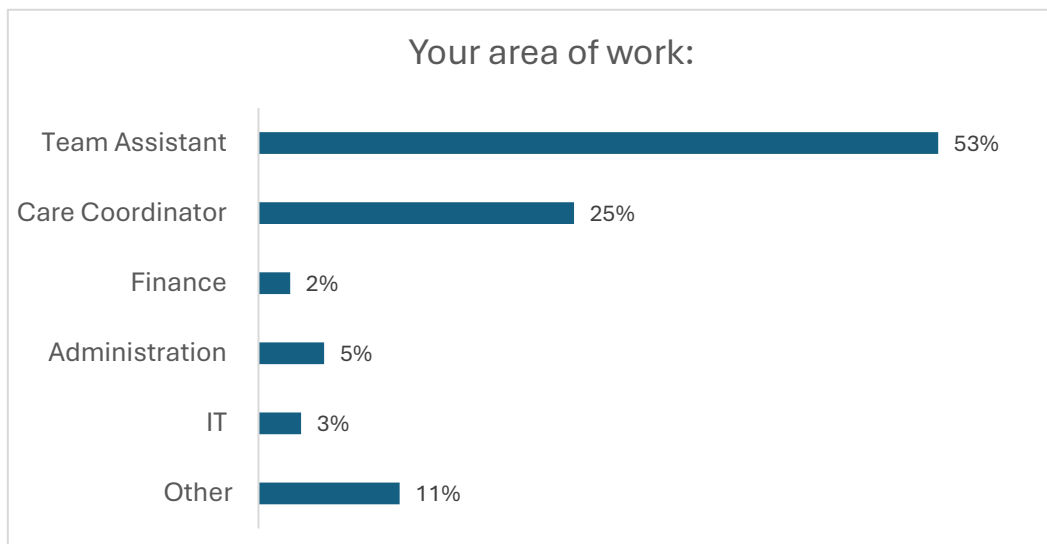


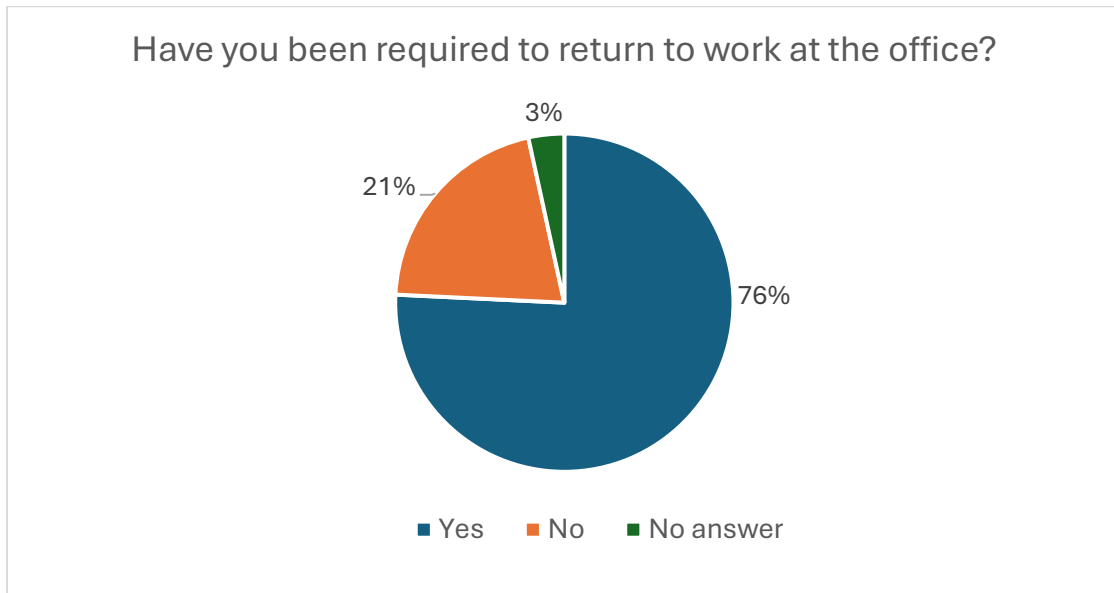
CUPE Survey of Ontario Health atHome members

Participation by CUPE members in the survey was strong, with a good response from all eight bargaining units. Overall, 1052 respondents completed the survey, and people took the time to write in thousands of comments. Respondents report very significant frustration with the ongoing restructuring and the uncertainty it creates. Workplace stress, overwork, and a lack of clear management communication were frequent themes. A recurring theme among some long serving members was that they have never seen things this bad at OH atHome and its predecessors.

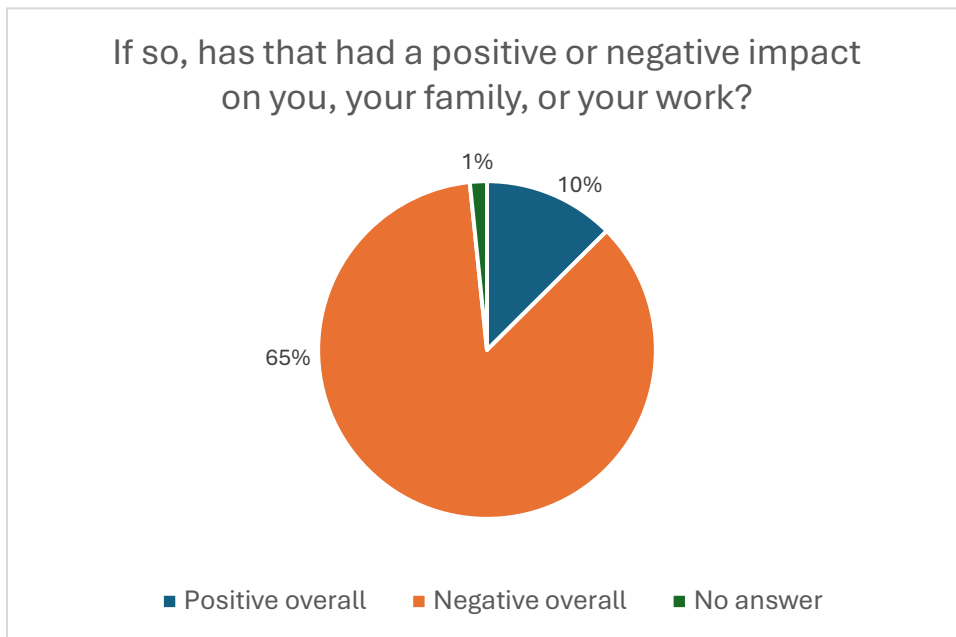
- Over one-half of respondents were Team Assistants and almost one-quarter were Care Coordinators. Other small, but significant occupational groups were in Finance (2.5%), Administration (5.1%) and IT (3.3%). Just over 11% reported other occupations.



- **Return to Office:** $\frac{3}{4}$ of respondents have been required to return to the office, while 21% say they have not (yet) been required to return.



- A very large majority of those who have been required to return say this has had a negative impact on them or their families: 684 say this is negative overall (86%), 100 say the return is positive overall (12.5%), and 13 provide no answer. In other words, a large majority felt the return to office was a negative change.

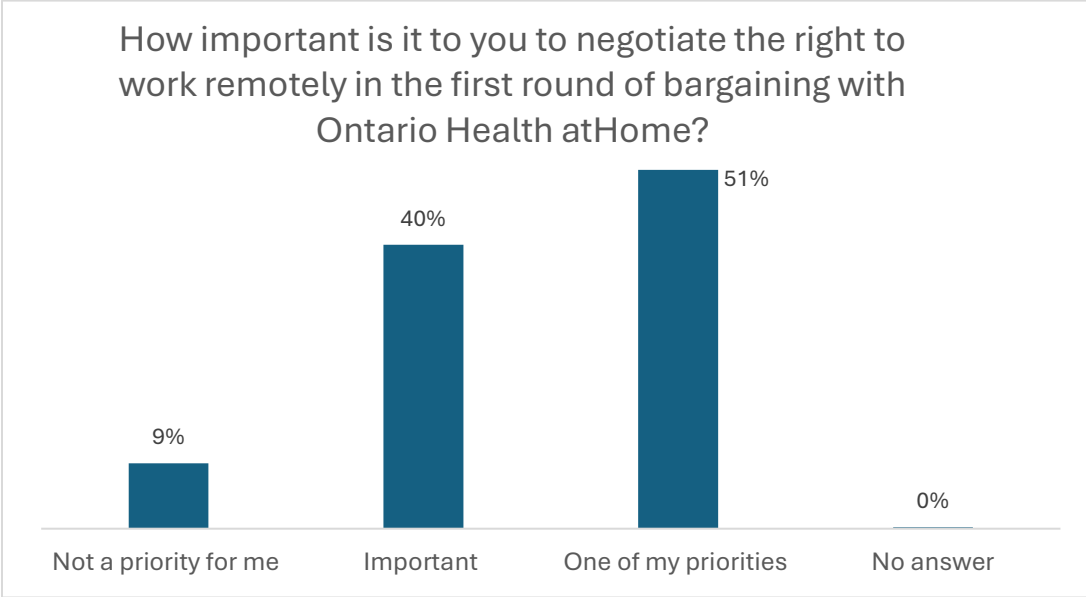


Of the 797 who have been required to return to the office, 675 fully wrote to explain their answer, often with passion and frustration. A number of people cite the extra costs and time of commuting, childcare/elder care issues, the interruptions and inefficiencies associated with working from the office, fear of COVID and flu, the need for less sick leave when working at home, parking problems, problems with equipment/IT/desks at the office, increased anxiety or other mental health impacts, lack of public transit, and the negative impact of a return to the office on chronic illnesses. A few liked the change. One feared fighting back might cause the employer to require five days a week in the office.

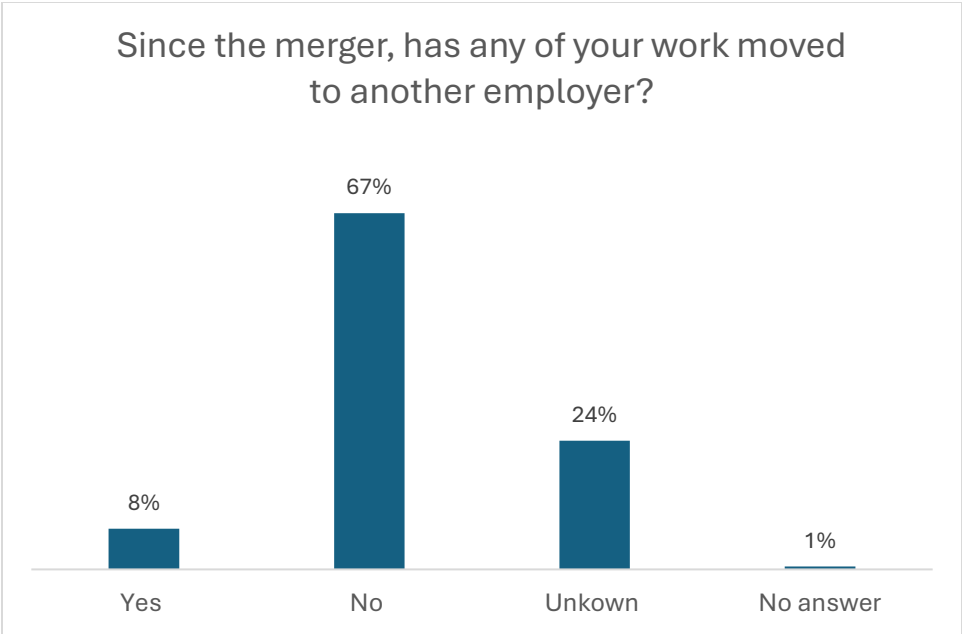
Notable comments include:

- More interruptions at the office. Travel to and from work. Parking issues and no options for public parking near the building.
- I now have to pay for childcare and cannot arrange this since I don't know what days I'll be in the office. I also will have to figure out transportation as we only have 1 vehicle and my husband also works overlapping shifts with me.
- My child who has had me home if she needs me will now be solo before and after school.
- There is no administrative reason for us to commute to a hotel desk in order to video conference our team. We can't even work from home when sick. We can't personalize our space. How is this decision respecting us? How does this decision improve work life balance? It doesn't.
- Anxiety has increased, I like to keep to myself and work with little to no distraction. Anxiety over health care and being exposed to more possible illness
- I don't drive and there is no buses after 6 pm.
- Did not give us fixed days. They change every week, which makes it very difficult to plan with family like sharing the car and looking after the family. Did not have a choice to pick days in the office.
- I am a single mother with a child with special needs who requires supervision and cannot be left alone. The cost of paying for help so I can work is extremely stressful and has negatively impacted my mental health significantly.
- No complaints. It is what it is.
- This has caused extreme anxiety within my life. As a single mom I barely make enough to cover my bills and what I need due to cost of living. The lack of planning, communication or flexibility has left me worried about my ability to fulfill my family responsibilities.
- In IT we have spent countless hours preparing for staff to return. Then they change the plans and we have spend more time to comply to the latest standards and changes.

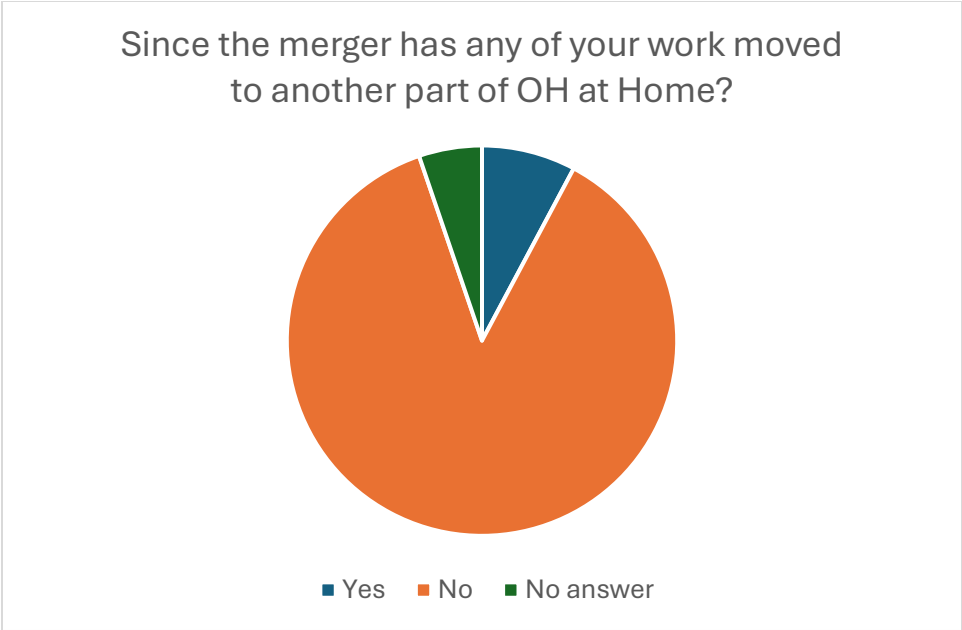
Negotiate the right to work remotely: A large majority see this as an important issue or as one of their priorities. Just 9% said it was not a priority for them.



Has work moved? Only 8% (81 respondents) say that since the merger their work has been moved to another employer. A further 24% said they do not know and 67% said their work has not been moved.



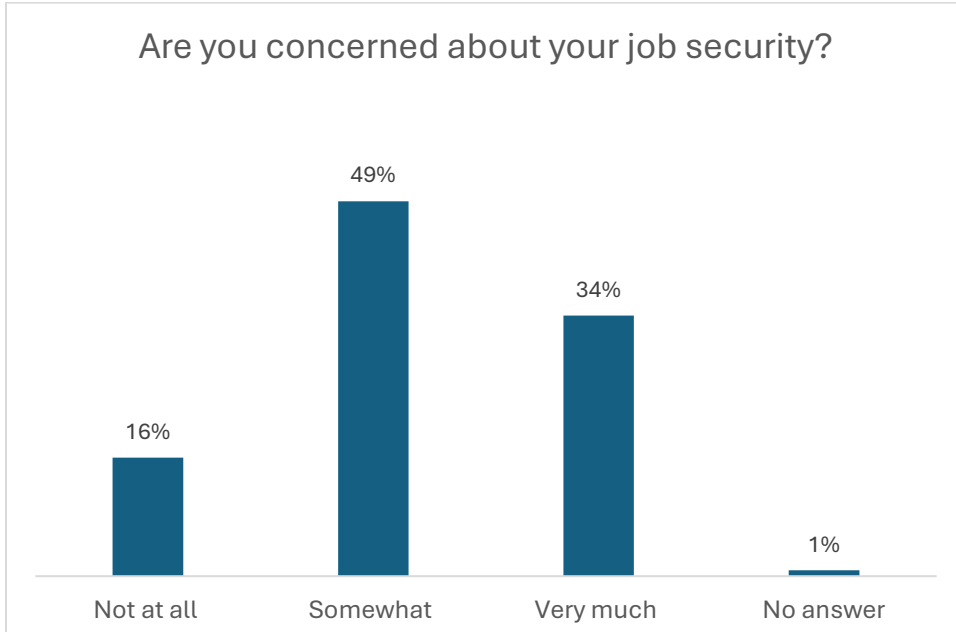
Similarly, 8% say their work has been moved to another part of OH atHome, while 87% say it has not. While the percentages may be small, the comments suggest significant restructuring of work, and that uncertainty is affecting some people. Respondents noted that work is being centralized on a provincial level, or moved to OH, while other work is being moved to hospitals.



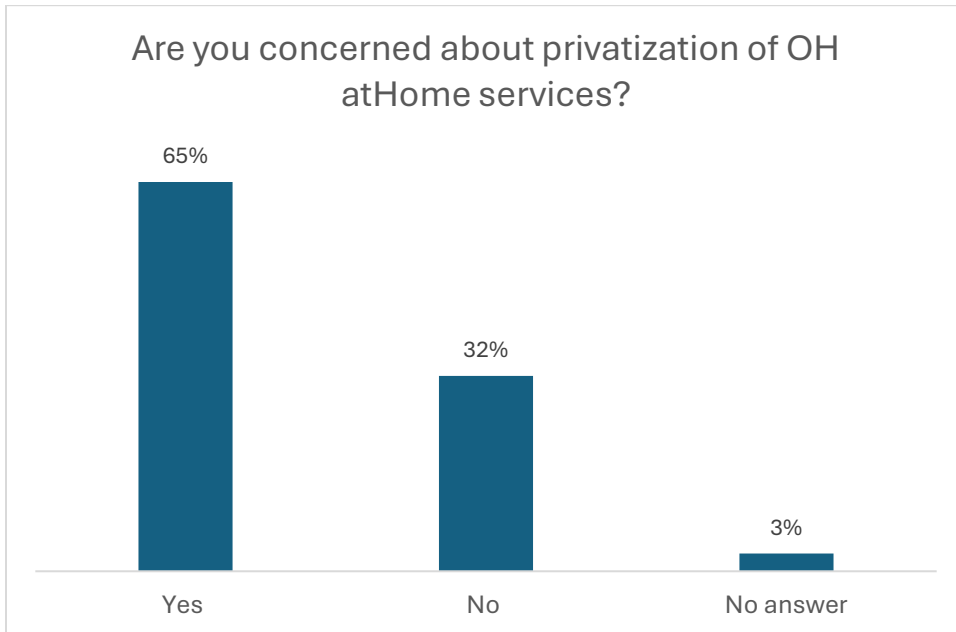
Some quotes from respondents:

- Work has been moving to provincial teams.
- OH has taken on some of the referrals.
- Many projects are taken away and given to hospitals
- Certain administration is being taken over by Ontario Health.
- Procurement and invoice processing
- Some work has shifted to hospital admin

Job Security: A very high percentage of respondents (84%) are concerned about their own job security. Over a third are “very much” concerned.



Privatization: Almost two-thirds of respondents answer “yes” when asked if they are concerned about privatization of OH atHome services.



476 of the 684 respondents who responded “yes” to this question also provided written comments. Issues cited include work being taken over by the contracted service provider organizations (“SPOs”). Others mention the growing role of hospitals. The lack of information from OH atHome about future restructuring plans is often mentioned, despite management talk about “transparency”. Many say the Ford government is committed to health care privatization and fear for the loss of their jobs.

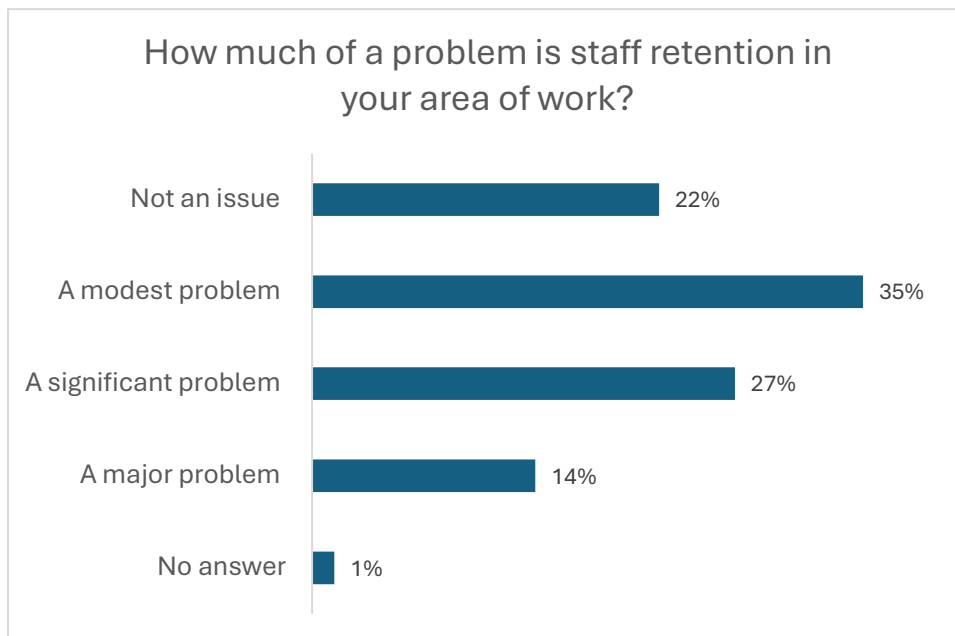
- This government seems Hell-bent on privatizing the healthcare system. Anyone who has been paying the slightest attention will have this concern
- Providers are taking over everything
- With the access to home care via hospitals there is less of a need for OHaH.
- We are now considered a service provider and hospitals and SPOs now offering ‘bundled care’ which they are managing
- OHTs are creating different programs/bundled care and hiring Navigators whose role is similar to Care Coordinators. OHTs are also directly sending these referrals to SPOs eliminating the role and utilization of OH atHome Care Coordination services.
- It feels as if there are many more changes planned that management is not telling us about. I do not trust management.

Comments on job security concerns:

- I fail to understand how Care Coordinators can work for a family health team and be scheduled through them and still require supervision and administrative support through Ontario Health atHome. My belief is that we will see the Care Coordination role fully outsourced to family health teams and therefore patient care assistants and managers will no longer be required. As an Administrative Assistant who supports these teams, my job would therefore also be rendered redundant.
- Now that we are all one big super agency, I am concerned positions may overlap and may therefore be eliminated.
- I am worried that they will have other people maintaining the waitlists for LTCHs.
- Currently my position is not one that is across the province, my fears are it will be eliminated or streamlined with other positions changing my job description.
- If service providers take over ordering supplies and equipment, MES departments will no longer be needed.
- Leadership have not communicated what our roles, place of employment, etc. will look like. Cryptic messaging, last minute roll outs and then delaying changes. Questions not answered in town halls.
- I’m concerned that with the leading projects, there will be a movement if not one already to phase out OH atHome and to remove the jobs within the organization entirely.
- There has been no reassurance from discussions for job security for team assistants.

- There has been absolutely zero confirmation or reassurance during multiple town halls despite being asked this question many times that jobs will not be affected
- It is very unclear what our roles will be like in the future. We are being told more changes are coming and at some point, we will be working from OHTs but there is no information provided about what this will look like.
- There's a gradual drip, drip of our work being transferred to other for profit agencies.
- Realistically how many IT do they need across the entire organization, and being lower tenured means I'll be one of the first to go.
- Concerned that my job will be moved to another town/location and that I will get bumped out of my position.

Staff retention: Just over 41% see staff retention as significant or major problem. 57% see it as not a problem or as a modest problem.

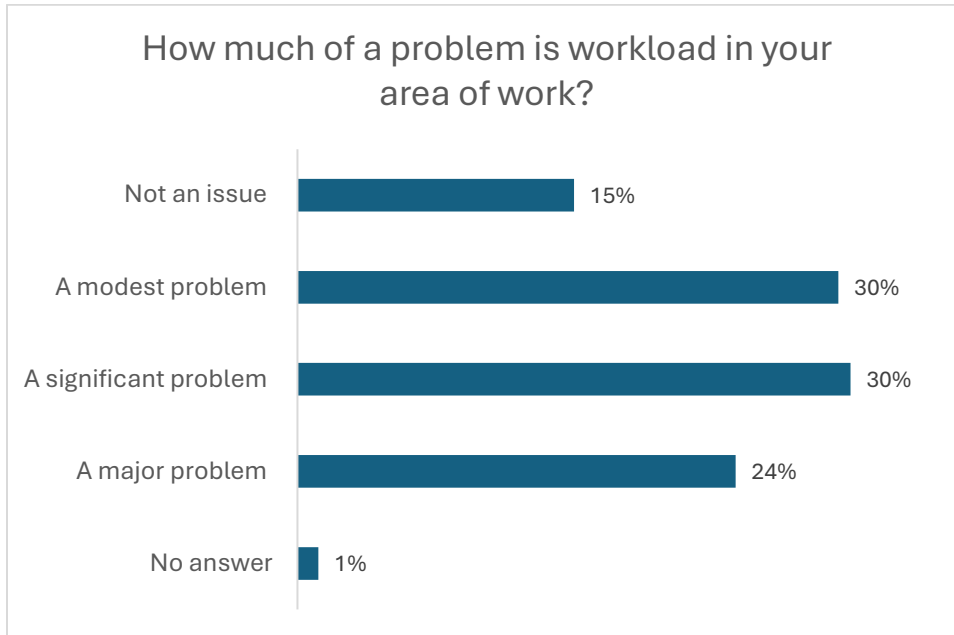


A variety of staffing retention issues were flagged:

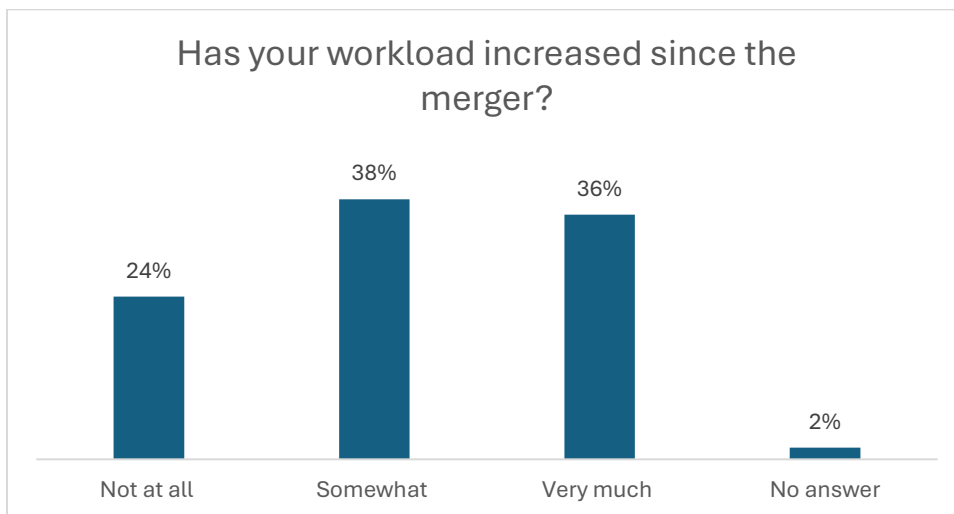
- They do not get the proper training, very little support from management. Thrown to the wolves.
- Many staff are making the choice to leave because they need more security than we have. Increased demands on staff are pushing ppl to retire earlier than they had planned. So much cross coverage and short staffing is a constant weight. It's rare to only have your own job to do.
- New employees don't realize how much work they have signed on for. By the time probation has ended, they have found a position with less stress with a new employer.

- This job has become very overwhelming. ...It is not possible to be successful and this turns people off the job.
- "People are not happy. Overworked. No flexibility. Favoritism.
- Return to work mandate
- People are very frustrated with changes and secrecy.

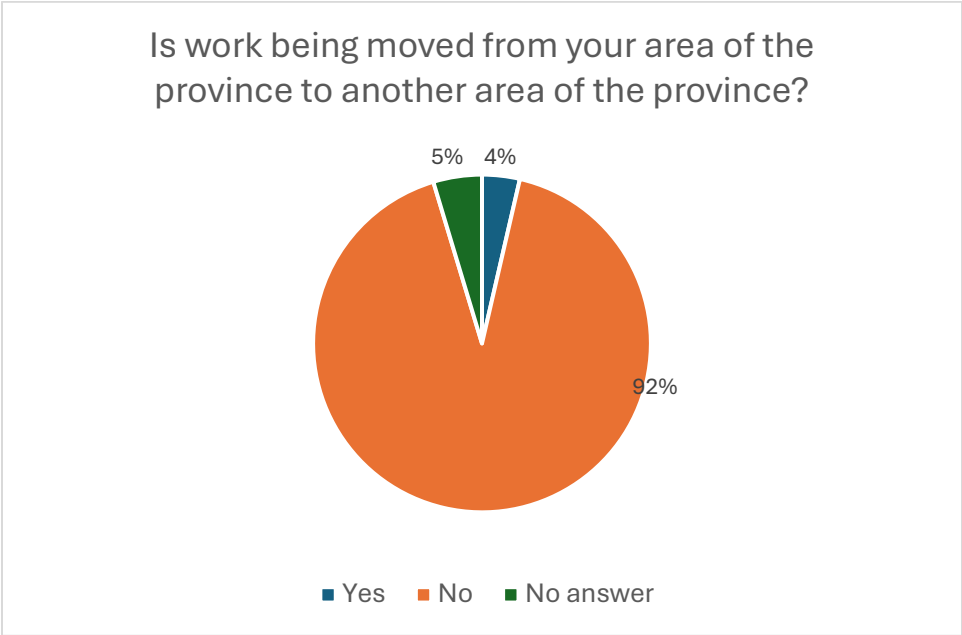
Workload: Over half of respondents see workload as a significant or major problem.



Increasing workload since the merger: 24% say their workload has not increased at all, 38% say it has increased somewhat, and 36% say it has increased very much.



Is work being moved from your area of the province to another area? 92% say no.



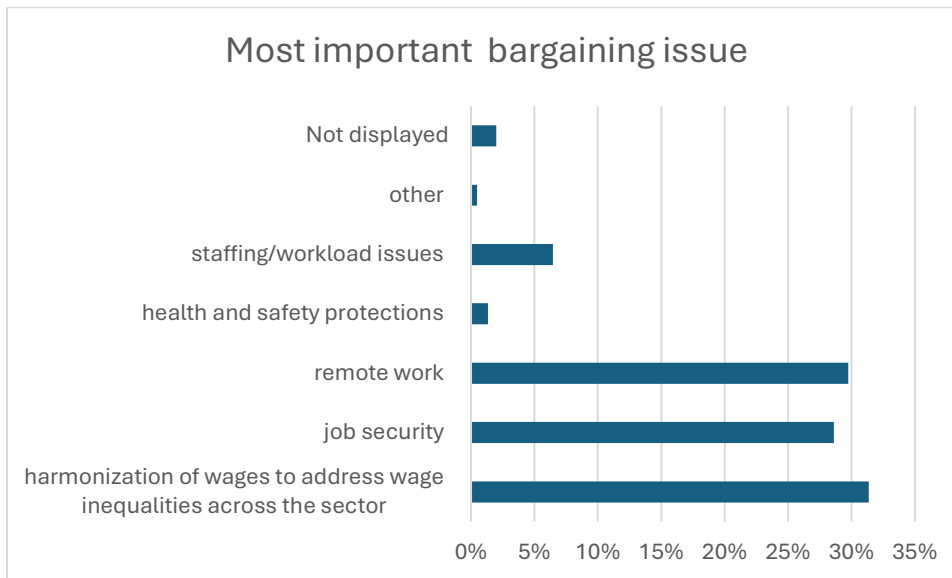
Comments from those who have seen their work moved include:

- I work closely with the accounting department and most of the positions have been centralized therefore it requires more time to get a final result and deadlines are being missed.
- The communications team has changed from being aligned to geographies to being aligned with portfolios ...while still somewhat supporting local geographies. This change happened more than a month ago, and everyone are still confused about who does what
- Reception is being centralized
- I believe this is happening to IT.
- All of finance is being restructured/changing each week. I believe that OH atHome really does not know/have a plan.
- Equipment and supplies
- Family managed care is being centralized

Priorities for the next round of bargaining: Three areas were all ranked very high:

- Harmonization of wages (31% cite this as their top issue).
- Job security (29%),
- Remote work (30%).

Staffing and workload was rated as the top issue by 6%, and health and safety was rated as the top issue by 1%.



Staffing and workload issues also received significant support as the second or third top issue (17% rated it as their second most important issue and 25% rated it as the third most important issue).

When asked to write in other bargaining issues that were not prompted, benefit improvements were very often cited. Parking, scheduling, communication, mileage, equity for part timers, equal treatment for all, and wages were also cited multiple times.

The survey concluded by asking for other comments. Here are some examples:

- I have never in my over 32 years with this organization ever felt defeated, undervalued and unappreciated as I do now. I don't think the people making these decisions even know what they're doing as the new processes they introduce get changed shortly after. It's very difficult to understand what they actually want done.
- Since working remote I have noticed a huge decline in the amount staff call in sick.
- Too many changes too fast without the due diligence to ensure the changes will actually work.
- The pay inequities between branches is really upsetting.
- I have been working here 24 years and I have never felt to stressed and overworked. It has impacted my health.

- The new expectations for home visit numbers is ridiculous.
- The way the employees are being treated would never be tolerated in a male dominated workforce. It is shameful the lack of concern for the mental health of the employees has been completely disregarded with such uncertainty, lack of information and the creation of work expectations that are unnecessary, discriminatory and unsafe in general. There is no consultation with the employees, there is no actual sharing of information, and we have been expected to put our lives on hold now for 4 years while this merger goes forward and we are kept in the dark. Townhall meetings are insulting and tone-deaf speaking about things which are in no way a priority for people who don't know the basic answer to the question will i have a job and what will that look like?
- I am completely dismayed and significantly disappointed about the lack of communication, substandard leadership in the midst of the undertaking to completely change home care. While I recognize cost effectiveness and efficiencies are vital, I want to know how these changes will enhance this and increase quality of care delivery and patient satisfaction. I fail to understand how the OHTs will work.
- This merger as it was implemented has caused serious distress to all employees I have spoken with as well as patients/physicians and SPO's. The timelines for rollout and increased workload over the summer leading into this disastrous fall have made OH atHome and its employees look completely incompetent to deliver effectively care in the home where it was done reasonably well for decades.
- Thank you for advocating for our rights. There's so many changes happening and we are overwhelmed with the added responsibility/metrics and expectations.
- Since I have been here 16.5 years this has been the most challenging time by far.
- As a part time employee scheduling is a HUGE concern. It is nearly impossible to plan anything
- The recent change in Medical Equipment and supplies to a common service organization and single formulary clearly was a disaster and not well thought out. Did upper management consult with front line workers to assess how this change will impact services and patient care. It doesn't seem so.
- I've lost count of how many drug deals I've passed while walking to my car after dark. And now with there being no parking for TAs, they really could not make it any clearer that we're disposable and they don't care about our safety because we're easily replaced.

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