Seniors for Social Action (Ontang)

SENIORS FOR SOCIAL ACTION (ONTARIO)

Editorial

The Health X Files: How Largely Secret Licensing and Funding Arrangements in Long-Term Care Cost the Public Billions with Little Public Accountability January 20, 2025

The public has, for over forty years, been barraged with horror stories in long-term care institutions. But nothing seems to ever change for the better.

Research during the pandemic showed that a <u>handful of chain-operated nursing homes had</u> the highest death rates in Ontario. Yet when it came time to make funding decisions, the Ontario government inexplicably chose to expand the for-profit institutional sector rather than non-profit assisted living programs that would have offered integrated care to elders in their own homes and communities. The <u>worst operators often received more beds.</u>

The public has a right to ask why.

One reason appears to be that the private deals made between the Ontario government and chain-operated nursing home companies with poor track records are shielded from full public accountability. Freedom of information requests about these deals — who authorized them, why were these lucrative contracts awarded, and what criteria were used — is largely unavailable to the public.

The Ministries responsible give several reasons for this, among them that these funding arrangements with long-term care companies involve the "economic and other interests of Ontario", "relations with other governments", "third party information", "advice to government" and "law enforcement."

In one example, information requested about Southbridge Care Home's proposed expansion at Orchard Villa in Pickering, where the Ontario government issued a Minister's Zoning Order over the objections of Pickering Council, to assist the corporation to build a 15 storey institution, it took over a year and an Order by the Information and Privacy Commission to obtain any information at all. When the access decision was finally made and the information supplied, much of it was redacted – whole pages blacked out, including the considerations in even issuing a temporary license and conditions placed on the facility by the Ministry.

With 85 people having died in this facility during the first wave of the pandemic, the Durham Region Medical Officer of Health having ordered it to work with the local hospital to try to manage the serious COVID outbreak, the Canadian Military having had to be called in, and its report having described horrific conditions, it should be obvious that this is a matter of significant public interest.

Yet the Ontario government granted, over the <u>objections of families of the dead</u>, and <u>a subsequent lawsuit</u> a license with "conditions" that the public is not allowed to see. Nor is the public allowed access to the compliance and operation review. Nor is it allowed to know what the overview of compliance findings were, nor the information contained in comparison and non-compliance tables covering six pages.

Non-profit organizations make their financial statements public. Taxpayers can see how much money they receive from government and for what. According to Chartered Professional Accountants Canada's Guide to Financial Statements of Not For Profit Organizations, audited financial statements are submitted to a Board of Directors as are internal in-year financial statements reporting on actual results compared to the organization's budget. Many non-profits make these available on their websites, or the public can simply request them.

Not so for private, for-profit chain operations that care for thousands of vulnerable people and receive billions in funding from the Ontario government.

The implications of this in considering the health privatization agenda of the current government are clear.

This is a way of funnelling billions in taxpayer funding to Ontario's predominantly forprofit long-term care institutional sector while largely shielding it from transparency or public accountability requirements. Taxpayers have to go through a lengthy and sometimes costly Freedom of Information process to receive almost no information about the licensing and funding arrangements between government and this sector.

This results in the equivalent of Health X files where the public is left trusting no one.

If the Ontario government wants to have any credibility in how it is handling the long-term care file, it can begin with a great deal more transparency in the awarding of long-term care contracts and what results are achieved by transferring billions in public funding to chain-operations with questionable track records.

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