

This is Long-Term Care

July 2017

The Ontario Long Term Care Association

ONTARIO
LONG TERM CARE
ASSOCIATION

oltca.com

Who we are

- Canada's largest long-term care organization, representing 70% of long-term care homes in Ontario:
 - ✓ non-profit
 - ✓ private
 - ✓ municipal
 - ✓ charitable
 - ✓ multi-home companies
 - ✓ independent operators
 - ✓ urban and rural
 - ✓ small and large
- Diversity of membership ensures we represent all interests in LTC
- Size and scope makes us the leading voice in long-term care
- Recognized by Ministry and LHINs as system player, key sector advisor



Long-term care in Ontario

- 625 homes are licensed and approved to operate in Ontario - all homes are funded and regulated by the Ontario Ministry of Health and Long-Term Care.
- 58% of homes are privately owned, 23% are non-profit/charitable, 16% are municipal.
- More than 40% of long-term care homes are small, with 96 or fewer beds.
- Of these small homes, about 47% are located in rural communities that often have limited home care or retirement home option.
- More than 300 homes (approximately 30,000 beds) were built to design standards dating back to 1973 and require renovations or to be rebuilt. In October 2014, the government announced a renewed capital redevelopment plan for long-term care homes and this planning work is underway.

Long-term care in Ontario - continued

- 77,390 long-stay beds are allocated to provide care, accommodation and services to frail seniors who require permanent placement.
- 746 convalescent care beds are allocated to provide short-term care as a bridge between hospitalization and a patient's home.
- 360 beds are allocated to provide respite to families who need a break from caring 24/7 for their loved one.
- The average time to placement for long-term care is 123 days.
- Wait list for long-stay beds as of September 2016 was at 29,942.

Sources: Long-Term Care Utilization Report, September 2016, Ontario Ministry of Health and Long-Term Care; Ontario Long Term Care Association, internal database, 2016.

Our members

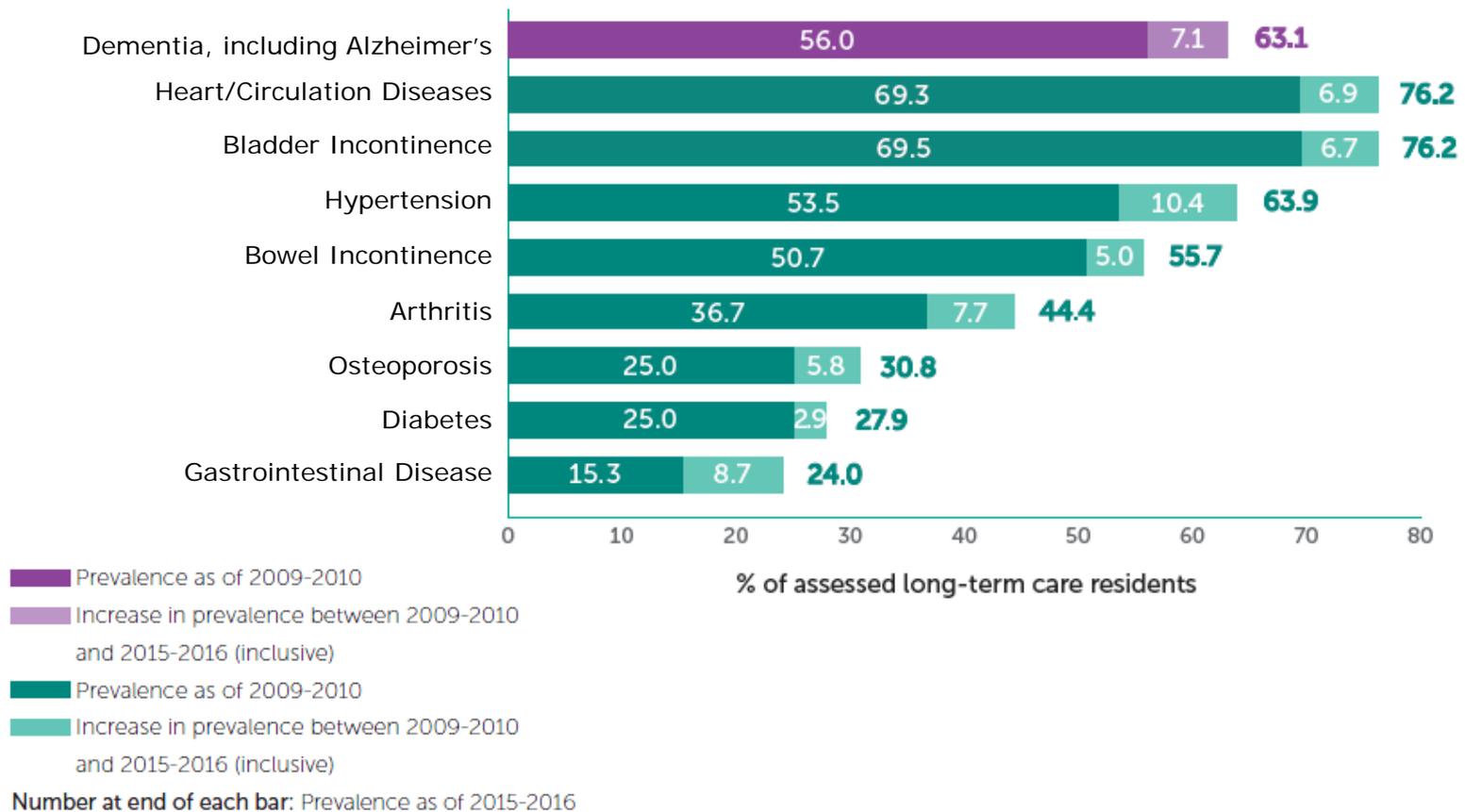
- Total active membership:
 - 432 homes (69% of Ontario total)
 - 51,376 beds (65% of Ontario total)
 - 123 small operators (1-3 homes only), 14 medium operators (4-20 homes), and 4 large operators (20+ homes)
- Of 432 Association member homes:
 - 356 are privately owned (98% of Ontario total)
 - 60 are non-profit/charitable (41% of Ontario total)
 - 16 are municipal (16% of Ontario total)
 - 3 are recognized CLRIs
- Commercial members: vendors who share a genuine interest in furthering quality in long-term care
- Affiliate members: educational and research institutions, non-profit stakeholders

From Residential Care to Health Service Provider: Long-Term Care Today

- Homes were originally resourced, built and equipped to provide assistance with activities of daily living (ADL) – bathing, dressing, eating, toileting, etc.
- The shift to home care has dramatically changed the role of long-term care in the health care continuum.
 - Since 2010, only seniors with **high** or **very high** care needs are eligible for long-term care.
 - Seniors are entering long-term care homes when they are older, frailer, and in need of more care.

Rapid Change, Dramatic Impact

- Significant changes in resident profiles in the last 5 years:



Source: Canadian Institute for Health Information, Continuing Care Reporting System 2009-2010 and 2015-2016

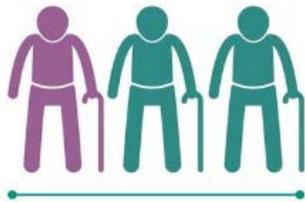
Rapid Change, Dramatic Impact

- Increase in acuity (complexity and frailty) of residents entering LTC:
 - 97% of residents have two or more chronic conditions such as arthritis or heart disease;
 - 90% have some form of cognitive impairment, while 1 in 3 are severely impaired;
 - 46% exhibit some level of aggressive behaviour related to their cognitive impairment or mental health condition;
 - 61% take 10 or more different prescription medications;
 - 58% use a wheelchair;
 - 40% have a mood disorder such as anxiety, depression, bipolar disorder, or schizophrenia; and
 - 38% need monitoring for an acute medical condition.
- Funding and services haven't kept pace with increasing needs of residents.

Source: Excerpted from This is Long-Term Care 2016. Data references are available in the report.

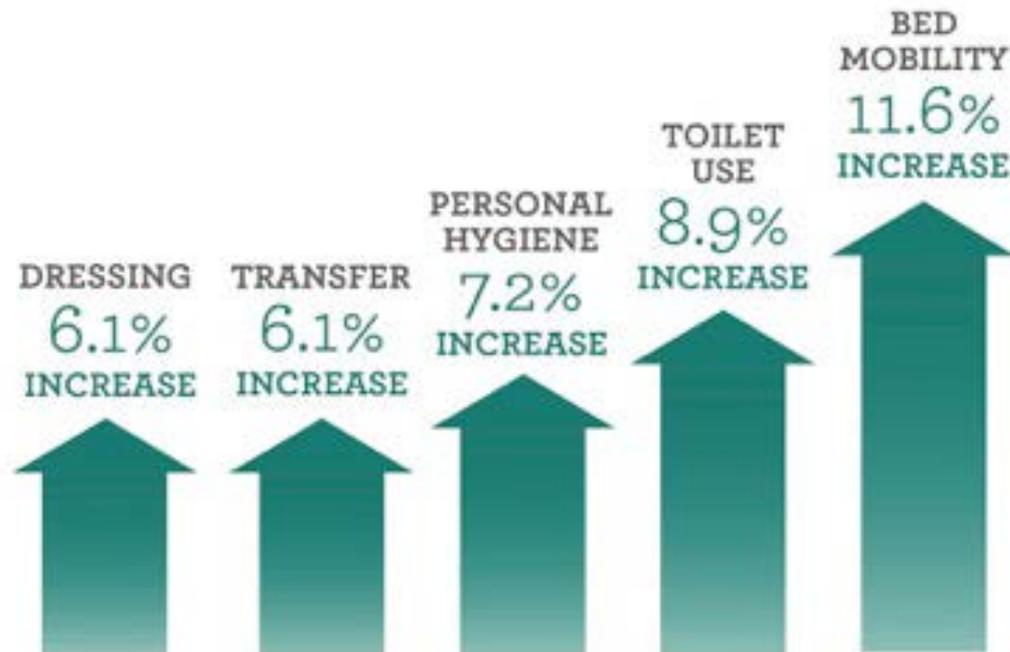
Residents More Frail, Complex

- Majority of LTC residents need help with activities of daily living.
- Increased needs are accompanied by a need for more staff time, skills, and resources.



1 in 3

RESIDENTS IS HIGHLY
OR COMPLETELY
DEPENDENT ON STAFF.



Source: Ontario MOHLTC: IntelliHealth Ontario 2009-2010 and 2014-2015

Public Opinion on LTC

- According to a 2015 poll conducted by Nanos Research on behalf of the Canadian Association for Long-Term Care:
 - Only 2 in 10 Canadians believe there will be enough staff to provide care to seniors when they need it.
 - Less than 1.5 in 10 Canadians are confident that long-term care homes will be prepared for the rising number of Canadians living with dementia.
 - More than 9 in 10 Canadians are concerned that patients are waiting too long for placement in long-term care homes.
 - Approximately 9 in 10 Canadians are concerned there will not be enough long-term care beds to meet the future needs.

Building Better Long-Term Care

- To ensure our seniors receive the safe, high-quality care they need and deserve, we know the government needs to act now.
- Our action plan for Better Seniors' Care, [*Building Better Long-Term Care*](#), highlights the Association's recommendations for building capacity in long-term care homes to deliver on Ontario's Health Action Plan:
 1. Rebuild and modernize older long-term care homes.
 2. Ensure seniors outside of urban centres have sufficient access to care close to home.
 3. Provide a more predictable approach to funding and ensure specialized resources are enhanced to support residents with increasing needs.



Priority 1: Making LTC Homes Safer and more Modern

- Nearly half of Ontario's LTC homes (about 30,000 beds) were built to design standards dating back to 1973 and need significant renovations or to be rebuilt for reasons of:
 - Safety and security for both residents and staff
 - Privacy and dignity
 - Provision of 'home-like' amenities
 - Improvement of fire sprinklers and other safety mechanisms
 - Infection prevention and control
 - Better containment of outbreaks
- New/renovated homes have larger rooms and generous common areas, offering more privacy, no 3- or 4-bed wards.
- We need a more robust renewal program with adequate capital funding.



Priority 2: Give Seniors Outside of Urban Centres Equal Access to Services

- Last year our sector supported more than 100,000 seniors, yet close to 30,000 remained on the wait list.
- In many communities, particularly those where there aren't any other service options, there aren't enough LTC beds to meet demand.
- Standards put forward in 1970s allowed operators to have fluctuating numbers of bed licenses in resident home areas, while new guidelines call for a maximum of 32.
- Result is many homes today do not have the necessary number of licenses to move forward with renewal. Licenses could be added as per Provincial Capacity Plan to help improve access.
- Development charges also impeding some homes from renewing – in some cases \$35,000 per bed is being charged for new construction.

Priority 3: Adopt a More Predictable Funding Approach; Enhance Support for Specialized Resources



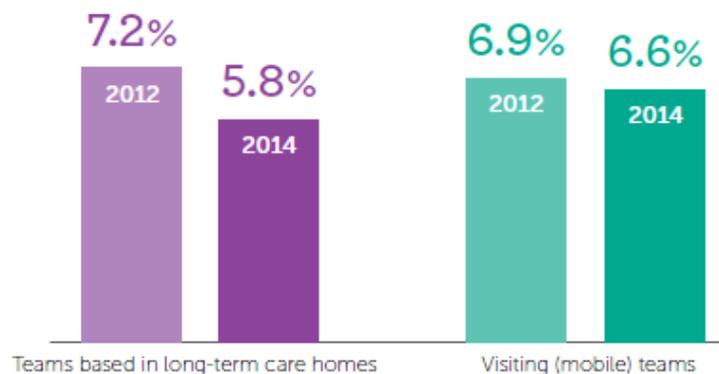
- Funding for care hasn't kept pace with increasing needs of residents. On top of this, operational costs to run homes continue to rise (i.e. in 2016, for some operators hydro-electricity has grown by more than 20%).
- Province sets the current funding environment for Ontario's long-term care sector, and does so exclusively.
- Funding decisions for operational items (Other Accommodation and Raw Food) are made at the political level, typically six months into calendar year, making it very challenging for homes to budget accordingly.
- Adopting a more predictable approach to funding will contribute to greater stability for all homes, while supporting efforts to continue enhancing resident care sector-wide.

Priority 3: Adopt a More Predictable Funding Approach; Enhance Support for Specialized Resources

- BSO teams provide additional supports for residents with dementia.
- In-home teams work daily with residents to reduce stress and identify triggers to stop behaviours before they happen.



Behavioural support teams and declining rates of very severe aggressive behaviour in LTC homes



Source: Ontario Long Term Care Association: An analysis of the performance of BSO mobile and in-home programs for selected indicators, May 2016

- Only some homes have access to in-home BSO teams. In the 2017 Ontario Budget, the province committed to increasing funding for BSO and ensuring every LTC home has access to an in-home team.

Better Seniors' Care – What Can You Do?

- The Ontario Long Term Care Association's action plan for Better Seniors' Care is available at www.BetterSeniorsCare.ca.
- Share this website with your family, friends, colleagues and networks.



Thank you for visiting BetterSeniorsCare.ca

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