

Bill 175 *Connecting People to Home and Community Care Act*
Presentation to Standing Committee on the Legislative Assembly
June 15, 2020 - 10:00am

1. Good morning, I am Jo-Anne Poirier, the President and CEO of VON Canada.
2. Thank you for the opportunity to provide comments/advice. This legislation is critical to the success of health care in Ontario as home and community care play an increasingly vital role in keeping people safe and at home.
3. First, a bit about us – VON is the longest-serving home and community care organization in Canada. We have been pioneers – our nurses have worked through the depression, both world wars and worked through other pandemics; founded community hospitals and innovated home and community care.
 - 123 years in operation – looking after youth and seniors from birth to end of life and palliative care
 - We serve 168 communities, ranging from urban centres to small rural communities.
 - Our VISION is to have EVERY LIFE LIVED TO THE FULLEST for everyone regardless of their circumstances
 - 6500 employees and 6200 volunteers in both ON/NS.
 - NPs, RN, RPNs, PSWs, OT, PTs, Recreational therapists, health care technicians, therapy assistants, Kinesiologist, Speech Language Pathologist, Social Worker, Dietician, Support Care Counsellor
 - Have professional RNs who train front line staff in best practices in infection control/professional practices (WE HAVE A SOLID CLINICAL INFRASTRUCTURE)
 - Exemplary standing with Accreditation Canada and Best Practice Spotlight Organization RNAO (Registered Nurses Association of Ontario)
4. VON's uniqueness:
 - Wrap around services to clients and their families: SMILE program of self-directed care, ADPs, Meals on Wheels, exercise programs for seniors
 - Need to move to a bundled care model which we already practice which is really LIFE CARE as it includes social services that reduces/eliminates social isolation and leads to better health

5. I'm here today to reinforce the critical role that home and community care play as part of the health care continuum. Over the past two years, a new imperative has become clear for home care leaders to collaborate and create a new vision for patients and their families in this province: this collaborative is Homecare 2020 and consists of Bayshore, SE Health, and VON. Together and each as BPSOs, we bring clinical expertise, clinical infrastructure and organizational strength to this province.
6. As you look ahead to implementation of Bill 175, there are some lessons learned from management of the pandemic that I urge you not to ignore. I say vital, not just because they are key to the sustainability of the home and community care sector, but also because they are key to the health, safety and indeed the life of people who benefit from these services.
7. More than that, as we shift the ways that care is offered, there are huge opportunities to make care both more effective – for the province, for the providers, and for people who receive care. We can help.
8. Home care enables people who are frail or have life-challenging physical or other conditions to receive care at home, where they want to be. Community care allows people, particularly seniors, to remain healthy and independent, it reduces isolation and illness, injuries and hospital visits.
9. Home is not just *where* people want to be, it's the safest place to receive care. It's also the most cost-effective place to receive care. We need to re-think non-acute care. Home care is invisible to many, but I wonder, given what we've seen over the last few months, if you started to think about LONG-TERM CARE AT HOME.....that may help build understanding of what our sector can enable.
10. Pandemic and its effects:
 - Has destabilized the entire sector, and our organization (reduction in home care visits, families have been stranded, staff have left or applied for CERB)
 - We have about 1,000 employees on leave due to lack of work – personal leaves, child care, WSIB and some layoffs.
 - Our clients have been placed at risk and risk ending up in Emergency rooms-
 - We have the lowest infection rate in any sector
 - We need to get people back at work taking care of clients at home.
11. Future of Home and Community Care:
 - Needs to be more flexible-currently a very transactional model
 - Makes it very difficult to recruit and retain front line employees

- Wage differential with acute care sector and long term care exacerbates the situation
- Long Term care AT HOME is the way to go : save on building beds, much better infection control, allows people to stay home where they want to be
- Needs to be redesigned to reduce high cost of administrative coordination done by the government – our staff can do assessments and coordination
- and accountability need not be jeopardized – health outcomes can be measured.

12. In summary, we need to modernize HOME CARE.

- We want to be at the table with the government to share our decades of lived experience, especially as you develop the regulations.
- Need to simplify the care coordination function, redeploy those resources to frontline services. The pay per visit and authorization of each visit by care coordinators is a big inefficiency that takes resources with no value to patient care.
- Home care can be and needs to be a stronger part of the health care continuum

Thank you for your time and attention this morning. I remain available to answer any questions you may have.

Sincerely yours,



Jo-Anne Poirier
President and CEO