



Deep Winter 2022

AFTERWORDS

Newsletter of Active Retired



IN this edition of your Chapter 11 newsletter, you will find a preponderance of articles about freedom, health care, and privatization. Our news providers have kept us aware of the colourful “freedom convoy(s)” around the country– but they are not always generous in providing background information about the causes cluttering our frustrating, COVID-encumbered chilly days. SO, I’m asking for your attention and some careful thought about where we will choose to place power in the June provincial election ... I give you

AfterWords is the official publication of the Active Retired Members of OSSTF, Chapter 11 Thames Valley (ARM C11). Opinions expressed are those of the author and do not necessarily reflect the policies of ARM C11 or OSSTF.

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- First-page information about a media conference from our local Health Coalition chapter—worth joining!
- My own summary of the ZOOM meeting created by Natalie Mehra on Tuesday, February 15th, to announce an “emergency”.
- A thoughtful word from the Waterloo chapter on how some of our discarded technology can be put to good use.
- A little history about the public health legislation that we have grown old depending upon.
- A “Conversation” article by three Manitoba law professors on our “Charter Rights” and the Emergency Measures Act..
- You’ve heard about those 3P’s in building hospitals...but did you know Ontario has a SCHOOL in the works in Toronto? A York U Education professor looks into the history of private-public partnerships for school building in Canada.
- And as always, some helpful words from our insurance providers.

MEDIA ADVISORY

Ford government plans unprecedented for-profit privatization of health care: London Health Coalition raise alarm and plan to protect local services

What:

The Ford government has announced plans to bring in private for-profit hospitals in Ontario. They are handing more than 18,000 long-term care beds to for-profit companies in 30-year contracts and despite many repeated announcements, they have not reinstated comprehensive inspections nor improved care levels. They are privatizing the last remaining public parts of home care. They have allowed private for-profit testing clinics to charge patients hundreds of dollars for COVID tests. All this in the context of unprecedented staffing shortages. Leaders and experts will join the London Health Coalition to discuss the impacts on local health care services and plans for an effective local response.

When; Thursday February 24, 2022 at Noon (12 pm)

Join Zoom Meeting at:

<https://us06web.zoom.us/j/89792862335> ID: 897 9286 2335

For more information: Peter Bergmanis at (519) 860-4403 or pbergmanis@rogers.com

When Natalie Mehra calls an Emergency Meeting— I ZOOM in!

Yes, Dear Reader– I had just settled into the computer desk chair with my evening espresso when I caught a note from our Chapter 11 Prezi about an Emergency Meeting , Tuesday, February 15th, 2022—in half an hour! I joined 355 other Ontarians wondering what could be so dire an emergency—nothing in my local paper had mentioned it , so....

The Origin

During a press conference on February 1st, Minister of Health Christine Elliott made reference to the backlog of surgeries that had piled up during the pandemic– but assured reporters that the problem would be solved by sharing it with “independent health providers”. NO MEDIA REP LISTENING THOUGHT IT SIGNIFICANT ENOUGH TO REPORT. That trio of Orwellian words– try looking it up...it’s a challenge—means private clinics or hospitals.

Old enough to remember John Snobelen’s “Create a crisis first” political philosophy?

Natalie also mentioned several bills that have been passed by the Ford administration, calling Bill 74 “the most radical in our history, giving sweeping powers to the Health Ministry” . Our Unifor friends expressed concern even before it was passed:

“Based on the trajectory of this legislation, Ontario Health would oversee the transformation of the health of the new Integrated Care Delivery Systems (ICDSs) as the main provider of health care services. That raises a number of concerns. The Health Minister is able to determine what qualifies to be an ICDS and make this designation without public consultation; many mergers, takeovers and “integrations” would result in the concentration of health care services being controlled by a small number of large care systems, which includes the elimination of all local health integration networks (LHINs). This is the creation of health care conglomerates. There are questions about the lack of accountability and public oversight over these conglomerates. There are real concerns about the “bigger is better” approach to care – this type of restructuring is very likely to result in the loss of local services for many Ontarians.”

Other Speakers ; John Hurley

Mr. Hurley– a CUPE member and long-time hospital worker -reminded attendees that the relative death rates in private long-term care facilities had been analyzed 20 years ago—.

5.2% higher death rates in private LTC homes, 8% higher death rates in private dialysis facilities. Do I need to remind anyone of the most recent reports of what the army found in LTC homes during the pandemic? And yet ... millions in profits were made by the well-known private homes during this time of inadequate service.

(If John Snobelen came to mind– let me assure you Mike Harris is doing well:”According to the report, the market value of the securities held by Mike Harris totalled \$5,974,195. The report shows Harris also earned \$223,000 in fees for, reportedly, “attending an audit committee meeting as a guest.”

And wasn't that a sweet announcement last week of how many LTC beds Ford and the Health Ministry are giving to the London area? I scanned the article several times but found not one word about the two facilities being PRIVATE.

France Gelin

Mme Gelin, NDP Health critic and Nickel Belt MPP for 15 years reminded attendees of the previous massive “re-organization” by Mike Harris

“The Ford government is now clearly embarking on the most aggressive and radical health care restructuring that Ontario has ever seen, warns the Ontario Health Coalition. The Mike Harris government hospital restructuring cost \$3.9 billion, and the current problems that we face in health care can be traced back to the last two rounds of restructuring. According to the Provincial Auditor General, it cut \$800 million from public hospitals to create “efficiencies”.. It led to for-profit privatization and new user fees for an array of services. The costs were never recovered and many of the problems we face today can be traced back to those earlier rounds of ‘restructuring’”

Hasan Sheikh

Before heading off to a shift in the ER, this Toronto doctor acknowledged problems in our public system, but reminded attendees that the old playbook is being dusted off again: let the system break under pressure (like the crisis in COVID testing a few months ago) and put out the call for private spending. He cited his own experience in a parallel private system ultimately making wait times longer– and we are encouraged to forget that the delivery system becomes private WITH PUBLIC FUNDING...

There are no easy solutions, said the doctor, but financing the system properly is the answer. Let's keep our eyes on the government announcements about an “enormous deficit” ... while Premier Buck-a-Beer relieves all of us drivers from those pesky license stickers and removes tolls from highways. A progressive tax system is the answer ...

The writ drops in May ... and we go to the polls on June 2, 2022. There is SO much to question, research, and make known to our fellow Ontarians before that happens.

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And now ...
*A timely article on how you can justify hankering after
 the latest model of your favourite cell phone ...*

What should I do with my old smartphone?

By: Gene P. Heesaker

My lovely wife and I purchased new smartphones over the holiday season. Once we activated these new beauties and transferred all of our data over to the new phones we began to wonder what we should do with our 3 year old phones? Did you know that your old smartphone can help those who are blind or visually impaired carry out a host of everyday activities? However, the technology may be out of reach for many Canadians, due to the high cost of new smartphones. So here is where your old smartphone can really make a difference.

When it comes time to upgrade, consider donating your old smartphone to the Canadian National Institute for the Blind's "Phone It Forward Program" so it can be refurbished and passed on to someone who will put it to good use.

Bonus: You will get a tax receipt for its market value from one of the most trusted charities in Canada.

Let's keep those old phones out of the landfill and put them in the hands of someone who can really use them!

For details, visit phoneitforward.ca or call 1-833-554-5020.

ARM Chapter 11 Executive 2020-21

President: Mary Lou Cunningham

Vice President and Newsletter Editor: Daina Janitis

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PAC Representative: Bryan Smith

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Member-at-Large: Joe Wilson





Recognize the People in this Picture?

Most of us who are ARM members probably can't remember the days of growing up in Canada before our public health acts came into force ... but the gentlemen you see here are Saskatchewan doctors gathered to plan going on strike if the Saskatchewan Medical Care Insurance Bill was introduced in that provincial legislature in 1961.

IN 1959, Tommy Douglas announced his intention to introduce medical insurance– prepaid, universal coverage, quality service, and public administration—to his province. The College of Physicians and Surgeons of Saskatchewan stated they could not work with a “compulsory, government-controlled scheme”. The words “creeping socialism” made their way through media interviews.

A group of Activist moms in Regina– KOD (Keep our Doctors) - gained support of the doctors and government Opposition members to launch a well-organized campaign with rallies, petitions, and advertising.

The Act came into force in July of 1962– and most Saskatchewan doctors closed their offices, took “sabbaticals”, or left the province permanently. The government urged doctors from the UK and US to help in the emergency– and even local citizens' groups created medical clinics and found doctors to work in them.. After amendments to the bill, doctors returned to work, but objections to “government involvement” continue to this day.

And few years later...our federal government - in 1984– unanimously passed the Canada Health Act to confirm two basic principles in order for provinces to get funding:

- **To ensure that every Canadian has timely access to all medically necessary health services regardless of his or her ability to pay for those services.**
- **To ensure that no Canadian suffers undue financial hardship as a result of having to pay health care bills.**

The CHA is known for its FIVE principal requirements

- 1. Comprehensiveness**
- 2. Universality**
- 3. Portability**
- 4. Accessibility**
- 5. Public Administration**

The small minority of Canadian truckers protesting vaccine mandates have made international news, prompted the invocation of Canada's Emergencies Act for the first time and spurred the resignation of Ottawa's police chief.

Canada's legal disinformation pandemic is exposed by the 'freedom' convoy

The self-styled "freedom convoy" descended upon Ottawa in the spirit of the Jan. 6, 2021, raid on the U.S. Capitol, unwilling to retreat.

As Prime Minister Justin Trudeau initially hunkered down in an undisclosed location, some protesters waved Donald Trump flags, swastikas and Confederate flags, and even hoisted the Tea Party's signature "don't tread on me" flag alongside their signature "Fuck Trudeau" signage.

The protesters oppose any further government intervention, even if aimed at mitigating the risks of a deadly virus that has already killed more than 34,000 Canadians, lessening the burden on health-care workers dealing with overflowing hospitals or protecting those with compromised immune systems or other vulnerabilities.

Pseudo-legal language

Crucially, the protesters have a list of demands they frame in pseudo-legal language. Canadian lawyers Richard Warman and Donald Netolitzky define pseudo-legal phenomenon as "spurious concepts that sound like law, and which may use legal terminology, but that are otherwise unrelated to 'true' or 'conventional' law."

At the apparent centre of the so-called "freedom convoy" movement's ideology is the mistaken belief that any individual freedom or liberty is absolute. However, the Canadian Constitution compels a proportionate weighing of all Charter rights against the threat of COVID-19.



This isn't to suggest any individual rights-based or Charter objection to scientifically grounded public health directives is automatically in bad faith, or pseudo-legal. Obviously, every claim must be measured on its merits.

But vaguely asserted and unspecified Charter claims about rights arising from COVID-19 mask and vaccine protocols aren't the same as actual claims that can be measured or adjudicated.

Nonetheless, the legal profession must earn the authority, trust and esteem that's invested in it. After all, lawyers — like doctors and other professionals — rely on public trust.

Some might suggest legal or medical opinions are just that — opinions. One medical doctor might think X and the other Y, and the same goes for any two lawyers. But this is rarely true.

Most medical and legal opinions are based on facts — for example, vaccination is the best way to prevent hospitalization or death from COVID-19 and the Charter is about the proportionate weighing of rights rather than their absolute enforcement. The protesters, after taking down their Memorandum of Understanding pledging to bring down the federal government, acknowledged that some misunderstanding had been created by the document. They “clarified” that the spirit of the document was to bring “the government of Canada and all Canadian citizens into agreement; that the Charter of Rights and Freedoms should be upheld for all.”

We agree and suspect most everyone does. However, “freedom convoy” organizers continuously demonstrate through their words and actions that they grossly misunderstand the nature of the protections the Charter provides and the types of rights and freedoms it encompasses.

Misunderstanding the Charter

As Errol Mendes, a constitutional law professor at the University of Ottawa, has stated: “Freedom is not absolute, and not being vaccinated endangers the freedom of others.” Missing from pseudo-legal iterations of “rights” or “liberties” is an understanding of the careful balancing act of Canadian constitutional law. The Supreme Court of Canada has repeatedly ruled that the freedoms we enjoy in a democratic society are not absolute.

On the contrary, Charter rights, from religious freedom to freedom of speech, are subject to Sec. 1 that “guarantees the rights and freedoms set out in it subject only to such reasonable limits prescribed by law as can be demonstrably justified in a free and democratic society.” As all first-year law students in Canada know, the definitive legal test for the application of Sec. 1 was set out by the Supreme Court of Canada in *R. v Oakes* when it stated:

“In each case courts will be required to balance the interests of society with those of individuals and groups.”

Although media coverage on the convoy has shown a lack of uniformity in what supporters believe the movement stands for or even whether they’re really truckers, there is credible reporting that some leaders of the movement hold white supremacist views and have association with far right and extremist causes that pre-date the pandemic.

Organizers retracted their earlier manifesto that called for the overthrow of the government and Trudeau’s resignation, but they still appear to support this agenda. They count among their ranks Daniel Bulford, a former RCMP officer involved with the prime minister’s security until he refused a vaccine. Bulford has reportedly surrendered to police after serving as the convoy’s head of security.

Misinformation vs. disinformation

Our ongoing research considers the role of misinformation and disinformation about the law. Misinformation is false information that may be unintentionally spread, while disinformation is a broader category that includes information, typically encountered online, that could lead to misperceptions.

More insidious than misinformation, disinformation includes false information that is deliberately spread.

In our view, since the pandemic began, there are a small portion of lawyers who themselves risk promoting legal misinformation and disinformation that's damaging to the integrity of the profession. At least one not-for-profit group in Canada that is affiliated with lawyers operates close to, or on, the margins of legitimate legal advocacy and the spread of pseudo-legal misinformation and disinformation.

The Justice Centre for Constitutional Freedoms in particular blurs the line between misinformation, disinformation and legal advocacy in their public education efforts online by relying on propaganda films and hyperbolic language, among other techniques. Slightly less radical outfits like the Canadian Constitution Foundation have an extreme libertarian litigation strategy with an increasingly narrow focus on COVID-19.

We fear that some members of the public might rely on websites of these sort to misunderstand the reality of the law and their rights. We call upon provincial law societies that regulate the profession to issue more and clearer guidelines on these matters.

Manifesto espouses falsehoods

An equally alarming pseudo-legal intervention is the "Free North Declaration," a bizarre manifesto created by a group of lawyers, most of whom have opted to remain anonymous (probably a wise choice).

The manifesto is also pseudo-legal because it is replete with misinformation and disinformation about the Charter and Canadian constitutional law, stating that "vaccine passports create the infrastructure for a global digital surveillance system" and that, "particularly for children and healthy young adults, (the vaccine) may be riskier than the virus."

COVID-19 is not the only pandemic that is threatening Canada. So too is the spread of misinformation and disinformation about Canadians' legal rights. Any argument that the Charter contains absolute rights is false. Canadians must be aware of the presence of misinformation and disinformation about the Charter and their relationship to COVID-19 health protocols. If the trend continues unencumbered, it risks weakening the rule of law in Canada and eroding Canadian literacy about legitimate Charter rights.





“ ‘Vertical school’ in a Toronto condo raises questions about education partnerships”



February 17, 2022 12.31pm EST—by Sue Wilson, Professor of Education at York University

Ontario’s government announced in January that it was partnering with the Toronto District School Board (TDSB) and Menkes Development to build the province’s first public school in a condominium at Toronto’s downtown waterfront. Such schools in mid-rise or high-rise buildings in dense urban areas have become known as “vertical schools.”

TDSB trustee Stephanie Donaldson described it as “an innovative urban school model” while the city’s mayor touted it as a way “to ensure that residents have access to all the services they need.”

Sounds good — but how well will it really serve the public interest?

Few details of the partnership are available to the public, even while the province says that the “new school could be replicated as an innovative solution to meeting... education needs,” leaving questions about what precedents this deal may set — and whether this public-private partnership will live up to its promise. Many don’t.

Public-private partnerships in education

A public-private partnership is a contractual agreement between government and the private sector to undertake a project with the expectation that all parties will share the costs, risks, rewards and benefits.

The private sector includes any businesses, industries or enterprises that aren’t owned or controlled by the government. Public-private partnerships vary in scope, method, scale and motive. In education these include any partnerships with for-profit businesses, non-government organizations, foundations and even ordinary citizens.

Such partnerships could look like public funding of private schools via vouchers, fundraising initiatives to build school sports facilities and arrangements where a business designs, builds, finances and/or operates infrastructure and the government leases the space to use for public schools. In some cases, the government can buy the buildings after a period of time.

Why partnerships?

Governments enter into infrastructure partnerships in education for a variety of reasons. There may be a need for something new, but the government either says

it doesn't have the money to finance it or doesn't think it politically wise to borrow money to pay for it.

A second reason is the expectation that a partnership project will be completed more efficiently and more quickly since the private financiers will want to see a return on their investment as soon as possible.

Thus, advocates hold, the project will ultimately cost less, partly because of its on-time delivery and partly because there's no need for governments to negotiate each part of the finance and design. Money saved can then be used elsewhere.

Public-private partnerships in education, while not new, were reborn as a policy preference in the 1990s and are now found around the world.

Nova Scotia schools

In Canada, the governments of Nova Scotia, Saskatchewan, New Brunswick and Alberta have all turned to infrastructure partnerships with private bodies to acquire new school buildings over the past few decades.

In 1999, Nova Scotia's government made deals with four builders to build and service 39 schools across the province with an option to buy them out after 20 years. All the schools were built within five years, mostly on time. However, the promise that this partnership was a better way to build schools wasn't borne out.

According to the 2010 report of Nova Scotia's Auditor General, the government was on track to pay about \$52 million more for services than if school boards managed services in these new schools.

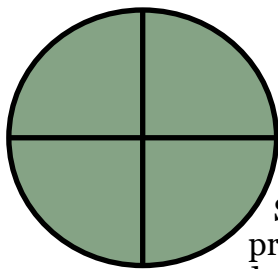
This outcome may have been partly due to badly-designed contracts and poor planning and project management by the government — as well as design changes along the way. But Nova Scotia's privately contracted schools are not the only projects to fail to live up the promise of cost savings for the public.

Companies seeking profit

It's also important to remember that companies that enter into partnerships with public bodies are looking to profit from the arrangement.

For example, a Nova Scotia contractor charged community groups \$75 per hour to use its schools' facilities after - compared to school board rates of \$7.50 per hour for kids' programs and \$30 per hour for adults. The contractor also claimed it was entitled 35 per cent of cafeteria and vending machine sales and refused to pay for technology upgrades and repairs due to vandalism that occurred after school hours.

In a 2010 review, Nova Scotia's Auditor General found many health and safety violations of service contract requirements related to servicing the new schools. These included inadequate emergency training for some employees, poor cleaning procedures and missing required child abuse registry checks for staff.



Alberta problems

Some communities in Alberta have faced similar problems with their private partners. A 2013 report by the Canadian Union of Public Employees details how a school in the Calgary Board of Education had to pay over \$100,000 to fix a leaky roof six months after a school opened.

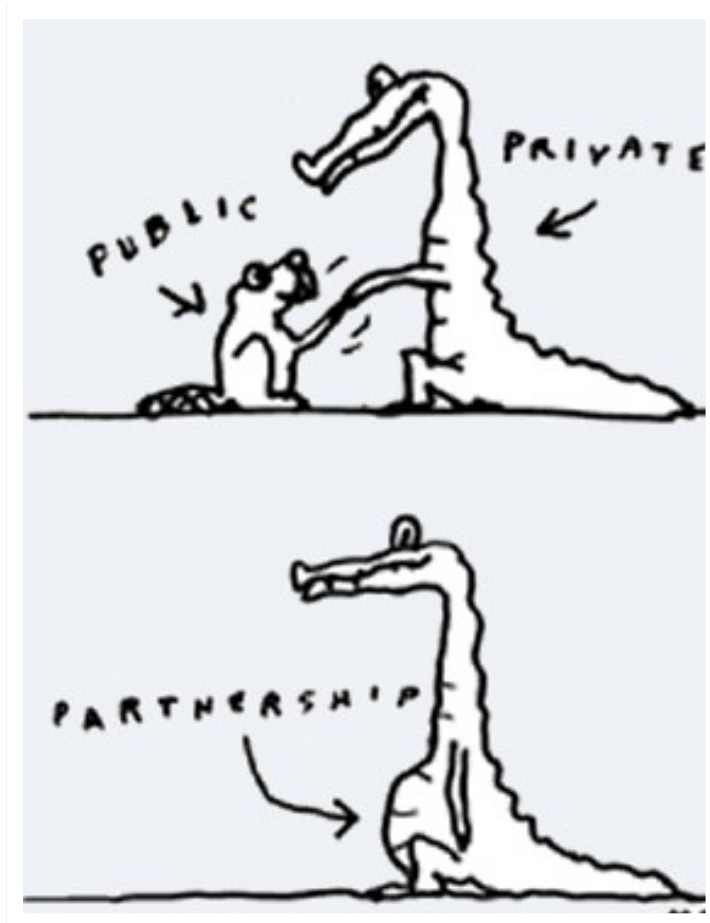
School staff also reported maintenance delays that sometimes put kids' and staff safety at risk. User fees and restrictions made it hard for community groups and sports teams to access spaces.

Alberta paused its public-private partnerships school program in 2014, acknowledging it would be less expensive to pay for the promised schools itself. And there was little reported interest by businesses to participate; in part, the project just wasn't profitable enough.

Transparency and accountability issues

Another reason to question the use of infrastructure partnerships has to do with transparency and accountability.

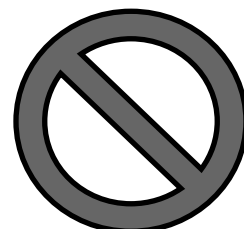
Detailed information about contract terms may be hard to come by, partly due to commercial confidentiality protections. In its evaluation of Nova Scotia's aforementioned projects, the CCPA-NS was unable to find important contract details and how much money private partners earned in total.



Public-private partnerships are sometimes also purported to bring new jobs to communities. However, these jobs may not be as well-paid or secure as those offered by governments.

So, are educational partnerships with the private sector like the one to build a new school in a condo development in Toronto a good idea?

The answer depends on what they hope to achieve. Such partnerships can produce much-needed infrastructure in a timely way that can be financed over a long period of time. However, experience shows they don't reliably meet the needs of communities for a lower cost than what governments can supply and are less accountable to the public.





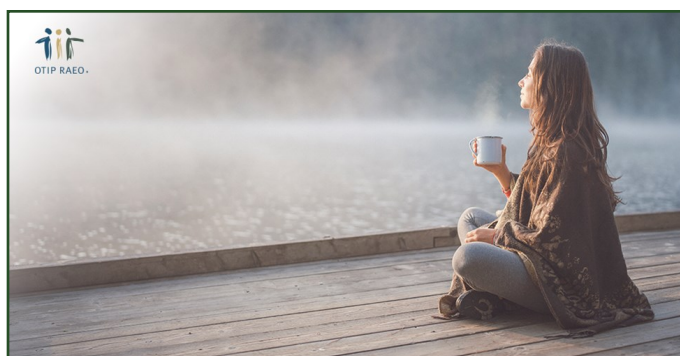
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WILD GEESE by Mary Oliver

*You do not have to be good.
You do not have to walk on your knees
for a hundred miles through the desert, repenting.
You only have to let the soft animal of your body
love what it loves.
Tell me about despair, yours, and I will tell you mine.
Meanwhile the world goes on.
Meanwhile the sun and the clear pebbles of the rain
are moving across the landscapes,
over the prairies and the deep trees,
the mountains and the rivers.*



*Meanwhile the wild geese, high in the clean blue air,
are heading home again.
Whoever you are, no matter how lonely,
the world offers itself to your imagination,
calls to you like the wild geese, harsh and exciting—
over and over announcing your place
in the family of things.*



Self-driving vehicles and the future of car insurance in Canada

A road full of driverless cars powered by artificial intelligence could soon become a reality with automated vehicles. While fully automated self-driving vehicles are not yet available to the Canadian public, Ontario's automated vehicle pilot program to test driverless vehicles on public roadways is already well underway. In fact, autonomous vehicles with SAE Level 3 technology that are available for public purchase in Canada can now be legally driven on Ontario roads.¹

With the future of autonomous vehicles already here, many drivers are wondering what impact advanced vehicle technology will have on their car insurance. Here's what you need to know.

What is a self-driving vehicle?

The [Society of Automotive Engineers \(SAE\)](#) has developed a system to define six levels of driving automation for motor vehicles—with Level 0 being no automation and Level 5 being full automation.² For the rest of this article we'll be referring to self-driving or driverless vehicles as those with SAE Level 5, meaning they are fully automated in all conditions without the need for a human driver.

How will self-driving vehicles impact car insurance rates?

It's still too early to give exact numbers on how the arrival of driverless cars on Canadian roads will impact car insurance rates. The majority of vehicle collisions today are due to human error or negligence. In a future where vehicles are capable of operating without the need for a human driver, who is responsible in the event of a collision? This is the most important question insurers are faced with when it comes to driverless cars—*liability*. For example, who is responsible in the event of a collision due to an automated vehicle owner's failure to install the latest software update? The owner, the manufacturer or the technology provider?

While we can assume that the arrival of self-driving cars will result in fewer collisions, we can also assume the cost per claim will increase significantly for insurance providers. The increased time to determine who is at fault creates additional overhead, and the repair and replacement costs for advanced vehicle technology has already [led to an industry-wide increase in the average cost of car insurance claims](#). Additionally, new technology brings with it new risks—including network failure, programming choices, hacking and cybercrime, and failure to install or update software.³

On the other hand, self-driving vehicles will have the ability to record significant amounts of data on vehicle activity. This will provide insurers with valuable information when it comes to assessing risk, managing claims and detecting fraud.

For now, insurance companies still need more data on how the rollout of self-driving vehicles will impact car insurance premiums across the country.

What does the future of car insurance in Canada look like?

In 2018, the Insurance Bureau of Canada (IBC) published a report on the future of insurance and automated vehicles. In the report, the IBC makes three recommendations to prepare Canadian drivers for the introduction of self-driving vehicles:

- Establish a single insurance policy that covers both driver negligence and the automated technology to facilitate liability claims.

- Establish a legislated data-sharing agreement with vehicle manufacturers and vehicle owners and/or insurers to determine the cause of a collision.

- Update the federal vehicle safety standards with technology and cyber security standards.

You can check out the IBC's [full report](#) for more predictions on how the arrival of fully automated vehicles will impact Canadian car insurance policies.

As we get closer to the time when fully automated, self-driving vehicles will be introduced to the Canadian market, the conversations surrounding safety, insurance and the regulation of these vehicles will surely intensify. Keep up with the conversation to learn how further advancements in vehicle technology may impact you and your insurance coverage.

If you have any questions about your existing car insurance policy or would like to learn more, contact your OTIP Insurance broker at [1-888-494-0090](tel:1-888-494-0090). If you'd like to get a quote for car insurance, connect with an OTIP broker today at [1-888-892-4935](tel:1-888-892-4935).