

KEY MESSAGES

Caregivers play a crucial role in sustaining the health care system

- ◆ In Canada, it is estimated that family caregiving is worth \$30-40 billion in “free” labour
- ◆ It is estimated that 70% of home care is provided by Ontario’s unpaid and family caregivers, with nearly 850,000 of them providing more than 10 hours of care per week

Caregivers need additional financial and home supports to continue their vital role in caring for their loved ones

- ◆ According to Statistics Canada, 22% of caregivers receive some form of financial support to help them with caregiving – but 68% said they needed more support.
- ◆ Caregivers have described financial barriers as the main determining factor that led to premature admissions into long-term care
- ◆ 41% of caregivers report their caregiving duties have reduced their ability to engage in paid work
- ◆ Without adequate home care and respite supports, caregiving can have significant impacts on mental and physical health: more than 90% of caregivers report the time they spend with other family and friends or leisure and community activities is reduced because of their caregiving responsibilities

Direct funding programs can provide important enhancements to existing home and community care supports

- ◆ While some caregivers benefit from traditional home care and respite programs, with their associated administrative and supervisory supports, others will fare better with Direct Funding programs, sometimes referred to as self-directed and family-managed programs
- ◆ Direct Funding programs provide **choice and flexibility** to families, allowing them to tailor the timing and nature of supports to the needs of their loved ones and their families, so they can prioritize what is most important to them. This is a person-centred model.

- ◆ Direct Funding programs allow families to **select the person(s)** who will provide respite and support, to ensure a good and stable match. This allows strong, stable, and trusting relationships to develop, essential to wellbeing and family peace of mind.
- ◆ Where PSWs are in short supply, such as in rural and remote communities, Direct Funding programs allow families to be **creative** in sourcing supports
- ◆ Direct Funding can help families to ensure that supports are **culturally and linguistically appropriate**, which is increasingly important in a diverse province.

We can build on Ontario's existing programs by learning from Direct Funding programs successfully implemented across Canada and around the world. This is a proven model.

- ◆ In Canada, there are models in British Columbia, Alberta, Saskatchewan, Manitoba, Quebec, Nova Scotia, New Brunswick, PEI and Newfoundland & Labrador
- ◆ Internationally, there are also comprehensive models in Australia and Scotland
- ◆ Our proposals are based on learnings from these models, to meet the expressed needs of our members

We are advocating for enhancements to make Direct Funding programs more equitable and accessible for caregivers who can benefit from them, including:

- ◆ Reforming eligibility requirements to allow substitute decision-makers and caregivers to take on application and administrative processes. Requiring recipients to self-manage excludes a large population living with intellectual and cognitive impairments, such as dementia, from programs that could benefit them.
- ◆ Enhancing program flexibility to better meet needs. For example, allowing recipients to hire family members can enable creative solutions to the PSW shortage and provide stable, trusting supports.

- ◆ Moving programs paid for by MCCSS from reimbursement to reconciliation funding. Reimbursement models create barriers for families who are low- or moderate-income. Using the Ministry of Health's installment model across all programs would improve accessibility.
- ◆ Improving navigation. The current patchwork of programs is difficult to locate and access because very few caregivers are aware or get told about these programs.
- ◆ Reducing waitlists. Over time, transitioning increased funding to self-directed programs will enable families to avoid or delay the use of institutional care.

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- ◆ Direct Funding programs provide choice and flexibility to families, allowing them to tailor the timing and nature of supports to the particular circumstances of their loved ones and their families, so they can prioritize what is most important to them. This is a person-centered model.
- ◆ Direct Funding programs allow families to select the person(s) who will provide respite and support, to ensure a good and stable match. This allows strong and trusting relationships to develop, essential to wellbeing and family peace of mind.
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Enhance program flexibility to better meet needs. For example, allowing recipients to hire family members can enable creative solutions to the PSW shortage and provide stable, trusting supports.

Move programs funded by MCCSS from a reimbursement to reconciliation funding. Reimbursement models create barriers to access for families who are low or moderate income. Using the installment model adopted by the Ministry of Health across all programs would improve accessibility

Improve navigation. The current patchwork of programs is difficult to locate and access. There is very low awareness among caregivers about these programs.

Reduce waitlists. Over time, transitioning increased funding to self-directed programs will enable families to avoid or delay use of institutional care.