April 17, 202

The Rt. Hon. Justin Trudeau, PC, MP, Prime Minister of Canada Office of the Prime Minister 80 Wellington Street Ottawa, Ontario K1A 0A2



Dear Prime Minister:

In the midst of this pandemic, none of the news has been as sad and upsetting as the tragedy taking place right now in our nation's residential care facilities.

By residential care, I am referring to a wide range of supported living and nursing care arrangements for seniors, and others, in Canada. These go by a variety of names across the country, which are generally referred to as residential care or long-term care facilities or residences. These facilities employ a spectrum of highly trained staff who provide medical and social supports to their clients.

My union, the National Union of Public and General Employees (NUPGE), represents a large number of workers in residential care facilities across Canada. We have members currently working on the front lines of this crisis. We also have past members, family and friends, who are living in these residences. Furthermore, we also feel a moral obligation to speak out on behalf of all those workers, unionized and non-unionized, and all those who require care, to demand that their needs not be ignored or forgotten.

There is an almost unimaginable crisis befalling many of the residential care facilities in this country. The horrific details of Montreal's Résidence Herron are only the most recent among stories of how seniors, some of our most vulnerable and dependent citizens, and the people that care for them, are paying a disproportionate price in the face of COVID-19.

Indeed, I would also point out the events at the Pinecrest Nursing Home in Bobcaygeon, Ontario. This site had the sad distinction, until recently, of having the largest number of deaths due to COVID-19 in a residential care residence. It is also worth mentioning that among the first deaths as a result of the coronavirus in Canada were those at British Columbia's Lynn Valley Care Centre.

Reports are that residential care facilities are among the hardest hit locations for COVID-19. Not just residents, but staff. This is doubly sad, as it is those Canadians who made a lifelong contribution to improving this country, and those who care for them, who are among those facing the greatest risks in this pandemic.

What is infuriating, however, is that, in many of these instances, these tragedies could have been avoided. The broken system of long-term care and seniors care in this country is contributing to these disasters. It appears that a disproportionate number of these tragedies are taking place in privately owned and operated facilities, including the 3 previously mentioned residences.



Sadly, if that proves to be the case, that will not be a surprise for our members working in privately owned residential care residences.

During discussions with the provincial leadership of my union, I have learned that residents and staff are not among management priorities in private residential care facilities:

- Maintaining their profits is priority, so private residential care facilities must pay their workers the least amount of money they can get away with. These workers, in turn, must work at multiple locations to earn enough to survive.
- Training is often seen as an added expense; thus, training is kept to the minimum.
- Providing personal protective equipment (PPE) for staff in the privately operated residences is seen by the owners as an added expense to be minimized.
- Following provincial guidelines is seen as adding costs, and only the bare minimum should be done to adhere to them.

As you know, these private care residences, along with home care and other medical services, were not included under the provisions of the *Canada Health Act*. This has resulted in a confusing mix of services across the country. In addition, we have seen a proliferation of forprofit companies stepping in to reward themselves off the backs of our seniors.

This pandemic has laid bare the multitude of flaws in the system.

Yet none of this is really new information. For decades the evidence has shown that for-profit residential care facilities have seriously underperformed that of the publicly owned and operated ones.

In the study entitled "Observational Evidence of For-Profit Delivery and Inferior Nursing Home Care: When Is There Enough Evidence for Policy Change?," published in 2016 in the journal PLOS Medicine, the authors argue that "When [long-term care is] provided by the for-profit sector, the evidence suggests there is a greater likelihood of inferior care."

The authors summarize decades of evidence, from the US, Canada, and elsewhere, comparing for-profit residential care facilities to ones run by public bodies, or non-profits. Even 4 years ago, the authors were saying, "it is time to re-align policy with evidence." Now, with the death toll in residential care facilities rising, the time for further research and discussion has passed. During this crisis, governments must take immediate and strong action to protect our nation's seniors.

In British Columbia, the Provincial Health Officer has assumed control of staffing at residential care facilities in the Vancouver area for the next 6 months. This action was done so as to provide employees equal pay and ensure that they work in only one location.

The province of Ontario has announced measures restricting the ability of workers in residential care facilities to work at multiple sites. Also, responding to recent events, the government of Quebec is looking at some strong interventions for the province's private residential care facilities.

Finally, your government has also seen the growing crisis in the sector. Your recent announcement of financial support for workers in the sector suggests that you recognize intervention is necessary. I would point out that the measures you are contemplating would

most likely go towards assisting the most poorly paid of these workers who are disproportionately employed in non-unionized, privately owned facilities. While the increased funding is welcome, more needs to be done to correct the deeply flawed system.

It is time that the federal government stepped in to end the travesty that is private for-profit residential care in Canada. I am calling on your government to extend the provisions of the *Canada Health Act* to include Canada's residential care facilities. By doing so, you would ensure that they must meet the 5 principles of the CHA: public administration, accessibility, comprehensiveness, universality, and portability.

In addition, your government should take all the steps to adequately fund the necessary support that workers and residents in residential care in this country desperately need. This funding needs to be ongoing to ensure that there exists in Canada a quality public health care system that includes residential care.

As your government acts to ensure the livelihoods of those who are currently struggling to make a living, please take some time to consider all those who have contributed in the past. This is a situation that must be addressed now to help both current and future generations of seniors and those that require residential care.

Sincerely,

Larry Brown President

cc: Bert Blundon, Secretary-Treasurer

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