



For immediate release

## **Hospitals grinding to halt because of stranded seniors, CMA head says**

Ottawa (Nov. 18) — Gridlocked hospitals around Canada are struggling to make room for incoming arrivals because so many older patients have no other place to go, the president of the Canadian Medical Association said today.

Dr. Christopher Simpson, a cardiologist at Kingston General Hospital, said hospitals are increasingly invoking what is known in the medical world as “Code Gridlock” when a hospital reaches or exceeds capacity.

“Code Gridlock means that the hospital is so full that patients can't move,” he said in a speech to the Canadian Club of Ottawa.

“Patients in emergency can't go upstairs to a bed because the beds are full. Sometimes ambulances can't offload patients into ER because it is packed - even in the hallways. Elective surgeries are cancelled. Transfers from the region are put on hold.”

Dr. Simpson said Canada needs a national seniors strategy involving all levels of government to develop investment in long-term care infrastructure and home care and community support programs.

“As a society, we need to step up investment in long-term care and invest much more in services for home and community care.”

Code Gridlock is fast becoming the new normal in Canadian hospitals as medical staffs are resorting to putting patients in “windowless nooks, crannies and broom closets —anywhere we can squeeze in a stretcher or a bed,” he added. Dr. Simpson said his own hospital is currently on its 25th consecutive day of gridlock.

“To those outside the medical world, the two words probably won't be heard over the white noise of a busy hospital. But to everybody else in the building they work like a dog whistle — start freeing up beds immediately.

“All physicians, nurses and other health care professionals are urged to do whatever they can to expedite discharges.”

The chronic overcapacity problem is being caused by a crisis in seniors care, he said. Thousands of older Canadians are taking up acute care beds at \$1000 a day even though they are well enough to be discharged because they have no place to go.

There either isn't a long-term care bed available in their area or there aren't the support services they need to live at home. About 15 per cent of acute care beds in Canada are taken up this way.

“We are warehousing them. We do the best we can. But it's not anywhere near good enough.”



Although publicly available figures are not available on the invoking of Code Gridlock nationally, hospitals have been reporting increased use of the code on their own. Thunder Bay Regional Health Sciences Centre, for example, reported a 105-per-cent increase in the number of gridlock days at the hospital in 2013. It has been cited with a fire violation because patients had to be put in hallway alcoves.

*The Canadian Medical Association (CMA) is the national voice of Canadian physicians. Founded in 1867, the CMA is a voluntary professional organization representing more than 80,000 of Canada's physicians and comprising 12 provincial and territorial medical associations and 60 national medical organizations. CMA's mission is helping physicians care for patients.*

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Video quotes from Dr. Christopher Simpson can be downloaded from this link:

<http://www.skyflyproductions.com/CMA-AMC>

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