

Bill 175 — Connecting People to Home and Community Care Act, 2020

Information for members in community care

Background on the legislation

Bill 175 dismantles public governance of community care by repealing the *Home Care and Community Services Act, 1994*. This leaves the new act little more than an empty shell and leaves most issues subject to regulation and policy, which can be changed by Cabinet or the ministry, without ever going to the Legislature for approval. This removes important mechanisms of public accountability and oversight over the sector.

What does Bill 175 and its associated reforms do?

Bill 175 and the Ford government reforms will enable further privatization of home and community care by dismantling Local Health Integration Networks (LHINs). LHINs are public sector authorities that, until now, have overseen home and community care. The responsibility formerly held by LHINs will be passed on to health teams, which are newly forming coalitions of for-profit and not-for-profit health service providers, that will form a key part of the government's reforms. Individual health service providers may also win a role here.

This will mean community care organizations may have to win service agreements with 50, 100, or 150 health teams or health services providers instead of just 14 LHINs.

It is uncertain which community care employers might win such agreements. No one even knows what the geographic scope will be for these new service agreements as the government has not yet even established all of the health teams. But with the increase from 14 LHINs to potentially 150 new organizations responsible for home and community care, the geographic scope for each service agreement will shrink. The nature and geographic scope of the work performed by community care employers is up for grabs if these reforms are allowed to proceed. That could have profound effects on bargaining units and employment.

One possible response to these reforms is for community care organizations to seek mergers. That may enable them to have the resources necessary to win service agreements and maintain their funding. But that also means potential changes to bargaining unit structures and collective agreements. Representation votes are also possible.

Unfortunately, the Ford government reforms bring a new era of uncertainty for home and community care.

In addition, the 14 LHIN boards of directors have been replaced by a single 12-person Ontario Health Agency board. Unlike LHIN boards, the Ontario Health board is not required to meet in public, they do not have regulations requiring public input, and there is a lack of public access to information about the board. The board is not subject to Ontario public service legislation regarding conflict of interest and includes pro-privatization bankers and corporate executives.

How does Bill 175 affect other workers?

Bill 175 imposes great uncertainty for workers employed by the LHINs. It dismantles LHINs, which are the one area in home and community care where CUPE and other unions have achieved reasonable conditions. This is an attack on female dominant workforce.

Bill 175 moves to privatize hospital services by allowing private hospitals to expand. Regulations proposed will also turn over hospital rehabilitation and transitional services to unlicensed (and potentially for-profit) “residential congregate care” providers.

Home care workers, like community care workers, will see their employers have to fight for new contracts with scores, if not hundreds of new contractors as the 14 LHINs are phased out. Here, community care workers have a very similar interest as home care workers.

How do we respond?

The provincial government had public hearings for Bill 175, from June 15 to 17, 2020, during which time CUPE Ontario deputed. However, with so much attention focused on the COVID-19 pandemic, the legislation was pushed through the Ontario legislature with very little public awareness, and without any consultation with the home and community care sector. CUPE Ontario joined the Ontario Health Coalition (OHC) in two days of protest at MPP’s offices and Queen’s Park. We will need to stay focussed on opposing the Conservatives’ agenda of further privatization of health care and major austerity cuts in the near future.