ENDING HALLWAY HEALTH CARE: RECOMMENDATIONS TO BUILD ONTARIO’S HOME CARE SYSTEM

2020 Pre-Budget Consultation Submission

HOME CARE ONTARIO
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SUMMARY OF RECOMMENDATIONS

01 To ensure PSWs and other critical care givers can be paid competitively with the long-term care sector and be provided the necessary operational supports and technologies that are critical in our modern health care system, Home Care Ontario recommends the government immediately provide a 5% increase to contract rates for home care in 2020-21 at a cost of $94 million. This should be followed by an additional 5% increase per year for the following two years after that, for a total $300 million over three years.

02 Direct the LHINs to halt their prescriptive practice of mandating time-specific visits and empower frontline home care provider organizations to provide more consistency, predictability and stability for PSWs by directly scheduling staff visits.

03 Direct LHINs to end 15-minute visits and the practice of rationing of home care services going forward, and instead fund the full patient care requirements prescribed by patients during their RAI assessments.

04 The Ontario government should introduce a Home Care Tax Credit in the 2020 budget, for people who retain home care services from reputable employers who provide quality care and comply with Ontario laws and standards. In doing so, Ontario should call on the federal government to adopt a matching credit, to double the overall benefit.

Up to $10,000 in annual retained home care services should be eligible for the credit, with a minimum of $1000, meaning that if the credit is for 15% of this, the maximum benefit to a provincial taxpayer would be $1500 (similar to the federal home renovation tax credit introduced by former Finance Minister J. Flaherty, which combatted underground services in that sector).

05 Ontario should launch a public awareness campaign, in partnership with Home Care Ontario, to educate consumers about the importance of choosing safe, qualified, properly trained home care providers. The province should begin an enforcement crackdown on illegal providers, with particular attention to labour law protections and tax compliance.
INTRODUCTION

In October 2019, the average hospital patient waited in an emergency department for 17 hours\(^1\). Many hospitals now regularly operate well above 100 per cent of their capacity and more than 5,300 hospital beds are occupied by patients who are no longer required to be there, but who only remain in hospital because they cannot get the home care or long-term care they need\(^3\). This untenable situation forces hospitals to treat patients in hallways, conference rooms, and other unconventional spaces. Ever-increasing wait times and delayed discharges for thousands of patients (Alternate Level of Care bed use) are the result of an unbalanced health system that has become overly reliant on acute care.

We are pleased the government is committed to tackling this issue, but it is critical to recognize that the solutions to these systemic issues will not be found within the walls of hospitals.

To make any impact on ending hallway health care, the government must take steps to support a better funded and more integrated home, community, and primary care system that works closely with acute care partners.

While Ontario embarks on transforming our health care system through the new Ontario Health Teams, immediate steps must be taken to create a home care system that can relieve the pressures in hospitals across the province.

To do this, three actions are necessary:

1. **HOME CARE CONTRACT RATES MUST BE INCREASED AND STABILIZED, BOTH WITH ONE-TIME AND ONGOING FUNDING;**

2. **THE WORKFORCE SHORTAGE FACING THE SECTOR MUST BE ADDRESSED;**

3. **THE GROWING UNDERGROUND ECONOMY MUST BE TACKLED AS A SERIOUS PUBLIC POLICY ISSUE.**

We know that people want to age, recover and remain at home.

Ensuring the delivery of more care at home and in the community is clearly the quickest and most cost-effective way to stabilize people at home and end hospital overcrowding and hallway health care.
STABILIZED HOME CARE FUNDING

To address hallway health care, Ontario must deliver more care at home. Today, thousands of Ontarians are waiting for home care, because the current system is not adequately supported or designed to address the growing need.

Unfortunately, simply providing additional funding for more hours of home care will not address the current system issues. Ontario’s home care system faces a structural funding challenge related to how much the government provides to support the system’s workforce and its operational functions.

Address the Home Care Wage Gap

In home care, there are a range of services provided by a variety of professionals, including nurses, therapists (OT, PT, SPL, Respiratory) social workers and personal support workers (PSWs). These staff work for home care organizations that operate across Ontario.

In home care, there are a range of services provided by a variety of professionals, including nurses, therapists (OT, PT, SPL, Respiratory) social workers and personal support workers (PSWs). These staff work for home care organizations that operate across Ontario. However, over the past decade contract rates have not kept pace with the costs required to properly deliver care across Ontario, and even less so in rural and northern communities. As a result, today the contract rates between home care providers and government do not cover the costs of living, technology, or inflation.

Publicly funded home care workers are paid considerably less than in other areas of the health system. For example, PSWs in the home care sector in 2018 had an average maximum wage discrepancy of 9.2% lower than those employed in long-term care and 18.7% lower than those working in hospital.

Other health care settings—such as hospitals and long-term care homes are able to pay higher wages because hospitals and long-term care have been funded to achieve these wage rates. Unsurprisingly, it is especially hard for home care providers to compete with other employers for the staffing levels required to meet the demand for home care.
While a modest wage enhancement for PSWs only was implemented in 2015 to acknowledge the critical role PSWs play in our health care system, the previous government’s minimum wage increase to $14 in 2018 has eroded the financial benefit of that wage enhancement. This erosion, as well as the higher pay rates found in other health settings make it very difficult to attract PSWs to the home care sector.

“Continuing to simply fund more hours of home care will fail to address the structural inadequacy of wage levels that are too low to attract or retain the required professionals.”

**UNFUNDED INCREASED COSTS**

- Cyber Security Requirements
- Innovative New Digital Health Tools
- Ongoing Quality Improvement Initiatives in Order to Drive Better Care
- Ongoing Training and Educational Support
- Gas Cost Increases
- Federal Carbon Tax
Unfunded Operational Requirements

Additionally, there have been overwhelming pressures on home care providers to maintain and update core infrastructure including technology, quality management systems, health human resources, and reporting.

These continued operational investments that must be made by home care providers have not been supported by government, causing even further cost pressures. In northern and rural communities where the cost to deliver care is even greater, these problems are even more prevalent.

For example, with the introduction of Ontario Health Teams and the ever-growing priority of digital health technology, the home care sector must update, maintain and incorporate innovative new digital health tools into practice to meet patient, family, and government expectations for the future of health care and its delivery in the home.

It doesn’t end there. Quality management systems require consistent workflow updating to meet changing evidence and best practice guidelines continuing to drive better patient care and outcomes.

Further, ongoing training and education is required to support nurses and therapists in professional development and the clinical expertise of PSWs in more complex and supportive patient care. These areas include palliative care, virtual care, wound and pediatric care.

This situation has carried on for too long and has created serious system-wide issues. Continuing to simply fund more hours of home care will fail to address the structural inadequacy of wage levels that are too low to attract or retain the required professionals.

Instead, overall contract rates must be increased so that PSWs and other health care workers in the home care sector can be paid competitively with their counterparts in other parts of the health care system as well as support the operational functions necessary for a modern home care system.

RECOMMENDATION

To ensure PSWs and other critical care givers can be paid competitively with the long-term care sector, and be provided the necessary operational supports and technologies that are critical in our modern health care system, Home Care Ontario recommends the government immediately provide:

A 5% increase to contract rates for home care in 2020-21 at a cost of $94 million.

This should be followed by an additional 5% increase per year for the following two years after that, for a total $300 million over three years.
ADDRESSING THE PSW SHORTAGE

PSWs provide the majority of day-to-day home care and as such, are the hands and heart of Ontario’s health care system. This workforce plays a critical role by assisting people with daily tasks they cannot do on their own. They ensure people can stay in their own homes as they age, helping them maintain their independence, freedom, and quality of life.

“We deeply and genuinely regret the problems this shortage causes for our clients and their loved ones, and completely understand clients want to go home.”

CATHERINE BUTLER, FORMER INTERIM CEO OF THE CHAMPLAIN LHIN

Today, a significant shortage of PSWs is affecting the home care system. Considering the central role that PSWs play, this means the health care system now faces a workforce crisis.

Unfortunately, as Ontario’s population continues to age, more medically complex clients will require care and the need for PSWs will only increase. It is essential, therefore, that the government create policies to increase the number of people entering the professions and in particular, to help existing PSWs make a life-long career in home care.

Based on Home Care Ontario’s research there are a number of factors that are contributing to Ontario’s acute PSW shortage.

MAIN FACTORS ARE:

1. LOW WAGES
2. OVERLY PRESCRIPTIVE SCHEDULING AND HOURS OF WORK
3. SHORTENED VISITS

By implementing positive changes in these key areas, the recruitment and retention of front-line workers would improve, allowing Ontario’s health care sector to develop and mature into a more efficient system that provides better quality of care for patients.
ADDRESSING THE PSW SHORTAGE

OVERLY PRESCRIPTIVE SCHEDULING AND HOURS OF WORK

Patients and caregivers “consistently highlighted not having enough home care services to meet the need as the number one priority for improving the transition from hospital to home.” 4

Empowering professional home caregivers by creating an adequate work-life balance is essential for any recruitment and retention effort.

Today, however, Ontario’s publicly-funded home care system is still highly prescriptive on the scheduling of services, which creates an inefficient system that negatively effects the PSW staff.

Currently, Local Health Integration Networks (LHINs) mandate “time-specific visits.” This causes severe scheduling challenge, because the demand for professional home caregivers peaks during mornings and evenings, leaving these workers with an insufficient workload during the day.

As a result, even though many PSWs have to work long days, they still do not get enough available hours of work to make their occupation a long-term career option.

**RECOMMENDATION**

Direct the LHINs to halt their prescriptive practice of mandating time-specific visits and empower frontline home care provider organizations to provide more consistency, predictability and stability for PSWs by directly scheduling staff visits.
“Insufficient home care the biggest challenge to overcome after being released from hospital, say Ontario patients and caregivers” 5

The demand for home care services continues to increase annually, but because LHINs have more requests for service than funding, LHINs often wait-list patients or ration the delivery of care.

**Rationing of Care**

Rationing of care occurs when LHINs reduce the length of visits assigned for a particular task, such as wound care. While the LHIN structure will eventually be redesigned, the existing system still remains in place for the majority of the home care sector, and the practice of rationing of home care service to Ontarians continues.

Because of rationing of care, today a patient may receive a 30-minute or even 15-minute visit for care that previously would be allotted double that amount of time.

In reality, a 15-minute visit does not provide adequate time to discuss a patient’s overall health, or any new issues that could be addressed early and possibly prevent hospital readmission.

Shortened visits are particularly problematic in northern and rural communities where travel times are longer. As a result of these shortened visits, many patients today are simply not receiving the care they require.

It is imperative that this practice end immediately to ensure patients receive the best possible care today.
TACKLING THE UNDERGROUND ECONOMY IN ONTARIO’S HOME CARE SYSTEM

Over 150,000 Ontario residents purchase more than 20 million hours of private home care services every year. They rely on these services to allow them to live more independently, to remain in their own homes longer, to avoid unnecessary use of emergency departments and other health care services, and to relieve the growing burden on caregivers.

“There is a growing need to educate Ontarians about what to look for when purchasing supplemental care in their home”

Importance of Legitimate Home Care

Legitimate home care organizations ensure the safety and quality of care being delivered to the people receiving this care – often vulnerable seniors. They also offer protection to their workers by ensuring compliance with labour laws, WSIB payments and compliance with applicable taxes.

However, with the overall growth of the gig economy, more and more people are turning to illegal, black-market service providers, often located through online marketplaces such as Craigslist.

There is a growing need to educate Ontarians about what to look for when purchasing supplemental care in their home, and encourage them to retain care from reputable home care providers; which pay taxes, have WSIB coverage, screen and train their PWSs and ensure the professional behavior of their workforce.

To this end, the government should implement a provincial tax credit to incentivize and support those who purchase home care from reputable, legitimate Ontario providers that adhere to safe, and responsible health, human resource, occupational safety and accreditation standards.

This would also help to relieve some of the financial strain on families as they strive to provide care to their loved ones.

Additionally, the government should consider partnering with Home Care Ontario to raise awareness of the risks of hiring unqualified or untrained people as PSWs though a province-wide awareness campaign.
“Legitimate home care organizations ensure the safety and quality of care being delivered to the people receiving this care—often vulnerable seniors.”

RECOMMENDATIONS

— 01 —

The Ontario government should introduce a Home Care Tax Credit in the 2020 budget, for people who retain home care services from reputable employers who provide quality care and comply with Ontario laws and standards. In doing so, Ontario should call on the federal government to adopt a matching credit, to double the overall benefit.

Up to $10,000 in annual retained home care services should be eligible for the credit, with a minimum of $1000, meaning that if the credit is for 15% of this, the maximum benefit to a provincial taxpayer would be $1500 (similar to the federal home renovation tax credit introduced by former Finance Minister J. Flaherty, which combatted underground services in that sector).

— 02 —

Ontario should launch a public awareness campaign, in partnership with Home Care Ontario, to educate consumers about the importance of choosing safe, qualified, properly trained home care providers. The province should begin an enforcement crackdown on illegal providers, with particular attention to labour law protections and tax compliance.
ENDNOTES


