



Published plans and annual reports 2020-2021: Ministry of Long-Term Care

Plans for 2020-2021, and results and outcomes of all provincial programs delivered by the Ministry of Long-Term Care in 2019-2020.

Ministry overview

Ministry's vision

The Ministry of Long-Term Care is working to end hallway health care, reduce waitlists and ensure that our long-term care (LTC) sector has a proper path forward to address the care needs of our growing elderly population.

Working across government and with sector stakeholders, the ministry is working diligently to improve Ontario's long-term care system to ensure Ontarians receive access to the quality care they deserve, in a safe, home-like environment when and where they need it.

The ministry works to deliver better coordinated care in the community and closer to home by improving quality of life for residents of long-term care homes, ensuring Ontario's healthcare system is ready to seamlessly transition seniors through various levels of care and working with the Ministry of Health and our sector partners to reduce long-term care waitlists across the province.

COVID-19 response

The government acted swiftly to address the COVID-19 outbreak, issuing its first guidance to the long-term care sector on February 3, 2020. This guidance, and other directives, were frequently updated in the face of an evolving situation and was followed up with two packages of regulatory amendments, four emergency orders, and numerous other measures. On March 25, 2020, the government released Ontario's Action Plan: Responding to COVID-19, the March 2020 Economic and Fiscal

Update. This \$17 billion government-wide response was made to ensure the health care system, communities and economy are positioned to weather the challenges ahead.

Part of this \$17 billion response includes investing \$243 million to assist the sector to prevent and contain the spread of infection through measures such as 24/7 screening, more staffing to support infection control, emergency capacity, and supplies and equipment to help tackle the COVID-19 outbreak.

On April 25, the government announced additional support for frontline workers fighting COVID-19, including long-term care clinical and support staff, through temporary pandemic pay of \$4/hour worked on top of their regular wages. In addition, the government will be providing monthly lump sum payments of \$250 for four months to eligible frontline workers who work over 100 hours per month. The pandemic pay will be effective for 16 weeks, from April 24, 2020 until August 13, 2020.

Ministry programs

The Ministry of Long-Term Care has a vision for a 21st century integrated long-term care sector that is well-resourced, puts residents at the centre and is ready to welcome our most vulnerable when and where they need it. To support this vision, the ministry is working to create 15,000 new spaces and redevelop 15,000 older spaces to modern design standards and introduce virtual long-term care to address capacity pressures in the health care system.

The ministry is also leading the response to the recommendations from Justice Eileen E. Gillese's Public Inquiry into the Safety and Security of Residents in the Long-Term Care Homes System.

Bed development/access to care

The Ministry of Long-Term Care is modernizing the development of long-term care spaces across Ontario to expedite the creation of 15,000 new spaces, redevelop 15,000 older spaces and introduce virtual long-term care spaces throughout the province – supporting our goal of ending hallway health care and improving access to high-quality and reliable long-term care.

The ministry is investing \$1.75 billion to get shovels in the ground and ensure our most vulnerable Ontarians get off waitlists and into appropriate care settings faster.

This will help increase access to long-term care, reduce waitlists, ease hospital capacity pressures, provide more appropriate care and end hallway health care across the province.

To date, the ministry has allocated 7,889 spaces or over half of the first 15,000 new long-term care spaces.

To ensure these new and redeveloped spaces are available where they are needed most, and as quickly as possible, the ministry has modernized the application process for long-term care development and is working to reduce red tape and streamline processes so that shovels are in the ground more quickly.

Reducing red tape

In collaboration with the Ministry of Economic Development, Job Creation and Trade (MEDJCT) and CO-Open for Business, the ministry has identified a number of policy amendments that support the government's strategy to streamline regulatory requirements for business by a minimum of 25% and achieve over \$400 million in cost savings while still maintaining resident health and safety as a top priority.

As part of its two-year burden reduction plan, the ministry has focused on reducing administrative burden for homes by streamlining and modernizing the licensing process. In addition, the ministry is streamlining approvals, reducing applicant costs and eliminating red tape in the LTC Development program.

Quality of life

The Ministry of Long-Term Care is committed to improving the quality of life of residents living in long-term care homes.

In July 2019, The Honourable Eileen E. Gillese, Commissioner of the Public Inquiry into the Safety and Security of Residents in the Long-Term Care Homes System, released her final Report and Recommendations providing a thorough analysis into areas for improvement within long-term care homes.

The ministry has been comprehensively reviewing the recommendations from Justice Gillese's Public Inquiry, and in collaboration with our long-term care sector partners, a total of 18 of the recommendations have been implemented, with 40 others underway.

The ministry is leading a working group with the Ministries of Health, the Solicitor General, the Attorney General, and Seniors and Accessibility, and will continue to review the Gillese Inquiry's recommendations, to ensure a collaborated and coordinated response on behalf of the sector.

While a report on the progress to date will be provided by July 31, 2020, the COVID-19 outbreak has had a significant impact on the day-to-day operations of the government and long-term care sector partners, and in turn on the continued progress made against many of the Gillese Inquiry recommendations.

However, the unprecedented challenges and tragic loss associated with COVID-19 in long-term care homes have reinforced the urgent need for reform identified through the Gillese Inquiry. Implementation of these recommendations will remain a key priority of the ministry, even as the lessons of COVID-19 are assessed.

Resident safety and security

The Ministry of Long-Term Care is committed to the safety, quality of care and quality of life of residents.

The ministry uses a risk-based inspection framework that prioritizes homes with high-risk complaints, critical incidents or concerning performance on quality measures for closer monitoring and more in-depth inspections. Every home is inspected at least once a year and the ministry's risk-based inspection framework determines the frequency of inspections.

The ministry prioritizes all reported issues according to the risk to residents and responds immediately to any reports of serious harm or risk of serious harm to a resident. If an inspector issues a Compliance Order, there is a follow-up inspection to ensure the compliance has been corrected. Once inspections are finalized, all inspection reports are made available to the public. In 2019, 2,882 inspections were conducted in Ontario's 626 long-term care homes.

The ministry has specifically addressed 12 of 27 recommendations to the ministry from the Gillese Inquiry that were focused on inspections, including modernizing the Long-Term Care Homes Performance Report and issuing a Minister's directive on the use of glucagon and severe hypoglycemia and unresponsive hypoglycemia. In addition, a Director's memo was issued regarding the destruction and disposal of

insulin cartridges.

Staffing

The Ministry of Long-Term Care understands that proper staffing is essential to meeting the needs of long-term care residents, and that there are challenges when it comes to recruiting and retaining frontline staff. These challenges have become more evident through COVID-19.

The ministry has recently announced investments in 2020-2021 that will increase funding to the sector by \$102 million to maintain the overall quality of care. This includes an increase in the level of care per diem provided to all homes for staffing and other care needs.

This is building on staffing-related investments in 2019-2020 which included funding to:

- Further support the maintenance of direct care services and other operating costs. Long-term care homes may use this funding for Nursing and Personal Care, Personal Support Services, Raw Food, and Other Accommodation.
- Maintain direct care staffing levels in all homes as well as additional staffing support for small long-term care home operators – those with 64 spaces or fewer.

The ministry has also made investments in training, including support given to personal support workers' continuing education and professional development.

The ministry also launched a staffing study in February to identify appropriate staffing models, as well as best practices on the training, recruitment and retention of personal support workers, nurses and other care staff—fulfilling a key recommendation from the Gillese Inquiry. The study is being led by an external advisory group which will inform a comprehensive staffing strategy to ensure the long-term care system is sustainable for years to come.

These efforts and investments will position the ministry, working in collaboration with the sector, to develop and move forward plans for reform in the months ahead.

2020-2021 strategic plan

The government has announced investments in 2020-2021 that will increase funding to the sector by \$102 million to maintain the overall quality of care.

This 2020-2021 investment includes new funding to increase the level of care per diem provided to all homes, an investment for a new Minor Capital Program to help maintain long-term care homes, as well as funding to continue the three pilot Behavioural Support Units sites initiated last year.

Currently, the COVID-19 outbreak has created unprecedented challenges in the health and long-term care sectors.

On March 17, the government announced \$50 million in initial emergency funding to the long-term care home sector that was effective immediately to support long-term care homes in preventing new infections, containing the spread of any existing infections, and responding to staffing challenges. The first portion of this funding, \$25 million, was flowed in March for expenses incurred in the 2019-2020 fiscal year.

The second portion of the emergency funding, \$25 million, was flowed in April for 2020-2021. This amount was included in the \$243 million in funding, which was announced on March 25, to support funding for 24/7 screening, more staffing to support infection control, and supplies and equipment to help tackle the COVID-19 outbreak.

On April 15, the government launched the COVID-19 Action Plan: Long-Term Care Homes to ramp up the protection of long-term care residents and staff through aggressive measures that included more extensive testing. Building upon the previous guidance from Dr. David Williams, Ontario's Chief Medical Officer of Health, a key pillar of this strategy consists of more aggressive testing, screening, and surveillance – leading to virtually all residents and staff in long-term care homes being tested for COVID-19.

Proper staffing is also essential in meeting the needs of, and, protecting long-term care residents. The government has taken actions to ensure homes have enough staff, including issuing four emergency orders, two sets of amended regulations, as well as \$243 million in emergency funding. These measures ensure long-term care

homes have the flexibility and funds to rapidly hire personal support workers and other frontline staff they need, when they need them. This includes funding directly available to help long-term care homes cover the incremental costs of new staff as well as offering full-time hours to part-time staff who are restricted to one workplace.

In addition, the government is helping to meet urgent staffing needs through the Health Workforce Matching Portal, which is matching a pool of workers with open positions at long-term care homes and health sector organizations across the province. The government is also working collaboratively with sector partners to screen and match qualified staffing resources that can be deployed to long-term care homes. These recruitment and deployment efforts are helping to address critical shortages in LTC homes and allocating needed resources to care for residents during the pandemic.

To further support ongoing efforts to fight COVID-19 in Ontario's long-term care homes, the government made a formal request for assistance to the federal government to access key Canadian Armed Forces medical and general duty personnel to support five high-priority long-term care homes to ensure the ongoing safety of residents and maintain effective staffing levels. This request was approved and these staff are now in place.

Ministry planned expenditures 2020-2021 (\$M)	
Category	Amount
COVID-19 approvals	25 . 0
Other operating	4 , 603 . 4
Total ministry	4 , 628 . 4

Category	Amount
Capital	0 . 0
Total ministry	4 , 628 . 4

Detailed financial information

Combined operating and capital summary by vote

Operating expense						
Votes/prog rams	Esti mat es 202 0-20 21 \$	Chan ge from estim ates 2019- 2020 \$	% ****	Esti mat es 201 9-20 20 ^[1] \$	Inte rim actu als 201 9-20 20 ^[1] \$	Act ual s 201 8-20 19 ^[1] l \$
Total including consolidatio n & other adjustment s	4 , 6 28 , 388 , 11 4	234 , 5 28 , 90 0	5 . 3	4 , 3 93 , 859 , 21 4	4 , 4 33 , 465 , 21 4	4 , 3 28 , 367 , 81 7

Votes/programs	Estimates 2020-2021 \$	Change from estimates 2019- 2020 \$	% ****	Estimates 2019- 2020^[1] \$	Interim actuals 2019- 2020^[1] \$	Actuals 2018-2019^[1] \$
Ministry administration program	5,692,500	4,444,500	356.1	1,248,000	1,248,000	N/A *****
Long-term care homes program	4,621,100,800	228,803,600	5.2	4,392,297,200	4,432,153,200	4,328,367,817
Total operating expense to be voted	4,626,793,300	233,248,100	5.3	4,393,545,200	4,433,401,200	4,328,367,817
Total including consolidation & other adjustments	4,628,388,114	234,528,900	5.3	4,393,859,214	4,433,465,214	4,328,367,817

Votes/programs	Estimates 2020-2021 \$	Change from estimates 2019- 2020 \$	% ****	Estimates 2019- 2020^[1] \$	Interim actuals 2019- 2020^[1] \$	Actuals 2018- 2019^[1] \$
Statutory appropriations	314,014	N/A *****	N/A *****	314,014	64,014	N/A *****
Ministry total operating expense	4,627,107,314	233,248,100	5.3	4,393,859,214	4,433,465,214	4,328,367,817
Consolidation adjustment - general real estate portfolio	1,280,800	1,280,800	N/A *****	N/A *****	N/A *****	N/A *****
Total including consolidation & other adjustments	4,628,388,114	234,528,900	5.3	4,393,859,214	4,433,465,214	4,328,367,817

Operating assets						
Votes/pr ograms	Esti mat es 202 0-20 21 \$	Chang e from estima tes 2019-2 020 \$	% ****	Esti mat es 2019 -202 0[1] \$	Inter im actu als 2019- 2020[1] \$	Act uals 201 8-20 19[1] \$
Ministry administr ation program	1,0 00	1,000	N/ ***** A ***	N/A *****	N/A *****	N/A *****
Long- term care program	20, 430 ,00 0	(1,000)	(0 .0)	20,4 31,0 00	20,4 31,0 00	20, 430 ,95 9
Total operating assets to be voted	20, 431 ,00 0	N/A *****	N/ ***** A ***	20,4 31,0 00	20,4 31,0 00	20, 430 ,95 9
Ministry total operating assets	20, 431 ,00 0	N/A *****	N/ ***** A ***	20,4 31,0 00	20,4 31,0 00	20, 430 ,95 9

Capital expense

Votes/program s	Esti ma tes 202 0-2 021 \$	Cha nge from esti mat es 2019 -202 0 \$	% ****	Esti ma tes 201 9-2 020 [1] \$	Int eri m act ual s 201 9-2 020 [1] \$	Act ual s 20 18- 20 19[1] \$
Long-term care program	1,0 00	(4,8 11,0 00)	(1 00 .0)	4,8 12, 000	7,9 67, 200	86 9, 07 3
Total capital expense to be voted	1,0 00	(4,8 11,0 00)	(1 00 .0)	4,8 12, 000	7,9 67, 200	86 9, 07 3
Ministry total operating and capital including consolidation and other adjustments (not including assets)	4,6 28, 389 ,11 4	229, 717, 900	5. 2	4,3 98, 671 ,21 4	4,4 41, 432 ,41 4	4, 32 9, 23 6, 89 0

Ministry total capital expense	1,000	(4,811,000)	(100.0)	4,812,000	7,967,200	869,073
Ministry total operating and capital including consolidation and other adjustments (not including assets)	4,628,389,114	229,717,900	5.2	4,398,671,214	4,441,432,414	4,329,236,890

Historic trend table

Historic trend analysis data	Actuals 2017-2018 ^[1]	Actuals 2018-2019 ^[1]	Actuals 2019-2020 ^[1]	Actuals 2020-2021
Ministry total operating and capital including consolidation and other adjustments (not including assets)	\$4,162,94,07	\$4,329,36,90	\$4,398,71,14	\$4,628,89,14
Percent change	N/A *****	4%	2%	5%

Ministry organization chart

Merrilee Fullerton, Minister

Effie Triantafilopoulos, Parliamentary Assistant

Richard Steele, Deputy Minister

Janice Crawford, Director, Legal Services

Jessica Davidson, Director, Communications

Brian Pollard, Assistant Deputy Minister, Long-Term Care Operations

Stacey Colameco, Director, Long-Term Care Inspections

Michelle-Ann Hylton, Director, Licensing, Policy and Development

Janet Hope, Assistant Deputy Minister, Long-Term Care Policy

Abby Dwosh, Director, Long-Term Care Funding and Programs

Kelci Gershon, Director, Long-Term Care Policy and Modernization

Michael Robertson, Director, Public Inquiries

Sean Court, Assistant Deputy Minister, Strategic Policy, Planning and French Language Services

Robert Francis, Director, Strategic Policy

Allison Henry, Director, Health Workforce Regulatory Oversight

Anne Hayes, Director, Research, Analysis and Evaluation

Joanne Plaxton, Director, Indigenous, French Language & Priority Populations

Robert Francis, Director, Policy Coordination and Intergovernmental Relations

Dr. Michelle Acorn, Provincial Chief Nursing Officer

Peter Kaftarian, Assistant Deputy Minister and Chief Administrative Officer, Corporate Services

Cherrie Lethbridge, Director, HR Strategic Business Unit

Teresa Buchanan, Director, Fiscal Oversight and Performance

Shelley Gibson, Director, Business Services and Facilities

Jim Yuill, Director, Financial Management

John Amodeo, Director, Corporate Management

Michael Hillmer, Assistant Deputy Minister, Capacity Planning and Analytics

Aileen Chan, Director, Health Data

Jennifer Bridge, Director, Health Analytics and Insights

Kamil Malikov, Director, Health Data Science

David Lamb, Director, Capacity and Health Workforce Planning

Karen McKibbin, Chief Information Officer, Health Services I&IT Cluster

Louise Doyon, Head, Community, Mental Health and Addictions
and Long-Term Care I&IT Solutions

Appendix

Annual report: 2019-2020 results

Long-term care is a top priority for the government. That's why, on June 25, 2019, the government announced the creation of a standalone ministry dedicated to long-term care in Ontario. The ministry's priorities include:

- ensuring Ontario's health care system is ready to seamlessly transition seniors through various levels of care
- working with the Ministry of Health and our partners to reduce long-term care waitlists across the province and end hallway healthcare in hospitals

Working across government and with sector stakeholders, the ministry is working diligently to improve Ontario's long-term care system to ensure Ontarians receive access to the quality care they deserve, in a safe, home-like environment when and where they need it.

Most recently, the COVID-19 outbreak has created unprecedented challenges in the health and long-term care sectors.

On March 17, the government announced \$50 million in initial emergency funding to the long-term care home sector that was effective immediately to support long-term care homes in preventing new infections, containing the spread of any existing infections, and responding to staffing challenges. The first portion of this funding, \$25 million, was flowed in March for expenses incurred in the 2019-2020 fiscal year.

Long-term care spaces

The ministry is investing \$1.75 billion to create 15,000 new long-term care spaces and

redevelop 15,000 existing, older spaces and introduce virtual long-term care. This will help increase access to long-term care, reduce waitlists, ease hospital capacity pressures, provide more appropriate care and end hallway health care across the province.

To date, the ministry has allocated 7,889 spaces of the first 15,000 new long-term care spaces, and 11,727 existing spaces to be to be redeveloped in 128 active projects.

Over the past year the ministry has announced the allocation of:

- 76 new long-term care spaces and 85 upgraded long-term care spaces in Picton
- 168 new and 280 upgraded long-term care spaces in Brampton
- 457 new and 275 upgraded long-term care spaces in Mississauga
- Almost 1,000 new long-term care spaces and almost 800 upgraded long-term care spaces in Haldimand-Norfolk, Brant, Hamilton, and Niagara
- Almost 200 new long-term care spaces and 300 upgraded long-term care spaces in Bruce-Grey
- 30 new and 98 upgraded long-term care spaces in Winchester
- 200 new long-term care spaces to Runnymede Long-Term Care Home in Toronto
- Funding for specialized long-term care support for residents with complex needs through the Behavioural Specialized Unit pilot program (a 30-bed unit at Cooksville Care Centre, a 26-bed unit at Fairview Lodge and a six-bed step-down unit at Linhaven)

Public inquiry

The government demonstrated its commitment to long-term care through the creation of a dedicated ministry to improve quality of life for residents.

A key role for the ministry includes the implementation of recommendations from the Gillese Inquiry into the Safety and Security of Residents in the long-term care homes system directed at the Ministry of Long-Term Care.

The ministry has been comprehensively reviewing the recommendations from the Public Inquiry and, in collaboration with sector partners, a total of 18 recommendations have been implemented, with another 40 underway.

The government continued to provide counselling services to the victim and the victims' families and loved ones who were originally approved by the Commission for a period of two years.

Staffing in long-term care

The Ministry of Long-Term Care knows that staff in long-term care homes are the backbone of the sector. The ministry is also aware that staffing plays a crucial role in ensuring that the needs of all long-term care residents are being met, and that there are real challenges when it comes to recruiting and retaining frontline staff.

Fulfilling a key Gillese Inquiry recommendation (#85), the ministry launched a staffing study to inform the development of a comprehensive staffing strategy. The study is being supported by an external advisory group and will consider potential long-term care staffing models as well as best practices for the training, recruitment and retention of personal support workers, nurses and other care staff.

Funding

After consulting with stakeholders, the Ministry of Long-Term Care extended the High Wage Transition Fund and the Structural Compliance Fund while it worked to develop new programs to improve how long-term care is delivered in Ontario. The transitional extension of these funding streams was intended to ensure that gaps in long-term care staffing and funding could be addressed while work was done to modernize and increase access to long-term care in Ontario.

The government extended the High Wage Transition Fund to December 31, 2020 as it develops a long-term care staffing strategy.

The government also extended the Structural Compliance Premium to March 31, 2020, to address feedback from stakeholders that minor capital is needed to help maintain long-term care homes.

Following sector consultations held in January 2020 to inform the design of what a new minor capital program could look like, on April 1, 2020 the government introduced a new minor capital fund, which will be phased-in over multiple years, to help maintain and extend the life of long-term care homes.

Key performance indicators

Building on the trend from the prior year, continued investment in maintaining and strengthening the long-term care system is expected to have a positive outcome, including:

Outcome measure #1 - Median wait time from long-term care application to placement

- As the government adds new bed capacity and embarks on initiatives to modernize service delivery and address LTC capacity pressures, wait times are expected to decrease. The median wait time has remained relatively stagnant. The target is to decrease wait times annually in future years compared to 2018 levels.

Outcome measure #2 - Percentage of long-term care home residents who were physically restrained on a daily basis

- There are many potential physical and psychological risks associated with applying physical restraints to older adults, and such use raises concerns about safety and quality of care. The lower the percentage, the better the outcome. Over the last few years, the proportion of residents who were physically restrained on a daily basis has steadily decreased.

Outcome measure #3 - Rate of hospitalizations for falls per 1,000 long-term care home residents

- The rate of hospitalizations for falls per 1,000 long-term care home residents has steadily decreased over the last few years.

Outcome measure #4 - Percentage of residents on antipsychotics without a diagnosis of psychosis

- Antipsychotic drugs are sometimes used to manage behaviours in residents who have dementia. Careful monitoring is required, as such use may carry negative results on safety and quality of care.
- The percentage of residents on antipsychotics without a diagnosis of psychosis has steadily declined over the last few years suggesting the potentially inappropriate use of anti-psychotics in long-term care is decreasing and homes may have found alternative means to help residents manage responsive

behaviours.

Ministry interim actual expenditures

2019-2020^[2]

Expenditure	Number
COVID-19 approvals (\$M) *****	25 . 0
Other operating (\$M) *****	4 , 408 . 5
Capital (\$M) *****	8 . 0
Total ministry (\$M) *****	4 , 441 . 4
Staff strength ^[3] (as of March 31, 2020)	338 . 0

Updated: March 31, 2022

Published: December 14, 2020

Footnotes

- [1] ^ Estimates, Interim Actuals and Actuals for prior fiscal years are re-stated to reflect any changes in ministry organization and/or program structure. Interim Actuals reflect the numbers presented in the March 2020 Economic and Fiscal Update.
- [2] ^ Interim actuals reflect the numbers presented in the March 2020 Economic and Fiscal Update.

- [3] ^ Ontario public service full-time equivalent positions.