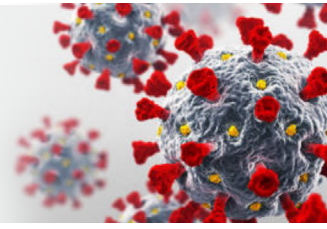


COVID-19 PANDEMIC ADVOCACY UPDATE ON STATUS AND ACTION

(MAY 11, 2020)



Recognizing the challenges home and community care providers are facing during this unprecedented COVID-19 pandemic, the Canadian Home Care Association (CHCA) is working with our membership and engaging the federal, provincial, and territorial governments on priority issues. Below is a summary of status and next steps for our three immediate priorities:

CONSISTENT EMPLOYMENT OF UNREGULATED HEALTH CARE WORKERS

ADVOCACY ASK: A “top up” compensation program must be designed as an employer subsidy that includes unregulated home health care workers providing essential services during COVID-19. The program should incent employers to offer full time work—37.5 hrs/week @\$23.50/hr (i.e. maximum of \$3,525.00/month for a designated timeframe)—to unregulated home health care providers delivering home based services deemed essential in the fight against COVID-19. **The program should be administered through provincial/territorial governments** to enable resources to be directed to support frail seniors and other populations that are vulnerable to COVID-19 in receiving care in their homes where the chances of transmission of the virus are lower.

RATIONAL: 20–25% of unregulated home health care workers (personal support workers) who earn less than \$2,000/month are choosing to decline visits and instead access the CERB. The hourly compensation for unregulated home health workers currently ranges from \$16.50–\$19.00/hr while compensation in long-term care facilities ranges from \$22.00–\$24.00 and hospitals from \$25.00–\$28.00.

STATUS

The CHCA has been communicating with the federal government (Prime Minister, Deputy Prime Minister, Finance Minister, Health Minister) and Provincial/Territorial Premiers since April 17.

Federal Government: On May 7, Prime Minister Trudeau announced that cost-sharing plans for topping-up the wages of essential workers have been confirmed, or are in the process of being confirmed, with all provinces and territories. The federal government will contribute up to \$3 billion to increase low-income essential workers pay. The provinces and territories will determine the eligibility criteria and levels of support.

Prince Edward Island: Essential workers with wages that do not exceed \$3,000 within a four-week period will receive a one-time payment of \$1,000 through their employers. The top-up will encompass approximately 17,000 workers.

Quebec: The Incentive Program to Retain Essential Workers (IPREW) will provide a weekly, taxable increase of \$100 beginning on May 27, 2020. The program will be in place for a 16-week period, retroactive of March 15, 2020.

Saskatchewan: Salaries of essential workers will increase by a flat rate of \$400 per month between the period of March 15 to July 4, 2020. The program will cover an estimated 35,000 lower income, essential workers at senior-care, community-based group homes, childcare facilities, and emergency and transition shelters. Workers will be eligible for the new supplement if they earn less than \$2,500 per month.

Ontario: A “pandemic pay premium” of \$4/hr is a temporary top-up retroactive from April 24 for 16 weeks. Those eligible include an array of staff in health-related sectors including home and community care. Individuals working over 100 hours per-month will receive additional lump sum payments of \$250 per-month, for the next 4 months.

Nova Scotia: The Essential Health Care Workers Program allows health care workers to receive a bonus of up to \$2,000 after a four-month period, beginning March 13. Up to 43,000 health-care workers are eligible and represent an array of health care workers including home care and health support workers, continuing care assistants and nurses.

ACTIONS

The CHCA will:

1. Encourage all jurisdictions to implement the “top up” program for unregulated health care workers providing government funded services and privately paid services.
2. Provide updates to the federal government on the effectiveness of the “top-up” strategy.

RECOGNITION OF HOME HEALTH CARE AS AN ESSENTIAL SERVICE

Advocacy Ask: Utilize the clinical experience and expertise of regulated and unregulated health care workers to provide care in the home setting as a proactive strategy to mitigate and control the spread and impact of COVID-19. Recognize home health care as an essential service, ensure appropriate financial and human resources, and increase referrals to home care services for frail elderly and vulnerable populations.

Rational: Leveraging home health care will support hospital discharge and “decanting” strategies (to build surge capacity) and provide alternatives to long-term facility-based care. Cancelling or delaying home care services increases the risk to patient safety as family caregivers are asked to provide skilled services with limited information or training. The essential care provided by qualified home health care workers cannot be simply substituted and off-loaded to family caregivers.

STATUS

The CHCA has launched a national campaign “[Home Care is an Essential Service in the Fight against COVID-19](#)”. The digital campaign profiles health care workers’ experiences in providing home health care services. Stories from over 35 essential workers (doctors, nurses, personal support workers, home care administrators) are featured.

ACTIONS

The CHCA will:

1. Continue to share stories and experiences from frontline workers who provide essential care and support in the home setting for over 3 million Canadians.
2. Target communications to provincial and territorial governments to encourage them to use home care services as a safe and effective care option.
3. Expand the campaign communications through social media and broaden engagement across the country.

ENSURE SAFETY FOR PATIENTS AND PROVIDERS

Advocacy Ask: Expedite access to personnel protective equipment (PPE) for home care providers and provide a reimbursement fund for employers who have experienced extraordinary financial burden due to inflated PPE prices and unprecedented demand.

Rational: The COVID-19 pandemic has created widespread shortages of PPE. Given the likelihood of a resurgence of the virus, home care providers must continue to purchase large amounts of PPE at inflated prices. This added financial burden will have a negative impact on small and independent providers who are not funded under government contracts. Many of these community-based providers will not be able to maintain their businesses which will impact access to home care services, particularly in smaller and rural communities.

STATUS

On May 3, Public Services and Procurement Canada introduced the [COVID-19 Supply Council](#) to provide advice on the procurement of critical goods and services to the federal government. The Council will play a significant role in establishing supply chains for PPE and other medical products needed for frontline workers in essential service sectors. Tariffs on PPE and other necessary medical equipment will be [waived](#) to reduce the cost of import.

ACTIONS

The CHCA will:

1. Continue to advocate for appropriate employer compensation for the unplanned and extraordinary costs of PPE.
2. Provide resources and information to home and community care providers on donning, doffing and safe storage of PPE.
3. Create a tool to help home care providers inform and empower caregivers.

ABOUT THE CANADIAN HOME CARE ASSOCIATION

Working together to strengthen integrated home and community-based care

The Canadian Home Care Association (CHCA) is a national non-profit membership association dedicated to advancing excellence in home and community care. Through our diverse membership base, the CHCA represents public and private organizations who fund, manage and provide services and products in the home and community sector. Our vision is an integrated health and social care system that provides seamless patient- and family-centred care that is accessible, accountable, evidence-informed and sustainable. www.cdnhomecare.ca @CdnHomeCare