



Bill 74, *The People's Health Care Act*

Presentation to Standing Committee on Social Policy

By Deborah Simon, CEO

**Check Against Delivery*

April 1, 2019

I want to thank you for the opportunity to appear before this committee and to provide the perspective of the not-for-profit home and community support services health sector on Bill 74, *The People's Health Care Act*.

My name is Deborah Simon and I am the CEO of the Ontario Community Support Association. OCSA represents nearly 240 not-for-profit agencies across the province who provide compassionate, high quality home care, community support services and independent living services to over one million Ontarians.

There are many organizations in your ridings that provide invaluable services to seniors and people with physical disabilities such as in-home nursing and personal support, Meals on Wheels, Alzheimer day programs, transportation to medical appointments or supportive housing.

Our sector is a key part in ending hallway health care as we offer over 25 health and wellness services that keep people healthy, living in their communities, and gets them discharged faster from hospitals. This includes the delivery of over 3 million meals, providing over 2 million rides and over 225,000 clients served in Adult day programs.

We know that the current model was not working for providers or clients. We share the conclusions in the first report by the Council that home and community care services haven't grown fast enough, that caregivers are facing bigger and bigger challenges and that there is a clear need for a long-term capacity plan for the health system.

Our association supports the government's goal of creating seamless transitions between hospitals and home and community care – and across the entire health system. We recognize that the government's new vision of local Ontario Health Teams who support their patients throughout their journeys through the continuum of care, offers plenty of opportunity to strengthen collaboration between providers.

United in our commitment to care

The proposed model definitely has the potential to enable stronger and more direct relationships between service providers that can translate into smoother care for clients. However we do have concerns regarding the inclusion of community support services and attendant care in the core basket of services, the role of not-for-profit delivery, the role of community governance and the need to address front-line worker shortages. We would like to share 5 recommendations with you.

The first is that Ontario Health Teams must incorporate a strong model of community governance and not-for-profit delivery of services. Shared community governance will ensure Ontario Health Teams understand the health needs of their communities. This knowledge is necessary to ensure that services are tailored to what a specific community actually needs as opposed to a one-size-fits-all solution that wastes taxpayer dollars. In addition, a strong shared community governance will ensure a strong focus on upstream services – including health promotion, social determinants of health and preventative health.

The important contributions not-for-profit home and community care bring the health system cannot be overstated. Its return on investment can be measured in many ways. For example, volunteers contribute over 3 million hours of service each year, providing a value of over \$78 million for free to the health care system. We must ensure these important contributions are not lost in this system transformation.

Our second recommendation is that a list of core services Ontario Health Teams are expected to deliver across the province needs to be identified. Core services must include community support services and independent living, along with home care. Keeping people healthy at home and out of hospitals isn't achieved through home care services alone. Last year, community support services and attendant care services enabled over a million individuals to thrive in their community.

Our third recommendation relates to health human resources. For any transformation to be successful it must include a plan to support and address the continuing shortage of frontline workers across the health system.

The current shortage of personal support workers (PSW) is having ripple effects across the entire health system. People are staying in hospitals longer or delaying the start of home care services due to the lack of qualified human resources. The government needs to implement a health human resource strategy to attract and retain PSWs, nurses and other care providers in the home and community care sector. Any strategy must include a plan to close the compensation gap for front-line workers between the home and community care sector and institutionalized care, such as hospitals and long-term care.

The government should also amend the *Public Sector Labour Relations Transition Act* to ensure it does not become a barrier to innovative service integrations. One way to do this is to return it to its pre-2006 application, ensuring it only applies to full organizational integrations.

Our fourth recommendation is that existing local collaborations should be leveraged to build Ontario Health Teams. Good work to build partnerships across sectors has already taken place

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at the local level in many parts of the province. Home and community care organizations are working directly with hospitals to encompass new models of care to streamline handovers and wrap services around patients. The sector has shown itself to be supportive of integration for the benefit of patient and client care, we caution against the strategy of reducing the number of providers arbitrarily.

Our last recommendation regards public accountability. OCSA recommends that the legislation be amended to ensure that the meetings of the board of governors of Ontario Health must be open to the public. In the administration and spending of public dollars there must be strong and open public accountability.

In closing, we are convinced we can utilize the strength of this sector to help government eliminate hallway health care. We call on the government to strengthen the relationship with our sector and ensure CSS and home care play a vital role in solving hallway medicine and build a better system for people that is based on a health and wellness approach.

With the appropriate supports, our sectors alleviate hallway medicine by keeping people healthy and out of hospitals in the first place and by shortening their stay by ensuring they have appropriate supports when discharged.

At this point I would welcome any questions to further explain the rationale behind our recommendations. Thank you.