



Community Health Care Professionals

June 2006

BPS Sector 17



Class action on CCAC pensions: are you affected?

Did you work for home care and then a CCAC in the mid-1990s?

Were you a member of OPSEU or the Association of Allied Health Professionals: Ontario at the time?

Was your pension membership moved from either OMERS or VON Pension Plan to HOOPP when your job moved to a CCAC?

If so, there is important information that may be of interest to you at www.opseu.org/bps/health/community/ccacpensions.htm regarding a class action brought on behalf of people like yourself against the government.

The class action is brought by OPSEU member Sue McSheffrey on behalf of current and former members of OPSEU and Association of Allied Health Professionals: Ontario (AAHP:O) who had their pensions moved either from OMERS or the VON pension plan, to HOOPP (Hospitals of Ontario Pension Plan) when the government moved homecare services to Community Care Access Centres in 1996-97. Sue is a physiotherapist at the Renfrew County CCAC.

Sue McSheffrey and OPSEU began this class action to provide a cost effective way to determine the government's liability for any pension losses. A class action of this nature eliminates the need for each individual to bring their own lawsuit at their own expense

Letter from the Chair

This year continues to be a challenging one for all of us in the Community Health Care Professionals Sector. Ontario's



response to the Caplan Report does little to protect our service provider agencies. The new LHIN legislation will mean the largest-ever restructuring of our health care system.

Your Sector Executive is working hard for you. A member of your executive will be contacting your local president or unit steward regularly. We need to know what's happening in your local so we can share that information provincially.

OPSEU is committed to protecting our health care system. We need to keep experienced professional health care workers like you working in the community. Without you the quality of our health care diminishes. Leah Casselman has been meeting regularly with Health Minister George Smitherman to fight on your behalf.

As Chair of the Community Health Care Professionals Sector it is an honor for me to be able to represent you. While we will be facing many challenges in the coming months I am privileged to be working, on your behalf, with an amazing and dedicated executive. If we can help please don't hesitate to call.

In Solidarity
Lois Boggs

Class action information (continued)

for a determination of the government's liability. Instead, the class representative, Sue McSheffrey, takes this issue to court on behalf of you all. Class members, other than the class representative, are not liable for the costs at this stage.

Once the liability of the government is established through a trial, the question remains of the actual amount of any individual's loss. That would have to be shown through a statement from the pension plans, or actuary or other similar professional, to determine what amount would have been earned in benefits if they had not been moved. Proving this part could be achieved either by agreement with the government or by a mini-hearing. If a mini-hearing is required, then the

individual could claim the costs of that mini-hearing against the government.

It is up to you whether you use the opportunity to claim a loss or not. If you do not, then there is no risk of cost to you. If you are concerned that there might be a cost associated with claiming the loss, we urge you to await the determination of the government's liability and any developments arising out of that before making your final decision on whether to proceed. In other words, by remaining in the class action at this time, you are preserving your right to decide if you will use this opportunity- you are not incurring any individual costs and are not at risk to incur individual costs at this stage.

Caplan Review: government's response offers little

The Ministry of Health raised more questions than answers in its long-awaited response to Elinor Caplan's review of home care last month.

The government says it has accepted all but two of Caplan's 70 recommendations. However, many of Caplan's proposed fixes for the system may have been tampered with.

The centerpiece of her original report was a Centre for Quality and Research in Home Care, to do the research needed to set benchmarks. But many of the duties of this proposed centre have been given to the Ontario Association of Community Care Access Centres (OACCAC), the advocacy group for CCACs.

Caplan also said the sector should come under Freedom of Information and Privacy Act. Instead, the government has made limited promises about opening access to information.

The flawed competitive bidding system remains in place, with some tinkering.

The government has accepted the idea of a staggered three-term nine-year contract, in which health care providers would be evaluated at the three- and six-year mark. If found acceptable, they would have their contracts extended. Only health care providers with a "preferred provider" status would be eligible to receive the last three-year extension. After nine years, the contract must be opened for bidding.

The few changes coming mostly affect personal support workers:

- An immediate increase in the minimum wage for PSWs from \$9.65/hr to \$12.50/hr;
- A requirement on providers to compensate for travel time and mileage for PSWs;
- A vague promise to improve basic employment benefits overall for the sector;
- Providers are now required to have a transition plan for entering and exiting a contract.

While Caplan recommended the end to the "elect-to-work" model of employment, the Ministry has watered this down to suggest

Government to leave flawed system in place (continued)

incentives will be given to employers to give employees statutory holiday pay, severance and notice of termination. This is supposed to result in less reliance on elect-to-work employees.

The government has also announced \$117.8 million in new funding for the sector, but this new money will likely fall short of the funding necessary to implement the full range of recommendations.

The Ministry invited unions for a briefing on the response to Caplan , but few details were

available. The Ministry has promised a follow-up meeting.

A link to the government's response can be found at:
www.health.gov.on.ca/english/public/pub/ministry_reports/caplanresp06/caplanresp06.html

LHINs still “planning to make a plan”

Most Local Health Integration Networks are spending the summer consulting on a draft regional strategic plan, which is due at the end of October.

Consultations began in April. The strategic plans should give the first indication of the direction regional health care is likely to take. These plans are to be made public and posted on the web sites of each of the 14 LHINs.

Most LHINs recently made the remaining appointments to their nine-member boards. Three LHINs have one more appointment to make.

The LHINs have a mandate to continually seek integration opportunities including forced mergers and transfers of service. The health minister has said health services will be offered from fewer locations. That could mean jobs and health services leaving your community.

Meanwhile, the government has given notice of two new housekeeping regulations for the LHINs — requirement for an audit committee and a community nominations committee. This latter committee would be responsible for identifying individuals to fill future vacancies

on the boards. Final appointments would still be made by Order in Council, not locally. The audit committee would review the LHIN's finances. The public can respond to these regulations in writing no later than July 27, 2006.

OPSEU members can watch the Ontario Gazette for notice of future regulations.

OPSEU has circulated a LHINs Watch sheet. The first side provides questions you might ask at a community consultation. The second side is a feedback form on the meeting. Please use this to help us keep track of what is happening and to share information. For more information contact Rick Janson rjanson@opseu.org at head office.

Three-year hospital funding

On June 2 the province announced three-year funding for each of the province's hospitals to 2009. In doing so, the province may have taken away the ability of the LHINs to make their own regional funding decisions. The LHINs will take on responsibility for regional funding in 2007.

Workers battle back against private hospital plans

Despite an early summer downpour, OPSEU activists marched on Queen's Park June 3rd to protest the government's reckless new program of privatized infrastructure. Under the plan, 29 new hospital projects will be designed, built, financed and operated by the private sector. Eleven projects are slated to go forward this year.

Public-Private Partnerships (P3s) have been tried in other jurisdictions with poor results. P3s cost more and deliver less. In Britain, hospitals have dramatically cut staff to make room in their budgets for exorbitant P3 costs.

Photo: Jay Jackson



Your executive: Who we are— where to find us:

Chair: Lois Boggs, Client Services Representative, VON Hamilton, Local 269;

Vice Chair: Sue McSheffrey, Physiotherapist, CCAC Renfrew County Local 481;

Treasurer: Deborah Sanowar, Physiotherapist, CCAC Sudbury Manitoulin, Local 675;

Newsletter Editor: Cindy Brown-Edmondson , Occupational Therapist, CCAC Peterborough, Local 315;

Membership Coordinator: Louise Mulligan -Roy, Social Worker, CCAC Eastern Counties, Local 489;

Bargaining Rep: Debbie Friday, Client Services Coordinator/Supervisor, VHA Home Healthcare, Local 548;

Campaigns Rep: Linda Hogan, Community Site Support, COTA Local 548;

1st Alternate: Lucy Morton, RPN, VON Hamilton, Local 269;

Secretary: Judy Cowan, Case Manager, CCAC Renfrew County Local 481

Staff: Janet Wright, Bilingual Negotiator OPSEU

To contact the sector go to www.opseu.org/bps/health/community/contact.htm and fill in the form.

Attached please find a copy of our last newsletter (Jan. 2006) which some people may not have received or viewed on our web page.

Authorization: Leah Casselman, President

www.opseu.org/bps/health/community/index.htm

www.opseu.org

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