



HOME CARE ONTARIO'S 2018 PRE-BUDGET SUBMISSION

*Providing More Home Care
for Me and For You*



OVERVIEW

People want and need more home care, but patient complexity, an aging population, and government underfunding has meant they are actually getting less, and professional home caregivers are being asked to do more with fewer resources. All families, meanwhile, are struggling to fill in the gaps and provide the level of care their loved ones deserve. The impact of this underinvestment is also playing out in our hospitals – under constant strain, with overcrowding and “hallway medicine” now the norm – even before accounting for the rapidly aging population on the horizon.

Simply put, we cannot stay on the current health care delivery path. We must embrace new ideas and innovative solutions because Ontario needs a new approach that truly puts home care at the centre of a long-term sustainable solution for the care of Ontarians.

Now is the time to act.

Now is the time for more home care.

Home care is key to relieving the pressure off our hospitals in a cost-effective manner. The average cost of one week of care for seniors in hospitals is 20 times more expensive than the same services provided through home care.

A better home care system also means both stronger hospitals and long-term care communities. It is, therefore, essential that Ontario invests in more home care to reduce hospital overcrowding, keep seniors in their homes and communities longer, and deliver care more efficiently to free up resources for hospitals and long-term care homes – putting patients first and making the entire health care system stronger.

87% OF CANADIANS AGE 55 YEARS AND OLDER WANT TO LIVE AT HOME FOR AS LONG AS POSSIBLE

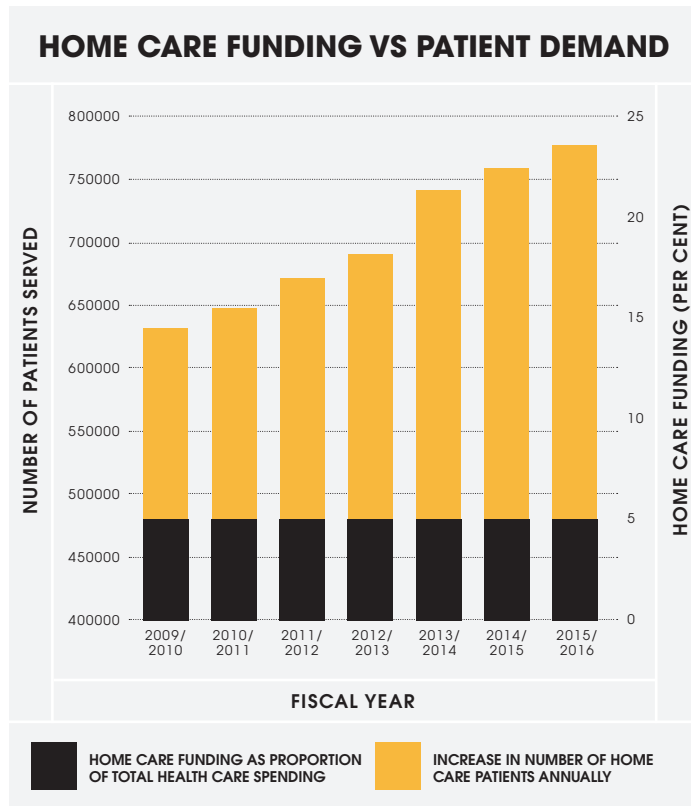
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SUMMARY OF RECOMMENDATIONS

Home Care Ontario respectfully urges the Ontario government to consider the following to build a stronger home care system for Ontarians:

- 01** *Invest an additional \$600 million annually in Ontario's home care system to deliver more frontline patient care. This would mean 9 million more PSW visits, 5.1 million more nursing visits, and funding to begin to meet the increased demand for therapy and other home care services;*
- 02** *Eliminate the SDCO Agency and work with existing and pre-qualified providers to implement a truly quality-based self-directed care model that achieves its laudable goals;*
- 03** *Work with health system leaders to implement a comprehensive strategy to recruit, retain, and value more professional and skilled home caregivers, and unlock latent service capacity to better utilize existing professional caregivers;*
- 04** *Launch a public awareness campaign through social and online media about the value of hiring trained and qualified caregivers from reputable providers to deliver quality care to patients and help impede the underground economy in home care;*
- 05** *Implement a tax credit or caregiver allowance for those Ontarians who can and do wish to purchase care from reputable, legitimate Ontario home care providers that adhere to safe, and responsible health human resource, occupational safety and accreditation standards;*
- 06** *Strengthen the information exchange between all Health Service Providers, including frontline professional caregivers, and acknowledge their HIC status to achieve continuity in approach and seamless, safe care for patients and families.*

THE NEED FOR INCREASED FUNDING TO DELIVER MORE HOME CARE



Today's home care system is underfunded and stretched too thin. This is the simple truth. The public system currently serves over 730,000 Ontarians, ranging from companionship to complex care, yet only accounts approximately five per cent of Ontario's total health care budget. To put that in perspective, that's \$2.7 billion of the current \$53.9 billion spent on health care annually.

This proportion is too low and home care budgets have stagnated for over ten years, even in the face of increased demand and need. It has made it increasingly difficult to even tread water, despite the heroic efforts from our professional caregivers who have been doing more with fewer resources. This has resulted in a system seeing unprecedented levels of rationing of care and growing wait lists, caregiver burnout, and regional health inequities - making people wait longer for care and then receiving less of it when they do.

The effects of this underfunding have also spilled over to Ontario's hospitals, which are no longer able to keep pace with demand. Some of that demand is from patients going to ERs when they have no family or nowhere else to turn – with overcrowding and 'hallway medicine' becoming commonplace – and resulting in ballooning Alternate Level of Care (ALC) rates in our hospitals. These are beds taken up by patients who could be elsewhere if there were adequate home care or long-term care resources but instead are simply waiting.

Most troubling is that rather than working to address these problems, the province has instead introduced a new Self-Directed Care Organization (SDCO Agency), to deliver care through a new bureaucracy, directly competing with existing care providers. Home Care Ontario opposes this new agency and believes this approach is wrong, will drive up costs, consume precious health human resource capacity, and will not offer Ontario patients and their families the self-directed care they deserve.

We must act now to change this. Ontarians want, need, and deserve more home care and it is time the government invests in more frontline care to make that happen.



RECOMMENDATIONS

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02

Eliminate the SDCO Agency and work with existing and pre-qualified providers to implement a truly quality-based self-directed care model that achieves its laudable goals.

THE NEED FOR MORE PROFESSIONAL HOME CAREGIVERS

As the demand for home care services continues to grow, it is imperative the industry has the skilled and professional workforce required to meet the increasing needs of a growing population. Providers, unfortunately, continue to struggle to attract and retain professional home caregivers – including nurses, therapists and personal support workers (PSW).

Ontario's health care recruitment and retention efforts over the last decade have been focused primarily on physicians and nurses operating in acute care, and its health human resource strategy is not designed to address the unique attributes of the home care sector.

A well-functioning home care system requires a trained, professional, and skilled workforce and a recruitment and retention strategy to attract the best employees. This is equally true for the supplemental home care sector, which is playing an increasingly key role in helping keep people at homes longer by providing an additional level of care. A key element of this strategy must also be to raise awareness of the risks of hiring unqualified people who could undermine the quality of care they receive. Such a strategy should also include improving the image and recognition of professional home caregivers, and improving the education and training resources that are available.

Unlike other areas in the health care system such as hospitals and clinics, the intimate nature of home care makes it difficult to showcase and promote the sector to potential workers. Because of this, there is a greater need for a promotional campaign of occupations in the home care setting.

On-going training resources is critical to growing the home care workforce. Ontario's post-secondary institutions lack professional programs which equip students with the necessary skills and understanding to work in the home care sector at the outset and throughout their career through continuing education.

Investments must be directed towards inter-professional education, and the establishment of cross-ministry programs to facilitate on-line training and workshops focused on home and community care populations.



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Work with health system leaders to implement a comprehensive strategy to recruit, retain and value more professional and skilled home caregivers, and unlock latent service capacity to better utilize existing professional caregivers.

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Launch a public awareness campaign through social and online media about the value of hiring trained and qualified caregivers from reputable providers to deliver quality care to patients and help impede the underground economy in home care.

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Implement a tax credit or caregiver allowance for those Ontarians who can and do wish to purchase care from reputable, legitimate Ontario home care providers that adhere to safe, and responsible health human resource, occupational safety and accreditation standards.

NEED TO EMPOWER PATIENTS, FAMILIES, AND CAREGIVERS

Ontario's health care system consists of individual components – acute care, home care and long-term care – and the system revolves around the needs of these sectors rather than the patient – without an integrated IT system to link them together and put patients first.

This must be addressed as it is a crucial piece of ensuring integrated care across the health care continuum and for Ontario's home care system – and by extension the entire sector – to be ready to handle the needs of patients who move between all three areas of the system.

Home Care Ontario believes we are starting from a strong foundation as Ontario already collects considerable amounts of patient data in both acute and home care – the issue is that they cannot talk to each other. We need an IT Strategy to link the information gathered by providers, with the rest of the health information that is being collected, and at the same time, allow professional access to the health records of the patients they are serving.

This begins with granting all care practitioners, including professional home caregivers, access to patients' health records through Ontario's portals. This is most pressing around the issue of home care providers being acknowledged as Health Information Custodians (HICs) in their own right. While providers are considered HICs under all existing health information and privacy laws, their

contracts with LHINs specifically remove this status. This means that they are not able to share health information or review primary care files for patients, such as medication and underlying conditions, even though it is critical to quality health care and determining how to best administer care. ER physicians and family doctors similarly cannot access a patient's file and find out when the last home care visit occurred and what took place. In 2018, this situation is neither safe care or acceptable.

These IT challenges must be addressed to empower families, patients and caregivers to ensure the right care decisions are being made by those closest to the patient in real time, rather than by care coordinators within LHINs. Time lags and care delays are costly, inefficient and most of all prevent seamless, accurate, and patient-centred care.



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Strengthen the information exchange between all Health Service Providers, including frontline professional caregivers, and acknowledge their HIC status to achieve continuity in approach and seamless, safe care for patients and families.