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Dear Dr. DeMarchi,

We are writing to follow up on our meeting of September 30, 2005. Thank you for meeting with us about the Special Diet supplement for recipients of Ontario Works and the Ontario Disability Support Program (ODSP). We greatly appreciated our discussion and the information you provided. As you know, we represent a group of family physicians, nurse practitioners and registered dietitians who work on the front lines with people living in poverty – including those on social assistance and ODSP.

As we discussed, we are surprised at the speed with which the Ontario Medical Association (OMA) and Ministry of Community and Social Services (COMSOC) are revising the Special Diet application forms. We are aware that the OMA is taking what it considers emergency measures in light of reported threats to physicians, and that the process is expected to be completed by October 19, 2005. We have four major concerns about this process.

First, we are alarmed that the revision has occurred without consultation from a group of health practitioners who have expressed significant interest in and who have a great deal of experience with this issue. We have been assessing our patients' eligibility for the Special Diet supplement for many years. We fill out these forms more frequently than almost any other group of health care providers. We are therefore concerned at both the lack of representation of primary care providers on the OMA's forms committee and the lack of direct consultation of these providers by the OMA and COMSOC. Failing to incorporate the input of experienced front-line health care providers into the form revision process risks creating a form that is less responsive to the nutritional needs of recipients of social assistance, and it risks increasing demands on already busy primary care health providers. One of our members had asked to meet with a senior OMA policy advisor months ago only to be denied a voice in this process. We have yet to be allowed adequate representation.

Second, our understanding is that when the form is revised, there will more stringent eligibility requirements for the special diet supplement. We have three concerns about this increase in regulations. First, we worry that primary care providers will feel they are

unable to address the needs of those patients who will inevitably fall through the cracks in restrictive regulations that will be unable to anticipate every possible eventuality. This will result in poorer health outcomes for high risk patients. Second, we are concerned that any requirements to match special diets with specific medical conditions on the form will result in an unnecessary disclosure of confidential personal medical information to lay social assistance workers who have no right to assess, or need to access, such information. The assumption that these workers are trained to deal appropriately with such information is both unwarranted and unprecedented. Finally, we worry that these requirements constitute a regulatory second-guessing of the medical judgment of trained health care professionals. This interference with professional autonomy sets a worrisome precedent for government and encroaches into physicians' decision-making processes.

Third, we also wonder if having more restrictive requirements for the supplement will only increase the anger of social recipients. We strongly doubt that by making the supplement less accessible to those who may need it, physician's safety will be more protected.

Lastly, there are thousands of Ontarians who are currently receiving a Special Diet supplement. We have no information about the government's plan for these recipients when a new, more restrictive, form is used. We are concerned that these families will see their monthly income decrease by as much as 25%. This will lead to evictions, homelessness and the inability to buy necessary food. How will the government protect against this outcome?

We urge the government to solve this problem by raising rates by at least the forty percent they have dropped in real terms in the past ten years. We appreciate the complexity of the issue – and fully understand the economic impact of increasing social assistance rates by this amount; however, we urge the government to consider the impact of not taking this action – continued poor health resulting in increasing health care and other social costs. The number of health care practitioners concerned about this issue is large and growing.

Again, we thank you for meeting with us and allowing us to share our concerns. We look forward to your reply, and to future input into this process.

Sincerely,

Susan Woolhouse, MD, CCFP
Family Physician

Melissa Melnitzer, MD, CCFP
Family Physician

Raise the Rates Campaign