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GARY YOKOYAMA, THE HAMILTON SPECTATOR

Paramedic Jessica Bartley, who works in the city's lower-central core, said it's not unusual for her to transport the same person to hospital 40 or 50 times in a year.

Band-Aid fixes getting us nowhere

BY STEVE BUIST

Jessica Bartley scrunches up her face and thinks for a second.

The discussion had turned to how frequently health care services are used in Hamilton, and Bartley, a 28-year-old paramedic who works in the city's lower-central core, was asked to guess the highest number of times she's transported the same person to a hospital emergency department during the past year.

Six times in a year? A dozen? Two dozen?

"Oh, much more than that," she said, as she tried to quickly do the math in her head.

How about 40 or 50 times in a year?

"Yeah, that's probably about right." A check of ambulance records shows there were two private residences in the lower-central core that each required more than 100 responses by Hamilton's Emergency Medical Services last year, according to platoon manager Justin Pyke. For privacy reasons, he could not reveal the specific addresses.

"I've heard other medics who have worked a lot longer than I have say they've watched people grow up, met their families, watched them go downhill through life to the point where they die," Bartley added.

The Spectator's landmark health mapping project shows there are massive differences between Hamilton's 130 neighbourhoods when it comes to the consumption of hospital and ambulance services. The comprehensive analysis also shows clear connections between the use of health care services and social factors, such as poverty and education.

Those who are the poorest and the least educated are also those who, in general, are the biggest consumers of health care services.

That's important because there are enormous costs associated with the health disparities that exist between Hamilton's neighbourhoods.

"We need to provide incentives so that

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ON THE WEB: Visit CODE RED at thespec.com where you'll find 26 interactive maps with rates and rankings for every Hamilton neighbourhood, slide shows and videos produced by photographer Gary Yokoyama, and links to the project's Facebook page.

the hospital is not by default the option, which it is now," said Neil Johnston, a Hamilton health researcher who has collaborated on this project with The Spectator for three years and acted as the chief data analyst. "Right now, there isn't an alternative to that.

"I'm not blaming the hospitals," added Johnston, an expert in analyzing and mapping health data. "It's that they have become, by default, where people go, and there's nowhere else to put them. And it's that nowhere-else-to-put-them part where we need to find alternatives."

According to figures obtained from Ontario's health ministry, the cost of an acute-care hospital bed in Hamilton is \$1,299 per day, an emergency room visit

"SOME PEOPLE MAKE choices that from a health perspective might be poor, but they probably make them for good reasons if you look at their lives. People who are living chaotic lives, whether it's on the street or they're couch surfing, they're probably thinking more about personal safety in the next 24 hours rather than dying of cancer at age 60. That's a pretty reasonable choice to be making."

— Dr. Chris Mackie, a Hamilton associate medical officer of health

costs \$259, and an ambulance trip is listed as \$785.

Combining those numbers with the project data, The Spectator calculated the cost of basic hospital service use at the neighbourhood level.

The differences are astounding. In one inner-city neighbourhood, bounded by Wellington Street North, Cannon Street East, Wentworth Avenue North and Main Street East, the total cost for hospital bed, emergency room and ambulance use was \$9.15 million for the two years of data collected.

That represents \$2,060 in costs for every person living in the neighbourhood.

At the other extreme is the wedge-shaped Flamborough neighbourhood that extends between Highway 8 and Middletown Road to Gore Road to the edge of Flamborough.

In that rural neighbourhood, the costs for the same services were just over \$523,000. That's \$138 per person, equal to about one trip to the emergency room every four years or so.

More importantly, it means there's a difference of \$8.63 million in hospital, ER and ambulance costs between the top and bottom neighbourhoods in Hamilton.

Johnston calls the money spent "a wasted opportunity."

"We're quite prepared to spend limitless amounts of money to Band-Aid this," he said. "It doesn't do anything about curing this in the long term. It's a complete revolving door. There's no improvement in health."



A closer look at the hospital data shows the same pattern of disparities exists across a number of measures:

■ In the neighbourhood bounded by Sherman Avenue North, the harbourfront, Ottawa Street North and the rail line near Barton Street, the rate of emergency room visits was 1,291 per 1,000 residents during the two years covered.

In the rural neighbourhood between Governors Road, Highway 8 and the Flamborough border, the emergency room visit rate was 97 per 1,000 residents — 13 times less than the highest neighbourhood.

■ In the inner-city neighbourhood bounded by Wellington Street North,

Cannon Street East, Wentworth Avenue North and Main Street East, the rate of urgent hospital admissions was 112 per 1,000 residents.

Urgent hospital admissions are like the canary in the coal mine — a sign of poor health that requires instant hospitalization.

In this neighbourhood, it means one in nine people required urgent hospitalization in an acute-care bed.

At the other end of the spectrum, the Flamborough neighbourhood between Highway 8 and Middletown Road to the edge of Flamborough had an urgent hospital admission rate of just 10 per 1,000 residents.

■ That same Flamborough neighbourhood had a rate of 46 days of acute-care hospital bed use per 1,000 people between the ages of 16 and 69.

At the other extreme, the rate was 729 acute-care bed days used per 1,000 people in the same age range for the inner-city neighbourhood bounded by James Street North, Cannon Street East, Wellington Avenue North and King Street East. That's a difference of 16 times from top to bottom.

■ There are three neighbourhoods in Hamilton where more than 20 per cent of the people who showed up at an emergency room reported having no family physician.

At the other extreme, the rate of no family physician being reported in the Stoney Creek neighbourhood bounded by Millen Road, Highway 8, Jones Road and the escarpment was 2.8 per cent.

Drill down into these gaping differences in health care use and some of the connections to social and economic factors become obvious.

Of the 10 neighbourhoods with the highest rates of emergency room visits, six of them are also among the bottom 10 neighbourhoods with the lowest median income per person.

Six of the highest ER visit rates are also among the top 10 neighbourhoods with the highest rates of adults who don't have a high school or postsecondary diploma, and five of them are among the top 10 neighbourhoods with the highest rates of people living below the poverty line.

Strip out the neighbourhoods heavily influenced by student populations, and the data show that six of the top 10 neigh-

"THE REALITY OF THE system is that most people do not want to go to an emergency department. It's a very stressful, difficult experience. They know they're going to have to wait a long time, they're scared, they don't know what the problem is. There's stress for us, too. We have to figure out: Where do they go? We can do the initial treatment but we often don't have the resources or the places to send them for followup."

— Dr. Agostino Bellissimo, chief of emergency medicine at Hamilton's St. Joseph's Healthcare