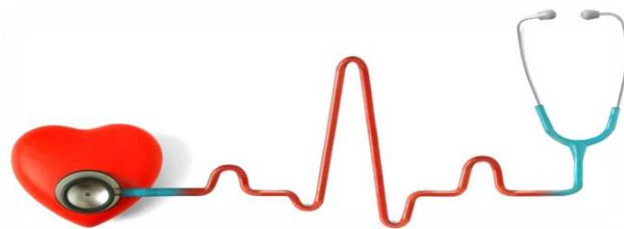


Ontario Health Coalition

ACTIONUpdate



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ALL OUT TO DEFEND PUBLIC HEALTH CARE

RALLY

April 30 noon - Queen's Park - Main Legislative Building



"The Ford government's planned health cuts, mergers and privatization are the most aggressive we have ever seen...more radical even than those of the Mike Harris era. And the provincial-level media, so far, is not reporting it."

"Now, more than ever, those of us who care about public health care need to show massive visible resistance. The public needs to know there is a way to stand up for our services that they can join. They need to know our local public health care services that our communities have spent a hundred years or more building are at stake."

"We *can* push them back on these plans. Every time any government has tried to privatize our hospitals we have stopped them. Don't forget that we forced the Harris government to completely change course on its cuts and we repeatedly stymied them on privatization. We saved dozens of hospitals under Mr. Harris and again under Mr. McGuinty and Ms. Wynne. We stopped home care competitive bidding. We improved long-term care. Every time we stand together in unity and strength we make real change."

We can take inspiration from the courage and determination of the parents of children with autism, from the fightbacks on the greenbelt and the OPP commissioner, all of which saw Mr. Ford on the wrong side of public morals and values, and on all of which he has backed down.

April 30 is our beginning in earnest. Please help us to build the largest, broadest, unified show of our will to protect our public health care that this province has ever seen.

Ralph Klein once called public health care the "electric third rail" of Canadian politics – the rail that runs down the middle between the tracks. It carries the power. I love that! They *should* have to fear the public rising up to protect our health care. It is ours, not theirs. It should be run democratically, in the public interest, not for private interests. Let's show them we will *never* let them take it away."

Natalie Mehra, executive director

URGENT UPDATE:

Doug Ford's most recent health care cuts, restructuring and privatization plans



MOUNTING HEALTH CARE CUTS

Here is a list of the Ford government health care cuts to date:

- Cut OHIP+ so families with sick children will have to seek private coverage first and pay deductibles and co-payments. (June 2018)
- Cut planned mental health funding by more than \$330 million. (July 2018)
- Canceled all new planned overdose prevention sites. (autumn 2018)
- Cut funding for the dementia strategy.
- Let surge funding run out for hospital overcrowding. Surge beds are now closed without replacement, despite overcrowding crisis.
- Cut and restructured autism funding. (Winter 2018/19)
- Set overall health funding at less than the rate of inflation and population growth, let alone aging. This means service levels cannot keep up with population need. (2019 Budget)
- Let public hospital funding at less than the rate of inflation. This means real dollar (inflation adjusted dollar) funding cuts and serious service cuts. (2019 Budget)
- Cut provincial funding for public health by almost 1/3 (27%) and cut public health units from 35 to 10. (2019 Budget)
- Introduced Bill 74 which gives sweeping new powers to the minister and Super Agency to force restructuring of the entire health system. (February/March 2019)
- Municipalities revealed Ford government plan to cut and restructure ambulance services, down from 59 to 10. (April 2019)
- Leaked document reveals plans to cut half a billion dollars in OHIP services. On the chopping block are sedation for colonoscopies, chronic pain management services and others. Plans will be made this spring/summer. (April 2019)

RESTRUCTURING and PRIVATIZATION

Cont'd on next page...

Please Help

We are all in this together. Please know that it matters that we can say that we represent a broad and large membership of regular Ontarians who care about and believe in protecting public health care as a priority. You really do make a difference when you become a member/donor. For those who are able, signing up for a regular monthly donation is the most helpful because it provides stable, automatic funding. Please do join, and please ask others you know who care about public health care. We promise to use it well! www.ontariohealthcoalition.ca/index.php/donate-now/

MOST RADICAL RESTRUCTURING IN OUR PROVINCE'S HISTORY

In the last two months plans have been revealed that expose the Ford government's intent to undertake the most radical health care restructuring in our history. Currently in third (final) reading in the Ontario Legislature, Bill 74, the so-called "People's Health Care Act". It does not improve a single health care service. What it does is create one mega-merger of 20 agencies into a Super Agency and give extraordinary restructuring powers to the government. This new law launches restructuring for hospitals, long-term care, home care, community mental health and addictions, community care, cancer care, palliative care, labs, eHealth, air ambulance, community health centres, home care, non-profit primary care and more. The Health Minister has revealed her plan is to restructure 1,800 health service providers down to 30 – 50 conglomerates. That's not all though. In the Provincial Budget, plans to cut Public Health by almost 1/3 of provincial funding (27%) and reduce Health Units from 35 to 10 were revealed. Then, municipalities revealed the Ford government's plans to restructure ambulance services from 59 down to 10.

Sweeping new powers to force through mega-mergers, transfer services from one community to another, close services, privatize services

The new law gives sweeping powers to the Minister and the government appointees in their new Super Agency to force through mergers, mega-mergers, amalgamations, transfers of services, closures of local services, and entire closures of service providers. In five separate areas in the legislation these restructuring powers enable the government, its appointees, and health service providers to transfer our public and non-profit health care services to for-profit companies. Already for-profit hospital companies are making bids to take over surgeries in London Ontario.

Unfettered powers to force health care providers to restructure, close, privatize

The legislation allows the Minister and the government appointees that run their new Super Agency the power to order, direct and coerce (using their funding power) local providers of service to comply with these restructuring edicts and pressures. It does this in multiple sections of the legislation. In most of these sections there is no fetter on these extraordinary powers and no public process. It takes away any last vestiges of local control over health care. They can close a hospital with the stroke of a pen, move a service to another town or close it entirely, order the privatization of all labs or all surgeries for example. It is truly shocking.

No public interest protections, no appeals, no access to information, no clear rulings: worst ever

There are no public interest protections in the legislation. There is no public notice at all for most of the sections that give new restructuring powers. There is minimal public notice in one section. There is no right to appeal anywhere in the legislation. There is no

public access to documents anywhere in the legislation. The new Super Agency is not subject even to the conflict of interest rules of the Ontario Public Service. There are no principles to guide restructuring. There is no requirement that any one, not the Minister, not the Super Agency, no one, actually measure and plan to meet population need for health care, protect any local health services at all, ensure that patients have access to care, worry about the workforce that will be subject to massive upheaval. There are no procedural protections whatsoever.

Ambulance cuts/restructuring

Ford's plans, revealed by municipalities, include cutting the number of ambulance services from 59 to 10. Already there are problems of slower response times in rural areas due to long travel distances, and inadequate numbers of ambulances available in urban centres due to crisis-level hospital overcrowding and paramedics stuck in long offload delays. The Ford government's restructuring plan does not address any of the causes of too-long EMS response times, it does not ameliorate services even where there is evidence of significant need. The current EMS system in Ontario was created by Mike Harris' restructuring. The evidence from that round of restructuring is that costs grew dramatically post-restructuring. "Cutting and centralizing the ambulance

services down to ten giant regions means that smaller rural and northern communities will be lesser priorities and risks their service levels," warned OHC executive director Natalie Mehra.

Public Health cuts/restructuring

Severe cuts amounting to almost one-third of provincial funding for public health threaten vital local services including food and water safety, infectious disease tracking and prevention, immunizations, prenatal training and safety, overdose prevention, safe needle and biohazard programs and many others.

Overall restructuring/cuts

The Ford government is now clearly embarking on the most aggressive and radical health care restructuring that Ontario has ever seen. The Mike Harris government hospital restructuring, which was radical enough and led to the loss of dozens of local hospitals and ultimately did not reduce administrative costs, cost \$3.9 billion. That is \$3.9 billion, according to the Provincial Auditor General, to cut \$800 million from public hospitals. The restructuring costs were made up of laying off staff, moving buildings, renovating and rebuilding, re-hiring staff, renaming services, re-doing letterheads and communications systems and so on. The evidence is indisputable that those cost were lost to health care and were never recouped. Moreover, restructuring led to for-profit privatization and new user fees for an array of services. The costs were never recovered and many of the current problems that we face in health care can be traced back to the last two rounds of restructuring.

With the way the Ford government chose to write this legislation, and given all the public interest protections they chose to strip out of it, there is no longer any shadow of doubt. The fight to protect public non-profit health care is on. The fight to protect local services from centralization and mega-mergers is on. The fight to stop billions of public dollars from being wasted in restructuring and turmoil is on. Without exaggeration, it is the most dangerous health care legislation in terms of privatization and risks to local services we have ever read, and it has the fewest public protections ever.

SERIOUS THREAT OF HEALTH PRIVATIZATION

In Bill 74 the Minister of Health has given herself and the Super Agency vast new powers to order and otherwise force the privatization of most of our health care services. Opposition parties have asked direct questions about private surgery clinics bidding to take over our covered services and neither Premier nor Health Minister will say anywhere that they will not privatize. In the documents being circulated from municipalities, Ford’s plans include privatization of parts of ambulance services. In the leaked documents from the Ontario civil service in February, plans were revealed to privatize eHealth, laboratories, air ambulance, long-term care inspections and other services. At no time, under questioning by media and opposition parties, will this government clearly promise not to privatize. The signs of impending privatization are serious.

Who’s Who: A primer on Ford’s insiders and the pro-privatization forces in government

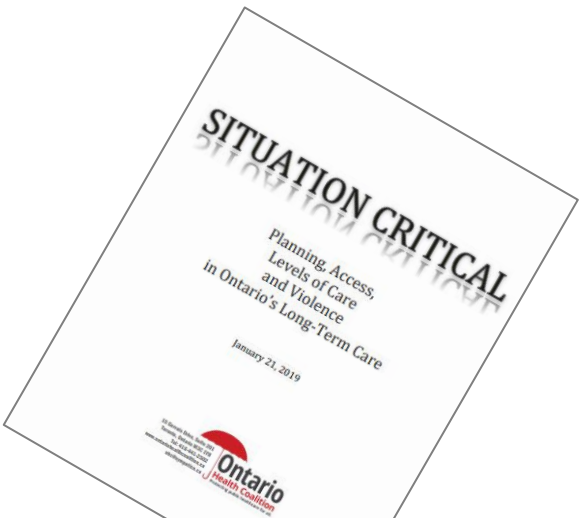
Charles Lammam, formerly of the extreme right wing Fraser Institute, is now the Director of Policy (2nd highest staff position) in the Health Minister’s office. The Fraser Institute has spent years trying to dismantle Canada’s social programs and one of their prime targets is health care. The Fraser Institute has been funded by the American Koch brothers (funders of the Tea Party) among others.

Shelly Jamieson, one of Ford’s appointed board members of the new Super Agency, is the former president of Extendicare, a for-profit long-term care home giant. She was on the Mike Harris government’s Restructuring Commission that ordered the closure of >40 hospitals and thousands of hospital beds, then moved to Extendicare which gained from the subsequent expansion of long-term care. Now she is on the new Super Agency, this government’s Health Restructuring board.

Elyse Allan is on the board of Brookfield Assets Management and the right-wing pro-privatization C.D. Howe institute and was recently on the pro-corporate Board of the Conference Board of Canada, the Chamber of Commerce and more.

Other board members include people from banks and private corporations including Real Estate Investment Trusts and others with direct interest in health care privatization.

In July, Doug Ford appointed Rueben Devlin, former president of the Ontario Conservative Party to be the Chair of a new *Premier’s Council on Improving Health Care & Ending Hallway Medicine* and Special Advisor on *Ending Hallway Medicine*. The positions come with a \$348,000 per year salary for the Conservative stalwart who was president of the party during the Mike Harris era during which the government spent \$3.9 billion closing and merging hospitals in an attempt to cut \$800 million from their budgets. That was most radical restructuring of public hospitals in the country’s history at time. Rueben Devlin is also the former CEO of Humber River Hospital where he presided over the closure of three entire hospitals. The three were replaced with one privatized P3 hospital at an eye-popping \$1.76 billion due to the exorbitantly expensive P3 financing and privatization model. In so doing, Devlin closed down a hospital in one of the poorest neighbourhoods of the city. The new P3 hospital did not have enough capacity to serve its population and last fall the former Liberal government reopened one of the closed-down sites in order to deal with patients waiting on stretchers in hallways for care.



The Ontario Health Coalition’s new report, “[Situation Critical](#): Planning, Access, Levels of Care and Violence in Ontario’s Long-Term Care”. The report was inspired by increasingly frequent complaints by families and care workers of violence in long-term care homes (nursing homes). In its research, the Health Coalition found what it describes as “shocking” and “intolerable” levels of homicide, the extreme end of a “spectrum of violence that is escalating”. Almost 80,000 Ontarians reside in long-term care homes.

Local Health Coalitions released the report across Ontario in 30 press conferences with family councils, Personal Support Workers and nurses, seniors and advocates. Media covered the tour extensively and we helped to keep this issue at the top of the public agenda. The report is on our website



Gordon Campbell: Not only does he have an abysmal record on financial matters, but former B.C. Premier Gordon Campbell, whom Doug Ford appointed to lead Ford’s fiscal inquiry in Ontario, is perhaps *the* biggest enemy of public health care in Canada. It is now apparent that Campbell’s model of health cuts and privatization may be the model that Ford is copying here. Campbell set the stage for the biggest growth in for-profit privatization of hospital care in Canada, private clinics in BC openly charge patients thousands of dollars in violation of the Canada Health Act as a direct result of his policies, he cut and closures local hospitals, systematically appointed pro-privatization health board people systematically, fired thousands of hospital support staff, privatized their services. He routinely supported private for-profit interests in pharmaceutical policy and health care against the public interest. The extreme right-wing Fraser Institute loves him, but his record on finances is terrible. Not only did he do all these terrible things in health care, he wiped out a \$1.5 billion surplus he inherited when he took government, then went on to post the largest deficits in the B.C.’s history up to that time, and added \$20 billion to the province’s debt.



**Health care
shouldn't depend
on how rich you
are.**

[http://www.ontariohealthcoalition.ca/index.php/
open-letter/](http://www.ontariohealthcoalition.ca/index.php/open-letter/)

**Protect Public Health Care for all
Canadians: Stop Private Clinics and
Unlawful User-fees and Extra-billing of
Patients**

We have written an Open Letter to all Provincial and Federal Health Ministers in Canada calling upon them to uphold the Canada Health Act, stop two-tier user fees and extra-billing of patients and stop privatization. Our goal is to get 1,000 organizations to sign on to the open letter. Please have your group sign on.

HOLD THE DATE!

Ontario Health Coalition Health Action Assembly & Annual Conference

Sheraton Centre Hotel, 123 Queen St. W. Toronto

Saturday November 23 & Sunday November 24

10 a.m. – 4 p.m. 9 a.m. – 1 p.m.

For special room rate, cite "Ontario Health Coalition" when you call Sheraton reservations 416-361-1000.

This is where we share the most up-to-date information, share report-ins from across the province and set our strategy

Registration Form

Number of people attending _____ Name of key contact _____

Additional Names of Attendees _____

Organization if applicable _____

Address _____ City/Town _____

Postal Code _____ Email _____

Tel (day) _____ (night) _____ (cell) _____

Fees: (sliding scale)

Saturday: \$0 - \$40 per person Amount paid: _____ x number of people _____ = Subtotal \$ _____

Sunday: \$0 - \$40 per person Amount paid: _____ x number of people _____ = Subtotal \$ _____

Total: \$ _____

Please circle one: Enclosed by cheque or Paid online at
<https://store.ontariohealthcoalition.ca/collections/all>

Mail or email to: Ontario Health Coalition 15 Gervais Drive, Suite 201, Toronto, Ontario M3C 1Y8 tel: 416-441-2502
email: ohc@sympatico.ca www.ontariohealthcoalition.ca If emailing, please use subject line: Assembly Registration.
Note: you can register and pay online at: <https://store.ontariohealthcoalition.ca/collections/all>

For office use only: ____ member ____ dbase ____ mls ____ lls

Ontario Health Coalition

Monthly Direct Deposit & Regular Membership

Municipality or Organization: _____

Contact Name: _____

Street Address: _____

City/Town: _____ Postal Code: _____

Phone: (H) _____ (W) _____

Phone: (C) _____ Email: _____

☐ I am a new member (please check if applicable)

☐ I am renewing my membership (please check if applicable)

PLEASE JOIN OUR MONTHLY DIRECT DEPOSIT

Under this plan, a set amount will be withdrawn directly from your account each month as a personal donation to the Ontario Health Coalition.

YES! I will give per month a fixed amount monthly:
(circle one) \$5 \$10 \$20 other _____

Every 1st or 15th of the month (circle one).
Starting date: _____, 2018

Please attach a blank voided cheque.

If only 1 signature is required for the account, then only 1 Payor need sign. If 2 or more signatures are required, then both or all Payors must sign.

I/We authorize the Ontario Health Coalition to debit my account with the financial institution noted on my cheque for the amount and frequency described above until written notice to the contrary is given.

Payor signature(s):

Date: _____

I have certain recourse rights if any debit does not comply with this agreement. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with the PAD Agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit www.cdnpay.ca

This Authorization may be cancelled at any time upon notice being provided by me either in writing or orally, with proper authorization to verify my identity within 10 days before the next PAD is to be issued. I acknowledge that I can obtain a sample cancellation form or further information on my right to cancel this Agreement from the Ontario Health Coalition or by visiting www.cdnpay.ca

CAN'T GIVE MONTHLY? ANNUAL MEMBERSHIP FEES 2017

Individual members: \$20

Organizations:

Under 100 members: \$25

Over 100 members, membership rates \$0.20 per member, e.g:

500 members = \$100

1,000 members = \$200

5,000 members = \$1,000

10,000 members = \$2,000 etc.

Municipalities:

Population under 49,999: \$100

Population 50,000-99,999: \$200

Population over 100,000: \$300

Your membership fee rate enclosed is \$ _____

Additional donation (circle one):

\$20 \$50 \$100 \$200 \$500 \$1000

Is this a membership renewal? (check one)

☐ **Yes** ☐ **No** ☐ **Not Sure**

Please fill out this form and send it to us at:

**Ontario Health Coalition
15 Gervais Drive, Suite 201
Toronto, Ontario M3C 1Y8**

Phone: 416-441-2502

E-mail: ohc@sympatico.ca

You can pay for your membership online at:
www.ontariohealthcoalition.ca click on "store" or "donate"

ALL OUT TO DEFEND PUBLIC HEALTH CARE

RALLY

April 30 noon - Queen's Park - Main Legislative Building

Get on the bus!

Please leave your name and contact information

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