



News Release

For Immediate Release

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Addictions-Related Treatment Wait Times, Emergency Department Visits and Deaths Rising Despite Increased Spending: Auditor General

(TORONTO) Wait times for addictions treatment, emergency department visits for opioid-related emergencies, and addiction death rates all continued to rise despite increased provincial funding, Auditor General Bonnie Lysyk says in her *2019 Annual Report*, released today.

“We found that the Ministry of Health does not allocate funding to addictions-treatment programs based on need,” Lysyk said after her Report was tabled in the Legislative Assembly.

“Ontario has committed to spend \$3.8 billion over the 10 years to 2026/27 for mental health and addictions services, so it’s important that funding is allocated appropriately to meet the needs of Ontarians,” she added.

The Report found that between 2014/15 and 2018/19, spending on addictions treatment programs grew almost 25% or \$42 million, to \$212 million; funds were distributed to about 200 addictions treatment service providers to treat over 76,700 clients. Since August 2017, an additional \$134 million was spent on the Ministry’s Opioid Strategy. However, approximately \$40 million of this addictions funding was distributed equally among all regions rather than according to need.

The Canadian Mental Health Association estimates that about one in 10 Ontarians has a substance-use problem. A 2018 study by the Canadian Centre on Substance Use and Addiction estimated that the cost to Ontario of substance use was over \$14.6 billion in 2014.

The following are some of the Report’s other findings:

- The Ministry spent about \$134 million on its Opioid Strategy between August 2017 and March 2019, but opioid-related deaths, emergency-room visits and hospitalizations continue to increase.
- Opioid-related deaths grew by about 70% (from 867 to 1,473)—or more than four deaths a day in 2018, up from over two deaths a day in 2016.
- Emergency department visits for substance use conditions increased by almost 40% (from 68,000 to 95,000 visits) between 2014/15 and 2018/19. Repeat visits to emergency departments for substance use conditions increased almost 50% (from about 20,000 visits to almost 29,800) over the same period.
- Longer wait times for addictions treatment resulted in people being hospitalized or dying before they could get treatment. For example, between 2014/15 and 2018/19, the average wait time for residential programs increased from 43 days to 50 days. Service providers said that some clients had dropped off wait lists because they were hospitalized, jailed, attempted suicide or even died while awaiting treatment.
- There are three main types of addictions-treatment programs (non-residential, residential and withdrawal management, also known as detox), but the Ministry requires service providers to follow a standard that applies only to detox programs. In the absence of standards for non-residential and residential programs, service providers determine on their own how to deliver their programs, resulting in significant differences among service providers for the same types of programs.

- Our audit's survey of addiction treatment service providers identified that 30% of non-residential treatment service providers did not offer any weeknight services and 76% did not offer any weekend services.
- Our audit found that between 2014/15 and 2018/19, about 88,000 instances of dispensed opioids were associated with about 35,00 prescriber licences that had been inactive since 2012 or earlier. It is possible these relate to attempts by prescribers, dispensers or opioid users to obtain opioids illegally or that some of these are just data entry errors; however, this requires further investigation by the Ministry and regulatory colleges.

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Read the report at www.auditor.on.ca

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