



Ontario Federation of Labour

Submission to the Standing Committee on Social Policy

The Broader Public Sector Accountability Act 2010

November 23, 2010



On behalf of the Ontario Federation of Labour (OFL) we would like to thank the Standing Committee on Social Policy for the opportunity of sharing our thoughts concerning the proposed legislation *The Broader Public Sector Accountability Act, 2010*.

The Ontario Federation of Labour is the largest provincial federation of labour in Canada. Our hundreds of thousands of members from a variety of unions work in every economic sector and live in communities across Ontario from Kenora to Cornwall and from Moosonee to Windsor. Since our founding convention in 1957 the OFL has been a visible and strong advocate for a publicly funded, transparent and accessible health care system which provides an array of quality needed services to Ontarians in their time of need. These services are provided to Ontarians in their communities by dedicated and experienced health care workers who are members of a variety of unions affiliated to the Ontario Federation of Labour. During the course of these hearings the Committee will be hearing from a number of these unions who will be able to share with you recommendations building on the unique front-line perspective of their members. The OFL is supportive of their recommendations to improve *Bill 122*.

Background to Bill 122

A major focus of political activity across Ontario in recent years has been the growing concern of many Ontarians about what is happening to their health care system. They see the McGuinty government condoning the disruption of Ontario's health care system by the cutbacks of programs, services and staff instigated by the Local Integration Health Networks (LHINs). They see that same government embracing the political posturing of those who advocate that health care is a "Pac Man" gobbling up government resources. Their "solution" is to privatize health services in order to further develop opportunities for profit making for a small select group who are themselves advocates for this approach. This is marketed as providing "choice" for consumers. The OFL and our affiliated unions join with many other Ontarians in rejecting this model for our health care system. We will continue to speak out and work closely with other Ontarians across our province to ensure that we have the accessible and quality public health system we need and we deserve.

In the last year there have been three reports which outline in considerable detail the short-comings of the existing system:

LHIN Spin Report on the Hamilton-Niagara-Haldimand-Brant LHIN
by the Ontario Ombudsman August 2010.

Ontario's Health Record Initiative by the Auditor-General of Ontario
October 2009.

Consultant Use in Selected Health Organizations by the Auditor-General of Ontario October 2010.

The Ombudsman's Report detailed how a LHIN sought to marginalize community involvement in health care decisions of great importance to the community. The Auditor-General's Reports detailed the transformation of the health care system from serving the needs of Ontarians to serving the needs of consultants who often had long standing relationships with the McGuinty government. *Bill 122* is the McGuinty government's response to these reports especially to the October 2010 Auditor-General's Report. This proposed legislation may be well-intentioned but it needs clarification and strengthening.

Suggestions for Improvements

Consultants and Lobbyists

The Auditor-General's 2009 and 2010 reports outline abuses of our health care system by the excessive use and influence of lobbyists and consultants. These documents especially the October 2010 report provide a series of recommendations which clearly set up a transparent process for the use of consultants. The vagueness of this proposed legislation can be addressed if the recommendations set out in this October 2010 report were incorporated into *Bill 122*.

A starting point is asking the question why all these lobbyists and consultants are needed. In an October 20, 2010 government back grounder document to *Bill 122* entitled "Taxpayer-Funded Lobbyists Banned in Ontario Public Sector" the point is made that:

"Since 2003, 1,519 positions in the Ontario Public Service have been approved for conversion to replace work previously done by consultants. This has resulted in ongoing annual savings of approximately \$64 million."

What policy development needs to be undertaken that cannot be done by the skilled and dedicated workforce already available found in the Ontario Public Service. Or is the use of consultants driven more by a desire to reward friendship, party loyalty and further development of a particular vision for health care? Sections 5-7 of *Bill 122* outline the procedures for reporting on the activities and expense incurred by hired consultants.

Bill 122 (Section 4) proposes to prohibit broader public sector organizations from hiring external lobbyists and paying for their services with taxpayers money. The OFL agrees that taxpayers money should be directed to the delivery of programs and services to Ontarians.

The fact that this has happened raises the question of what are the problems which compel broader public sector organizations to hire external lobbyists when in this case they attempt to access the policy development/implementation processes of the Ministry of Health and Long-Term Care. Is this a problem experienced by all broader public sector organizations or just some? Why has the existing system of democratic representation including the involvement of their local MPP, the appropriate Cabinet Minister in this case the Minister of Health and Long-Term Care not been able to address their concerns?

While *Bill 122* proposes to prohibit broader public sector organizations from using taxpayers money to hire external lobbyists there is the question of such organizations using other monies to pay for these lobbyists. The Auditor-General in his October 2010 report notes that 85% of the total operating expenditures for Ontario's 155 public and specialty psychiatric hospitals were funded directly by the Ministry, primarily through the LHINs leaving 15% funded from other sources. In this case could hospitals use some of this 15% to fund external lobbyists? *Bill 122* (Section 1 g) makes reference to "every publicly funded organization that received public funds of 10 million dollars or more in the previous fiscal year". This limit of 10 million dollars is confusing in that it could exclude certain members of the broader public sector. For example larger Community Care Access Centres (CCAC's) with budgets over 10 million would be included but smaller CCAC's with budgets less than 10 million dollar would be excluded. The solution to this is to name the health sector organizations which would be covered by *Bill 122* or to remove the 10 million limit.

Another question which arises is the exclusion in *Bill 122* of the private for-profit sector of Ontario's health care system. In the past some Ontario governments (e.g. Harris, Eves) have encouraged the growth of the private for-profit sector in such areas as Long-Term Care. This sector continues to receive funds from Ontario taxpayers. Any external lobbyists that they would hire would presumably be advocates of increasing the level of private for-profit health care in our province. This would provide an unfair advantage to these advocates of a particular model of health care. The OFL believes that the scope of *Bill 122* should be broadened to include all those organizations who receive funds from Ontario taxpayers.

Procurement

Bill 122 (Sections 12-13) discusses the issue of procurement but the vagueness of this proposed legislation raises the concern that it could be used to impose the competitive bidding model on the provision of services in various sectors of the health care system. The experience in home care should be clear that competitive bidding results in serious and repeated disruptions in the provision of quality services to Ontarians and in the lives of those Ontarians

providing these services. The competitive bidding model has not worked. The OFL believes that *Bill 122* must be clarified to ensure that it is not used to impose the discredited model of competitive bidding on any sector of our health care system.

Public Reporting of Expense Claims

Bill 122 (Sections 8-11) outlines provisions to report publicly expense claims in the broad public sector. This is a move to increase transparency and we are supportive. The OFL believes that the provisions of *Bill 122* should be broadened beyond the broader public sector to include groups such as the private for-profit operators who are recipients of public monies.

Freedom of Information and Protection of Privacy Act

Bill 122 (Section 24) proposes to include hospitals in the scope of the *Freedom of Information and Privacy Act (FIPPA)* as of January 1, 2012. Hospitals in a number of Canadian jurisdictions are already covered by privacy legislation. As noted already the OFL believes that the provisions of *Bill 122* should be expanded to cover all those groups who receive public monies to provide health care services to Ontarians.

The coverage of FIPPA has expanded in recent years and we are supportive of this in the spirit of increasing transparency for all Ontarians. However, we must note that many Ontarians and organizations have experienced great frustrations in time and resources while seeking to use FIPPA to gain access to information. The frustrations of Ontarians with FIPPA must be addressed in another forum.

Conclusion

The Ontario Federation of Labour is supportive of the intent of *Bill 122*. However we are concerned that the coverage of this proposed legislation must be expanded to include all of the groups which receive public monies. The vagueness of this legislation which we attribute to the speed it was developed in response to the Auditor-General's October 2010 Report *Consultant Use in Selected Health Organizations* must be addressed in the manner which we have already addressed.

We thank you for the opportunity of sharing our thoughts of this proposed legislation.

Respectfully submitted,

ONTARIO FEDERATION OF LABOUR