



June 4, 2020

Minister Merrilee Fullerton
Minister of Long-Term Care:

This communication is a follow-up to the email sent to your office April 16, 2020, outlining actions needed for immediate and long term planning to renovate the Long Term Care system. Our Advocacy Team is the voice for Family Councils Network Four, with the focus to improve the care for all residents in Long Term Care (LTC). As one of the largest networks in the province, we represent the Family Councils at all 86 LTC Homes (over 11,000 residents) in the region which includes Hamilton, Niagara, Haldimand, Brant, Burlington and most of Norfolk Country.

We recognize that your ministry is facing an enormous challenge to respond to the pandemic that has decimated LTC homes. We applaud the recent announcements where homes that are not coping have been placed under Ministry control or linked to neighbouring hospitals for management and that you have moved the timing of the commission to start in July instead of waiting until September. We are hopeful that your assertions of “*all solutions are on the table*” will quickly find the most effective action plans to set in motion. Continuing to listen to the need for a full Public Inquiry is important, but does not need to interfere with the crucial immediate steps to improve conditions in all Ontario homes.

Our team along, with many other organizations that support a life of safety and dignity for seniors, will be watching closely as the Incident Management System Long-Term Care Table makes recommendations and your Ministry implements sustainable changes.

As you redesign the complexity of the Long Term Care system, we urge you to engage in a *parallel* process.

1. There are several things that the Minister could implement immediately (at least in the next 3 months) to address the current situation. Your team is already very familiar with all the key issues from previous recommendations drawn from inquiries, investigations, studies and reviews. A new commission (or public inquiry) is not needed to implement any of these recommendations.
2. In parallel, Minister, you can make use of the advice from this new public inquiry / commission to look in depth at other systemic issues that have not yet been identified. Once the framework for an optimum LTC system is developed, then you can turn your attention to building new homes based on the newer models of care to address the ever growing waiting list and the question of how For-Profit and Not-For-Profit homes fit in the same arena.

Rich research and documentation exists to draw up a battle plan that can quickly be adapted. Starting with *enacting a standard of care* (example: Time to Care Act) will provide guidance to all homes to develop care plans and safety protocols that meet the needs of the residents in each home. We see establishing *a standard of care as foundational* to building a credible care system. Deploying inspectors back into the homes after a long hiatus of absent quality-driven oversight is welcomed. This two-year hiatus with reduced inspections has proven that this is one example of “red tape” that is actually needed. Redeveloping the protocols, quality and comprehensive training for the inspection process will give clear direction to all administration and staff to achieve those standards. Swift and substantial fines or where appropriate, loss of authority to manage a LTC home, are needed to maintain the standard of care and safety. A comprehensive Human Resources plan that incorporates appropriate funding and salary levels for staff will allow LTC staff to adhere to the guidelines and stretch to meet the unique culture within each home.

The response to the recommendations outlined in the Honourable Eileen E. Gillese, Commissioner’s *Report of the Long-Term Care Homes Public Inquiry* was expected in July 2020, a full year after it was submitted to the government. This report outlines a long list of credible, well-defined steps and is one tool to assist the Long Term Care table to immediately carve out real change to system. If recommendations are not accepted, we expect a full rationale for the rejection or an alternate, yet equal recommendation to achieve results to be published.

Our network of Family Councils continues to offer participation at committee or task force level. Families are increasingly anxious to find methods to support proper infection control processes while visiting family in LTC homes to combat the growing loneliness as the fight of the pandemic continues. One example forwarded by a frustrated family member is building plexi-glass shields in communal areas to promote a safe way for families to meet and share some time together.

This is a huge project and needs a non-partisan approach and consensus to be successful. Thank you for listening.

Yours sincerely,

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Family Council Network 4 Advocacy
Committed to Improving the lives of Ontario Residents in Long Term Care
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