



Ontario Home Care Association
Submission to Standing Committee on
Finance and Economic Affairs

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Pre-Budget 2008 Consultations

It is vital that the Ontario government stay the course during this time of economic challenge and continue to invest in home and community care in order to sustain the improvements in health care that are beginning to be realized. Research has proven that home care is cost effective even when the contributions of family caregivers are attributed at replacement wage (Hollander, MacAdam, 2008). The Ontario Home Care Association (OHCA) offers the following recommendations to sustain the momentum toward a system that places high priority on care at home and in the community, and demonstrates recognition for the important contributions of family caregivers:

1. ***Commit to investment in home and community care that directly impacts clients and builds on current levels of service*** so that Ontarians of all ages can confidently choose to remain at home safely with adequate publicly funded health care support. This will require that the government:
 - a. Institute multi-year CCAC funding to establish consistent and continuous support for home care services vital to health system transformation (eg. acute care relief and chronic disease management for people of all ages, aging at home and palliative care).
 - b. Accelerate the integration of health system partners (within and outside the publicly funded system) with a focus on moving to the provision of non-acute care in the community and establishing a broader mandate for home care within primary care and illness prevention. Collaborative initiatives that address service delivery and human resource supply from across all sectors within the health care system need to be supported.
 - c. Support the continued financial analysis of the continuum of health care in order to establish guidelines for the appropriate balance of public funds to enable Ontarians of all ages to live and age successfully in their own homes and communities. OHCA encourages the government to continue its work using tools such as the “Ontario Health-Based Allocation Model”; and in so doing include the financial implications of the unique and integral contribution of family / informal caregivers on which the home care system is heavily reliant.

- d. Establish a timeline and fund the implementation of innovative technology applications to support care delivery at home recognizing that there are solutions to increase staff efficiency and effectiveness and solutions to enhance capacity through remote monitoring.
- 2. Provide direct funding to home and community care frontline service providers in order to fund new labour obligations** as a result of changes to the current exemptions with the Employment Standards Act. This is necessary as home care providers are funded based on their projected costs established at the initiation of a contract to provide services to the Community Care Access Centre. Providers will experience liabilities (estimated at \$30 million per year and possibly as high as \$40 million with service volume fluctuations) that would not have been factored into their cost estimates, including statutory holiday pay, severance and termination pay.
- 3. Implement a strategy to provide meaningful and relevant support for family caregivers** so they can access respite services in order to ensure that they have the ability and means to continue to provide the care necessary to keeping their loved ones at home.

Discussion

One of the most significant demographic health care priorities facing our province is the need to respond to the changing societal norms regarding seniors' expectations to live and age independently in their own homes. While seniors of the future are predicted to be among the healthiest in history, it is also known that the likelihood of developing chronic conditions increases with age and can compromise the prospect of independence, particularly where there is inadequate primary health care. The Ontario government has committed to helping "more Ontarians receive care closer to home..." and to doing "...more to help seniors who want to stay in their own homes" (Throne Speech, 2007).

The health care system in Ontario has begun to re-tool to respond to the needs of our growing senior population so they can remain in the home and community setting; and to build on the initiatives already underway to keep children at home and in their communities. The

transformation of our health care system requires a shift in focus from reactive acute care to proactive community based care. The Ministry of Health and Long-Term Care (MOHLTC) is driving this change by addressing two important health care priorities – reducing wait times in emergency departments and improving access to family health care for all Ontarians. Effectively addressing these priorities requires a strong publicly funded home care system that is closely linked to primary care and integrated across all sectors.

In 2005-06, the elderly represented 58.5% of admissions; adults 32.1%; and children 9.5%

(OACCAC)

However the factors influencing health care delivery in the community are unique. Across Ontario, care is increasingly delivered where people live and work - in private homes, schools and workplaces. This means that staff are mobile, travelling to and from the care site and for the most part, work independently and autonomously. Technology solutions to support the capacity of the home care professional are rapidly emerging and must be adopted to enable responsive, 24/7 care delivery in the home; and real time communication with the health team.

Families and others create an extended circle of caregivers and are considered necessary members of the home care 'virtual' team, providing a social network supporting the home and community care system. 75-90% of home care is provided by family caregivers (Health Canada, 2005). 27% of Ontarians report having personally cared for a family member or close friend with a serious health problem in the last 12 months (Change Foundation, 2008). Because of the predicted greater reliance on family caregivers, arising from the aging population and shortages of health human resources, innovative approaches to support care at home must be adopted. Leveraging the family caregiver is vital to enhancing the capacity of the formal home care system.

Investing in home-based care can save money, improve care and improve quality of life for people who would otherwise be hospitalized or institutionalized.

(Chappell and Hollander, 2002)



Home care does not operate independently of the rest of the health care system in Ontario. By strengthening the home and community team through enhanced communication systems and strategies to achieve collaboration, many of the inefficiencies and costly redundancies of the health care silos can be eliminated. Client presentation in the emergency department can be avoided and access to community based resources can be enabled in order to support both the client and family in proactively addressing their health care needs.

The OHCA urges the government to demonstrate their support for a well resourced home and community care sector in the 2009 Budget. Home care is a cost effective solution particularly where investments are made in the context of a broader integrated system of care in which proactive substitutions of home care for facility care can be made (Hollander, MacAdam 2008). Furthermore, home care is the preferred place of care for Ontarians. A 2005 survey showed that 88% of surveyed Ontarians prefer home care, and 84% prefer home care for loved ones (Pollara, 2005). In addition to government sponsored care, the OHCA believes in the vital contribution of home care organizations which deliver important services necessary to support and enable client and family caregiver independence outside the publicly funded and administered system.

The OHCA believes that to provide more home care, the system needs competent organizations with strong internal infrastructures to support the work and educational needs of a largely decentralized, mobile workforce serving over 500,000 Ontarians annually. These organizations require adequate resourcing in order to focus on continuous improvement, innovation and best practices in care delivery. The OHCA recommendations are vital to creating a strong home care system in Ontario.

About the OHCA

The Ontario Home Care Association (OHCA), *the voice of home care in Ontario*, is an organization of home health and social care service providers. Association members deliver nursing care, home support services, personal care, physiotherapy, occupational therapy, social work, dietetics, speech language therapy and medical equipment and supplies in the home to individuals of all ages. Ontario Home Care Association members are contracted by all three levels of government, Community Care Access Centres, insurance companies, institutions, corporations and private individuals. OHCA members are accredited through the Accreditation Canada and/or the International Standards Association (ISO).

