

LONG-TERM CARE

VALUE STATEMENT

I expect municipal long-term care homes to be safe, provide quality care and services; and facilitate access to related health services, as required.

LONG-TERM CARE

What is this Service?

Long-Term Care (LTC) Services provide quality resident-focused care within municipal LTC homes and offer programs that meet the needs of individuals who are no longer able to live independently. The goal is to maximize quality of life and safety for residents.

Each municipality is required by legislation to operate an LTC home. Operators can also include charitable and private sector organizations. All LTC operators are provincially funded and governed by the same legislation and standards set by the Ministry of Long-Term Care.

Some municipalities provide community programs (for example adult day services, homemakers and meals on wheels) which provide support to clients and family caregivers. These services enable many clients to remain independent in their own homes.

Objectives May Include:

- Provision of 24-hour clinical and psychosocial care
- Appropriate dietary and nutritional assessments
- Stimulating recreational and social activities
- Adherence to infection and prevention protocols

Influencing Factors:

- **Service Levels:** Service levels will vary based on resident needs (acuity levels), which will impact both the cost of providing service and staffing levels.
- **Location/Supply:** Municipal and District homes in Northern communities hold a significant proportion of the LTC beds provided in the area. Without municipal participation, some areas of the province would have limited access to LTC services. Conversely, Municipal and District homes in some southern and urban communities make up a smaller proportion of overall LTC beds given the significant number of LTC beds operated by other provider types. As a result, this may lead to greater choice of long-term care homes in these communities.
- **Staffing Mix:** Costs are affected by staffing levels, the ratio of registered vs. non-registered staff and the case mix index (CMI).
- **Bed Availability:** The number of bed days will be impacted by beds held in abeyance. Beds could be held in abeyance due to outbreaks or other local or provincial health mandates.

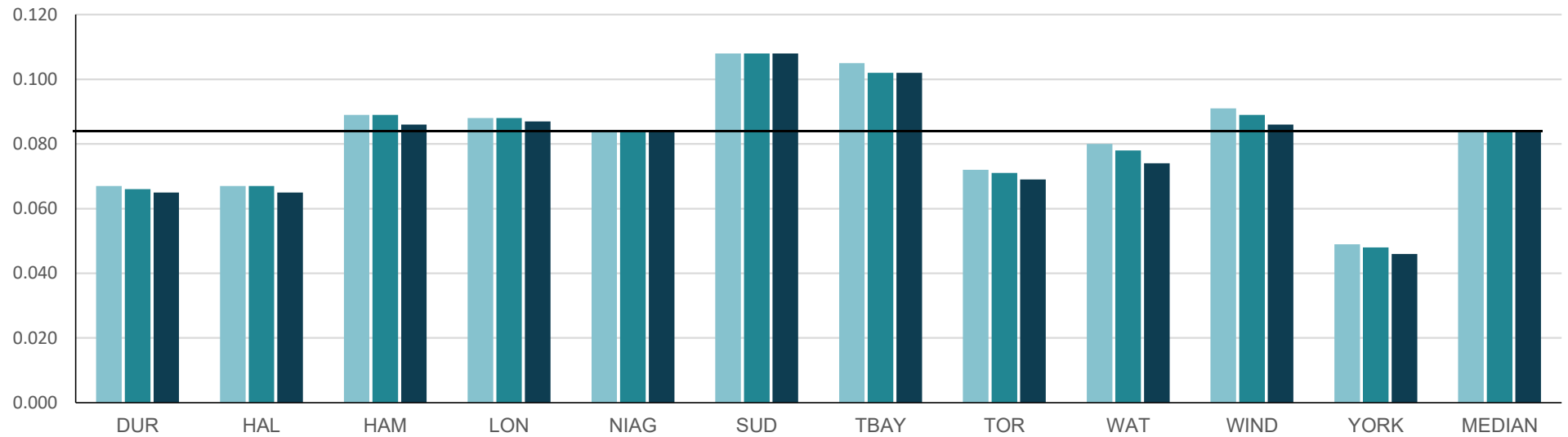
Extenuating Circumstances:

- **COVID-19 Pandemic:** Throughout 2020, the long-term care sector was significantly impacted by the COVID-19 pandemic. This impact was felt by service providers as well as residents and their family members. Changes in provincial directives and public health policies resulted in the need to implement enhanced infection prevention and control measures (e.g., increase in nursing and other staff, PPE, cleaning, screening assessment, testing, etc.). The pandemic also highlighted the need to provide increased mental health supports for residents and their families due to significant changes in their routines and social interaction. Municipalities increased the use of online technologies to support resident and family engagement.

Long-Term Care

Figure 20.1 Number of Long-Term Care Beds per Population 75 Years and Older

The need for long-term care beds is influenced by the availability of other services, e.g. hospital beds, complex continuing care, other community care services, supportive housing, adult day spaces, etc. These services are designed to work together to provide a continuum of health care for residents.



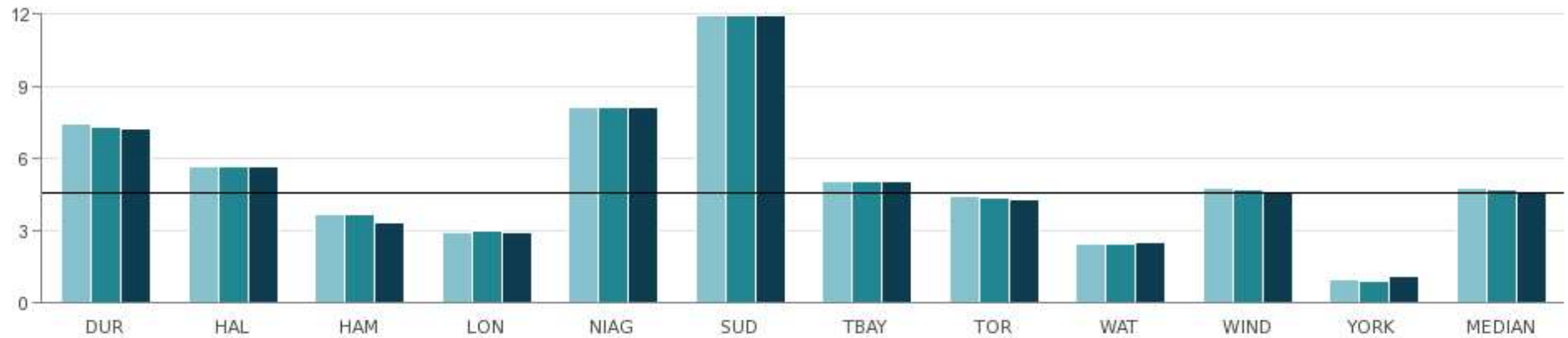
2018	0.067	0.067	0.089	0.088	0.084	0.108	0.105	0.072	0.080	0.091	0.049	0.084
2019	0.066	0.067	0.089	0.088	0.084	0.108	0.102	0.071	0.078	0.089	0.048	0.084
2020	0.065	0.065	0.086	0.087	0.084	0.108	0.102	0.069	0.074	0.086	0.046	0.084

Source: LTCR105 (Community Impact)

Long-Term Care

Figure 20.2 Municipal Long-Term Care Home Bed Days per Population 75 Years of Age and Older

Municipal homes in northern communities hold a significant proportion of the long-term care (LTC) beds provided in the area. Without municipal participation, some areas of the province would have limited access to LTC services. Conversely, Municipal and District homes in some southern and urban communities make up a smaller proportion of overall LTC beds given the significant number of LTC beds operated by other provider types. As a result, this may lead to greater choice of LTC homes in these communities.



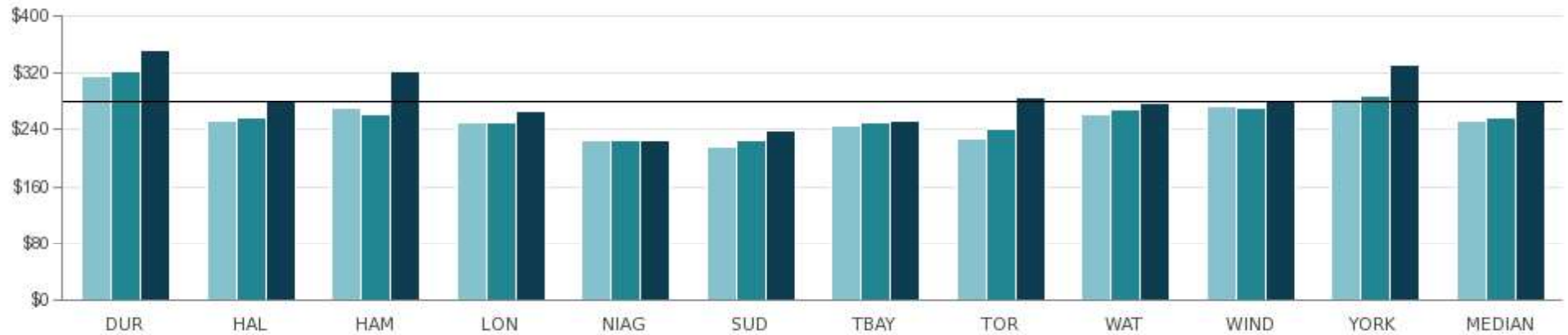
2018	7.41	5.68	3.64	2.95	8.10	11.95	5.02	4.41	2.47	4.79	0.93	4.79
2019	7.32	5.68	3.64	2.98	8.10	11.95	5.02	4.33	2.41	4.70	0.90	4.70
2020	7.20	5.68	3.31	2.95	8.12	11.94	5.04	4.27	2.53	4.56	1.04	4.56

Source: LTCR219 (Service Level)

Long-Term Care

Figure 20.3 Long-Term Care Home Direct Cost (CMI Adjusted) per Long-Term Care Home Bed Day

Results are based on calculations using the Ministry of Long-Term Care Annual Report data. Many municipalities contribute additional resources to their long-term care operations to maintain standards of care that exceed provincial requirements. The need to implement enhanced infection prevention and control measures (e.g., increased nursing hours, extra staff for screening/testing and other protocols) to ensure the health and safety of residents and staff in response to COVID-19 impacted on 2020 results across all municipalities.



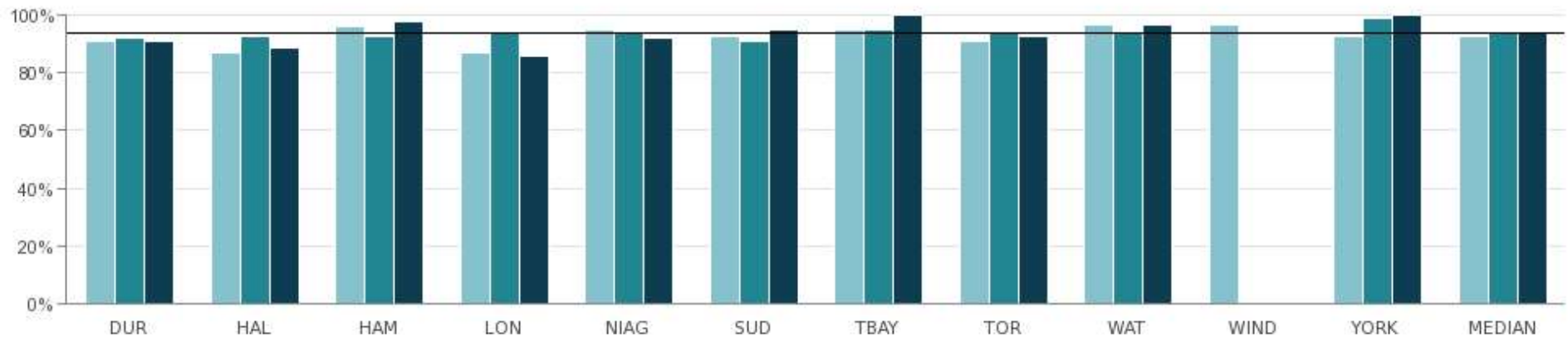
2018	\$316	\$252	\$271	\$250	\$225	\$216	\$245	\$228	\$261	\$272	\$284	\$252
2019	\$323	\$257	\$262	\$249	\$225	\$224	\$250	\$242	\$269	\$270	\$290	\$257
2020	\$353	\$280	\$322	\$265	\$226	\$238	\$253	\$286	\$278	\$280	\$332	\$280

Source: LTCR305 (Efficiency)

Long-Term Care

Figure 20.4 Long-Term Care Resident / Family Satisfaction

Residents and/or their family members are surveyed annually to ensure their needs are understood and services are provided to meet those needs. Municipalities use different survey tools to measure resident and family satisfaction and response rates will vary.



2018	91%	87%	96%	87%	95%	93%	95%	91%	97%	97%	93%	93%
2019	92%	93%	93%	94%	94%	91%	95%	94%	94%	N/A	99%	94%
2020	91%	89%	98%	86%	92%	95%	100%	93%	97%	N/A	100%	94%

Source: LTCR405 (Customer Service)

Windsor: The City is unable to report the Long-Term Care Resident/Family Satisfaction measure for 2019 and 2020. The data has not been analyzed as staffing resources have been dedicated during the pandemic to resident care and preventing COVID-9 from entering the home.