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The Society for Manitobans with Disabilities (SMD) has notified its professional staff that it will be significantly reducing the hours of therapy services it provides to preschool age children in the Province come September 2013. With these announced reductions and previous reductions, SMD has reduced its Occupational Therapy services by 51%, Physiotherapy services by 61% and Speech Language Pathology services by 22% over the last year. The resulting layoffs and unfilled positions will reduce therapy services by 8.3 full-time positions.

SMD representatives have acknowledged that these layoffs will result in a significant increase in wait times for children and their families requiring these therapies. SMD has also stated to MAHCP representatives that it is unable to meet the conditions of its Service Purchase Agreement with the Province. The current expected case load for these therapists is 50 children per full time position, meaning hundreds of pre-school age children will wait longer or not receive the assessments and therapy they need. The Canadian Association of Speech-Language Pathologists and Audiologists benchmarks related to wait times are 3 months to the first appointment and 1 month from assessment to treatment (for children birth to 5 years). Manitoba already falls well short of this professional guideline for intervention and these reductions will only make matters worse.

More children will now reach school age without ever having had the benefit of the services that these Health Care Professionals provide. These children and their families will most certainly encounter a more difficult time in school than if they had been able to access quality community intervention in an acceptable time frame. There will undoubtedly be increased demands on the acute (hospital) system as a result of these service reductions and layoffs. For many, if not all of the children referred to SMD, the acute system is inappropriate to meet their needs. Professional research and guidelines agree that the most effective intervention for children with developmental delays is the child's natural environment (home, day care etc.) and not in an examination room.

The education system will become even more stretched as the professionals in the schools will be dealing with long standing issues that could have been significantly improved with early intervention prior to the child arriving in the classroom. It is well established that the years before five provide the greatest and most cost effective window for intervention.

The Manitoba Association of Health Care Professionals and the Health Care Professionals it represents at SMD are gravely concerned about the impact this service reduction will have on the children in our communities.

The Manitoba Association of Health Care Professionals met with the Assistant Deputy Minister of Disability Services and the Director of Child Services to emphasize concerns. In the meantime SMD intends to move forward with these service reductions knowing that it will compromise the much needed services for these children.

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