







The Ontario government intends to change how health care is delivered with its Local Health Integration Networks (LHINs).

Health care and community-based social service workers who advocate for quality patient care understand that the changes proposed under LHINs will compromise the quality of our public health care system. We want to stop the most destructive elements of the McGuinty Liberal's LHINs scheme.

The LHIN plan in Bill 36 compromises our public health system.

Here's what health care workers mean when we say Stop LHINs:

STOP the erosion of patient care

The LHINs will have the power to "merge", "transfer", "amalgamate" and "wind-up" health services out of hospitals and community agencies. The remaining health services will be rationed and re-distributed over the vast areas of the networks. In many cases, the sick and elderly will have less access to care in our communities and have to travel further for services once available locally.

<u>STOP</u> the for-profit model from being introduced to all our health care services

Along with service mergers and cuts, the government intends to set a price for many health services and put them up for tender. Under the LHINs scheme your health care services will be provided by the lowest bidder, not the best quality provider.

The government is opening the door to a competitive bidding model in hospitals, long-term care and community health-related social services. It's the same model that has destroyed community-based, non-profit home care in Ontario.

STOP the turmoil for patients and health care

In the home care sector, the same competitive bidding model has resulted in less care and a lack of continuity of care.

Workers lose their jobs or leave the sector in alarming numbers because of low wages, few benefits and no job security.

<u>STOP</u> slashing health programs and the wages of health care workers

The proposed "integration" will cut costs by cutting and merging services — not by controlling the real health

care cost drivers: pharmaceutical drugs and medical equipment.

STOP the loss of local control over health service priorities

Unelected LHIN boards appointed by the government will get control of more than \$21 billion of health service funding. Communities will have little recourse when health services are merged and cut from local hospitals and agencies.

STOP the secrecy

Despite the dramatic changes planned, only four days of public hearings are scheduled. Further, the legislation sets no minimum requirements for public access to LHINs meetings.

<u>STOP</u> the worsening regional inequalities that LHINs will cause.

LHINs cover large geographic boundaries. Smaller community hospitals may be forced to close under the LHINs plan, unable to compete on price with larger urban hospitals and new private clinics. Services will move out of communities.

STOP the new level of bureaucracy

The 14 new health networks (LHINs) will add a new layer of bureaucracy. Each LHIN will be staffed by a CEO, directors and contract administrators earning large salaries – money that could be going directly to hire more front line health care workers to provide better patient care.

Find out more. Log onto www.stoplhins.ca.