

Ontario Long Term Care Association

The background of the entire page is a close-up photograph of several hands of different ages and skin tones clasped together in a supportive grip. The hands are positioned diagonally across the frame, from the bottom left towards the top right. A large, semi-transparent teal circle is overlaid on the bottom left, containing the title text.

Meeting the Needs of Ontario's Aging Population Across the Seniors' Care Continuum: A Case for Municipal Support for Long-Term Care



For more than 60 years, the Ontario Long Term Care Association (OLTCA) has been committed to advancing the quality of long-term care services in Ontario. With advocacy and leadership as a key focus, the Association has been able to influence legislative, policy and regulatory change, support sector expansion and redevelopment, and provide educational opportunities to ensure the increasing needs of residents are being met with safe, high-quality care.

Today, the OLTCA has the privilege of representing 70% of the long-term care homes in Ontario. Like the system itself, the OLTCA includes a range of ownership models: private operators, non-profit and charitable organizations, and municipally operated homes. Our members provide care and accommodation services to more than 70,000 residents annually.

The OLTCA represents the shared interests of all homes across the province, and believes in our collective responsibility to build a strong and sustainable long-term care home sector that delivers the best quality care to Ontario's seniors.



Institute of
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and Economy

The StrategyCorp Institute of Public Policy and Economy provides thought leadership on important public policy issues facing Canadians and their governments across the country by combining policy expertise with key political insights.

The Ontario Long Term Care Association (OLTCA) commissioned the StrategyCorp Institute of Public Policy and Economy to identify opportunities for key sector partners and stakeholders, including municipalities, to work together to improve seniors' access to quality care in Ontario.

For questions specifically regarding this document, please contact the Ontario Long Term Care Association. For questions about StrategyCorp's services please consult strategycorp.com.

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Introduction

A significant demographic shift is underway in Canada – by 2035, one in four Canadians will be over 65 years of age, and within the next 13 years, the population over 80 years of age will double in Ontario.¹ Yet, it is becoming increasingly apparent that our current community, social, and health services are not ready to respond to the significant increase in demand for services that will come with this “grey wave.” As governments and policy makers at all levels prepare to build capacity to meet the needs and expectations of our aging citizens, all partners in the seniors’ continuum - including long-term care - will need to work together to ensure our seniors can receive high quality, timely care in their local communities in the most appropriate setting for their needs.

Seniors in Ontario and across the world want to “age in place” with services and supports being provided directly in their homes and local communities. However, the reality for many people is that as they age, their care needs will become far too complex to be met safely in their homes and communities. While it is crucial to expand the services available to seniors to support in living in their homes as long as possible, there is also a collective obligation to ensure that more intensive and specialized services and supports, such as those provided in long-term care homes, are available in their communities should they and their families need them.

Demand for long-term care today already exceeds available spaces with over 38,000 seniors waiting to move into long-term care homes, with average wait times amounting to over 6 months and with some applicants waiting as long as 2 years.³

This lack of services creates pressure on families and Ontario’s health system – in 2021, individuals waiting for long-term care accounted for 496,007 Alternative Level of Care (ALC) days or approximately 39 percent of all acute ALC days in Ontario hospitals.⁴ ALC refers to someone occupying an acute care hospital bed but not acutely ill and thus not requiring the intensity of resources provided in an acute care hospital setting.

Approximately **1 in 5 seniors** over the age of 80 will have complex needs that require a level of care and services that can only be provided in long-term care homes.²



By 2029, the waitlist for long-term care will grow to 48,000 individuals.⁵ This future demand for long-term care means that more aggressive commitments to develop new beds are required in addition to building 30,000 new spaces and redeveloping the 30,000 existing beds constructed in the 1970s that require critical redevelopment, most before 2025 when their licenses expire. Ontario's stock of long-term care beds was also recently reduced when 4,300 beds in 3- and 4-person ward rooms were taken out of operation to reduce maximum occupancy to two per room to mitigate Infection Prevention and Control (IPAC) risk.⁶ If swift action is not taken to redevelop enough beds to meet growing demand, long-term care capacity in Ontario will decrease substantially and applicants will experience even longer wait times for the long-term care they require.

The Province of Ontario has recently made significant and welcomed commitments to build 30,000 new long-term care beds and increase the level of daily care to four hours per resident by 2025. However, there is a growing consensus that more transformative change is necessary as demand for timely access to long-term care continues to increase, with additional pressures brought on by the COVID-19 pandemic.

As the order of government closest to people's daily lives, municipalities are both key service providers and partners in the delivery of long-term care and other seniors' services across the province. Operating approximately 16 percent of all long-term care homes in Ontario, municipalities leverage their local knowledge and expertise to operate their homes in a way that is highly responsive to the unique needs of the local population, resulting in high satisfaction rates and quality resident outcomes.⁷ Municipalities also have a critical role to play in the development of long-term care more broadly, given the planning and building approvals for new and redevelopment of private and not-for-profit long-term care homes that fall under their jurisdiction.





As a result, there is an opportunity for municipalities to work together in partnership with the Province of Ontario and sector stakeholders to ensure communities have access to the quality care services they need and deserve, whether right at home or in their neighbourhood long-term care home.

This paper identifies three recommendations where municipal support, advocacy and engagement with the Province of Ontario and other key stakeholders can assist in meeting the growing long-term care needs of the province's aging population:

- 1. Enable a fundamental transformation in the public policy dialogue and funding model that recognizes long-term care as an essential component of the seniors' care service continuum in Ontario;**
- 2. Develop a modernized policy and funding methodology that will both enable long-term care beds to be built efficiently to meet today's demand now, and build in sustainability and predictability for the future; and**
- 3. Mobilize enhanced funding and strategies to tackle the worsening health human resources crisis spanning Ontario's entire health system, from home and community care and primary care to long-term care homes and hospitals.**

This paper first seeks to highlight the severity of the current challenges facing long-term care applicants and residents, demonstrating the need for decisive and immediate action. The second part of the paper then outlines the potential solutions to this myriad of challenges and issues a call to action for the long-term care sector, municipal sector and provincial government to work together to deliver the services Ontarians need to be able to age in place.



Why is decisive and immediate action needed?

As Ontario emerges from the most devastating phase of the COVID-19 pandemic and reflects on a period of time which forever altered the lives of tens of thousands of residents, their loved ones, and the staff who care for them, there must be a renewed focus from key sector partners – operators, government, health system partners, families and seniors' advocates – to immediately mobilize to meet the needs of current and future seniors in Ontario.

Despite the fact that Ontario's seniors' population is growing rapidly, many jurisdictions across the province are not adequately prepared to meet the growing demand for long-term care. The time pressure is not the longer-term horizon but the immediate reality of the next 2-3 years. Approximately 30,000 long-term care beds – 38 percent of the province's total bed capacity at present – urgently need to be redeveloped, most before 2025 when their licenses expire.⁸ The Ontario regions most at risk due to license expiry include the GTHA, parts of Northeastern Ontario, parts of Southwestern Ontario, and rural Eastern Ontario (Figure 1).

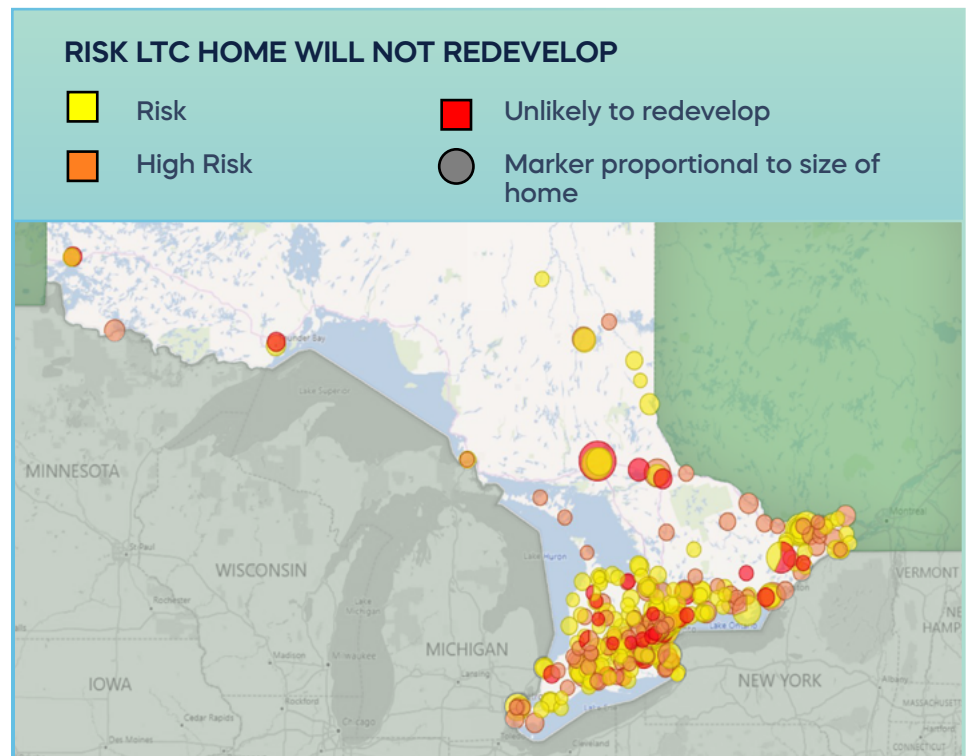


Figure 1

Redevelopment of existing beds and the building of new beds is crucial and must be urgently prioritized, particularly due to rising construction costs, the rising cost to lend, and inflation rates and red tape, which continue to slow down development across the province. If significant action is not undertaken, tens of thousands of Ontario seniors and residents face a future without the care required to support quality of life.



Ensuring a continuum of seniors' care in Ontario



Building more long-term care beds will not alone meet the full demand of seniors' care in the province. Long-term care is one of many seniors' services across a broad spectrum and should be considered as the final option once an individual can no longer receive the care and support they require at home. In fact, long-term care should be reconsidered as one element in a broader holistic approach that integrates the vast range of seniors' services and focuses on ensuring seniors can age in or closer to their homes.

"Aging in place" means having the health, social supports, and services one needs to live safely and independently in their home or community for as long as they wish and are able. Enabling seniors to age in place is proven to improve mobility, personal care, and quality of life, while also fostering a greater sense of dignity and independence. In the absence of sufficient supports closer to home, seniors may turn to more acute services like paramedics, community ambulatory care clinics, and hospital emergency and acute care beds, leading to longer waitlists that often worsen health conditions and add to capacity challenges in hospitals, which are currently overburdened and understaffed. Supports along the care



continuum – and well before urgent or acute care is required – can ensure the right level of care at the right time and place, and work toward quality of life and ending hallway medicine.

Within this context, municipalities play a key role in building age-friendly communities and providing a continuum of seniors' care and supports. Generally, municipalities provide seniors' services like accessible spaces, transportation services, community services, and housing, among others. These services help seniors remain healthy, safe, and active members of their communities. Municipalities also partner with other seniors' service providers like hospital, home care, and community health care organizations to ensure seniors' social supports and healthcare needs are addressed in the community.

A 2021 survey found that 78 percent of Canadians want to age in their current homes, but only 26 percent predict they will be able to do so.⁹

Today, planning and delivery of seniors' services in Ontario is fragmented with responsibilities distributed across the provincial government, municipal governments, traditional health care silos, and long-term care operators, with no cohesive strategy to guide coordination across the various service providers. Municipalities are key to enable the creation of age-friendly communities where seniors can age in place, surrounded by the community supports they know and correlated with improved health outcomes. As a result, there is a need for a broader conversation on how the various levels of governments and community and private partners can collectively build a true continuum of seniors' care in Ontario of which long-term care is one part.

A continuum of care ensures seniors or those that require services can transition from home to retirement to assisted living to long-term care in an effective, timely, and seamless manner as well as access integrated services in or close to home.¹⁰ From a system perspective, investing along the continuum, in areas such as in-home modifications, and home care and community care, can reduce the burden on long-term care and acute care capacity to fill these identified gaps and instead help build a more robust and sustainable system of older adult healthcare that puts people first.

In the absence of an overarching and integrated provincial strategy for creating a continuum of care for seniors, some municipalities – such as Toronto and York Region – have developed Seniors' Strategies for their communities to ensure the lens of equity, accessibility and inclusivity for older adults is applied as municipalities grow, plan and adapt.

What are the challenges?

- Since 2007, every upper or single-tier southern municipality is required to maintain at least one municipal long-term care home. **However, long-term care is one element of a broader continuum of seniors' care** made up of primary care, hospital care, community and home care, residential care, and palliative care. In many ways, municipalities are



asked to operate a piece of that continuum in isolation, with limited access to the broader healthcare system serving seniors, in spite of the real and tangible benefits of a more integrated and coordinated network of healthcare supports for aging adults.

Municipalities are strong proponents of “aging in place”, with many developing policies and planning frameworks to support transforming this from an accepted concept-in-principle to an implementable action plan. However, municipalities cannot independently meet needs and will need support and investment from a range of stakeholders, including other seniors’ services providers, long-term care operators and governments.

- **Municipalities are not immune to the core challenges facing other types of providers in delivering long-term care services, including insufficient provincial funding and sustainability.** Municipalities have a unique understanding of their community’s profile and needs as well as established relationships with community partners, other orders of government and external service providers. While their local on-the-ground expertise and experience as frontline service providers has been beneficial in delivering long-term care services to their residents, many municipalities also question to what extent these service standards are sustainable.

As will be demonstrated below, the costs of operating a long-term care home are escalating, especially in relation to human resource requirements. To offset these increasing pressures, many municipalities make up the shortfall from provincial funding on the property tax base in order to provide their current levels of care – this is especially worrisome since municipalities have limited revenue tools available to them to generate income. Notably, the Association of Municipalities of Ontario (AMO) reports that municipalities contribute about \$350 million annually to long-term care, above provincial funding and excluding capital costs.¹¹ This subsidization of long-term care is not only unsustainable but is likely to grow as long-term care operating pressures increase, and municipalities will need to balance their long-term care services with other service delivery needs in their regions.

What are the opportunities?

- **Long-term care homes should be included as key partners in the comprehensive and effective planning of care services within communities.** This will require strong strategic partnerships with the full variety of healthcare providers across the private, public and not-for-profit sectors to tap into respective strengths and collaboratively deliver citizen-focused care. For municipalities, this may also mean sunseting or exiting direct delivery of long-term care to ensure true integration of long-term care services under the provincial banner.
- **The province should fund and make mandatory the development of Aging in Place planning at the municipal level,** comparable to the legislative requirement that



municipalities must create Community Safety and Well-Being Plans. These Aging in Place plans will identify and create collaborative opportunities for the province and municipalities to take a community-centered approach in designing the full continuum of seniors' services. They should also consider the integral role of long-term care in fulfilling provincial and municipal affordable housing commitments, especially given that a minimum of 40 percent of long-term care beds in Ontario are available for rate reductions based on income.

Given that municipal governments are embedded in the local community fabric, a reality further brought home by the experience of the COVID-19 pandemic, they are well-positioned to support, advocate for, and advance the 'continuum of care' and other innovative models, partnerships and developments. The ultimate objective is to create complete communities, where Ontarians can live, work, play and age in the communities they know and love

Recommendation #1

Enable a fundamental transformation in the public policy dialogue and funding model that recognizes long-term care as an essential component of the seniors' care service continuum in Ontario.



Building and redeveloping critical long-term care beds to meet current and future demands

As waitlists and waiting periods for accessing long-term care beds grow ever longer in Ontario, there must be a dual focus both on building new long-term care homes and redeveloping the older homes, which have significant space constraints and outdated infrastructure and saw major outbreaks during the COVID-19 pandemic as a result. The provincial government's recent \$1.75 billion commitment to help accelerate the construction of urgently needed long-term care projects is a key step towards getting more shovels in the ground. Yet, operators continue to encounter significant challenges that are preventing more rapid construction of long-term care beds across the province.

What are the challenges?

- **The provincial Construction Funding Subsidy (CFS) does not accurately reflect current market costs and realities.** Across Canada's 11 largest municipalities, residential and non-residential capital projects are contending with significant increases in building construction costs. Statistics Canada data from the first quarter of 2022 reveals that there has been a 25 percent year-over-year increase in the cost of construction for residential projects, and a 13 percent increase for non-residential projects.¹²

In line with recent trends across the entire construction sector, some private, not-for-profit, and municipal operators are contemplating deferring or canceling re/development projects due to inflated construction costs, which are making a growing number of projects simply unviable. Approximately 295 homes across Ontario may not be able to redevelop, which account for nearly 38 percent of all long-term care capacity currently.¹⁴

- The current land use planning system fails to reflect two key challenges with respect to long-term care: **the lack of access to suitable and affordable land and an expedited planning approvals process for long-term care homes**, (which can be lengthy, costly, and unpredictable).

In Ontario, the projected 2022 construction escalation rate for long-term care homes is approximately 12 to 14 percent.¹³



On the first point about access to land, limited availability has led to surging costs, pricing many long-term care providers out of the market. This challenge is particularly notable in the Greater Toronto Area, where a recent study conducted by Colliers demonstrated that land values rose by 32.9 percent year-over-year in the fourth quarter of 2021.¹⁵ Even when land is available, such as in rural or more remote areas, the land may not always be suitable for the development of a long-term care home due to lack of municipal servicing, and infrastructure, including zoning restrictions.

Further, on the policy and approvals side, municipal land use planning and development departments are often juggling heavy workloads and must balance different planning applications and files while also ensuring compliance with provincial legislation, regulations and policies.

What are the opportunities?

- **Update the Construction Funding Subsidy (CFS)** model to keep pace with rising construction costs and other re/development cost pressures (e.g. lending rates), which are being significantly impacted by rising inflation. This is consistent with AMO's position,



which recently advocated for provincial capital funding enhancements to better support municipal long-term care capital re/development projects.¹⁶ AMO anticipates that an enhanced CFS would help to reduce municipal reliance on the property tax base to fund capital long-term care projects, as well as incentivize additional municipalities to pursue the capital re/development of long-term care homes. The CFS must support the long-term sustainability of long-term care by building in annual inflationary increases and ensuring the funding is more accurately reflective of prevailing economic realities.¹⁷

- **Strengthen the role of municipalities to streamline/expedite provincial and municipal approvals processes** to expedite the long-term care development pipeline and increase capacity. Timelines for approvals vary across the province and can be several months long, slowing down development and driving up wait lists. This can create additional pressure on municipalities to expand their own scope of long-term care services to make up the difference. By working with the province to expedite development approvals for other long-term care operators, municipalities can mitigate some of the pressure on their own operations and help rapidly expand long-term care bed availability in their communities.



For instance, municipalities may consider implementing a uniform approach to exempting long-term care operators from the Site Plan Approval process and leveraging new tools, such as the Community Infrastructure and Housing Accelerator (CIHA) tool, which was designed to streamline planning approvals to get projects built and meet community needs. The CIHA tool will enable municipalities to submit a request to the Minister of Municipal Affairs and Housing to expedite local priorities such as long-term care facilities and market-rate housing, among others. Municipalities can also benefit from the Ontario government's \$45 million Streamline Development Approvals fund, announced in January 2022 and designed to support municipalities in updating and accelerating their development approvals process.¹⁸

- **Identify innovative policy solutions to address land affordability and scarcity** so that older adults, particularly in the GTA where land is most scarce, will not be forced to leave their community to find a long-term care bed. These solutions range from implementing “campus of care” models to considering more flexible design guidelines and rethinking current land use planning policies to open up access to more land and incentivize more creative solutions that integrate long-term care alongside residential, commercial and institutional land uses.

By way of example, the province and municipalities may consider the benefits associated with permitting long-term care operators to access employment lands. Aside from being a targeted and cost-effective approach, long-term care homes are significant employers within their communities, both directly by offering skilled, well-paid positions within the home as well as indirectly by utilizing local businesses' services. On average, a 128-bed long-term care home employs 130 people.¹⁹

Recommendation #2

Develop a modernized policy and funding methodology that will both enable long-term care beds to be built efficiently to meet today's demand now and build in sustainability and predictability for the future



Tackling the health human resources crisis and building a resilient and sustainable workforce

The pandemic has taken the highest toll on essential workers, particularly within the health human resources sector, and even more specifically those working with high-risk populations – including seniors – in congregate settings like long-term care homes. Most long-term care homes in Canada reported staffing shortages during COVID-19, according to the Canadian Institute for Health Information.²⁰ In 2020, 85% of nursing homes (or long-term care homes) reported staffing challenges among direct-care employees, impacting quality of resident care and employee safety.²¹

With the COVID-19 pandemic now in its third year, these health human resources challenges have only increased. Exacerbating these shortages are high levels of voluntary job exits, due to job stress and burnout.²² By the end of 2021, there were 126,000 vacancies in the health care and social assistance sector, with nursing and residential care facilities seeing a 115 percent increase in job vacancies over the two-year pandemic period.²³

In Ontario, staff shortages in healthcare services have reached dire levels, with hospital emergency rooms having to temporarily close due to not having enough staff able to work. Along with healthcare experts and advocates, municipalities have raised the alarm, concerned about availability of and access to urgent healthcare services in their communities.

Forecasting long-term, the labour shortage is expected to worsen as the aging population increases. The OECD estimates that by 2040, Canada will require an 80 percent increase in all healthcare staff in order to maintain the current ratio of healthcare staff to individuals 65 and over.²⁵ Demand for critical positions in long-term care like Personal Support Workers (PSWs) and Registered Nurses (RNs) is already outpacing supply. For these reasons, investing in attracting, training, and retaining these critical staff is crucial to addressing the health human resources crisis today as well as ensuring that individuals can get the care they require when they need it in the future.²⁶

21 percent of long-term care facility or seniors' residence workers intend to change or leave their job in the next three years.²⁴



What are the challenges?

- **Cost pressures continue to escalate due to** higher staffing costs related to the need to employ more staff to meet growing consumer demand and increasing resident acuity, compensating for overtime and sick pay during the pandemic, and ensuring competitive wages.²⁷
- **Attraction and retention of staff is a significant challenge**, with long-term care homes competing with other healthcare entities for limited health human resources. This challenge is magnified for smaller homes in northern and rural municipalities, where the current operating funding levels are already insufficient to maintain an adequate staff complement and it is harder to incentivize staff to move and/or commute to northern or rural areas.²⁸ Given some communities are disproportionately impacted, not only top-down but also bottom-up community solutions are required to ensure critical health human resource needs are met.
- **Staffing challenges are only forecasted to grow if action is not taken today.** By 2029, long-term care will need at least 58,600 more nurses and personal support workers to support the new 30,000 spaces and achieve the new four hours of care requirement.²⁹ That is more than double the current nursing and PSW workforce in long-term care. It takes six months to year to train PSWs, two years to train Registered Nurse Practitioners (RPNs), and four years to train nurses. Thus, traditional or 'status quo' methods of recruiting and training staff are simply insufficient to meaningfully addressing the current and future global staffing crisis.





What are the opportunities?

- **Develop innovative approaches to meet staffing needs.** To meet today's and tomorrow's staffing needs, innovative models of education that support training and career laddering on the job while serving seniors are required. There is also a need to unlock the potential of the staff we have in our homes today by allowing them to work to their full scope of practice and through recognizing and expanding the role of our allied health colleagues who are integral to the quality care.
- **Build upon existing commitments to develop a multi-year health human resources strategy** that builds a resilient and sustainable workforce. Investing in staffing and compensation, training, and improving staffing ratios and skill mix are some of the key initiatives needed to address the health human resources crisis in long-term care homes. These efforts are all the more important as the province works to improve the quality of long-term care by increasing the hours of direct care for each resident to an average of four hours per day by 2025.

While this new commitment aligns with a people-focused approach to long-term care and will enhance residents' quality of life, long-term care homes will need support in addressing the staffing impacts as a result of this commitment, including recruitment, retention and training. Ontario's postsecondary education sector can play a key role in this regard as they are critical partners in the development and training of professional staff of all stripes. Finally, the strategy should also take a regional lens to address the unique challenges in northern and rural areas and ensure these communities have the specialized staff they desperately need.³⁰

Recommendation #3

Mobilize enhanced funding and strategies to tackle the worsening health human resources crisis spanning Ontario's entire health system, from home and community care and primary care to long-term care homes and hospitals.



Conclusion



Today, seniors are waiting 25 percent longer for long-term care than they did in 2011.³¹ The waitlist has nearly doubled to over 38,000 and those waiting for long-term care placement in acute care settings account for 39 percent of all ALC days. Estimated demand for long-term care on its own, outside of other healthcare services, is expected to grow by 38 percent province-wide in the next 10 years.³² Ontario requires over 30,000 new long-term care spaces based on current utilization. Another 48,000 more spaces are required to eliminate waitlists, including ALC.³³ Further exacerbating the challenge are the tens of thousands of bed licenses set to expire in short order.



Ontario's long-term care system is on the brink of collapse if significant and meaningful action is not taken immediately. Moreover, as the analysis above demonstrated, the impact will not be equally felt across the province. The hardest hit regions will be the GTHA, parts of Northeastern Ontario, parts of Southwestern Ontario, and rural Eastern Ontario.

It is clear that the repercussions associated with inaction will be catastrophic. An inadequate response to these issues puts seniors at risk of insufficient care when they most need it and will place a significant strain on families seeking care for their loved ones. Communities across Ontario will also be severely impacted as the unmet demand for quality seniors' care will place considerable pressure on local services to fill the gap.

Collaboration must be the path forward. Addressing the deep and structural challenges to delivering a true continuum of care for older adults requires an 'all hands on deck' approach with all levels of government and sector stakeholders working together. It is our collective responsibility to swiftly mobilize to protect the health and well-being of our seniors for generations to come.

Municipalities are key in their unique role as both direct service providers of and approval authorities for long-term care. They face the same challenges as long-term care providers on both the capital and operating side and yet have a distinct perspective as the level of government with its ear most to the ground. Municipalities know their communities the best, and this has the potential to be the foundation for a transformative partnership between the province, municipal sector and existing long-term care providers to overhaul the current model of long-term care in Ontario.

By focusing on a holistic approach that situates long-term care on a spectrum of seniors' services, there is the potential to realize meaningful change in how we conceptualize and deliver healthcare services for older adults. Through advocacy and collaboration with the province and sector stakeholders, municipalities can play an instrumental role in ensuring that older residents in their communities have access to the high-quality healthcare services they need and deserve. Aging in place can become a reality for the millions of Ontarians that desire it.



End notes

¹ Statistics Canada. **Population estimates on July 1st, by age and sex (2020)**. <https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=1710000501>.

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¹⁰ Ontario Long Term Care Association. **Long-Term Care Plus (2019)**. https://www.oltca.com/OLTCA/Documents/Reports/LongTermCarePLUS_Dec2018.PDF

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¹³ Turner & Townsend. **Benchmark Report & Cost Study – OLTCA Cost Study. (July 2022)**.

¹⁴ Based on internal analysis conducted by the Ontario Long Term Care Association (OLTCA).

¹⁵ Storeys. **GTA Industrial Land Costs Have Almost Doubled in 18 Months. (February 11, 2022)**. <https://storeys.com/gta-industrial-land-costs-almost-doubled-18-months/>.

¹⁶ Association of Municipalities Ontario (AMO). **Creating Viable Long-Term Care Home Development and Redevelopment: Submission to the Ministry of Long-Term Care (July 2021)**. p. 2.

¹⁷ Ontario Long Term Care Association, **Long-term care that works. For seniors. For Ontario: 2019 Budget Submission**, p. 9.



¹⁸ Government of Ontario. **Ontario-Municipal Summit Seeks Solutions to Build More Homes: Province announces more than \$45 million to help streamline development approvals and increase housing supply.** <https://news.ontario.ca/en/release/1001442/ontario-municipal-summit-seeks-solutions-to-build-more-homes>.

¹⁹ Ontario Long Term Care Association. **The Ontario Long Term Care Association's Submission to the Ministry of Municipal Affairs and Housing regarding Amendments to the Development Charges Act and Planning Act.** <https://ero.ontario.ca/comment/31849>.

²⁰ Canadian Institute of Health Information (CIHI). **COVID-19's impact on long-term care (2021).** <https://www.cihi.ca/en/covid-19-resources/impact-of-covid-19-on-canadas-health-care-systems/long-term-care>

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²⁴ Based on an internal membership survey conducted by the Ontario Long Term Care Association.

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²⁸ Ibid.

²⁹ Based on internal analysis conducted by the Ontario Long Term Care Association (OLTCA).

³⁰ Ibid.

³¹ Based on data analysis conducted by Preyra Solutions Group (PSG).

³² Ibid.

³³ Ibid.



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