

**OPSEU/SEFPO 2021**  
**Submission to the**  
**Standing Committee on**  
**Finance and Economic**  
**Affairs on Bill 269, *An***  
***Act to implement Budget***  
***measures and to enact and***  
***amend various statutes***



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## Introduction

Like the rest of the world, Ontario finds itself in an unprecedented crisis. The COVID-19 pandemic has placed us all in the midst of a storm.

The way out – in both the short and long term – exists in the know-how, experience, and courage of front-line workers like the 180,000 members of OPSEU/SEFPO.

Many of them have been risking their lives every day they've gone to work during this pandemic. Why? Because their goal as public sector workers is to make Ontario's communities healthier, safer, and more prosperous. Public services are a vital part of the equation.

High-quality health care. World-class education. Strong social services: They are the great equalizers. And they are the answer to this crisis.

By investing in these services, and in the front-line heroes who provide them, Ontario will emerge from the pandemic stronger than ever and much better able to weather crises in the future.

The 2021-22 budget in Bill 269 is an encouraging first step towards making these investments a reality.

By flat-out rejecting 30 years of austerity and damaging cuts, this government has shown it understands that the COVID-19 crisis is actually a capacity crisis. If our public services had the capacity they once had, the pandemic's death toll would be much lower and the lockdowns much shorter. Fewer workers would be jobless, and fewer businesses would be bankrupt.

The government is to be commended for understanding this and taking an important first step towards building our public services back up, instead of continuing to break them down.

But it is only the first step of many that are required. A single budget can't turn back the clock on three decades of cuts.

OPSEU/SEFPO's members have seen the damage these cuts have done firsthand and have been sounding the alarm for years. The pandemic didn't cause the crisis in our public services; it revealed it.

A variety of sources – from RBC<sup>[1]</sup> to the province's Financial Accountability Office<sup>[2]</sup> – show that Ontario currently invests less per person in public services than any other province. The result: Ontario performs worse than all other provinces on a number of measures, including hospital mortality<sup>[3]</sup>, social and affordable housing wait times<sup>[4]</sup>, and per-student investment in postsecondary education<sup>[5]</sup>.

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[1] Canadian Federal and Provincial Fiscal Tables,  
[http://www.rbc.com/economics/economic-reports/pdf/canadian-fiscal/prov\\_fiscal.pdf](http://www.rbc.com/economics/economic-reports/pdf/canadian-fiscal/prov_fiscal.pdf)

[2] Comparing Ontario's Fiscal Position with Other Provinces,  
<https://www.fao-on.org/en/Blog/Publications/inter-prov-comparisons-feb-2019>

The budget in Bill 269 might have stopped the fall. Now, it's time for the government to commit to tabling future budgets that make bold and courageous investments to begin the hard work of pulling us back out.

It won't be easy, and government can't be expected to do this hard work on its own. Labour and business must also come to the table to help Ontario forge a new path. OPSEU/SEFPO is committed to playing an active and productive role in this work.

In the pages that follow, our members lay out practical and achievable solutions to the problems plaguing the broad range of public services in which they work. They are hard-won insights, developed from first-hand experience on the front lines.

They are all important, but the following are urgent priorities:

- **Increase health care capacity.** When it opened last year, the Cortellucci Vaughan Hospital was the first new hospital to open in three decades. And Bill 269 properly invests in building more new hospitals and creating thousands of new beds. Still, current investment in health care falls far short of the 5.2 per cent annual increases required to keep pace with health care inflation. To address chronic shortages in infrastructure and staffing, sustained annual increases of at least 5.2 per cent are vital.
- **Eliminate costly, ineffective and dangerous privatization in long-term care.** Enough is enough. The majority of COVID-19 deaths in long-term care have occurred in homes that prioritize profits over people. It's time for the government to put people first by entirely removing privatization from the sector.
- **Invest significantly in the post-secondary system.** The \$106-million investment in colleges and universities outlined in Bill 269 is a good start. More is needed to ensure our postsecondary education system's long-term sustainability, so that it can create fully credentialed educational and training programs that address the chronic staffing shortages across health care and social services.
- **Prioritize women in all pandemic recovery plans.** The pandemic has been especially difficult for women in the workforce. The government's Task Force on Women in the Workforce is an excellent initiative, but it must have real influence. The majority of OPSEU/SEFPO's members are women, so the union is uniquely positioned to provide key support and insight into the task force. Our first suggestion: reduce wage inequality by repealing Bill 124. Besides being unconstitutional, imposing three years of effective wage cuts on front-line public service workers – the majority of whom are women – prevents women from recovering all they've lost during the pandemic.

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[3] Ontario Hospital Association, <https://www.oha.com/Documents/Ontario%20Hospitals%20-%20Leaders%20in%20Efficiency.pdf>

[4] Statistics Canada, <https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=4610004201>

[5] Canadian Association of University Teachers, [https://www.caut.ca/sites/default/files/2.4\\_provincial\\_government\\_funding\\_per\\_fte\\_student\\_0.xlsx](https://www.caut.ca/sites/default/files/2.4_provincial_government_funding_per_fte_student_0.xlsx)

Yes, Ontario is in crisis.

But since the crisis began, the government has shown a willingness to engage in real conversations and consider real solutions that go beyond traditional partisan and ideological bounds.

With a deeper understanding of some of the profound problems revealed by the pandemic, the government tabled a budget in Bill 269 that finally starts to address these problems by rejecting austerity.

We must continue down this path and continue working together. It's time for more collaboration and consultation, because nobody has the market cornered on good ideas. By establishing consultation and advisory tables that bring together Ontario's best – from business and labour – the government can identify and make the investments we need today for a better tomorrow.

As always, the 180,000 members of OPSEU/SEFPO stand ready to help.

## Health Care

Ontario has a hospital system that, according to the Premier himself, is on “the brink of collapse.” A long-term care system that has suffered hundreds of outbreaks and more than 3,500 deaths – roughly half of the province's total COVID-19 death toll. And a home care system struggling with chronic and critical staff shortages.

The health care system was in crisis before the pandemic and is failing us now, forcing the government to impose long and ruinous lockdowns across the province.

Massive and urgent investment is required to rebuild the capacity of our entire health care system.

## Hospitals

In the early 1990s, Ontario cut hospital beds from 50,000 to a little over 30,000. We still have roughly 30,000 beds today, despite the fact the province's population has grown by 25 per cent.

The government still invests less per person in our health care system than eight other provinces. Even before the pandemic, the consequences of that underinvestment were clear: chronic staffing shortages in some medical professions, ambulances lined up outside ERs, “hallway health care,” and crumbling infrastructure.

We simply do not have anywhere close to the hospital capacity we need, in terms of either staffing or infrastructure. Building our capacity is of urgent importance.

### **General Hospital Sector Recommendations:**

- Build more publicly-run and funded hospitals to address the severe lack of capacity in infrastructure and staff shortage.
- Ensure all hospital workers have the proper PPE (N95 or better).
- Place all health workers on the priority list for vaccination.
- After the investment needed to increase capacity, commit to global funding increases to health care of at least 5.5 per cent per year.
- Address the staffing shortages and transfers of staff which is leading to overall burnout and increased work-related injuries. Ensure employers do not continue to deny vacation and sick leave requests.
- Implement paid sick leave/isolation pay especially for part-time, casual staff.

### **Hospital Professionals**

The recruitment and retention of hospital professionals has been a problem that continues to go unaddressed, and will continue to affect access to care for Ontarians if action is not taken. Existing training and educational programs in our colleges and universities do not produce the number of professionals we need in these specific health care fields.

A vital component of a human resources strategy for hospital professionals is making the professions more attractive, both to young people just starting their careers and to existing hospital professionals looking for a career change.

### **Recommendations:**

- Establish a committee that includes hospital professionals to outline a human resources strategy that addresses the shortage of hospital professionals in our labs, ultrasound services, nuclear medicine, diagnostic imaging, physiotherapy and other classifications.
- Partner with colleges and universities to expand existing training programs and open new programs, including incentivized programs, to recruit and train hospital professionals across the sector.
- Avoid responding to deficits with layoffs in vital services, primarily in outpatient therapeutic and rehabilitative care services, such as Physiotherapy, Occupational Therapists, and Social Workers.

## Hospital Support

### Recommendations:

- Stop the contracting out of vital hospital support services such as housekeeping, food service, environmental services, and IT to name a few.
- Provide additional funding and resources to support the implementation of proper health and safety measures of all staff in hospital settings.

## Community Health Care Professionals

The pandemic exposed the negative impact of the profit motive in health care, including community health care. While the crisis has demonstrated the critical role of local public health units and their effective response under the current model, the prevalence of for-profit companies in home care has undercut adequate wages, benefits and full-time work. The community health care workforce is still waiting for the implementation of the precautionary principle and infection control measures as recommended from the SARS commission. The Home and Community Care Support Services model was formally established April 1, 2021 by Order and the LHINs were dismantled as part of Ontario's health care reform. OPSEU/SEFPO recommends that the current coordination of services model for all home care remain intact without further devolution of services.

Another pressing issue is violence in the workplace. Nurses and other caregivers visiting and caring for patients in their homes reported experiencing an increase in verbal and physical violence from people who were stressed out, lonely and afraid.

And with the health care system pushing patients out of the hospitals and into their homes at a faster rate to minimize exposure to COVID-19, community nurses are dealing with increasingly complex cases.

### Recommendations:

- Maintain adequate staffing levels to allow front-line workers to spend more time with patients, residents and clients, and diffuse potentially difficult and violent situations. Front-line workers should work in pairs when dealing with a difficult patient, resident or client.
- Eliminate the for-profit motive that has undermined quality of care. The government must cease renewal of contracts with for-profit companies and upload home care services to a public service delivery model.
- Address chronic staff retention issues by increasing PSW and RPN wages permanently.
- Deal with systemic wage gaps through a more comprehensive and inclusive approach that eliminates lower wage rates for the same work performed in community settings.



- Do not consolidate the current 35 Public Health Units into 10 regional health entities. As the pandemic response has demonstrated, the current model works. Local authority and accountability has enabled tailored responses to local communities. Consolidation would reduce services in more rural areas and with more sites in typically in larger, more urban centres.

## Long-Term Care

No sector was harder hit by COVID-19 than the long-term care sector. More than 3,500 long term care residents have died - many more deaths than there would have been if we had the necessary regulations, funding, and public ownership in the long-term care sector that OPSEU has demanded for years.

The high, potentially even criminal, death toll in long-term care is a direct result of inadequate physical infrastructure and chronic understaffing – particularly in privately owned and run homes.

### Recommendations:

- Bring all private, for-profit long-term care homes into public ownership as quickly as possible. There have been four times as many COVID-19 related deaths in private, for-profit homes as in non-profit and municipal homes. The profit motive is not compatible with keeping people healthy and safe.
- Guarantee at least four hours of direct care per resident by 2022. This will force home managers to address chronic understaffing and hire an appropriate number of caregivers.
- Establish a minimum livable wage be established for PSWs and all other front-line long-term care workers, and make permanent the pandemic premium provided to all front-line long-term care workers in 2020.
- Enact labour regulations and provide funding to make LTC work as stable as possible – permanent jobs with stable and predictable hours with an emphasis on providing as many full-time positions as possible, paid well with benefits and sick leave.
- Require long term care homes to maintain an adequate supply of PPE, and that this be enforced through regular proactive inspections.
- The Ministry of Long-Term Care develop a province-wide pandemic protocol, with a clear chain of command that can be implemented quickly. Such a protocol must define what constitutes a pandemic, and when such protocols need to be implemented.
- Phase out ward rooms as quickly as possible as licenses for older homes with ward rooms come due for renewal. Before the licenses are renewed, ward rooms must be phased out and replaced with single rooms and shared (double) rooms for those who want to cohabitate with their spouse, family member or friend.

- Immediately reinstate the annual Resident Quality Inspections (RQI) for every long-term care home and hire enough inspectors to carry out both these proactive inspections as well as the reactive complaint-driven inspections. Please see our Submission to Ontario’s Long Term Care COVID-19 Commission on behalf of Long Term Care Home Inspectors for a full list of recommendations.

## **CBS and Diagnostics**

Diagnostic testing by laboratory staff is vital in the fight against COVID-19, but also to prevent public health crises like Walkerton, SARS, and other outbreaks. This work keeps our communities safe, and it is essential to everyone’s health. But depending on where they work, Ontario’s lab workers are treated very differently.

The situation has only gotten worse during the pandemic. Lab professionals have had their schedules overridden and are facing tremendous burnout while trying to meet the government’s unreasonable COVID testing quotas.

To add insult to injury, lab professionals enter into bargaining and face the imposed wage caps of Bill 124. Public Health Ontario and other employers have expressed difficulty in hiring and retaining lab professionals because they are in high demand and are able to make more money elsewhere.

### **Recommendations:**

- Repeal Bill 124 in recognition of the vital service lab workers and other frontline workers provide to Ontarians, especially during the COVID-19 pandemic.
- As consistency is the key to safety, government must harmonize the pay, safety provisions, and working conditions for all laboratory professionals regardless of whether they work in community hospitals, community-based laboratories, or privately-run diagnostic companies.
- Maintain the ban on private blood and plasma-product collection to ensure the ongoing safety of Ontario’s blood supply, and invest in public plasma collection facilities. The government must invest in public plasma collection facilities to reduce dependency on world markets for the fractionated plasma products used to produce medications, much of which is collected by paying donors.

## **Ambulance**

The role of paramedics and Ambulance Communications Officers is evolving. They no longer simply respond to 911 emergencies – they now have broad community involvement and care, and increased expectations during a crisis.

Throughout this pandemic, for example, they are key frontline workers at vaccination clinics as screeners, and actively participate in congregate settings with declared outbreaks.

## **Recommendations:**

- In recognition of ambulance workers' increasing roles and responsibilities, mandate a \$4/hour immediate and permanent base wage increase to be applied to all paramedics regardless of employment status or certification level.
- Provide power air purifier respirator (papr) PPE for all ambulance workers. It offers the best protection not only to the paramedics but also to the members of the public they treat and transport each day.
- Immediately implement the approved upgrades and staffing at all Central Ambulance Communications Centres (CACCs). Approval has already been given, however, the delays continue to result in inappropriate utilization of already stressed paramedic resources.
- Fully compensate all paramedics regardless of employment for the duration of the quarantine/isolation when directed by a workplace, public health, MOH or authorized body.

## **Mental Health and Addictions**

The pandemic has exposed cracks in the mental health system and the limits and gaps of this vital link in the social safety net. The government's new investments to mental health under *Ontario's Roadmap to Wellness* are a good start to recognizing the tremendous need for more services across the province.

## **Recommendations:**

- Expand community-based mental health counseling services and early intervention.
- Increase 24-hour integrated mobile crisis teams across all communities and provide stable, and permanent funding.
- Expand community-based addictions services and eliminate for-profit treatment clinics.
- Provide leadership and work with other levels of government to create supportive housing programs in every community.
- Expand Mental Health court locations and hours to provide better access to marginalized communities; and provide culturally-competent and trauma-informed services within the justice system, including significantly improved access to mental health court supports for Black and Indigenous individuals.

## Social Services

### Developmental Services

The pandemic has exposed the chronic retention issues in the development services sector, where part-time work and low wages are chronic. The government provided temporary wage increases that underscore the need for a permanent wage improvements. The government's stated intention, to move to a direct funding model will only make the retention issues worse if service agencies aren't funded to help supported individuals and families who aren't able to manage their own care. Developing and implementing a workforce strategy is also crucial to ensure an accountable, and highly trained workforce under direct funding.

#### Recommendations:

- Mandate service agencies to shift to a full-time work model.
- Increase base funding to agencies to expand supportive housing and program services.
- Set a provincial \$25/hour minimum rate of pay for DSWs. Under the current Passport model individuals are funded per dollar. Clients pay many workers the provincial minimum wage of \$14/hour to stretch hours of service.
- Set provincial standards and training requirements for DSWs and PSWs.

### Children's Aid Societies

The pandemic has exposed the vulnerability of racialized communities who have been disproportionately affected by COVID-19, and who face systemic barriers such as poverty and racism. The overrepresentation of Black, racialized and Indigenous children and youth served by Children's Aid Societies must be addressed within the service delivery model.

The government's modernization plan cannot succeed without a re-visioning of the funding formula to achieve its goals of expanding prevention, early intervention, and supporting children, youth, and families from marginalized communities.

#### Recommendations:

- Change the funding formula to include an increase to base funding to Children's Aid Societies to expand the delivery of prevention and early intervention programs.
- Invest in more frontline positions to reduce the systemic workload burden and improve retention in the field.
- Establish a fully public and accountable housing system for youth in care. The mostly private residential group care has failed youth in care in Ontario. Eliminate for-profit

care in group homes (Outside Paid Resources, OPRs). OPRs provide substandard housing and services for vulnerable youth.

- Fund the embedding of equity, anti-oppression, anti-Black racism, and Reconciliation programming into all areas of service delivery in the child welfare system.

## **Community Agencies**

The pandemic means Ontario's non-profits and charities face imminent closure, and the losses will be devastating to Ontario communities, large and small. Seventy-five per cent of organizations have already lost revenue and one in three non-profits have had to lay off staff or reduce their paid hours. One in five have closed their doors and may not reopen. The government must allocate a stabilization fund of at least \$680 million to ensure that non-profits and charities can help rebuild the economy and communities.

### ***Child Care***

Child care is essential to Ontario's economic recovery from the COVID-19 pandemic. The federal government acknowledged the need for a national child care system in the 2020 Throne Speech. Ontario must take the lead and set out a long-term strategy to collaborate with the federal government to develop a publicly funded and delivered child care system.

First, the government must immediately reverse \$48 million in annual provincial funding cuts.

Furthermore, an investment of \$500 million in emergency funding is needed to stabilize the child care sector which is facing increased costs due to new health and safety standards, and temporary low enrolment has left many child care centres in a very precarious financial position.

### ***Community Legal Clinics and Legal Aid Ontario***

The pandemic has caused a massive surge in demand for legal aid services as Ontarians face evictions, job loss, domestic violence and other issues. In 2019, Legal Aid Ontario suffered a 30 per cent budget cut (\$133 million). In 2020, Legal Aid Ontario is facing a funding shortfall of \$60 to \$70 million.

This funding crisis could decimate front-line services struggling to assist some of Ontario's most vulnerable people. The government must immediately increase funding to LAO and community legal clinics to ensure that all Ontarians have access to justice services.

### ***Shelters***

Rates of violence against women have gone up during the pandemic and women's shelters have been struggling to meet the greater need. Ontario announced an emergency fund of \$2.7 million to support domestic violence victims during the pandemic that will reach

more than 50 community agencies across Ontario, including Indigenous organizations and groups based in rural areas. This is a good start but nowhere near what is needed to stabilize and expand a fragile system.

Homeless shelters have been hard hit by the pandemic. The Ontario government provided municipalities an additional \$150 million to improve homeless shelters and create opportunities for longer-term housing. The government must ensure that accountability and oversight are built into any improvements made in the sector.

The Ontario government invested over \$47 million to provide supportive housing for individuals with severe mental health and addictions challenges who are either homeless or at risk of becoming homeless. The government must ensure that services be both publicly funded and delivered in the expansion of supportive housing.

## **Child treatment**

The need for children and youth mental health services is now greater than ever. In response to growing demand during the pandemic, the government stepped in with a \$12 million investment. Prior to the pandemic, wait times for 28,000 children and youth for mental health services were up to 2.5 years. This is not sustainable - the government must commit to directing a significant portion of its promised mental health and addictions funding of \$3.8 billion over 10 years (including matching funds from the federal government), to develop a responsive and strong child and youth mental health system.

### **Recommendations:**

- Increase funding to expand frontline services, reduce waitlists and address the growing demand for services.
- Eliminate for-profit care in congregate group care and establish a fully public and accountable treatment and housing system for children and youth. The mostly private, congregate group care system has failed children and youth in Ontario.
- Eliminate the wage gap between child and youth mental health and children's treatment providers and their counterparts in education and health. The wage gap has produced a chronic workforce recruitment and retention deficit of professional staff, undermining stability and predictability that children and youth deserve.

## **Youth Corrections**

Youth justice workers in transfer payment agencies continue to provide care to youth during the pandemic, but often without WSIB coverage or the same working conditions as their counterparts in directly operated secure custody facilities under Ministry of Children, Community and Social Services. In 2016, the government was told by an independent body that these two systems should be harmonized into a single system to improve and standardize training, hiring practices, health and safety, policies and procedures, standards, and compensation.

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Recently, Ontario’s Ministry of Children, Community and Social Services abruptly announced its plan to close 26 youth justice facilities in Ontario, without warning and without having consulted the union. This has undoubtedly caused confusion on the front lines and has raised questions about the future of Ontario’s youth justice system that must be addressed.

### **Recommendations:**

- Create a harmonized system for youth justice with consistent standards.
- Pass Bill 191 to amend the Workplace Safety and Insurance Act to include COVID 19 as an occupational hazard so it covers essential workers who test positive for the illness.
- Pass Bill 194 to include residential care facilities and group homes in Schedule 1 of the Workplace Safety and Insurance Act.
- Provide temporary pandemic pay to all front-line youth justice workers and repeal Bill 124 to allow these workers to achieve fair wages through collective bargaining.
- Step back from the decision to close youth correctional facilities and sit down with OPSEU/SEFPO to discuss the future and direction of youth corrections in Ontario.
- Reinvest in the youth justice sector, including reintegration homes and services that allow young persons to remain closer to home, and hire the appropriate staff complement.

## **Boards of Education and Cultural Institutions**

The chronic problems facing our public schools – overcrowded classrooms and inadequate staffing levels – are even more dangerous and damaging during the pandemic.

Violence in the classroom has been a growing problem for education workers – particularly education support workers supporting students. But now the danger is even higher because many have inadequate PPE. Education support workers must work in close proximity with mask-exempt students. And while most students are learning virtually during lockdowns, many students are unable to use virtual learning technology are still attending school in person.

And when all students are in school, overcrowded classrooms do not allow for physical distancing putting both students and workers at risk. In some cases, classes have become even more crowded during the pandemic as classes have been combined because of increased virtual learners.

Adding to the problems, contact tracing is a confusing patchwork of rules and protocols across schoolboards.

And many education workers, who are as much on the front lines of this pandemic as other front-line workers, are demoralized and struggling financially because they are not eligible for temporary pandemic pay.

The pandemic has also hurt adult learning. The failure of school boards to provide adult learners access to remote learning technology has led to decreased student enrollment, decreased funding and layoffs.

### **Recommendations:**

- Increase funding to reduce class sizes by hiring additional education and custodial workers, reopening closed classrooms, and renovating/repurposing unused areas within school board districts.
- Invest in enhanced PPE for front line staff working in specialized classrooms. Enhanced PPE should include N95 fit test masks, accessible plexiglass barriers to use while working with students at a table, feeding, or deescalating situations where contaminants may be present.
- Invest in technology for all enrolled adult learners to access and participate in remote learning.
- Invest in a province-wide protocol for contact tracing to document when education workers enter and depart cohorts.
- Invest in providing self-isolation pay for casual education support workers that are exposed to COVID-19 in the workplace.
- Increase funding to increase front line education support staffing in cohorts in order to reduce the movement of education workers through multiple cohorts and lower the risk of virus spread.
- Provide temporary pandemic pay to all educational support workers and repeal Bill 124 to allow these workers to achieve fair wages through collective bargaining.

## **OPS**

COVID-19 has shone a spotlight on a number of crisis afflicting the OPS and the Ontario public it services.

Ontario would be doing much better in this pandemic if it had strong and properly enforced regulations, the accountability and reliability of publicly owned and managed public services, less contract and precarious work, and municipalities unburdened by years of downloading.



## Regulations and enforcement

The shocking death toll in long-term care is tragic, heartbreaking and was totally avoidable. It's the consequence of years of weak and unenforced regulations. Industry "self-regulation" does not work, particularly in sectors like long-term care that have for-profit companies. But weak or unenforced regulations aren't just a problem in long-term care.

There are not enough inspectors in the Ministry of Labour, Training and Skills Development to inspect the province's workplaces and ensure they are safe for workers. There are not enough transportation enforcement officers from the Ministry of Transportation to keep our roads safe. Conservation officers from the Ministry of Natural Resources and Forestry have worked as a skeleton crew for years – there are fewer than 180 boots-on-the-ground conservation officers enforcing natural resources laws across the province and the new laws that came with emergency orders during the pandemic. And there are too few inspectors who work for the Ministry of Agriculture, Food and Rural Affairs are crucial in our supply chain and work on the front lines in abattoirs, which are workplaces that have been hit hard by COVID-19.

## Privatization

Privatized public services are more expensive and less reliable.

During the pandemic, for example, all publicly owned and managed ServiceOntario Centres have remained open and safe with adequate PPEs and safety protocols. On the other hand, many of the privately managed ServiceOntarios have simply closed.

## Downloading public services to municipalities

From the download of Ontario Works to the municipalities in the 1990s to the download of fire service training in early 2021, and most recently, the government's announced intention to download ODSP casework, municipalities have been burdened for decades with public services that they can't provide efficiently and effectively.

Downloading is inefficient and overly expensive. It is easier to control costs and take advantage of economies of scale, reduce bureaucracy, and ensure that public services are consistent across the province when they are run by one government instead of hundreds of them.

## Good jobs in the OPS and beyond

The pandemic has shown us just how important stable, permanent employment with benefits, pensions and job security is in every sector. The public sector is no exception.

Part-time, temporary employment without benefits leaves workers dependent on several jobs at a time, leaving them at higher risk of contracting and spreading COVID-19. And with no sick leave to stay home when they are ill, the risks of spreading are even higher.

## Recommendations:

- Stop deregulating industries, industry self-regulation and offloading regulatory enforcement onto outside agencies. OPS employees are the best suited to enforcing regulations in Ontario.
- In consultation with the Ministry Employee Relations Committees, hire enough enforcement staff (including support staff) to carry out proactive inspections and enforcement of industries and sectors in Ontario.
- Adjust the pay of enforcement officer classifications like transportation enforcement officers and conservation officers to reflect the true scope and complexity of their work.
- Stop downloading OPS-provided services to municipalities, and that any future downloading plans be cancelled, including ODSP casework. ODSP is an Ontario government program, and it should be funded, directly run and staffed by public sector workers who are specially trained to understand and provide the services that people with disabilities need.
- We further recommend that any services that have already be downloaded be uploaded to the province again, including Ontario Works and the Ontario Fire College.
- Reverse the privatization of all OPS services that have been privatized and cancel any future plans they may have for privatization of OPS services. They should be brought back under direct ownership and staffing by the Ontario Public Service. In-house public services cost less than contracting them out to for-profit companies, and they provide better and more reliable service.
- Invest in the OPS so it sets an example for all other employers by converting as many fixed term contracts to full time employment as soon as possible, and to stop the use of temporary staffing agencies.
- Reinstate the strengthened Employment Standards Act passed by the previous government. The pandemic has shown that all Ontario workers need sick leave, a higher minimum wage and stronger workplace protections in order to survive at all times, but especially now during the COVID-19 pandemic.

## Corrections

In 2020, the government invested \$500 million for new Corrections infrastructure and front-line corrections staff across the province.

But to address the Crisis in Corrections, this is just a start.

Much more investment is needed before the corrections system in Ontario is transformed into one that is not only safe for staff and inmates, but also achieves the goal of rehabilitating and helping the people who enter the correctional system.

### **Recommendations:**

- Mandate that no Probation and Parole staff work alone at an office, and that a metal detector be installed in every office. In 2020, an offender brought a gun into the P&P office in Elliott Lake and shot himself in the interview room while the P&P officer on duty was working alone.
- Stop using temporary agencies to fill vacancies. Instead, fixed-term contracts should be issued, with an eye to converting as many fixed term contracts to permanent positions as possible. Temporary staffing agencies have been used to fill nursing and cleaning positions in some institutions. Temporary agencies not only cost more than hiring staff directly, they provide precarious employment and no benefits for employees who work in one of the most challenging workplaces in the province.
- Adult institutions are dangerously overcrowded, which is a health and safety issue at any time, but especially during a pandemic. We recommend a substantial increase in capacity as quickly as possible in order to more safely and humanely house inmates and provide them the programming and health services they need both during and after the pandemic.
- The ministry was not prepared with policies and procedures for pandemics, with regards to PPE and other health and safety protocols. We recommend that funding be allocated to stockpile enough PPE to get us through this pandemic and to be prepared for any future pandemics.
- Reopen additional mental health secure facilities instead of placing inmates with severe mental health issues in jail – they desperately need properly trained staff to help get stabilized.
- Address the remand challenges that are contributing to overcrowding.
- Invest in secure mental health facilities in order to decriminalize mental illness and place those in crisis where they will receive the proper treatment/supports.
- Review staffing in every institution immediately with a financial commitment to increase full-time Correctional Officer staffing levels.
- Increase investment in community staffing resources, including, but not limited to, hiring additional Probation and Parole Officers to start group offender rehabilitation programming six months prior to an inmate’s release. Establish a process of continuity of service from incarceration to community supervision.

- Bring back “Community Resource Centres” (formerly known as provincial halfway houses) for parolees who lack a parole sponsor and/or suitable housing), thereby reducing overcrowding in correctional facilities. Create employment programs for inmates housed in halfway houses and recoup costs by charging residents nominal room and board.
- Bring back forensic custody facilities for the mentally ill. Much of the inmate overcrowding in our institutions and the increasing levels of violence within our correctional facilities is due in large part to the ever-growing inmate population afflicted with mental health ailments. Offenders with mental health challenges often pose risks to themselves and others, requiring the use of segregation as a means to negate such risks. Forensic Correctional Centres would help solve the inmate overcrowding, violence and segregation crises, and would ensure that mentally ill inmates receive the medical services, supports and treatment they so desperately require.

## LCBO

Like other essential front-line workers, OPSEU/SEFPO members at the LCBO have been risking their lives throughout the pandemic.

It took weeks of pressure from the union at the start of the pandemic to get the LCBO to implement health and safety measures such as Plexiglas barriers at the cash, face masks, limited customer numbers and enhanced cleaning. These measures have improved health and safety in LCBO stores for customers and workers alike.

The LCBO is a Crown corporation overseen by the Minister of Finance. As such, the LCBO is much more than a retailer – its workers are providing a vital public service that protects our communities from alcohol harm while providing billions of dollars in dividends that are critical to the strength and effectiveness of all our other public services.

Unfortunately, the distribution and retail sale of alcohol is being privatized in bits and pieces. Deliveries to agency stores are bypassing LCBO stores in Northern and rural communities. More and more warehouse work is being outsourced and privatized, and some alcohol producers are being allowed to bypass the LCBO’s warehouse and distribution system altogether. E-commerce direct deliveries are done by a third party and not credited to the LCBO store network. All this privatization adds up to the potential for lower LCBO profits, and less investment in our public services.

Investing in a strengthened LCBO will pay dividends in a variety of ways. It will help lower the billions in a year that must be spent in health care, mental health, and correctional services to handle the harms of alcohol. It will strengthen the economies of rural and Northern communities by providing stable jobs that pay appropriately. And it will increase the dividend the province receives from alcohol sales.

As a profitable Crown corporation, the LCBO should be a better employer. In fact, the LCBO should lead, by example. The majority of LCBO workers are part-time with no job security or benefits. It's time these essential workers were given a fair deal at work.

It's time to put public safety first by preventing the expansion of privatized alcohol sales in Ontario. Recently, 61 7-Elevens in 31 communities applied to the Alcohol and Gaming Commission of Ontario for Liquor Licenses in an effort to expand privatized alcohol sales. 7-Eleven thinks it has uncovered a regulatory loophole in Ontario's liquor laws, to eventually force open the door to take-home alcohol sales in all convenience stores across the province.

Ontario must continue to uphold the ban on the retail sale of alcohol in convenience stores – to keep our province, and our children, safe.

### **Recommendations:**

- Stop the piecemeal privatization of alcohol distribution and sales.
- Halt the expansion of privately-owned LCBO Convenience Outlets and prevent the privatized retail sale of alcohol in convenience stores.
- Allow the LCBO to sell cannabis. The LCBO has a long and proven track record of selling alcohol responsibly and maximizing public revenues. The government must give municipalities the option of choosing the LCBO as the retailer of cannabis in their communities.

## **Colleges and Universities**

More than 50,000 OPSEU/SEFPO members working as faculty and staff at 24 colleges and 16 universities help provide quality post-secondary education to more than 800,000 students in Ontario.

In the face of the pandemic, our members quickly pivoted to deliver and support online learning at the outset of the pandemic despite increased workloads, stress, and large online classes. Faculty adapted teaching and learning methods along with assessment and evaluation, while front line support staff helped students, many of them outside the country, succeed in a mainly online environment, from recruitment, admissions, advising, proctoring tests and exams, and supporting the IT systems.

This same dedication to providing a safe and quality learning experience for students was applied by OPSEU/SEFPO members, who starting last summer, have taught and supported the in-person labs required by some programs for students to graduate.

The pandemic has exacerbated and exposed the damage done by underinvestment in postsecondary education in Ontario. The government's intention to impose performance-based funding will only deepen the damage, forcing colleges to compete against one another and potentially leading to the elimination of critical – but currently low-waged – programs focused on social services and support.

We're now seeing a crisis on campuses across Ontario, and particularly in the North, at Universities like Laurentian and Nipissing. Funding per student in Ontario has been on the decline since 2008. Colleges and universities in Ontario receive the lowest per-student funding of any province. The funding crisis has been years in the making and is the fault of governments of all political stripes.

Colleges and universities are vital to the socioeconomic health of our communities, particularly in Northern and rural Ontario. But after a decade of underfunding across the postsecondary education system, Laurentian University is tens of millions of dollars in debt. It faces drastic restructuring, affecting programs and jobs, unless the government steps up now and provides funding to ensure long-term sustainability.

The push towards micro-credentials is another worrisome development. Students need an education that will provide a whole body of knowledge and skills on which to build a career, not a partial qualification that sets them up for a life struggling from one gig economy job to the next.

The pandemic has also once again exposed the high use of precarious labour in colleges and universities and the great vulnerability of that labour to economic shocks. Support staff were hit by layoffs and the hardest hit were the most vulnerable: part-time support staff. Their employment by the college dropped by half at the start of the fall term, compared to the previous year. The union is calling for all part-time support staff to be rehired by the colleges.

In the universities, as a result of the pandemic, work has disappeared for some precarious workers including food services, event staff and staff throughout various academic and administrative departments. For full-time workers, coping with heavy workloads remains an ongoing issue. Staff can feel overwhelmed, struggling to balance work with parental or elder care responsibilities during the pandemic. Some members are going on sick leave, while other members are taking leaves under the Emergency Infectious Disease Leave.

The lack of sufficient mental health services and counselling for students is another systemic failing exposed by the pandemic. There is a mental health crisis among our young people, and online learning can exacerbate feelings of isolation and anxiety. In a recent survey of Canadian students, more than a third agreed with the statement that they would have trouble reaching out for help if they felt isolated or anxious about their progress. Mental health was identified as one of the top barriers to learning by these students.

## Recommendations:

- Abandon performance-based funding
- Foster a “built-in-Ontario” college system with solutions that focus on more research, more manufacturing capacity, health and community services, and more workers trained quickly and effectively, under faculty supervision, graduating with a whole credential.
- Provide immediate funding to address the current crisis at Laurentian University, Nipissing University, and other public institutions in financial distress.
- Provide stable funding for all public colleges and universities to ensure the long-term sustainability of Ontario’s 45 public institutions.
- Invest in students by offering free or reduced tuition
- Invest in stable, full-time jobs in colleges and universities
- Utilize to the fullest extent the talents and skills of support staff and upper-level students to support student learning and the student experience at our colleges
- Uphold academic freedom and intellectual property rights
- Invest in counselling and mental health supports for students
- Invest in greater supports for Admissions, International Student Services and Student Advisement.
- Establish a class-size cap for online classes
- Only offer micro-credentials in situations where the micro-certifications add value to an existing whole credential.

## Conclusion

If we've learned anything during this pandemic, it's that we have to work together to survive. And after the pandemic, we'll have to work together to thrive.

Strong public services ensure that we work well together.

They are the "great equalizer," giving everybody the same access to safe and healthy communities, a good education, and a real chance to contribute and prosper.

Ontarians are yearning for stronger public services.

The pandemic has shown them how weak our public services have become and, in poll after poll, they are demanding better. They understand that big investments now will pay even bigger dividends in the future.

Working together, this government and the frontline public service heroes in OPSEU/SEFPO can help build a better future for all.

It's time for the Premier to bring together Ontario's best – from business and labour – and establish consultation and advisory tables to address our most pressing concerns and find long-term economic solutions as we move forward.

It's time for collaboration and consultation, because nobody has the market cornered on good ideas. It's time to put partisanship aside.

Establishing a Task Force on Women in the Workforce is an important step in addressing the unique barriers that women face due to the COVID crisis. Women will be a crucial part of our economic recovery, and we must ensure that the path to recovery and prosperity is inclusive.

OPSEU/SEFPO proudly represents upwards of 180,000 members – the majority of whom are women who are highly represented on the front lines of the public sector, and the COVID crisis.

We are uniquely positioned to advise and inform the government on these issues and we look forward to being part of the conversation.

Our members know how to make Ontario better. Budget Bill 269 marks an important step in the right direction. But Ontario is going to need more than short-term solutions to achieve prosperity. We need a bold vision and a big investment, so that our public sector – and our province – is strong in the long-term.



Authorized for distribution by:



Warren (Smokey) Thomas,  
President OPSEU/SEFPO



Eduardo (Eddy) Almeida,  
First Vice-President/Treasurer  
OPSEU/SEFPO



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