

## **Backgrounder: Reinvesting From Acute to Continuing Care - The Proposed 1% Solution**

One of the major themes of the [BC Ministry of Health's Primary and Community Care policy paper](#) is that existing expenditures will be protected, while appropriate reallocations from the acute to community services sector must become part of health authority plans.

Among other things, the paper proposes that a majority of new net funding must be assigned to developing primary and community services.

BCCPA is encouraged by the Ministry's commitment to reinvest from acute to continuing care and welcomes this important development.

To ensure this objective is achieved, BCCPA is recommending Health Authority Performance Agreements with the Ministry of Health outline a specific commitment to reallocate 1% per year from acute care to the continuing care sector over a five year period - starting in 2016/17.

Excluding any annual funding increases to health authorities that would have occurred anyways, this action would equate to a five-year reinvestment from acute to home and community care of approximately \$320 million per year by 2021/22.

[Click here](#) for a table that applies 2014/15 budget figures to calculate what one percent re-allocation looks like for the five regional health authorities. Among other things, this reallocation could potentially fund:

- annual operation of 4,395 long term care beds; or
- 12.8 million care aide hours; or
- 8 million home support hours.