

Mission and Discipleship Commission
Western Ontario Waterways Regional Council
OF THE UNITED CHURCH OF CANADA
Connecting, Supporting, Transforming

Thursday, May 28, 2020
2pm via Zoom

Roster: Deanne Dickson (Chair) Rosemary Benbow Mary Jeanne Carmichael
Bruce Dickson, Rodger Filsinger, Lyle Haney Mary Hawthorne Patrick McDonough
Joyce Osborne, Keith Reynolds

Staff Support: Diane Matheson-Jimenez (Minister, Social Justice)

Kathy Douglas (Minister, Faith Formation)

Dave Jagger (Stewardship and Gifts Officer)

Ruthanna Mack (Admin Support)

Present: Deanne Dickson (Chair), Mary Hawthorne, Bruce Dickson, Rodger Filsinger, Joyce Osborne, Pat McDonough, Rosemary Benbow, Keith Reynolds, Diane Matheson-Jimenez, Kathy Douglas, Dave Jagger, Ruthanna Mack

Regrets: Lyle Haney

Absent:

Welcome and Constitute Meeting: Deanne welcomed the group and opened the meeting

Acknowledging the Land: Deanne offered acknowledgement of the land

Opening Worship: Deanne opened with a story "The Great Realization" (the Virus Story)

Opening Motions:

Approval of Agenda:

MOTION by Pat McDonough that the agenda be accepted as circulated.

Passed by consensus

Approval of Previous Minutes:

That the Mission and Discipleship Commission of Western Ontario Waterways Regional Council approve the minutes of 05-07-2020 as circulated.

Approved by consensus

Business Arising

1. Mission Support letters: Deanne indicated that we have now had a response from all of the organizations who received Mission Support Grants for 2020. The next step is to arrange meetings. Commission members to follow up with their assigned agencies.
2. WOW M&D Rep needed for SJNOR (Social Justice Network Ontario Regions). Kathy said she would get Jenn Hind's contact info (she is a member of the WOW M&D resource pool) and pass that on to Deanne
3. MOTION: by Mary Hawthorn/Rodger Filsinger that the Western Ontario Waterways Mission and Discipleship Commission grant \$3000.00 to the Chalmers Community Services Centre as a one-time grant. Funds to come from the surplus Mission Support Grant monies for 2020.
MOTION CARRIED
Diane to get banking information for Ruthanna

New Business

1. Staff Reports:
 - Kathy Douglas:
 - ◆ The draft note about Expressions of Interest went to the WOW Executive. Kathy to double check with Sue Duliban about the response from the Executive. Kathy then to follow up getting it into the Newsletter.
 - ◆ Camps: not opening this summer due to COVID-19. They are still actively looking to provide online content for their campers
 - ◆ Webinars: Kathy has been providing a series of online webinars around children's ministry topics. They have been well received
 - ◆ UCW: Kathy is working on a covenant with the UCW to facilitate them becoming a Community of Faith. Kathy then deferred to Joyce Osborne for further update

Diane Matheson-Jimenez

Last week when we met, I mentioned 2 opportunities to engage in justice issues. Please find below more information on both of those initiatives:

1. Universal Basic Income. UCC Moderator, Richard Bott, has written to the federal government in support of a Universal Basic Income program. This link will lead you to both the letter Moderator Bott sent and some really practical things your Community of Faith can do if this is an issue you feel passionately about.

<https://www.united-church.ca/social-action/act-now/create-universal-basic-income-program>

Please circulate widely!

2. Provincial inquiry into COVID-19 response and subsequent outbreaks in long term care facilities. The provincial government announced, rather quietly, that it planned to strike a commission (a commission allows testimony in private, a narrow focus, and even stacking of the commission with parties who have a vested interest) to look at its response to COVID-19 and the crisis in long term care facilities. The opposition parties, and the Ontario Health Coalition asked that this be a full public inquiry (which allows for public testimony and documentation that can set precedent for future crisis response). The request was denied and the province intends to proceed with a commission.

The Ontario Health Coalition asks 2 things of those who are as concerned as they are

A. They are looking for organizations (cultural, religious, social, etc) to sign on to their letter below.

They ask that interested parties forward to them (ohc@sympatico.ca) clear approval (i.e. a motion from a governing, or similar, body), the full name of the organization, and a logo if one exists.

B. They are looking for individuals who will use the letter to send correspondence directly to Premier Ford, copying the Ontario Health Coalition. (I would also suggest copying the MPP serving the region you live in)

“We are inviting organizations to sign onto the following open letter. We are on a tight timeline and would appreciate hearing back from organizations with your approval to be added as soon as possible. Please email us at ohc@sympatico.ca with your clear approval and the full name of your organization. For individuals who are not organizations, please use this letter to write your own correspondence to Premier Doug Ford at premier@ontario.ca and please cc us in.”

Dear Premier Ford,

While we are pleased that your government has committed to independence, non-partisanship and transparency with regards to the commission into long-term care and COVID-19, we are seeking some assurances regarding both this commission and the immediate measures needed that cannot wait for a commission. In addition, we believe that it is imperative that Ontario hold a full public commission or inquiry into the province’s overall response to COVID-19, like the SARS Commission, as there are many lessons to be learned from this experience beyond the long-term care sector.

To be clear, the Ontario Health Coalition called for the commission into long-term care to be under the Public Inquiry Act. You have voted against this in the Legislature. Failing that, Premier, we must state in the clearest possible terms that it will be unacceptable to the public if the commissioner(s) and any supporting staff are not fully independent of long-term care operators. Any long-term care commission must have unimpeachable credibility and operate in the public interest. This means it cannot be led or controlled by any partisan (political party) interests or by long-term care owners

and operators. It must be transparent and open, not by invitation only. Access to the Commission must be equitable and it must allow for voices from families, residents, staff and their associations and unions, public interest groups and advocates who have worked closely on these issues. Care workers and professionals must be protected to speak on the record about conditions in the homes. Testimony and research must be on the record and fully available publicly as with formal commissions and inquiries in the past, and the commission must report as quickly as possible.

Further, this commission cannot delay immediate action being taken to stabilize and support the workforce to stop the COVID-19 outbreaks that continue to spread in long-term care homes across significant parts of Ontario. We need a coherent plan from your government to stop the spread of COVID-19 in long-term care and retirement homes, including concrete measures to improve PPE supply, workplace safety and infection control, and to stabilize the workforce. We urgently need your government to take leadership and concrete coordination measures to immediately address critical staffing shortages that mean even basic daily care like feeding, bathing, hygiene, human contact are not able to be done; that palliative care needs are not being met; that care for the gravely ill is less than what is needed, as follows:

- Understaffing in long-term care is critical and must be addressed. The provincial government cannot rely on long-term care homes in crisis to get themselves out of crisis. There must be a coherent plan, led by our government, to step in with a set of coordinated, concrete measures to get staff into the homes that have lost staffing levels due to sickness, having to choose one part-time job, staff leaving etc. Leaving it to the providers to forge voluntary arrangements among themselves is not sufficient. Staff need a permanent improvement to their wages and access to full-time hours. This cannot be voluntary and there is no path to stability without the provincial government undertaking these measures. In addition to the permanent improvements to wages and access to full-time work, measures are needed while homes' operations remain under the emergency directives. Many staff have lost significant hours of work (and thus income) as a result of the requirement to choose one work site. They are risking their health and their families to go into the homes to do care work and the loss of hours is not offset by the pandemic pay increase. Yet some homes are bringing in PSW aides, nurses and others without giving their part-time staff any increase in hours. To address this, long-term care homes must be required to increase their pay for part-timers who have been required to give up part-time work in other homes to be equivalent to full-time pay and benefits, so as not to maintain the operator's economic incentive to limit the proportion of care delivered by full time staff. Further, the Minister of Long-Term Care must use her powers to revoke licences and appoint new management in long-term care homes that have uncontrolled outbreaks and evidence of negligence and poor practices.
- Infection control practices, workplace safety and access to PPE must be improved. Reusing surgical masks patient after patient, resident after resident, would have been totally unacceptable before COVID-19. Insufficient access to N95 masks continues to be a problem and there are shortages of other equipment. There needs to be a clear plan from the government to improve the supply of PPE or develop our own. Leaving it to industry to do voluntarily has so far been insufficient. Standards for infection control and workplace safety must be improved. Staff need the appropriate equipment, enough supply and training in order to comply with them. Staff who are infected must be supported to isolate at home. The directive allowing health care facilities to require staff to work who have tested positive for COVID-19 but are asymptomatic is dangerous and should be changed as should the loopholes that fail to stop agency staff from working at more than one location. Ongoing training and support for infection control regarding the use of PPE are needed. Testing of all residents and staff must be ongoing in long-term care homes, and completed

in retirement homes and congregate care facilities (and shelters). Testing, tracking and isolating people who test positive is shown to have stopped the spread of COVID-19 in other countries. It must happen here. Access to PPE using the precautionary principle must be implemented in long-term care, hospitals, home care and across the health care system as soon as possible.

- Testing, contact tracing and isolation must be improved using our province's full public capacity. Public hospital laboratories that are not currently doing COVID-19 testing and have unused capacity should be ramping up testing. We need a clear honest plan from the provincial government that assesses our full capacity to test (including all the public hospitals, not just those that are currently testing) and immediately ramp up to our province's real full capacity the testing, tracking and isolating to stop the spread of COVID-19. There must be a coherent plan and immediate action to get the supply or develop it for testing kits, swabs and reagents, and transparency about what is happening with this.
- Transfers to hospitals. Where there are long-term care homes in crisis without sufficient staff to provide proper palliative and end-of-life care, as well as being unable to address the general care requirements of the residents, residents should be considered for transfer to public hospitals, which are not in crisis, for safe and proper care, subject to their right to consent.
- Bring in family caregivers and volunteer nurses as soon as possible: As soon as testing/contract tracing capacity and PPE supply are stabilized enough to do so, and as soon as training in infection control can be properly conducted, primary family caregivers need to be able to be involved as partners in their families' care. The pool of nurses that the RNAO has recruited to help should be utilized if they have not already been.
- Institute a minimum care standard in long-term care: There has been deep consensus for decades that the rising acuity (complexity and severity of the care needs) of long-term care residents requires more care. This cannot be left to operators to do on their own, and resources -- both financial and human -- need to be provided to support this. There cannot be further delay in beginning to move to a 4-hour average minimum care level for residents in long-term care to protect their safety and the safety of staff.

Premier, we are also deeply concerned about our research finding that the death rates in for-profit homes are significantly higher than in non-profit homes. It is imperative that your government halt any expansion of for-profit long-term care.

We will follow up with your office regarding these issues and look forward to your response.

Cordially,

Ontario Health Coalition

The following organizations have signed onto this letter in support: (to be inserted)

If either of these topics are of interest to folks in your network, please direct them to me so I can provide further resources and support.

- Joyce Osborne: UCW

◆ The UCW is working on their Community of Faith Profile

- ◆ GC Executive are considering postponing GC44 which is scheduled for July 2021 to 2022. The facilities are already booked and plans begun for the 60th Anniversary of UCW in July 2022 in Cape Breton. It is the hope of the UCW that GC be planned for August so as not to conflict with the UCW celebration.

- Intercultural and Indigenous Ministries

- ◆ Conversations are ongoing with C-A regarding a replacement staff member for this position

- Dave Jagger: Dave offered a link for Stewardship info now available for congregations:

<https://www.united-church.ca/community-faith/being-community/stewardship-finances-and-covid-19>

Dave also relayed the news regarding the Philanthropy Unit's David Armour being laid off last week and noted further changes will be coming. Sarah Charters is the current Acting Executive Minister for the Philanthropy Unit.

2. Executive Update: Deanne:

- ◆ Fall Meeting: A face to face meeting is unlikely for the fall meeting. There will be a series of zoom meetings from October 13-18th in the 6-9pm time frame
- ◆ Next Executive meeting for information only is June 3 9:30-11:30am. Bruce has volunteered to attend this meeting on behalf of the Commission. He will contact Sue Duliban to get the link for this meeting
- ◆ June 17 is the next regular WOW Executive meeting.
- ◆ New Ministries Service for Ordinations will be live streamed

3. Financials: The Commission has a total of \$14,000 to spend on events and community ministry. See above for Motion regarding the contribution of \$3000.00 to Chalmers Community Services Centre. Balance of funds available is \$11,000.00.

4. Discussion regarding the balance of funds: Keith relayed that Camp Bimini deficit is \$80,000.00. Dave suggested a sort of funds matching idea where the commission could match funds raised by the Camps – that way the Camps have some participation in the fund raising. Kathy will ask the three WOW camps for a summary of their financials and their current fund raising plans. This item to be further discussed at our next meeting.

May 28, 2020

CC 20-17

It was noted that this would be Deanne and Rosemary's last meeting. Thanks were offered for their service to the Commission.

Deanne closed the meeting with a final thought

Next Meeting: 06-25-2020 2pm via zoom

Worship by:?

MOTION by Name / Name that the Mission and Discipleship Commission of Western Ontario Waterways Regional Council

MOTION

Choose an item.