

# Briefing Note

## Doug Ford's Omnibus Health Bill (Bill 74)



### Not a Single New Service or Improvement to Care

We have excellent health care. We just don't have enough of it. Yet Doug Ford's new health care omnibus bill does not open a single new health care service. Not a single surgery to help tackle wait lists. Not one new nursing home space. No more health professionals, vital support staff, nurses or doctors.

At the same time, Ontario has the fewest hospital beds left of any province in the country and of any developed nation, even while patients wait for days on stretchers for a bed to open up. Every major hospital has operating rooms that are closed due to lack of funding, even while people wait for surgeries. Our province funds our hospitals at the lowest rate in Canada. We also have the second fewest long-term care beds of any province while wait-lists number 33,800. The evidence is clear: cuts and rationing have gone too far. In fact, in the election Mr. Ford traversed the province promising more, not a wholesale dismembering of the health system.

**Ontario funds health care at the lowest rate in Canada. We have a long way to go even just to reach the average of the rest of the country. We are asking the Doug Ford government to refocus attention on actually expanding and improving access to care. No to privatization and mega-mergers.**

### New Powers to Force Mergers, Privatization Loss of Local Control

What is in Mr. Ford's health care omnibus bill is a new "Super Agency" forged out of 20 existing agencies with widely disparate mandates, histories, levels of effectiveness, and cultures. But that's not all. Written in the new law are vast powers that the government has given itself and its political appointees in the new "Super Agency" for a wholesale restructuring of our local hospitals, long-term care, home care, community care, mental health, health clinics and so on.

Restructuring powers are defined in the legislation as not only service coordination but also mergers, amalgamations, transfers of all or part of a service, closures of a service, and entire closures of local health services. In the law itself these are not simply "voluntary", as the Minister describes them. What is actually written in the legislation is a set of virtually unfettered powers that take away any last remaining vestiges of local control. The only public governance of health care will be from a "Super Agency" run out of Toronto.

### A Gift to Giant CEOs and Large Chain Corporations to Take Over Health Services

Doug Ford's new omnibus health care bill does not add to health care for people. But it does take attention away from care to restructuring. The evidence shows that restructuring (such as mergers, closures and takeovers) costs a lot of money and often leads to local towns losing services.

Already the attention of every CEO and manager in the health system has turned to restructuring. The reality is, the large and the ambitious, the "empire builders" in the health system, will turn their attention and resources to planning takeovers of other services. The large for-profit corporations will seek to expand their "market share" and profits using the new opportunities afforded in this legislation.

Many of us remember what happened after the Mike Harris government forced the mergers and closures of hundreds of hospitals across Ontario. The Provincial Auditor reported that the restructuring cost \$3.9 billion. That is billions of dollars spent to lay off nurses and staff, close down local services, and then rebuild portions of them elsewhere. Many towns lost services forever. The government spent \$3.9 billion to cut (or "Save") \$800 million. The result was billions of dollars lost to frontline care and vital patient support services that we will never get back.

## **New Bureaucracy But No Public Oversight**

At the end of the years of mergers and takeovers and partnerships and so on, the current Minister envisions 30 - 50 giant health care conglomerates running virtually all services for up to 15 million Ontarians. Each conglomerate would be made up of hundreds of mergers, service transfers and takeovers, but also some separate entities. Each conglomerate will need a new tier of administration to run the relationship between its various parts of the conglomerate.

That equals 30 – 50 new uber administrations plus the mother Super Agency, as compared to 14 LHINS and 6 agencies that exist at present. Furthermore, the administration of the conglomerates will be owned by the providers themselves in their interest, not public oversight in the public interests.

This is worse not better. You can see why the leadership of chain companies and large CEOs are salivating. They've just been given carte-blanche to take control over our local health care services.

## **What Can We Do**

With respect that is due to them in the strongest terms possible we urge the Ford government to hit "pause", to engage in proper public consultation and to make a new priority of actually improving access to public health care services for the people of our province.

**Let's build a massive show of strength to protect our local health care services:**

# **RALLY**

## **Queen's Park**

## **April 30 12 pm**

**Improve Public Health Care. No to Cuts & Privatization.**

To get on a bus or to organize a people to come to the rally in your community, please see the RALLY notice on our website for local contact numbers and information or contact us at (416) 441-2502 [ohc@sympatico.ca](mailto:ohc@sympatico.ca)

## **No Public Consultation: Virtually All Community Control Taken Away**

Virtually all the democratic protections that we won in previous legislation have been stripped in the new omnibus law. There are no open board meetings. No public right to access restructuring documents. No appeals. There is only the weakest possible language in the new legislation regarding community engagement (that's what they now call democracy or public input). There is no evaluation system for the vast new restructuring. There was no public consultation prior to this Bill and there is no opportunity for any meaningful public input into the health system that the public funds that should be ours, as the people of Ontario.

## **Upheaval for Care Workers**

Another half decade or more of upheaval and takeovers will be devastating to a workforce that has stretched itself for decades to do ever more.