

Submission prepared by the CMA – Quebec office

Valuing Caregivers and Recognizing their Contribution to Quebec's Health System

*Bill 56, An Act to recognize and
support caregivers and to amend
various legislative provisions*

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Introduction

About the CMA

Founded in Quebec City in 1867, the Canadian Medical Association (CMA) unites the medical profession in Canada to improve the health of Canadians and strengthen the various health care systems. Speaking on behalf of the medical profession, the CMA stands for professionalism, integrity and compassion. The CMA and its Quebec office complement and collaborate with Quebec's existing medical bodies.

The CMA has in recent years identified the need to improve seniors' care and well-being as a priority. Optimizing the performance of our health care system is largely dependent on our ability to improve the care provided to our seniors. The CMA's work has included advocating for a coordinated national seniors health care strategy, advocating for a United Nations convention on the human rights of older persons and researching policies to support seniors and their caregivers.

The CMA has also proposed the following solutions and recommendations to federal authorities: that the federal government ensure that the provincial and territorial health care systems meet the care needs of their aging populations by means of a demographic top-up to the Canada Health Transfer, and that the federal government create a Seniors Care Benefit that would be an easier, fairer and more effective way to support caregivers and care receivers alike.

The CMA applauds the government of Quebec's commitment to "making known the contribution and commitment of caregivers and supporting them in their role." For a number of years, the CMA has been calling for greater recognition of the contribution that caregivers make to the health care system as partners in health care delivery.

By recognizing caregivers in its legislation, Quebec is leading the way as the second Canadian province, after Manitoba, to grant legal status to these essential people.

National policy on caregivers and home care

According to the CMA, it is vital that the government of Quebec consider the situation of caregivers, but it is also important to recognize the wider context in which this bill has been proposed. The CMA strongly suggests that a rethink of how long-term care is delivered in Quebec is needed. For example, the CMA believes that seniors care in residential and long-term care homes (CHSLDs) needs to be rethought. This is an area that needs reform, and the CMA looks forward to commenting on the draft bill that will be introduced by the government of Quebec on this matter in the fall.

To properly support our seniors, the CMA believes that significant changes are also needed in the delivery of home care and community care. According to a new study conducted by Campaign Research Inc. on behalf of Home Care Ontario, almost all seniors in Ontario (91%) wish to remain in their own homes for as long as possible.¹ The CMA believes that a similar percentage of Quebec seniors hold this view.

Denmark provides a good example of aging in place. It has implemented a number of progressive policies, such as increasing investment in community care to support seniors at home, ensuring at least one home visit for preventive care per year for all seniors aged 75 years and older, and freezing the construction of new long-term care homes (this policy has been in place for close to 20 years).

These types of changes require better support to improve home care services and new measures to support caregivers. A recent report by the Canadian Institute for Health Information indicates that 96% of long-term care recipients have an unpaid caregiver and that one-third of these caregivers are distressed. The report also notes that caregivers who are distressed spend an average of 38 hours a week providing care — the equivalent of a full-time job.²

Importance of caregivers in Quebec

In 2016, the demographic portrait of caregivers in Quebec indicated that 35% of Quebecers, or 2.2 million people, provided care to a senior. Of these, around 15% acted as caregivers for more than 10 hours a week. With the aging of the population — including the senior and caregiver population — set to accelerate in the coming years and decades, caregivers' unpaid working hours will increase significantly. In Canada, according to a 2011 University of Alberta study, close to 80% of all assistance to recipients of long-term care was provided by family caregivers. This represents a contribution of over five billion dollars' worth of unpaid services for the public health network.³

The pandemic has highlighted the importance of caregivers and of their contributions to the health system and the services provided to seniors. As many health care services were closed early in the pandemic, caregivers have been asked to work twice as hard and play an even bigger role, which has placed these individuals under even more stress than usual. The CMA believes there is no better time to acknowledge the contributions of caregivers. Now is the time to take action. We need to learn the lessons from the first wave of the pandemic and avoid the horrors of potential subsequent waves.

According to Statistics Canada, seniors in Quebec are more likely to live alone than seniors in other provinces. It is important to note that many caregivers do not live with the person they are caring for. In addition, many seniors who live alone do not have a caregiver.

The CMA's observations on Bill 56

Caregivers are the backbone of our health care system. They provide in-home care as well as care in hospitals, homes for seniors and CHSLDs. They deserve all the support we can give them. Unfortunately, the measures in place to support caregivers in Quebec and elsewhere in Canada are inadequate. Other countries have been doing a lot more and are way ahead of us on this issue.

The CMA supports the main objectives of Bill 56 and commends the government for recognizing the important contribution caregivers make in our society. The CMA supports the creation of a committee to monitor government action and a committee of partners concerned about caregiver support and also supports the creation of a Quebec observatory on informal caregiving.

Definition of caregivers

The pandemic has revealed a number of shortcomings in our health care system. One of these shortcomings is the lack of support and services for seniors during lockdowns of health care facilities, CHSLDs and senior centres. We must provide better support to seniors at these times. The Canadian Foundation for Healthcare Improvement (CFHI) and a consulting group have outlined a number of specific steps to guide the examination of policies, including reviewing policies on family presence as well as the participation of patients, family members and caregiver partners. The CFHI has also indicated that it is important to distinguish between family caregivers, who are essential partners in care, and visitors.⁴ The role of family caregivers should be officially recognized throughout the delivery of care. The CMA is pleased to note that this was the case with the recent action plan for the second wave of the pandemic.⁵

Better financial support for family caregivers

Seniors and their caregivers are an important and growing segment of the population. Family caregivers often provide funding for their family members' home and long-term care. These added expenses can also coincide with the caregiver's withdrawal from the workforce to provide care. Caregivers carry many responsibilities, including financial ones. It is estimated that private expenditures for seniors care will increase 150% faster than available household income between 2019 and 2035.⁶

Given their enormous contributions, caregivers need help in the form of financial support, education, peer support and respite care.

The CMA recommends:

1. Implementing a caregivers' allowance to deal with increased home care expenses (similar to the family allowance); a caregiver's allowance exists in Nova Scotia⁷ and the United Kingdom⁸
2. An increased tax credit for caregivers

More respite for caregivers

The CMA supports the desire of the Minister Responsible for Seniors and Informal Caregivers to “ensure that more seniors are able to stay at home.” Indeed, the vast majority of seniors remain at home (93.2%),⁹ even though many are dealing with reduced autonomy.

Caregivers are essential wellness supports for seniors. However, these caregivers are at risk of developing health problems such as stress, anxiety and exhaustion. They need a complete range of support services to prevent health problems. Even though the CMA applauds the refundable tax credit announced in Quebec’s 2020–2021 budget, we believe that the draft bill should include concrete measures to provide greater respite to caregivers.

The CMA recommends:

1. Increasing the tax credit for caregiver respite
2. Increasing resources for caregiver respite, such as respite and psychological support centres, and the rollout of respite homes for caregivers across the province
3. Increasing home support services for seniors and caregivers

Supporting caregivers through virtual care

New technologies such as telemedicine and telehealth offer quick access to health care while eliminating travel and related expenses. In February 2020, the CMA, the Royal College of Physicians and Surgeons of Canada and the College of Family Physicians of Canada created a framework for expanding virtual medical services in Canada, identifying the national standards, legislation and policy that must be put in place. As we have seen during the pandemic, telemedicine and telehealth can play an important role in improving seniors’ access to primary care.

Several recommendations have come from the report of the Virtual Care Task Force, including the following:

1. Maintaining the fee schedule for virtual care that was put in place for the COVID-19 pandemic
2. Simplifying the licensing system to allow the provision of virtual care throughout the country
3. Integrating virtual care into physician learning
4. Creating national standards for patients’ access to health information¹⁰

The CMA also recognizes the need to improve digital health literacy. Accordingly, we have asked the federal government to recognize and support the adoption of virtual care and address inequities in access to digital health services by creating a digital health care knowledge bank and accelerating the expansion of high-speed Internet services to the entire Canadian population.

Meeting caregivers' training needs

Another key support element for caregivers is the provision of accessible training.

Caregiver training must comprise a significant element of the government's action plan, particularly with respect to our capacity to respond more effectively to the second wave of the pandemic. The CMA is encouraged that the government's action plan recognizes the important role that caregivers play in supporting seniors and the fact that their safety must not be compromised: "Maintain secure access to CHSLD and RPA facilities for family and informal caregivers."¹¹

Conclusion

The CMA looks forward to developing solutions with government authorities and offers its full cooperation with respect to recommendations on the national policy, action plans and the situation of caregivers in Quebec.

One of the objectives of the CMA in Quebec is to disseminate knowledge, skills and best practices in senior care from other Canadian and international regions.

The CMA is ready and willing to work with governments, caregivers and health care providers to enable caregivers to prosper along with the people they care for.

¹ Home Care Ontario. New poll shows over 90% of Ontario seniors want to live at home as they age, and want government to invest to help them do it [news release]. 2020 Aug 7. Available: <https://www.newswire.ca/news-releases/new-poll-shows-over-90-of-ontario-seniors-want-to-live-at-home-as-they-age-and-want-government-to-invest-to-help-them-do-it-857341964.html>

² Canadian Institute for Health Information. 1 in 3 unpaid caregivers in Canada are distressed. 6 Aug 2020. Available: <https://www.cihi.ca/en/1-in-3-unpaid-caregivers-in-canada-are-distressed>

³ Fast J, Iero D, Duncan K, et al. *Employment consequences of family/friend caregiving in Canada*. Edmonton: Research on Aging, Policies and Practice, University of Alberta; 2011.

⁴ Canadian Foundation for Healthcare Improvement. Re-Integration of Family Caregivers as Essential Partners in Care in a Time of COVID-19. 8 Jul 2020. Available: <https://www.cfhi-fcass.ca/about/news-and-stories/news-detail/2020/07/08/re-integration-of-family-caregivers-as-essential-partners-in-care-in-a-time-of-covid-19>

⁵ Government of Quebec, 2020. COVID-19: action plan for a second wave. Available: <https://publications.msss.gouv.qc.ca/msss/fichiers/2020/20-210-257W.pdf>

⁶ Conference Board of Canada (2019). *Measures to better support seniors and their caregivers*. Ottawa: Conference Board of Canada; 2019. Available: <https://www.cma.ca/sites/default/files/pdf/health-advocacy/Measures-to-better-support-seniors-and-their-caregivers-e.pdf>

⁷ Government of Nova Scotia. Continuing care: caregiver benefit. Available: <https://novascotia.ca/dhw/ccs/caregiver-benefit.asp>

⁸ Carers UK. What is Carer's Allowance? Available: <https://www.carersuk.org/help-and-advice/financial-support/help-with-benefits/carers-allowance>

⁹ Statistics Canada. 2016 census. Ottawa: Statistics Canada.

¹⁰ Virtual Care Task Force. *Virtual care: recommendations for scaling up virtual medical services*. Ottawa: Canadian Medical Association, College of Family Physicians of Canada and Royal College of Physicians and Surgeons of Canada; 2020 Feb. Available: <https://www.cma.ca/sites/default/files/pdf/virtual-care/ReportoftheVirtualCareTaskForce.pdf>

¹¹ Government of Quebec. COVID-19: action plan for a second wave. 2020. Available: <https://publications.msss.gouv.qc.ca/msss/fichiers/2020/20-210-254W-A.pdf>