



CARE WATCH

Advocating Quality Home & Community Care

Pre-Budget Submission January 2022

Care Watch is a non-profit advocacy organization. Volunteers run Care Watch, and older adults lead it. We work with decision makers to promote home and community services for older Ontarians. These services enable them to stay in their homes and communities safely and productively.

Care Watch welcomes the opportunity to contribute to Ontario's Pre-Budget Hearings. In order to rebuild the home and community services system, we recommend that government:

- Commit to a home-and community-centred system of care for older Ontarians
- Fund long-term care as a comprehensive system, which begins with care in the home and community and also encompasses care in congregate settings
- Immediately invest \$677 million in home and community care:
 - \$470 million to increase staff salaries
 - \$57 million in community support services base funding
 - \$150 million for service providers
- Follow these investments with stable and realistic annual investments for:
 - Core funding and sustainable services rather than one-time enhancements
 - Increases to wages and benefits for personal support workers to bring them into line with those who work in congregate settings
- Continue to increase the amount of home and community services investment annually to keep pace with inflation
- Make dollars for home and community services a key component of health care allocations to planning bodies
- Immediately carry out plans to recruit, train, and retain staff for work in home and community care
- Create a plan, with timelines and accountabilities, to achieve wage parity across home care, long-term care homes, and hospitals
- Remove legislative and regulatory barriers to improving salaries

Older Ontarians want to remain in their homes.

Older adults want to remain in their homes and communities as long as possible. The number, always high, grew when COVID-19 exposed the conditions that sickened and killed many residents of long-term care homes. Now, nearly 100% of older Canadians say they want to stay in their homes and not live in institutions.

Keeping people at home often requires services – sometimes help with basic personal and household tasks and sometimes more specialized interventions. Home and community services help older adults and people with disabilities hold on to their independence. They also relieve pressures on the health care system. When people can stay safely at home, and their caregivers are supported, they are less likely to crowd hospital emergency departments or occupy alternative level of care beds. When those who don't need care in a congregate setting can stay at home, those settings have more room for the residents who need them and staff have more time to support those residents effectively. The new long-term care beds under construction won't be enough, and they won't be completed quickly enough, to meet today's needs and certainly not those in the future. Supporting older adults to remain at home listens to them and to the system as a whole.

• *Not-for-Profit.* • *Volunteer-Run.* • *Senior-Led.*

Care Watch Ontario 140 Merton St, 2nd Floor, Toronto, Ontario M4S 1A1. (416) 590 – 0455 www.carewatchontario.com

Budgets are about investments.

Investing in home and community care saves money – money the health care system needs. The province's own estimates in 2020 showed that caring for a long-term care equivalent client at home costs a little more than \$100 per day – far less than the \$201 per day in a long-term care home or the \$730 per day as an alternative level of care patient in a hospital. About 8% of current long-term care residents in Ontario could be living at home if they had support. Keeping these clients at home would have generated annual health system savings of about \$238 million. The National Institute on Ageing has told us that strengthening home and community care services could save the province close to \$250,000 in capital costs for each long-term care bed it would no longer need.

Many home and community care providers are not-for-profit organizations. When government funding isn't enough, they make difficult choices. They are forced to cut services, increase client fees, or sometimes both. For some clients, a few more hours of service per week can mean the difference between living at home or in an institution.

Care Watch supports the recommendations of the Alzheimer Society of Ontario and of the Ontario Community Support Association to increase funding for home and community care. Specifically, we support the Ontario Community Support Association's recommendation of a total of \$677 million, which will consist of:

- \$470 million to increase salaries of staff and strengthen capacity to deliver services
- \$57 million in community support services base funding to prevent financial deficits and forestall service cuts
- \$150 million to service providers to deliver the additional home care volumes announced in the Fall Economic Statement

This amount needs to be followed by ongoing, consistent, and stable annual funding increases. One-time initiatives and enhancements, though attractive, aren't enough. Community agencies need core funding to maintain services, address inflation, and begin to rebuild the damaged home and community care system. They can then move from rationing to service and prevention, which can minimize the strain on hospitals and long-term care homes.

As with many wise investments, the greatest returns occur over the longer term. Acute and congregate services need funding, but to invest only in them at the expense of home and community services misses the full picture.

We need to rebalance the system.

Long-term care is a system, so that's how we need to plan it and budget for it. Care in homes and communities is the foundation and the entry point to services that range from community services and programs, such as Meals on Wheels, to personal care and nursing assistance in the home to care in a congregate setting for those clients who eventually need it. The system has to meet clients where they are, not where the system is.

• *Not-for-Profit.* • *Volunteer-Run.* • *Senior-Led.*

Care Watch Ontario 140 Merton St, 2nd Floor, Toronto, Ontario M4S 1A1. (416) 590 – 0455 www.carewatchontario.com

When home and community services are strong, home becomes the first, and often the best, option. The goal is to support clients in their homes as long as possible; for some, that may be for a lifetime.

Any discussion of long-term care and any plans for long-term care have to include home and community – as an essential component and not an afterthought or enhancement. Allocations to planning bodies within Ontario’s planning and funding structures need to include specific allocations for home and community services.

Programs and services need people, and there aren’t enough of them.

COVID-19 showed us that our society hasn’t valued older adults or the people who care for them. Most of the people who provide care in the home and also in congregate settings are personal support workers. We hear them praised, but we see them disrespected. They were already in short supply, and it’s not surprising that the pandemic drove many away. It becomes harder to recruit new ones and even harder to keep them.

We welcome increases to pay, benefits, working conditions, and training opportunities, but only when they are for all workers and not only those in congregate settings. Personal support workers in the community do the same work and contribute the same value as those in hospitals and long-term care homes, but they earn far less. Recent Campaign Research survey results show that two-thirds of older Ontarians believe that professional caregivers, such as personal support workers and skilled therapists, should be paid at the same rates whether they are working in home care, long-term care homes, or hospitals. Without comparable pay and working conditions, even fewer workers will want, or be able to afford, to work in the community. When clients have no one to care for them, they are forced into long-term care homes or hospitals. The system is then further destabilized.

The workforce shortage is system-wide. In addition to the immediate investments, we need a larger plan for recruiting and retaining personal support workers, including those in the community. The plan also needs to include the many unpaid caregivers who provide about 70% of home care, often at a cost to their personal health and finances.

The crisis isn’t looming. It’s already here.

We’ve already seen some of the consequences when home and community services are sidelined – service cuts, long-term care homes with neglected residents, and overflowing hospitals unable to provide even urgent services. When we see the statistics and hear the stories, what more does it take? Unless we act now, we can expect to see even worse.

Health care is interdependent. What happens in one part of the system affects all others. The capacity of hospitals to care for the people who need them depends on the capacity of the community to care for the people who can, and would prefer to, remain at home. When we strengthen home and community services, and the agencies and workers that deliver them, we strengthen all other elements of the system. It is with attention to older adults and to the system as a whole that Care Watch has submitted its recommendations.

• *Not-for-Profit.* • *Volunteer-Run.* • *Senior-Led.*

Care Watch Ontario 140 Merton St, 2nd Floor, Toronto, Ontario M4S 1A1. (416) 590 – 0455 www.carewatchontario.com