

From CFUW Stratford and the South Shore University Women's Club (Montreal)

May 13, 2020

Long-Term Care under the Canada Health Act – 2020

CFUW Stratford & South Shore University Women's Club (Montreal)

RESOLVED, that the Canadian Federation of University Women urge the federal, provincial, territorial, and indigenous governments of Canada to create universal, accessible, regulated, respectful, and quality long-term care for the immediate and growing needs of elderly and vulnerable persons in Canada by placing it under the Canada Health Act.

Background

We are bringing this forward as an Emergency Resolution because of the horrifying revelations of the impact of Covid-19 on both patients, their families, and staff in Canada's long-term care facilities. The urgent need for better care for seniors and vulnerable persons in these facilities has never been more obvious. In many provinces, the lack of quality-controlled standards of care, the inadequacy of inspections, the profoundly disrespectful employment attitudes and practices regarding staff, especially Personal Service Workers, have caused tragic and preventable outcomes.

Greed and indifference have been allowed to combine to cause seniors to end their lives in painful isolation. CFUW should act without delay in encouraging its members to lobby for universal standards of practice and accessible care for Canadian seniors regardless of location or income level. To meet this goal, CFUW should petition all levels of government to have long-term care placed under the Canada Health Act.

The Canada Health Act

"The Canada Health Act (CHA or the Act) is Canada's federal legislation for publicly funded health care insurance. The Act sets out the primary objective of Canadian health care policy, which is 'to protect, promote and restore the physical and mental well-being of residents of Canada and to facilitate reasonable access to health services without financial or other barriers.'

The CHA establishes criteria and conditions related to insured health services and extended health care services that the provinces and territories must fulfill to receive the full federal cash contribution under the Canada Health Transfer. The aim of the CHA is to ensure that all eligible residents of Canada have reasonable access to insured health services on a prepaid basis, without direct charges at the point of service for such services." (Government of Canada, 2020)

Canadian seniors are suffering the most from COVID-19, with 79 per cent of all deaths in the country now connected to long-term care and seniors' homes. (Walsh & Semeniuk, 2020) The majority of these seniors are women. With longer lives, higher rates of disability and chronic health problems, and lower incomes than men on average, many women need long-term care services without having the resources to pay for them. (AARP, 2007)

In his commentary for CTV News, Flanagan (2020) quoted Dr. Samir Sinha, director of geriatrics at Mount Sinai Hospital in Toronto as saying "We're seeing that the real epicentre of this epidemic has been long-term care homes across the country." He indicated that Canada's senior-care sector has long struggled with underfunding and neglect, leading to consequences that include workers being employed at multiple homes and frequently moving between them, making it easier to spread a virus from one facility to another. This is especially true in the Montreal region.

Nightly news broadcasts report on seniors being housed two or more to a room without proper isolation available and often abandoned because staff have themselves become ill. Tales of residents being left in their own urine and excrement have shocked us into the realization that some of our long-term care facilities have degenerated and have been insufficiently inspected.

Long-term care is a provincial matter. In Quebec, in particular, the situation is deplorable in many long-term care facilities which have been under-funded, understaffed, and neglected for a long time. As of May 8th, The Montreal Gazette states that the average of confirmed cases across all provinces is 175 per 100,000 population. In the epicentre in Quebec, there are 423 confirmed cases per 100,000 population. Among Canadian provinces, that's by far the highest rate. After Quebec comes Alberta (136) and Ontario (133). (Riga, 2020.).

In the province of Ontario, for example, each long-term care home is supposed to have unannounced comprehensive resident quality inspections (RQI) annually. CBC News reviewed inspection reports from the last five years for all long-term care homes in the province and found that while most received a comprehensive resident quality inspection in 2015, 2016 and 2017, the number dropped to just over half in 2018 and just nine last year.(Common, Mancini, & Pederson, 2020)

A recent Toronto Star investigation found that once covid-19 had entered a nursing home, residents of for-profit nursing homes were twice as likely to catch covid-19 and die than residents in non-profits! The Star also quotes an international study indicating that Canada had the highest proportion of long-term deaths from covid-19 among 14 countries studied and that the deaths were occurring at a disproportionate rate in for-profit homes. (Oved, M.C., Kennedy, B., Wallace, K., & Tubb, E.)

Without the protection of the Canada Health Act, funding for long-term care has fluctuated with provincial budgets. Prime Minister Justin Trudeau, on *Tout le Monde en Parle*, on *Ici Radio-Canada Télé*, promised that the federal government would increase

the level of transfers funds from the federal government to the provinces, to make up for the cuts made by the previous government. (Brisebois, 2020) Long-term care cannot be left to such vacillation. Vulnerable senior citizens require the reasonable access to physical and mental well-being without the financial barriers. They need the protection of the Canada Health Act.

In their study, *Sizing up the Challenge: Meeting the Need for Long-Term Care in Canada*, the Conference Board of Canada concludes that the investment and spending on long term care beds will have a positive effect on the economy, contributing a total of \$235 billion to real GDP and supporting an average of 123,000 jobs per year. (Gibbard, 2017)

CFUW already has a germane policy on the books which presciently addresses *Preventing Healthcare Facility Acquired Infections* – policy #160 presented by CFUW Windsor in 2008.

160.– 2008 CFUW Windsor (Ontario) RESOLVED, That the Canadian Federation of University Women (CFUW) urge the Government of Canada and provincial and territorial governments to make infection prevention, control and hygiene programs (with standardized guidelines) mandatory in acute care (hospitals), long-term care, continuing care facilities and community health clinics, and to provide sustained dedicated funding, infrastructure, human resources, and incentives so that effective programs can be enhanced and monitored in these facilities; RESOLVED, That CFUW urge the Government of Canada and provincial and territorial governments to require all acute care (hospitals), long-term care and continuing care facilities to provide the public with infection rate statistical data.

What we propose is that we now articulate explicitly a petition to the federal government to place long term care under the Canada Health Act.

This resolution would parallel resolution #192 which dealt similarly with the inclusion of home care services under the Canada Health Act as follows:

192. Inclusion of Home Care Services under the Canada Health Act – 2005 CFUW Burlington (Ontario) | CFUW Hamilton (Ontario) RESOLVED, That the Canadian Federation of University Women urge the federal, provincial and territorial governments to extend home care services to individuals beyond those identified in the Final Report of the Commission on the Future of Health Care in Canada 2002 (Romanow Report), to include the elderly, the chronically ill and/or disabled; and RESOLVED, That the Canadian Federation of University Women urge the federal, provincial and territorial governments to ensure that the provision of home care for both acute care and chronic care patients become an integral part of the Canada Health Act.

Because there are indeed many issues regarding the structure, staffing and financing of long-term care facilities, we believe that there is an urgent need to lobby for overall

protection now for our seniors and most vulnerable populations. We believe that placing long-term care under the Canada Health Act merits an emergency resolution at this year's CFUW AGM.

Implementation

CFUW members should lobby their local MPs regarding the dire situation in long-term care in Canada and express the need for long-term care to be incorporated under the Canada Health Act.

CFUW members should communicate with their MPPs about the number of RQI inspections funded for long-term care facilities in their province.

CFUW members should look at employment practices in Long-Term care facilities through the lens of both gender and vulnerable sector discrimination.

Bibliography

AARP Public Policy Institute, (2007, April). Women in long-term care. Retrieved from https://www.aarp.org/home-garden/livable-communities/info-2007/fs77r_ltc.html

Brisebois, M. (Director), Laniel, C.-A. (Writer), (2020, May 3). *Tout le Monde en Parle*. Lepage, G.-A. and Wiseman, L. (Producers) Ici Radio-Canada Télé.

Common, D., Mancini, M., & Pederson, K., (2020, April 15). Ontario scaled back comprehensive, annual inspections of nursing homes to only a handful last year. *CBC News*. Retrieved from <https://www.cbc.ca/news/canada/seniors-homes-inspections-1.5532585>

Flanagan, R., (2020, May 6). Where the tragedy really lies: The crisis in Canada's long-term care homes. *CTV News*. Retrieved from <https://www.ctvnews.ca/health/coronavirus/where-the-tragedy-really-lies-the-crisis-in-canada-s-long-term-care-homes-1.4927328>

Gibbard, R., (2017). Sizing up the challenge: meeting the need for long-term care in Canada. The Conference Board of Canada. Retrieved from https://www.cma.ca/sites/default/files/2018-11/9228_Meeting%20the%20Demand%20for%20Long-Term%20Care%20Beds_RPT.pdf

Government of Canada. (2020). *The Canada Health Act*. Retrieved from the Government of Canada website:

<https://www.canada.ca/en/health-canada/services/health-care-system/canada-health-care-system-medicare/canada-health-act.html>

Riga, A., (2020, May 8) Coronavirus: It's been a long rough 8 weeks in Quebec. *The Montreal Gazette*. Retrieved online from <https://montrealgazette.com/news/local-news/coronavirus-it-has-been-a-long-rough-eight-weeks-in-quebec/>

Oved, M.C., Kennedy, B., Wallace, K., & Tubb, E. (2020, May 9). Crisis in long-term care homes: Ontario covid-19 deaths far higher in for-profit nursing homes. *Toronto Saturday Star*. pp A1, A20.

Walsh, M., & Semeniuk, I. (2020, April 28/29). Long-term care connected to 79 per cent of Covid-19 deaths in Canada. *The Globe and Mail*. Retrieved from <https://www.theglobeandmail.com/politics/article-long-term-care-connected-to-79-per-cent-of-covid-19-deaths-in-canada/>

Appendix

Notes for this ongoing and evolving topic

In Quebec 2017-2018 was the third year of a three-year evaluation cycle (2015-2018) during which all of the 413 public, private and private CHSLDs under agreement were evaluated. Of this total of 413 CHSLDs, 57 were assessed in 2017-2018. Visits to CHSLDs are ongoing. The quality assessment visit reports in CHSLDs are posted on the MSSS website at the following address: [http://www.msss.gouv.qc.ca/sujets/organisation/visites appreciation / visits.php](http://www.msss.gouv.qc.ca/sujets/organisation/visites_appreciation_visits.php), and on the establishments' websites.

Long-term care homes in Quebec have been riddled with problems for years. The Ombudsperson Marie Rinfret tabled her 2018-2019 Annual Report at the National Assembly. In it, she presented her findings concerning the quality and integrity of Québec public services.

"I'm particularly concerned about public service access for people who are the most vulnerable because of their health, age, social and economic condition or their isolation. When access rules are too complicated, they deprive people of the services they need and have the right to," said Ombudsperson Marie Rinfret.

She also said the services provided to seniors and people living with disabilities in long-term care homes were "deficient" and "flawed." "At many institutions, staff can barely keep up. The upshot is that services such as baths and dental care are put off. Needless to say, this causes significant harm to people who are highly vulnerable."

Last fall, the Quebec Council for the Protection of Patients got the green light from Quebec's Superior Court to pursue a class action lawsuit against the province and regional health authorities over poor living conditions at the homes.
