

**A PRESENTATION /SUBMISSION
TO THE COMMITTEE OF THE ONTARIO LEGISLATURE CONSIDERING
BILL 175; THE CONNECTING PEOPLE TO HOME AND COMMUNITY
CARE ACT**

Mr/Mme Chairperson, Honourable members of the Committee, first of all thank you for giving me this opportunity of making known to you my views regarding Bill 175: The Connecting People to Home and Community Care Act.

I am a Canadian citizen who was born in England at the beginning of the Second World War. I am a retired clergy person who was ordained in 1968 and who has served in England, Scotland, The United States Canada and St Vincent and the Grenadines. I have spent hours visiting the sick, frail and elderly in all these places. I have always been a social activist and community organizer. I live with my wife Patricia in Oakville. Before I begin let me acknowledge that my comments are strongly based on the analysis provided by the Ontario Health Coalition.

The first thing that strikes me about Bill 175 is that its focus is on administration. Bill 175 seems to me to be an overhaul of the administration of Home Care. It certainly does not seem to be setting out any enlargements of the scope of the service and improvements to the quality of care, because no mention is made of any such additions or improvements, even though it is generally recognized that improving the provision of reliable, competent, dependable, sufficiently resourced Home Care, is desirable and urgently needed.

Another feature of Bill 175 that stands out for me is the consistent intention it expresses to lessen the responsibility of the Provincial Government for the provision of Home Care. At present accountability at every level is to the Ministry of Health, through its appointed representatives. Under Bill 175, Ontario Health, which is a small cabinet selected and appointed body of unelected citizens, selects and appoints Ontario Health Teams, composed of representatives of health providers in a local jurisdiction. The Health Teams then award contracts for providing Home Care, either to themselves, or to competing companies. The resulting relationship of delivered Home Care to the Minister of Health, the Cabinet, the Legislature, is, consequently, much more tenuous and distant. It is disappointing and disturbing that the Provincial Government would not want to have a much closer involvement and responsibility for maintaining the dignity and health of our older, incapacitated, and sick citizens in the context of these people's own homes, relatives and communities.

The withdrawal of the Government's presence makes available another development which Bill 175 facilitates. This is a much greater role of private-for-profit companies in the provision of Home Care. Health Teams are not non-profit based, as are the LHINS. Membership and management of the Health Teams will, in all likelihood, be dominated by the resource contributions of corporate business chains who will need to satisfy shareholders that being part of a Health Team is a profitable development. The new management model of Bill 175, therefore, increases the business orientation, and, consequently, the profit focus of providing Home Care. This business focus will undoubtedly generate a stress relationship with a quality healthcare focus. In such instances business management for corporate profit regularly wins.

Bill 175 revokes a number of pieces of legislation controlling the delivery of Home Care. The existing legislation will not be replaced with new legislation. Instead the passing of Bill 175 will result in Home Care being controlled by regulation, presumably determined by the Minister of Health. This change

dovetails very nicely with the Ministry, Cabinet and Legislature having a more distant and detached relationship with the provision of Home Care and with the development of a variety of Health Teams providing Home Care in a variety of ways. Equally, regulation rather than law makes it much easier for difficulties and disagreements to be handled without the interference of political debate or testing in the courts. As I see it, the problem of ruling by regulation means a lack of stability, certainty and accountability. These are characteristics that do not fit with the fragility and dependence of persons requiring Home Care. To feel safe they need stability and dependability

What makes ruling by regulation more problematic is that Bill 175 provides no right or means of access for public input from the clients of care, organizations of, and for, those receiving care, professional bodies or the general public; no public access to the meetings of Ontario Health or Ontario Health Teams; no access to information about their decision making, finances and management. Decisions of the Minister of Health are final, without the possibility of appeal. It prevents the sharing of knowledge and experience that might contribute to the improvement of the service. It increases the potential for rigidity of thought and action. and communicates an attitude of take it or leave it, It does not nurture confidence with the system and prevents initiatives of cooperation with it. All of which are detrimental to the creative development of the service and satisfaction with it.

The significant and fundamental changes to the delivery of Home Care that Bill 175 is intended to make seem to me to display the following characteristics:

- The lessening of the Provincial Government's responsibility for the provision of Home Care
- The increased openings for profit making
- The exclusion of outside input
- The uncertainty resulting from governing by regulation
- The lack of accountability to clients, the public and the Legislature
- The failure to extend the scope and quality of Home Care

I am left with the overall impression that this is a piece of legislation that has little understanding and compassion towards those who will be most effected by it. It is a Bill that seeks to promote the agenda of small, imperious and impermeable government whose main objective is the prospering of private business. It is the model of government that has resulted in the disaster that has occurred in our Long Term Care Homes during the COVID19 pandemic. I am concerned that the implementation of this Bill will create similar deficiencies and depressing suffering for those needing Home Care. I hope I will be proved wrong. I fear I will not be.

Respectfully.,
Mervyn Russell

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