OSLA AOOA
The Ontario Association of Speech-Language Pathologists and Audiologists
Association ontarienne des orthophonistes et audiologistes

OSLA's 2020 Ontario Pre-Budget Submission

We are NOT asking for Government funding. Below, there are two specific cost-free measures to **save taxpayers' money, cut red tape, and improve health care service delivery, and patient experience.**

Context: Aging, illness or accident can all cause sudden or incremental changes to hearing or communication. The need for care is rapidly increasing with the growing and aging population. These are just two examples of how minor legislative or regulatory changes could result in more cost effective, timely, and efficient treatment for people of all ages, by leveraging the qualifications and skills of Ontario's Speech-Language Pathologists and Audiologists.

Eliminate an unnecessary trip back to the family physician for some patients by:

1. Allowing Speech-Language Pathologists and Audiologists to convey a diagnosis for ailments they treat.

Qualified Speech-Language Pathologists and Audiologists do assessments and provide treatment for certain conditions, but unlike other Provinces, Ontario legislation only permits a physician to provide the patient with the diagnosis. That means an unnecessary trip back to the physician, delayed treatment and its associated risk, wasted physician time and tax dollars, and anxiety for the patient.

Speech-Language Pathologists and Audiologists have the knowledge, skill and judgement to provide a diagnosis for conditions they are treating. Millions of *taxpayers' dollars can be saved, and health care delivery improved, by simply eliminating the red tape* of an unnecessary trip back to a family physician for many patients who have a communication disorder that is assessed and treated by a qualified Speech-Language Pathologist or Audiologist.

- ***Annual savings of $21M and 132,552 hours of family physician time.*** *These savings are based on an estimated $40 cost per 15-minute family physician referral for the 530,210 people in Ontario who are deaf or hard of hearing and could potentially receive their diagnosis from a qualified Audiologist, as is the case in other Provinces.*
- ***Minimum annual savings of $6.6M and 40,000 hours of physician time****. For those 165,000 people with a communication condition NOT caused primarily by deafness or significant hearing loss who could receive their diagnosis from a qualified Speech-Language pathologist, as is the case in other Provinces.*

These savings could be achieved with a minor amendment to the Audiology and Speech-Language Pathology Act 1991, as laid out in MPP Sam Oosterhoff's Private Member's Bill (February 2018). *

> *(1) In the course of engaging in the practice of audiology, a member is authorized, subject to the terms, conditions and limitations imposed on his or her certificate of registration, to perform the following: 1. Communicating a diagnosis identifying an auditory or vestibular disorder as the cause of a person's symptoms. 2. Prescribing a hearing aid for a hearing-impaired person. (2) In the course of engaging in the practice of speech-language pathology, a member is authorized, subject to the terms, conditions and limitations imposed on his or her certificate of registration, to perform the following: 1. Communicating a diagnosis identifying a communicative or swallowing disorder as the cause of a person's symptoms.

2. Allowing Audiologists to make direct referral to specialty medicine such as Ear, Nose and Throat (ENT) specialists.

Currently, an Audiologist needs to recommend to their patient's family physician that a referral to an ENT be made. The Ontario Association of Speech-Language Pathologists and Audiologists (OSLA) recommends an amendment to the *Health Insurance Act* (it's regulations and/or the Schedule of Benefits) to facilitate direct referral of patients to specialty medicine by Audiologists, when required. This change will **improve patient outcomes and reduce risk** especially for those without a family doctor OR who experience sudden hearing loss which requires immediate treatment. This change will also **reduce costs and increase capacity** of healthcare delivery.

Both anecdotal and empirical evidence indicate that roughly 10% of Audiologists' patients require a referral to an ENT. A research study at St. Joseph's Health Care in London, Ontario (2001/02) indicated that 13% of patients who were seen for Audiology issues required a referral to an ENT.

Assuming 1.4 referrals per week per Audiologist directly to ENT, the elimination of the family physician appointment time and cost of $50.37 per visit ***would result in savings of $3,090,200 and 15,300 hours or 2,186 working days of physician time.***

There are approximately 17,676 family physicians in Ontario. If each family physician eliminated even ONE appointment for a referral to an ENT the cost savings would be ***$890,315 and the released capacity would be 4419 hours or 631 days of increased capacity.***

(All financial references for assumptions available upon request.)