

## Election Primer for Members

ONTARIO ELECTION DAY IS THURSDAY, JUNE 2, 2022



CARP members in Ontario can make a difference in the provincial election this year.

Over 95% of CARP members vote. What's more, **over 5 million eligible voters in Ontario are over the age of 60.**

**We have the power!** It's time to make our priorities the dominant focus in the election.

Hold your candidates accountable for supporting our priorities. If they won't come out and say it...change your vote!

**The needs are urgent and immediate.  
CARP demands action NOW.**

### CARP'S TOP 5 ONTARIO ELECTION ISSUES



**1 Fund better home care**



**2 Transform long-term care**



**3 Drastically cut wait times**



**4 Make vaccines more accessible**



**5 Fund fitness for seniors**



**Educate yourself on these issues – and help make them front and center in the campaign**

Read the fact sheets we've prepared on each topic, and familiarize yourself with the facts.

Share the information with your candidate – by phone, by email, in person.

When a candidate (or a candidate's representative) knocks on our door, show them **The CARP 5** list and get a commitment of their support, and a pledge to act on that support.

Attend an all-candidates' meeting and ask a question from the floor. Ask each candidate if they know about and will support **The CARP 5**.

Write a letter to your local newspaper.

Tell your relatives, friends, co-workers. Encourage them to join CARP to make our voice even stronger.

Vote only for a candidate who has pledged to act on these issues.



## 1

## Fund better home care



As bad as things are in our long-term care sector, the real solution is better home care.

Almost all Ontarians agree that they want to stay in their own home as they age

Home care saves the system money. Even for a person with the highest needs, home care costs an average of \$103 per day. Compare that to \$182 per day in a nursing home, or \$1,000 per day in a hospital.



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It's so obvious – yet investments by past NDP, Liberal and PC governments have not come close to meeting the need.

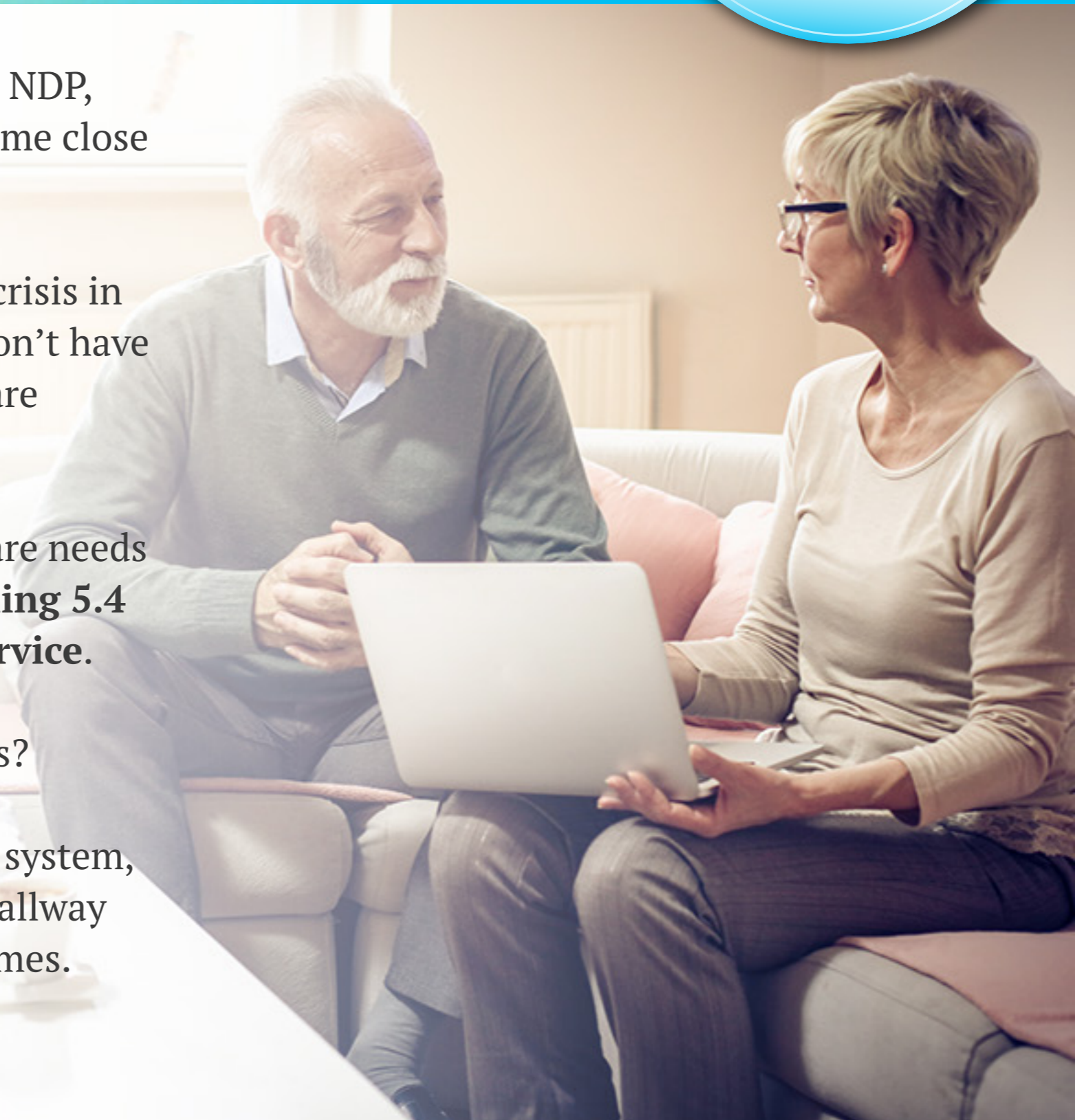
In fact, we now face a human resources crisis in home care, made worse by COVID. We don't have nearly enough staff to meet the home care needs of seniors.

In fact, less than half of current home care needs are being met. **The system is not fulfilling 5.4 out of every 10 calls for home care service.**

And what happens to those unmet needs?

They get thrown back on to the hospital system, resulting in emergency room backups, hallway medicine, and unacceptably long wait times.

It's lose-lose all the way.



## CARP demands this action NOW.

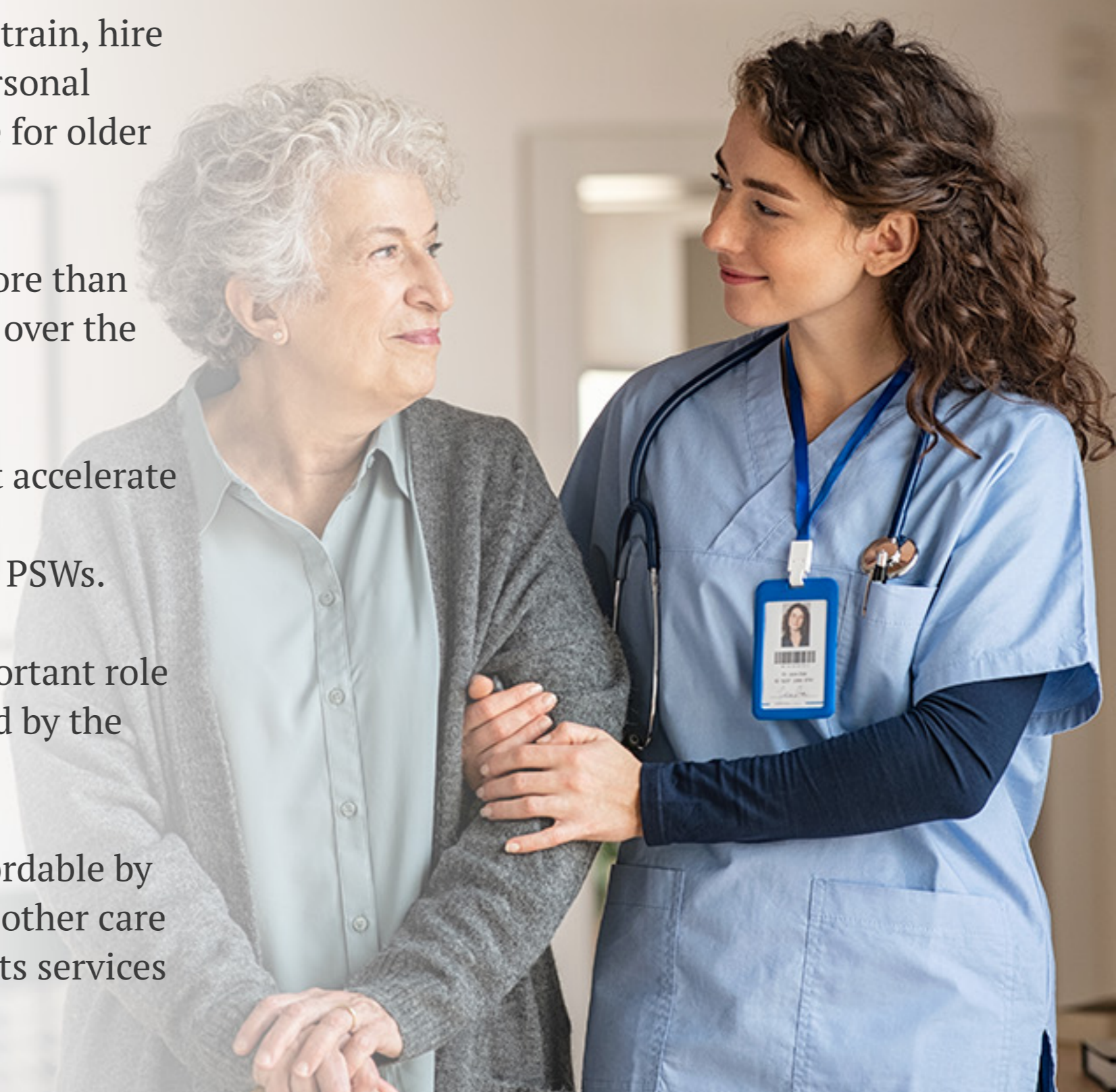
Ontario must immediately recruit, train, hire and retain tens of thousands of personal support workers and nurses to care for older adults in their own homes.

We estimate that Ontario needs more than 30,000 net new home care workers over the next five years.

As part of that effort, Ontario must accelerate immigration and licensing for internationally-trained nurses and PSWs.

Private home care can play an important role in supplementing the care provided by the provincial health system.

Ontario can help make it more affordable by exempting home care services and other care services from HST, just as it exempts services provided by medical practitioners.



## 2 Transform long-term care



COVID brutally exposed the problems that have plagued Ontario's long-term care system for decades: inadequate facilities, lack of proper staffing, lack of inspections and infection control and above all, an obsolete model of care that robs residents of dignity and respect, giving them (and their families) little or no voice in their own care.

This goes beyond bricks and mortar, or even more staffing. What we need is a total **transformation in the culture** of how long-term care is provided.



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It shouldn't be an impossible dream. There are a number of innovative models, already embraced in the USA, Europe and Australia (and even in a handful of homes right here in Ontario itself). These include the Eden Alternative, the Green House Project, and the Butterfly Homes model. They're all based on an emotion-focused and person-centred philosophy:

- More hours of direct care for each resident
- Using a relationship-based approach to care, where residents, their families, and staff feel part of a community
- Creating of smaller "home-like" environments (as opposed to the present impersonal "warehousing" approach)
- Recognizing families and caregivers as integral members of the team

The emotion-centred model is not only more humane, it produces better outcomes:

- A decrease in aggressive incidents
- A decrease in the use of anti-psychotic drugs
- A decrease in the number of staff sick days (in one case, 75% less)
- An increase in resident and staff satisfaction, and social interaction



### CARP demands this action NOW.

A shift in approach from "institutional" to home-like environments. Whether we're dealing with new buildings or the refurbishing of older facilities, there must be smaller clusters shared by fewer people, and more private bedrooms.

All nursing homes must develop written commitments, with specific timelines, to meet these standards. The entire system must be converted within 3 years.

All nursing homes must be required, as a condition of their license, to adopt a culture of person-centered care, and present written plans for achieving it.

Stricter regulations must be created, inspected regularly and firmly enforced.



## 3 Drastically cut wait times



Supporting Ontario's public universal health care system should not mean having to passively accept long wait times for service.

Canada spends near the top of OECD countries on health care as a percentage of GDP, yet our performance ranks near the bottom. If other publicly-funded health care systems can do better, why can't we? It's time to say – loudly, and with our votes – we've waited long enough.

**We've waited long enough in Emergency Rooms.**



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In Ontario, patients admitted through the ER wait over 20 hours before being moved out of ER.

In some hospitals, that number is as high as 50 hours. We're waiting a long time for an initial assessment, too – an average of 1.5 hours, but as high as four hours in Windsor, just to be seen by an ER doctor.

**We've waited long enough to see a specialist.**

In Ontario, patients wait an average of 8.2 weeks to see a specialist, after being referred by a family doctor, and then another 10.3 weeks for treatment. That's more than a third of a year from the initial family doctor visit.

In some categories with high relevance to older Canadians, like orthopedic surgery, the time lapse can be twice as long.

**We've waited long enough to access diagnostics.**

In Ontario, the average wait time is six weeks for an MRI scan and a month for CT-scan.



**CARP demands this action NOW.**

Specific commitments to improving the performance numbers, with particular attention to increasing the capacity for diagnostic testing.

We want dates and measurable goals to be achieved – details, not vague promises.

Specific commitments to increased investment to address the backlog of care lost to patients during the pandemic.

Specific commitments to increase the investment on recruitment and training of more doctors and nurses, with particular focus on specialists needed by our older population. (There are only 313 geriatric specialists in the entire province, compared to 1,018 pediatricians).

## 4 Make vaccines more accessible



Ontario must continue to invest in best in class vaccines for older adults.

Adult Immunization is an effective and cost-efficient way for Ontario to protect the health of older adults.

The “Big 3” in preventable illnesses - flu, shingles and pneumonia - have now become the “Big 4”, thanks to new life-saving COVID vaccines.



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It's tempting to think everything is fine. After all, Ontario is a national leader in the availability of vaccinations for older adults. But there is still more work to do and leadership to be shown.



### CARP demands this action NOW.

#### Better accessibility through wider availability of NACI recommended high dose flu vaccines

Although Ontario funded and provided the NACI-recommended higher doze influenza vaccine for everyone over 65, there are still shortages and distribution issues every flu season. The senior-specific flu shot should be widely available and easily accessible to every Ontarian over 65 – in doctor's offices, pharmacies and public health clinics.

#### Increased availability of the shingles vaccine at no cost

Ontario is also a leader in funding the shingles vaccine, but imposes limits on who qualifies for access without out-of-pocket payments. Ontario must increase the availability of the shingles vaccine, at no cost, to everyone over 50.

#### Streamlined access and more funding for the pneumonia vaccine

Though studies show that the pneumonia vaccine can save many lives, Ontario requires seniors to pay for the vaccine – out of pocket – at their pharmacy. Then they have to take that prescription to their doctor to have the vaccine injection. This combination of high cost and inconvenience must be eliminated. Ontario must fund no-cost access to pneumonia vaccines for all Ontarians 65-plus.

**COVID-19 Vaccination Record Card**  
Please keep this record card, which includes medical information about vaccines you have received.

Wilson		James
Last Name	First Name	
02/17/1949	008-5484-8547854	
Date of Birth	Patient number	
Product Name / Manufacturer	Date	Healthcare Professional or Clinic Site
High COVID-19 Vaccine mRNA	Dec. 27 2021	HQ 178-92 - main
COVID-19 Vaccine mRNA	Jun. 20 2021	HQ 178-77 - aux
COVID-19 Vaccine mRNA	Apr 17 2021	HQ 178-99 - main

## 5

## Fund fitness for seniors



The Ontario government should do more to support fitness for seniors.

Recent studies show that fitness activities can reduce health care costs by over \$2,000 per person.

Proactively funding senior fitness is an innovative way to encourage better health and relieve excess costs from the beleaguered system.



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**CARP demands this action NOW.**

The provincial government should introduce a \$1,200 refundable tax credit that will incentivize more seniors to take part in fitness programs, and more providers to create such programs and opportunities. There are already some programs (such as High Five For Older Adults) that would see participation rates increase if there were financial incentives.

There is a lot of scope in this area!

The provincial government should work more actively with regional and municipal governments to revisit their existing recreational programs, and redesign them to better meet the needs and demands of older adults in their communities.

Local communities will also find cost savings in other programs, if they can do more to boost the health and fitness of their aging population.

