Unifor Submission to the
Standing Committee on
Social Policy regarding
Bill 135, Convenient
Care at Home Act, 2023

November 2023
UNIFOR IN THE HEALTH AND SOCIAL SERVICES SECTORS

Unifor represents over 160,000 members in Ontario across several sectors. Despite being the largest private sector union in the country, Unifor represents a significant number of workers in the broader public sector in the province. This includes 26,000 members in health care (hospitals, long-term care, emergency services, retirement homes, home care, health clinics) and 2,400 in social services.

INTRODUCTION

Unifor has deep concerns about Bill 135, which continues this government’s plan to transform the home care sector by privatizing core home care functions and removing public accountability from the system. This piece of legislation did not involve any consultation with any key stakeholders when it was drafted – including workers’ representatives, labour unions, health advocacy groups and client representatives.

Bill 135 opposes the public interest in our health care system and reflects the priorities of home care corporations who currently operate and profit from our system. Similar to the hastily pushed Bill 175 in 2020, this new piece of legislation does nothing to provide Ontarians with better access to care, improve quality of care, address the ongoing staffing crisis in the sector, or improve public accountability and control of our system.

FUELING PROFIT AND GREED: EXPANDING PRIVATIZATION IN HOME CARE

After the changes made through Bill 175, Bill 135 will now operationalize this privatization process through the creation of Ontario Health atHome and its ability to contract out all aspects of home care delivery. Previously, the LHINs played a central role in the placement and care coordination of home care in communities across the province. However, this legislation enables Ontario Health atHome to let “client providers” – most likely for-profit companies – provide the core placement and care coordination functions.

The delivery of home care is already largely controlled by for-profit companies, who are contracted out and funded by the province to perform this work. This restructuring and expanded privatization of the sector only serves the companies who will siphon public funds from our health care system. Companies will profit from the new doors that will be open to them. It is very clear that the core intention of this legislation is to continue to erode our public health care system by privatizing the last remaining core element of home care – placement and care coordination functions.

PUBLIC ACCOUNTABILITY AND OVERSIGHT OF HOME CARE

Bill 135 will allow the newly-created Ontario Health atHome to contract out all home care functions to “client providers” and/or Ontario Health teams. Ontario Health Teams are
already made up of provider companies that are both for- and not-for-profit. However, the majority of direct home care services are contracted out to for-profit companies.

Ontario Health (and the proposed subsidiary, Ontario Health atHome) is governed by a Board that is not subject to the Ontario public service legislation regarding public conflict of interest. This Board includes an array of pro-privatization business people and corporate executives. With regard to Ontario Health and its Board, there are no regulations for public input, open board meetings or public access to information.

Absent in this legislation are any provisions that apply to Ontario Health atHome for public meetings, public notice, public access to documents, or any other democratic provisions. Despite this major restructuring of home care, there appears to be little oversight or accountability mechanisms for the provision of home care.

Previous legislation also transferred most of home care’s key elements to regulation. This means that a Minister can still make core changes to the sector without having them put to a vote in the legislature or without any meaningful public input. This concentrated power and absence of public accountability remains problematic.

ERODING THE QUALITY OF HOME CARE

Through this legislation, the government continues to pave the way for for-profit companies to siphon resources away from our public health care system, at the expense of patients and the quality of care they receive. The primary objective of these companies is to make money. Public funds earmarked for home care services will simply not be efficiently spent – diminishing the level of care that patients receive, while putting downward pressure on staffing compensation.

By their nature, for-profit companies who are contracted out for home care functions will limit the resources going to deliver services in order to maximize profit. For example, it is common for a family to have difficulty accessing OHIP-covered services by the home care operator in their area, only to have the same operator offer services if they are willing to pay out-of-pocket for private care.

The shift of home care coordination and delivery away from public entities and to the different “client providers” and Ontario Health Teams will result in different models of care for different regions. Each provider and Ontario Health Team functions differently, so there remains uncertainty about how home care will be delivered in each region. Rather than making improvements to “integrate” home care within the health care system, this legislation continues to create a patchwork system that relies on an array of different service providers in each region (including variability in access in urban vs rural areas).

This patchwork becomes even more intensified with the privatization of placement and care coordination functions. However, in some cases companies who are given the reigns for placement and coordination could also be contracted to provide direct care. Enabling
for-profit corporations to both have the ability to coordinate care and be the providers of care is also a conflict of interest and would compromise care. These companies would be able to determine how many visits a person can have, the resources allocated to them, and supervise their own care.

WITHDRAWING BILL 135

The legislation was developed and introduced without meaningful consultation and if passed, would continue to diminish public accountability and oversight of the home care system, while paving the way for further privatization of home care – especially placement and care coordination.

This legislation does nothing to improve the quality of care or provide any better protections for clients regarding access to care, assessments that do not measure actual need, rationing of home care, inequities from region to region, missed visits and other problems in home care. This legislation also does not address the ongoing staffing crisis in the sector, nor will it improve the efficiency of the home care system in any way.

Unifor calls on this government to withdraw Bill 135. Instead, this government must meaningfully address the needs of our home care system by acting in the public interest – by reversing the privatization in the sector, addressing the staffing crisis (including compensation and precarious work), and restoring public accountability and transparency in the system.