



2024 Pre-Budget Submission:

**A provincial older adult perspective
on priority health care budget issues
impacting all Ontarians**

Ontario Association of Councils on Aging (OACA)

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Lilian Wells

President, OACA

l.wells.oaca@rogers.com

The Ontario Association of Councils on Aging (OACA)

The Ontario Association of Councils on Aging (OACA) reflects the perspective of thousands of older adults across the province whose lived experience provides valuable insights into issues affecting older adults.

The volunteers who serve on the Board of Directors are volunteers who represent several Ontario communities ranging from urban areas like Toronto and Ottawa to rural areas such as Grey-Bruce and Greater Arnprior. Board members are mostly older adults who have had experience as caregivers to loved ones needing health care and community support, and/or as professionals who fulfill or have fulfilled various capacities in health care or related fields.

The Board has, over the past few years, been active in advocating for improvements in the areas of health care addressed in this submission. For example, it has written letters to the Premier, applicable Ministers and leaders of all provincial political parties on primary care, long-term care, home and community care and housing. It has appeared as a deputation before the Ontario Long-Term Care COVID-19 Commission.

Summary of the Position of the OACA Board of Directors on the 2024 Budget

A Provincial budget must reflect the priority needs of the population and address the current issues impacting the quality of life of Ontarians. The OACA Board urges that the 2024 budget address one of the most important dimensions of quality of life for

Ontarians of all ages – good health and good quality, accessible, and affordable health care.

Ontario's (and indeed, Canada's) much valued public health care system is strained to an unprecedented level. Correspondingly, the public health care system requires unprecedented attention from governments in the form of additional funding and accountability measures to ensure desired outcomes.

Many knowledgeable observers state that this pillar of Canadian society is in crisis and point to an abundance of evidence, which is corroborated daily by Ontarians' experience with unprecedented wait times in emergency rooms, for long-term care beds and for community health and support services.

As Canada's leading economic powerhouse, and with access to recently announced federal health care funding, Ontario is well positioned to apply the necessary resources to this vital need. It is time for Ontario to demonstrate its leadership in the Canadian federation and make the required bold decisions to implement the measures urgently required to appropriately fund strategic elements of the health care system. To optimize the effectiveness of these additional health care investments, it is also important to appropriately fund related services impacting the social determinants of health (e.g., affordable, and appropriate housing) to achieve the outcomes that will better meet the needs of Ontarians of all ages.

Further to the positions on related health care policies already recorded by the OACA, and shared with all provincial party leaders and featured in opinion editorials in several Ontario newspapers, the OACA Board accordingly recommends increased funding of

the following strategic aspects of the health care system (with corresponding accountability for outcomes to achieve optimal return on these recommended investments):

1. **Improve access to primary care**, particularly in rural areas, to effectively serve Ontarians and support the broader health care system
2. **Improve access to home and community care**, by ensuring adequate funding to achieve desired outcomes such as support for aging in place and relieving demand for more costly and often unnecessary institutional care
3. **Implement promised staffing recommendations for long-term care homes** to achieve 4.5 hours of resident care per day and other measures recommended by the Ontario COVID Long-Term Care Commission
4. **Relieve pressure on hospitals to achieve timelier care**, by adequately funding hospitals to perform priority surgical procedures, and relieve pressure on emergency departments and corresponding availability of beds, including mental health services
5. **Sustain the capacity of Public Health to meet population health needs** by adequately funding public health units to address population health issues, particularly mental health, and addictions
6. **Support aging in place and related measures**, by adequately funding services that address the social determinants of health (e.g., housing with a particular focus on supporting aging in place, income supports for marginalized populations, education, etc.)

Recommendations from the OACA for the 2024 Budget

A Provincial budget must reflect the priority needs of the population and address the current issues impacting the quality of life of Ontarians. One of the most important dimensions of quality of life for Ontarians of all ages is good quality, accessible, and affordable health care.

Ontario's health care system is under unprecedented pressure and is showing multiple signs of strain. To preserve and strengthen the much-valued public health care system from which millions of Canadians have benefitted over the decades since the inception of Medicare, Ontario urgently needs to make substantial generational investments in select elements of the public health care system, accompanied by accountability measures to ensure desired outcomes.

The OACA recognizes the multiple social, economic, environmental, and other needs of the population; however, for the purpose of inputting into the 2024 Provincial budget, the OACA submits that MPPs prioritize health care investments and consider and urgently implement the following recommendations in the 2024 budget:

1. Improve Access to Primary Care

Access to primary care is the foundation and gateway to an effective and sustainable broader health care system that includes key components such as home and community care, mental health, acute and long-term care. There is an abundance of evidence that corroborates that primary care in Ontario is in crisis,

and that this crisis is more critical in rural areas and is disproportionately impactful on older adults.

The primary care crisis negatively impacts the health of the individual directly and adds a workload burden and unnecessary cost to the broader health care system.

Recommendation:

1.1 Urgently and adequately fund systemic and integrated measures to address the primary care crisis, including investments in health human resources, recognition of health care professionals trained abroad, increase in number of nurse practitioners and options for practicing in interprofessional health teams settings, and incentivizing primary care providers to assume family practices, with incentives to take on patients with chronic conditions, and patients in rural areas.

2. Improve Access to Home and Community Care

Access to home care, placement, and related community support services in the spectrum of health care services in this province plays a significant role in the quality of life of so many Ontarians. Specifically, such services support aging in place, support family caregivers and relieve demand for more costly and often unnecessary institutional care.

With the passage of Bill 135 (Convenient Care at Home Act), it is critical that the regulations and effective implementation are supported with corresponding

appropriate funding to enable the quality of outcomes required by recipients of the services, their family caregivers, and the broader health care system.

Specifically, access could be improved by including provision for system navigation and opportunities for input and feedback from people receiving the care and services, their caregivers, and others with an interest in such care and services. In addition, to ensure the effective delivery of care and services, local decision-making must be enabled to be responsive to the regional variances across the province (i.e., rural, urban, population density, cultural diversity, local availability of care and services etc.).

Recommendation:

2.1 Adequately fund the government's reform of home and community care

(i.e., Bill 135, Convenient Care at Home Act) to support aging in place through the preparation of regulations and corresponding implementation that ensure quality of care that meets recipients' and caregivers' needs, improves access to care and services, provides for input and feedback from the public and for responsiveness to regional variances, while reducing pressures on the broader health care system (e.g., hospitals, long-term care homes).

3. Implement Promised Staffing Recommendations for Long-Term Care Homes

Following the devastating impact of COVID-19 on the lives of thousands of residents in long-term care homes, the Ontario government established the Ontario Long-Term Care COVID-19 Commission. The government subsequently considered

the Commission's recommendations which included increasing staffing levels; supporting person-centred models of care and systemic reforms on governance and accountability; and a recommendation requiring the Minister of Long-Term Care to table a progress report in the legislature on the first and third anniversary of the release of the Commission's report.

For purposes of the 2024 budget, the government must prioritize the implementation of its promise to meet the recommended average of 4.5 hours of resident care per day across all long-term care homes in the province.

Recommendation:

3.1 Implement the government's promised staffing commitment to achieve the 4.5 hours of resident care per day for all long-term care homes, which was one of the key recommendations by the Ontario Long-Term Care COVID-19 Commission to improve resident care. Other recommendations would address long-standing systemic shortcomings and avoid a recurrence of the devastation and loss of life experienced by thousands of residents due to the system not having the capacity to respond to the challenges of a pandemic.

4. Relieve pressure on hospitals to achieve timelier care

Hospitals must be better funded to provide better care in emergency rooms, to better meet the demand in hospitals for surgeries of all kinds, including hip and knee replacements, as well as mental health care. Addressing the needs of the emergency department, which typically serves as the gateway to hospital care, will concurrently need improvements in other hospital elements, such as increased

beds and operating room time. Investing in health human resources is key to helping resolve the pressures on hospitals.

There is an abundance of evidence that corroborates that emergency departments are under unprecedented pressure, as indicated by very long wait times for care, extremely long wait times for necessary admissions to hospital, emergency room closures (particularly in small communities and rural areas), and other indicators.

Anecdotally, many Ontarians have experienced unacceptable delays in accessing emergency care, while waiting in ambulances that are in hospital parking lots unable to offload patients to the emergency room, or laying on stretchers and gurneys in hallways or storage rooms for days before being admitted.

Recommendation:

4.1 Urgently and adequately fund hospitals to alleviate emergency department and surgical pressures to enable Ontarians to access necessary emergency care in a timely manner, to access mental health services, when needed in a hospital setting, and to optimize the use of available hospital operating rooms to enable required surgeries (e.g., hip and knee replacements).

5. Sustain the capacity of Public Health to meet population health needs

Public Health units must remain well funded to provide the necessary preventive education and other measures to help keep Ontarians healthy in the community and possibly avoid needing more costly care. The COVID-19 pandemic demonstrated the value of local health units that were nimble and resourceful in managing a global health crisis and mitigating the transmission of potentially deadly viruses.

In addition, increased need for mental health and addictions services requires responsive public health units that can help mitigate mental health crises, causes of harm by addictions that can lead to deaths from overdoses, and causes of homelessness.

Recommendation:

5.1 Adequately fund public health units to enable the fulfillment of their

mandates to keep the population healthy. Based on Ontario's experience during the height of the COVID-19 pandemic which demonstrated the value of an appropriately funded public health service, funding must be sustained to help manage the crisis level of harmful addictions (e.g., fentanyl) and the intersection of other social determinants of health leading to unprecedented societal challenges (e.g., homelessness).

6. Support Aging in Place and Related Measures

Adequate funding for promoting good health and providing quality health care (as advocated in the above five recommendations) must extend to the social determinants of health to be truly effective in achieving desired health outcomes.

For example, adequate housing for older adults, with various options to meet the varied needs of older adults must be provided to support aging in place, and possibly prevent or postpone the need for more expensive options, such as congregate living, long-term care homes or other health care services.

Housing options such as more supportive housing, co-housing, and home sharing (sometimes intergenerational), expansion of non-market rental housing, rent supplements and rent banks which will also contribute to mitigating the unequal aging of low-income elders and the causes of homelessness among older adults, and to addressing the needs of vulnerable older adults with complex issues.

Recommendation:

6.1 Adequately fund programs and services that address the social

determinants of health (i.e., various options for affordable and for supportive housing and that specifically support aging in place and mitigate social factors that lead to displacing older adults and resorting to more expensive measures within the health care system, such as long-term care homes and other health care services).

Closing Statement

The OACA Board of Directors has a good understanding of the complicated process of identifying and funding priority provincial budget items. Good health and quality health care, which provide the foundation for the overall quality of life of so many individual Ontarians and of the province overall, must be the baseline for the 2024 budget process. The Board urges the government to carefully consider the points made in this submission, capitalize on available health care funding, and implement the recommendations in this submission to support all Ontarians and the sustainability of Canada's treasured public health care system.