

**Standing Committee on National Defense  
Impacts of the COVID-19 Pandemic on Canadian Armed Forces Operations**

**Presentation by: Michelle van Beusekom  
Co-Founder: Protect People in Long Term Care**

**November 27, 2020**

Speaking Notes:

Thank you Mister Chair and Committee members for the invitation to speak with you today.

I am a co-founder of *Protect People in Long Term Care*, an ad hoc citizens group formed in early April in an effort to propel our political leaders to take decisive action and avert the looming catastrophe in Long Term Care. On April 7, we launched a petition asking for emergency funding, a national coordinated strategy to address the unfolding crisis and the implementation of shared standards. To date our petition has garnered over 98,000 signatures from every province and territory in Canada.

I'm also speaking to you today as someone with a unique lived experience and perspective - both of my parents live in Grace Manor, one of the five Long Term Care facilities in Ontario that received military assistance in May.

I'd like to underscore that many of us with loved ones in LTC saw this tragedy coming. The systemic gaps and failures in Canada's long-term care system are something we are intimately familiar with. We saw what happened in Spain and Italy in February and we knew what was coming our way. Chronic understaffing is endemic in this sector and when families and volunteers were locked out on March 13 in many parts of the country, we knew that staff who were already overstretched would quickly become overwhelmed.

We couldn't understand why LTC staff members were having to fight to get access to PPE. And we watched in anguish and horror as outbreak after outbreak was announced - yet LTCs in many jurisdictions were not being prioritized by their public health authorities for testing to ensure the rapid assessment and cohorting of residents.

My parents LTC in Brampton Ontario reported their first case of COVID on April 7. Each day the numbers rose, but they had to wait an agonizing 8 days after that first positive case until their public health authority - following Ontario Ministry of Health directives for testing - would finally give them access to testing for all residents.

And by then it was far too late. In their LTC with a population of 120 residents and 36 staff, there were 65 resident cases including both of my parents and 21 staff cases which ultimately resulted in 12 deaths including 2 staff.

With staff levels so depleted, the remaining staff were working up to 16 hours a day. Administrative staff with the requisite training left their offices and were working on the floor providing resident care. One amazing nurse I know started sleeping in a separate apartment on site to be closer to work. The doctor donned his PPE and started organizing and running the zoom calls for families with COVID positive residents.

The Senior administration at Holland Christian Homes, the not-for-profit which runs Grace Manor, reached out to the province of Ontario, and the local health authority for help. They hoped to partner with the two local hospitals in Brampton and to receive redeployed medical staff from those hospitals.

When that didn't happen, they asked – as a last resort in an increasingly desperate situation - to be considered for military assistance. On April 24, the Ontario Government formally made the request for military assistance on behalf of five homes.

For Grace Manor, that military assistance was vital. Half of their staff was gone. The military presence gave them the breathing room to bring in and train new staff and ensure proper infection control protocols were firmly in place.

Military personnel also provided much needed human contact for residents – many of them frail, vulnerable and confused - who by this point had been completely cut off from any in-person visits with their families for over a month.

My father so appreciated his conversations with young military personnel from places like Nova Scotia and Petawawa. He also marveled at their cleaning prowess. They clean really well, he told me, they even disinfect my garbage pail every morning.

I am so thankful the military were able to come to Grace Manor. It allowed them to get new staff trained and in place. And it allowed the core staff – those who hold those vital relationships with residents which is essential for quality care in a Long Term Care setting - to get back to a slightly more normal rhythm.

But why did this happen in the first place? Why was military assistance needed? How did it get so bad?

It got this way after a full 30+ years of political leaders ignoring report after report that flagged a host of critical systemic issues: underfunding, chronic understaffing; poor labour practices; the lack of shared standards of care and training standards; deregulation; privatization; and absence of accountability. Family and volunteers

were the glue that kind of held things together before March. COVID, in that fragile context, and the loss of family/volunteer support, collapsed the system. It's a tragedy that should not have happened and a catastrophic failure of our most vulnerable.

And here we are now – in a second wave. Over 12,000 people in Canada have lost their lives to COVID-19. In the first wave, 80% of all deaths were people living in Long Term Care - the worst record in all OECD countries. Today, hundreds of Long Term Care facilities across Canada are once again in outbreak. And despite the devastating loss of life during the first wave, the same struggles with access to testing and rapid cohorting that we saw in the first wave continue.

Kat Cizek is one of my cofounders at Protect People In Long Term Care. She is seeing this nightmare unfold with her own father at Lakeside Long Term Care Centre in Toronto in outbreak where Covid positive residents have been left on the same floor as those who have not contracted the virus. Another co-founder Kitra Cahana, is watching as staff and resident infections skyrocket at the Maimonides facility in Montreal where her father lives. Despite this alarming outbreak, the public health authority is not making testing mandatory for staff and visitors.

I don't have words to describe how excruciating it is to watch this happen - again. Despite all we knew before about the failings in long term care, all we learned during the first wave, the release of new studies, the surfacing of old ones, the swift release of policy recommendations by organizations like the Canadian Society for Policy Alternatives and the Royal Society of Canada and growing public discussion and awareness of key problems already understood by those of us with loved ones living or working in the sector (chronic understaffing, poor labour practices, an absence of shared standards of care, outdated infrastructure, deregulation and lack of accountability) little has been done to address the root problems that have caused this crisis and taken so many of our loved ones from us.

As I've mentioned, the problems have been exceptionally well documented. In Ontario alone, 35 reports were conducted between 1999 to 2020 – reports that consistently called for immediate attention to staffing ratios, staff mix, professional practice and funding support to ensure quality care. To quote Doris Grinspun, the CEO of the Registered Nurses Association of Ontario: " It is disheartening, exhausting and expensive to continue to study problems that are known and understood and where the missing factor is the political will to act decisively rather than, once again, kick the can down the road with more commissions and more reports. Enough of over-studying and under-acting in this sector – we know and the government knows what needs to be done to improve and save the lives of LTC residents."

In the Throne Speech on September 23, the Federal Government made a commitment to National Standards for Long Term Care – yet almost 10 weeks later, details and a timeline have not been shared.

We should not be relying on the military for last-resort crisis management in a sector where the problems and the solutions are this well known. That is not a good use of military resources and military training. And I'm sure it has compromised military operations and budgets in many ways – to come to the aid of a sector where private operators have continued to reap handsome profits for their shareholders throughout this crisis.

We have begun to see reports of how Operation Laser has impacted the mental health of military personnel who were thrown into an acute crisis situation for which they don't have the requisite training. Military medical staff are not Long Term Care specialists. Caring for high-needs elderly, over 80% of whom suffer from some form of dementia, is a highly skilled activity – even if our society does not recognize it as such. Military personnel were thrown with very little training into an environment they didn't necessarily understand that was experiencing catastrophic failure. They like LTC staff, residents and their families will carry this trauma for the rest of their lives.

It is so disheartening to see the jurisdictional bickering and doubling-down that is blocking the groundswell of grassroots support right across this country for national standards. As I mentioned, our little petition started by four anguished citizens with full time jobs and many other responsibilities has garnered over 98,000 signatures.

With the number of cases in LTC on the rise again and dozens of homes in outbreak across the country, it is imperative that all levels of government come together to fix this broken system and that a timeline and action plan are put into place.

The studies have been conducted, the solutions have been documented and the policy recommendations have been prioritized and mapped out by dedicated professionals who have been fighting for decades to ensure dignified lives for our most vulnerable older adults.

What has been missing to date is the political will to do the right thing.

I am so thankful that the military were there for my parents and for Grace Manor. And I never want to see that happen again. This sector needs to be properly supported. The long-standing problems need to be addressed. And we need concrete action on those national standards.

Speaking on behalf of the 98,000 who signed our petition, I hope we can count on you to help make that happen.

Thank you.

Michelle van Beusekom

## Protect People in Long Term Care – Our Petition and Updates

Updates include an overview of media coverage

<https://www.change.org/p/petition-for-emergency-funds-for-c-19-crisis-in-long-term-care>

**CHANGE.ORG/LONGTERMCARE**

### OUR SIGNATORIES

From St. John's in the east, to Dawson City in the west. From Grise Fiord in the north, to Leamington in the south, we come from all across Canada.

Paul Uvilluk, Grise Fiord NUNAVUT

Brenda Schiuma, Dawson City YUKON

"If Loblaw's and Sobeys can increase their staff's wage due to risk then why not PSW's?"  
Teresa McDonell, Amherst NOVA SCOTIA

Deantha Edmunds-Ramsay, St. John's NEWFOUNDLAND

"My mother is in care in Coquitlam, BC and I miss her and want to see her so badly my heart aches."  
Joanne O'Neill, Coquitlam, BRITISH COLUMBIA

"The majority of residents in LTC facilities are veterans. They fought to build our country. It's time we fight for them."  
Cathy Kirkpatrick, Calgary, ALBERTA

David Hildebrand, Leamington ONTARIO

"My father died of covid in a CHSLD Saturday and my mother is struggling to be properly cared for in another CHSLD where there are 12 active cases"  
Peter Wheeland, Montreal QUEBEC

"Ce sont nos très chers, nos batisseurs"  
Marie-Claude Bellemare, Laurentides QUEBEC

"My sister works in a long term care facility and has a young family at home. Her centre is being given 1 gown and 2 masks for her entire shift. And I constantly worry about her safety."  
Alexis Boucha, Kewatin ONTARIO

**founding committee:** Kilra Cahana, Katerina Cizek, Helene Klodawsky, Michelle van Beusekom. **media contact:** longtermcarecrisis@gmail.com

### Select References:

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Research by Nora Loretto

[https://docs.google.com/spreadsheets/d/1M\\_RzoiK0vwF9nAozI7aoyLpPU8EA1JEqO6rq0g1iebU/edit#gid=0](https://docs.google.com/spreadsheets/d/1M_RzoiK0vwF9nAozI7aoyLpPU8EA1JEqO6rq0g1iebU/edit#gid=0)

#### On Long Term Care Staff being denied access to PPE:

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[40 dead from COVID-19 in Ontario nursing and retirement homes.](#) CBC News. April 1, 2020

[Quebec has abandoned frontline healthcare workers.](#) CULT-MTL. April 21, 2020

[Staff had to stop showing up at D.D.O. CHSLD, but are praised by residents' families.](#) Montreal Gazette. April 22, 2020.

**On the rise of for-profit homes:**

[Covid-19 Exposes gaps in for profit long term care.](#) Pulpit and Politics April 16, 2020

[Top for profit care homes could pay out up to 59 million to shareholders this quarter.](#) Press Progress. July 7, 2020

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**Second Wave and Urgent Need for National Standards**

[Spread of Covid-19 spiraling at Maimonides Geriatric Centre.](#) Montreal Gazette. November 24, 2020

[Décanadiser, dites-vous?](#) Le Devoir. November 25, 2020

[Covid-19: Think-tank calls for national oversight of long term care.](#) Vancouver Sun. November 23, 2020

**Select Studies and Repots:**

[A Higher Standard: Setting Federal Standards in Long Term Care and Continuing Care.](#) Canadian Centre for Policy Alternatives. November 23, 2020

[Restoring Trust: COVID-19 and the Future of Long Term Care.](#) Royal Society of Canada. July 2, 2020.

[Honouring the voices and experiences of Long Term Care Home residents, caregivers and staff during the first wave of COVID-19 in Ontario.](#) Patient Ombudsman. October 2020.

[Finding the Right Balance: An Evidence-Informed Guidance Document to Support the Re-Opening of Canadian Long-Term Care Homes to Family Caregivers and Visitors during the COVID-19 Pandemic.](#) National Institute on Aging. July 19, 2020.

[Reimagining Care for Older Adults: Next Steps in COVID-19 Response in Long-Term Care and Retirement Homes.](#) Canadian Foundation for Healthcare Improvement. July 20, 2020.

[Better Together: Re-integration of Family Caregivers as Essential Partners in Care.](#) Canadian Foundation for Healthcare Improvement. July 2020.

[Long-Term Care Staffing Study.](#) Long Term Care Staffing Study Advisory Group. Ontario Ministry of Long Term Care. July 30, 2020

[.Nursing Home Basic Care Guarantee.](#) RNAO Submission to the Long-Term Care Staffing Study Advisory Group. June 10, 2020.