May 25 2023

Mr. Randeep Sarai, M.P.
Chair, Standing Committee on Justice and Human Rights
House of Commons
Ottawa, Ontario, K1A 0H8

Re: Canadian Medical Association feedback on Bill C-295, An Act to amend the Criminal Code (neglect of vulnerable adults)

Dear Chair and Honourable Committee Members,

The Canadian Medical Association (CMA) is pleased to provide feedback to Bill C-295, An Act to amend the Criminal Code (neglect of vulnerable adults). This draft bill would amend the Criminal Code to create an offence for long-term care facilities, their owners and their managers that fail to provide the necessaries of life to residents of the facilities.

As we all witnessed during the first years of the COVID-19 pandemic, many elderly persons living in residential care facilities suffered from a lack of basic care that made international headlines. Chronic underfunding resulted in the inability to provide high-quality care. The CMA agrees with the Honourable Dr. Hedy Fry that we need to ensure this never happens again. As such, the intent of this bill is recognized.

However, this bill will be unable to achieve its intended impacts without a comprehensive approach to supporting older adults that includes:

- federal, provincial and territorial funding investments to improve access to integrated care for older adults both in terms of community supports (e.g., home care) and in residential settings;
- supporting the full implementation of the recently established national standards for long-term care;
- supporting integrated health human resources planning to ensure the development and deployment of front-line workers, as well as ongoing training;
- launching awareness programs to bring elder abuse to the attention of the public, as well as programs to intervene with seniors who are abused, and with their abusers (e.g., establishing a comprehensive definition of elder abuse);
- reducing ageism by promoting an age-friendly society that respects the experience, knowledge and capabilities of its older members and accords them the same worth and dignity as it does other citizens;
- providing financial supports and respite care to support caregivers who are often the backbone of our care system; and
- implementing patient harm reporting processes for front-line workers that mitigate the risk of retaliation by workplaces for those who report.
May 25, 2023

It is our view that this bill, as currently drafted, will have secondary effects that may worsen front-line working conditions, including unintentionally hindering efforts to both recruit and retain staff out of fear that this amendment will apply to them as they work in understaffed workplaces and suppressing the reporting of the abuse this bill seeks to eliminate for fear of workplace retaliation.

While the disincentives in this bill can be impactful, without consistent standards linked to enabling resources there is a high likelihood front-line providers will be put in an even more precarious position than they are in currently.

The CMA agrees that this must be a priority issue. As Canadians continue to live longer, the number of people living with complex social and medical needs and, subsequently, in need of community and residential supports will also increase. In 2021, the federal government committed $9 billion to the long-term care sector. We need to ensure these commitments result in improved quality of care in long-term care, including increased accountability across Canada.

The CMA would be pleased to participate in a robust engagement strategy to address the recommendations outlined in this brief to both achieve the bill’s intent and protect front-line workers.

Sincerely,

Arika Lafontaine, BSc, MD, FRCPC
President, Canadian Medical Association

cc:
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