



# **Submission to the Standing Committee on Finance and Economic Affairs regarding Bill 148, *Fair Workplaces, Better Jobs Act* *From the Association of Ontario Health Centres***

---

**July 2017**

**Contact:**

Jacquie Maund

Policy and Government Relations Lead, Association of Ontario Health Centres (AOHC)

Tel: 416.236.2539 x 234 [jacquie@aohc.org](mailto:jacquie@aohc.org)

## Working Conditions: A Social Determinant of Health

The Association of Ontario Health Centres (AOHC) is the voice of community-governed primary health care in Ontario. AOHC's vision is the best possible health and wellbeing for everyone living in Ontario. We know that good, secure jobs with fair wages, extended benefits and healthy working conditions all contribute to health and wellbeing for people and communities. Strong and effective legislation is essential to govern workplaces and ensure good wages and working conditions with rules that protect everyone.

AOHC members include 107 Community Health Centres (CHCs), Aboriginal Health Access Centres (AHACs), Community Family Health Teams (CFHTs), and Nurse Practitioner-led Clinics (NPLCs) who serve people in 110 communities across the province. CHCs and AHACs have a mandate to serve people with barriers accessing health services, including low income people, Aboriginal People, people with disabilities, newcomers and refugees, people who are LGBT, Francophones and people in rural or remote communities.

About 54% of people served by Community Health Centres are living on low incomes – many of these people are in precarious jobs where they work for low wages in part-time, temporary or contract positions without employment benefits or workplace protection. So health service providers in CHCs see firsthand the impact of precarious work on the physical health, mental health and overall wellbeing of the people we serve. We know that shift work, job insecurity and overtime work impacts cardiovascular health and increases the risk of diabetes. We know that low income is the biggest determinant of poor health.

But our member health centres can only go so far in addressing the determinants of health – we need upstream interventions with public policies and legislation that promote good jobs and healthy working conditions.

This is why AOHC provided input to the public consultations initiated under the Changing Workplaces Review. We support the changes to labour legislation stemming from the review which are reflected in Bill 148, *the Fair Workplaces, Better Jobs Act 2017*. In particular we support the extension of 10 personal emergency leave days to all workplaces. But we would like to see changes in the Bill to ensure that 7 of these days can be taken as paid days.

As a partner in the \$15 and Fairness campaign AOHC endorses the recommended amendments to Bill 148 in the joint submission from the Workers Action Centre, \$15 and Fairness Campaign and Parkdale Community Legal Services

## Comments on Bill 148

AOHC supports the proposed reforms to labour legislation in Bill 148 including:

- Raising the minimum wage to \$15/hour by January 2019
- Equal pay for equal work between full-time, part-time, casual and temporary workers, including people who work for temporary help agencies;
- Three hours of pay for on-call employees who are not called in for work, and for any employee whose shift is suddenly cancelled; and workers' right to refuse shifts if they are scheduled with fewer than four days' notice;
- Extension of ten job-protected Personal Emergency Leave days to all workplaces;
- No doctors' notes required to access any of the personal emergency leave days;
- Three weeks of paid vacation for all employees after five years of service with an employer;
- Employers prohibited from misclassifying employees as independent contractors;
- Increased public investment to enforce the Employment Standards Act and launch a public education program for employees and employers to learn more about their rights and responsibilities.

We endorse these changes to labour laws because they will increase incomes for low wage workers, improve working conditions and support better health outcomes for precarious workers in communities across Ontario. Health service providers in our member centres know that greater income security will improve the health and wellbeing of the people they serve. This is borne out by research which found that an annual increase of \$1,000 in income for the poorest 20% of Canadians will lead to nearly 10,000 fewer chronic conditions [1].

With regard to **Personal Emergency Leave**, the proposed change to legislate two paid days as part of ten days per year of Personal Emergency Leave for all workers in Ontario is an important step forward. We also strongly support the proposal that employers cannot require employees to provide a sick note from a health provider when they take these days as sick leave. Requiring a medical note is not a good use of the time and expertise of health providers.

However, we recommend that the number of paid days be increased from two to seven for all workers. This reflects the advice of the Decent Work and Health Network and many health providers across the province.

Most workers will use Personal Emergency Leave days as sick days. People usually get sick, or their children get sick, more than once during the year. Or if they have a severe flu they will not be able to recover within two days. The limitation of only two paid Personal Emergency Leave days means that many low wage workers will go to work when sick because they cannot afford to lose pay if they stay home to recover properly. Going to work when sick often serves to spread infectious disease to co-workers. Insufficient days of paid Personal Emergency Leave/sick days will perpetuate inequities in the labour market with the least support going to the most vulnerable workers.

In contrast, research shows that providing sufficient paid sick days reduces the duration of illness and the worsening of minor conditions [2]. Access to paid sick days is associated with an overall lower burden on the healthcare system [3]. In short, sufficient paid sick leave is an essential health care policy that supports the well-being of workers while preventing contagion and work loss among co-workers.

## Recommendations

AOHC supports Bill 148, *the Fair Workplaces, Better Jobs Act 2017*.

But we recommend to the Standing Committee on Finance and Economic Affairs that the amendment to Section 50 (Personal Emergency Leave) of the *Employment Standards Act* be changed to ensure that seven (7) days of the ten (10) Personal Emergency Leave days per calendar year are required to be paid days.

We also endorse the recommended amendments to Bill 148 in the joint submission from the Workers Action Centre, \$15 and Fairness Campaign and Parkdale Community Legal Services.

\*\*\*\*\*

\*\*\*\*\*

### Notes:

[1] Wellesley Institute and Community Social Planning Council of Toronto, "Poverty is making us sick". 2008

<http://www.wellesleyinstitute.com/wp-content/uploads/2011/11/povertyismakingussick.pdf>

[2] Institute for Women’s Policy Research. “No Time to be Sick: Why Everyone Suffers when workers don’t have paid sick leave”. 2004

<https://iwpr.org/wp-content/uploads/wpallimport/files/iwpr-export/publications/B242%20no%20time%20to%20be%20sick.pdf>

[3] Aronsson, G, Gustafsson, K, Dallner M. “Sick but yet at work. An empirical study of sickness presenteeism” Journal of Epidemiology and Community Health, 2000 July: 43 (7)

<http://jech.bmj.com/content/54/7/502>