



Health



Closing the Gap® Healthcare

*Bayshore*  
HealthCare

# How to Bring Health Home & Stabilize Ontario's Health Care System

October 2022

# Who We Are

The **Bring Health Home** group consists of VON Canada, SE Health, Bayshore HealthCare & Closing the Gap Healthcare.

We are a collective of frontline homecare providers, each with decades of experience, who have been intentional in their approach to improve system wide outcomes, particularly for patients, staff, and providers.



Our group delivers homecare services to approximately **633,000 Ontarians a year**



**200 years** of collective experience and scale



We make **24.6 million homecare** visits annually across Canada



We provide approximately **50% of home health care services** in Ontario

# The Status Quo

Ontario's health care system is under tremendous pressure, with experts, front line workers, administrators, the media, and the public all referring to the situation with the same tone: **this is a crisis.**

Limited access to appropriate primary or community care in Ontario is playing a significant role in Ontarians ending up with the wrong care at a higher cost. (ED overcrowding, LTC wait lists and ALC)

## **The main challenges in the existing system include:**

- Poor and inequitable public access to care
- Limited autonomy to impact care delivery for clients, families and front-line providers
- Outdated fee schedules
- Chronic underfunding
- Cumbersome bureaucracy
- Underappreciation of the home care work force

**“Status quo is just not working.”**

Premier Ford, 2022

# Challenges With the Home Care Workforce

## Cost of Living Safely at Home



**HOME CARE \$103 a day, \$37,595 a year**

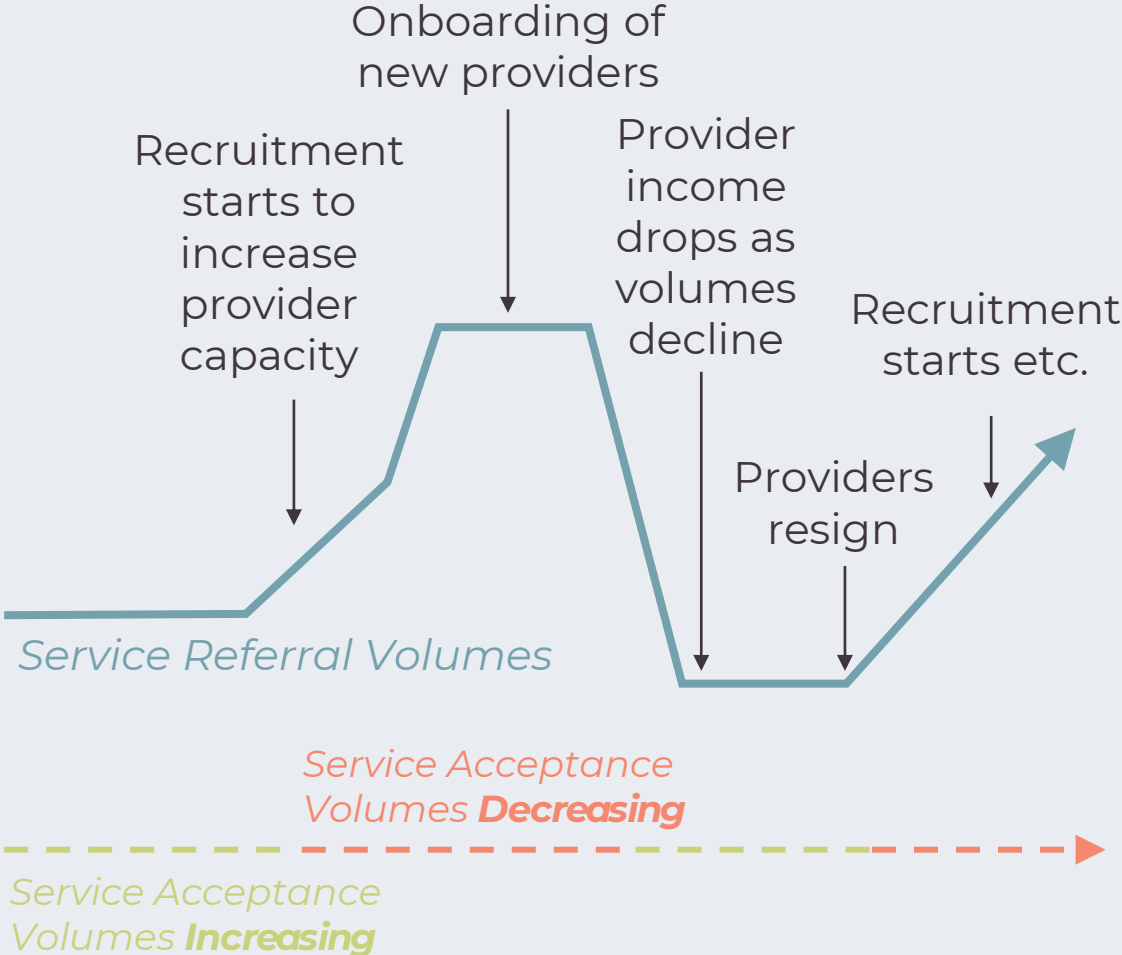


**LONG-TERM CARE \$201 a day, \$73,365 a year**



**HOSPITAL \$730 a day, \$266,450 a year**

## Health Human Resource Capacity Planning In a Fee for Service Funding Model



# How This Group Can Help

Our group believes that there is a tremendous opportunity to unlock the vast potential of the sector to ensure that Ontarians are offered the opportunity to age at home.

Implementing reform successfully will require close collaboration and partnership between policy makers, funders and those who are tasked with delivering services on the front-lines and caring for communities.

We stand ready and willing to partner with the government as we work through the transition to a more efficient and effective home care system.



“A **stronger, more connected and more responsive home-care system** would also relieve family members and caregivers, who are too often underequipped and overwhelmed.”

Ontario Medical Association



96% of Ontario's older adults want to **stay in their homes** for as long as possible



78% of Ontarians would **prefer home care** to long-term care homes



6% of Ontarians believe they will have access to **quality long-term care** when they need it

# Recommendations (1/3)

## **Stabilizing the Existing System: Relieving Pressure on Ontario's Hospitals and Long-Term Care Homes**

- Expand integrated funding and new service models that enable Ontarians with more complex health needs to stay safely in their homes longer;
- Give clients and families more choice and flexibility through client-directed care-models;
- Reduce surgical backlogs through surgical-bundled care programs;
- Stabilize the home care workforce; and,
- Scale successful “hospital to home” models to enable ALC patients to safely transition home.

# Recommendations (2/3)

## **Setting Ontario Up for Success: Transitioning to a Modern and Innovative Home Care System**

- Solidify internal government leadership and accountability structures;
- Partner with those with direct experience in delivering and receiving services in discussions around how to implement change;
- Include the perspective of home care in broader health system transformation discussions;
- Do not wait on full OHT “maturity” to devolve services; and,
- Ensure that home care modernization results in measurable reductions in red tape and bureaucracy.

# Recommendations (3/3)

A breakdown of how we recommend the planned \$1.5 billion in home care investments be directed over the next 3 years, and the cost effectiveness and time effectiveness of increasing home care capacity sustainably versus medical institutions.

Funds to be directed	Initiatives for funds to be directed towards
<b>\$500 million</b>	Toward new models that support the long-term life care needs of older adults in the community including those on the waitlist for LTC. Pilot, evaluate and scale these programs in partnership with primary care, home care, community support service and OHTs.
<b>\$350 million</b>	Toward transitional bundled care programs, enabling ALC patients in hospital to be safely discharged home.
<b>\$150 million</b>	Toward expanding client-directed funding programs to support independence and healthy aging.
<b>\$100 million</b>	Toward surgical bundled care programs to support surgical recovery and the continuum of care.
<b>\$340 million</b>	Toward contract rate increases to level up frontline wages and support critical infrastructure costs within home care service provider organizations.

