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Published plans and annual reports 2022–2023: Ministry of Long-Term Care

Plans for 2022–2023, and results and outcomes of all provincial programs delivered by the Ministry of Long-Term Care in 2021–2022.

Ministry overview

Ministry's vision

The Ministry of Long-Term Care (the "ministry") is fixing long-term care, so that every resident experiences the best possible quality of life, supported by safe, high-quality care. This vision will be realized through: (1) improving staffing and care, (2) driving quality through better accountability, enforcement, and transparency, and (3) building modern, safe, comfortable homes for Ontario's seniors.

The *Fixing Long-Term Care Act, 2021*

On April 11, 2022, a new legislative framework to govern long-term care services came into force, repealing and replacing the *Long-Term Care Homes Act, 2007* (https://www.ontario.ca/laws/statute/07l08) . The development of the *Fixing Long-Term Care Act, 2021* (https://www.ontario.ca/laws/statute/21f39) , and its supporting regulation, was informed by external third-party reviews — such as the Long-Term Care COVID-19 Commission report (https://www.ontario.ca/page/long-term-care-covid-19-commission-progress-interim-recommendations) and the Auditor General report. It includes new measures to support the three pillars of the government's plan to fix long-term care, which is designed to ensure that Ontario's seniors get the quality of care they need and deserve both now and in the future. The three pillars are:

1. Improving staffing and care.
2. Driving quality through better accountability, enforcement, and transparency.
3. Building modern, safe, comfortable long-term care homes for Ontario's seniors.

Improving staffing and care

The legislation contains several new measures to improve staffing and care. Most notably, it establishes a system level target of an average of four hours of daily direct care provided by registered nurses, registered practical nurses and personal support workers per resident, per day by March 31, 2025, and to increase care provided by allied health care professionals to a system target average of 36 minutes of daily direct care provided by allied health professionals (AHPs) per resident, per day by March 31, 2023. Furthermore, the legislation establishes interim annual targets and requires the Minister to annually assess and report on progress towards targets and if a target is not met, develop and make public a plan with proposed strategies to assist in achieving the target.

Driving quality through better accountability, enforcement and transparency

The legislation also places a greater emphasis on quality improvement, supported by enhanced accountability, transparency, and enforcement. It aligns the language in the Residents' Bill of Rights with the grounds of discrimination in the Ontario Human Rights Code (https://www.ontario.ca/laws/statute/90h19) and expands the rights of residents to have access and support from their caregivers, as well as to receive care and services based on a palliative care philosophy based on consent.

To increase accountability and build towards a culture of continuous quality improvement, the legislation includes several measures. One of these measures is the requirement for long-term care homes to implement a quality improvement initiative.

Another requirement is for the form and method of conducting family/caregiver experience surveys to be set out in the regulations. In addition, the legislation enables the creation of a Long-Term Care Quality Centre to support improved compliance.

The legislation includes new and updated compliance measures that will be used as part of the ministry's inspection program, which aims to hold licensees to account for the care they provide. The measures were developed using modern regulator principles and include a broad range of compliance measures and proportional responses to specific instances of non-compliance. These new measures range from issuing Administrative Monetary Penalties to bringing in a supervisor to manage on a temporary basis the entire operations of the long-term care home or a specific issue—such as infection prevention and control, financial or clinical operations.

In addition, the legislation doubles the fines that can be levied upon the conviction for an offence. Individuals can be fined up to $200,000 for first offence and $400,000 for second offence, and corporations can be fined up to $500,000 for first offence and $1,000,000 for second offence.

There are also significant changes when it comes to fines. The legislation doubles the fines on the conviction of an offence for individuals (up 100% to $200,000 for first offence, $400,000 for second offence) and corporations (up 150% to $500,000 for first offence, $1,000,000 for second offence).

Building modern, safe and comfortable homes for Ontario's seniors

The legislation includes new measures to build safe, modern, and comfortable homes for Ontario's seniors. It permits the Minister to make a policy that outlines how the Minister determines if beds are needed in the province and if licence requests are in the public interest by maintaining a healthy market competition and balance between non-profit and for-profit ownership. Additional measures include streamlining the process for approval of management companies where help is required for the day-to-day operation of a home. This helps ensure that timely decisions are made and allows the ministry to be responsive to urgent needs.

There are also modified requirements to support the development and redevelopment process. These include: amended references to the Design Manual to make it easier for the ministry to update standards, streamlined requirements for license expiries, and the removal of loopholes to prevent a person unrelated to the operation of a home from gaining a controlling interest in a licensee's corporation without seeking ministry approval.

Through the measures listed above—and the many others contained in the *Fixing Long-Term Care Act, 2021* (https://www.ontario.ca/laws/statute/21f39) —this legislation helps form the foundation on which the ministry will work to build a long-term care sector where every resident experiences the best possible quality of life, supported by safe and high-quality care.

More Beds, Better Care Act, 2022

On August 18, 2022, the Ontario Government introduced the *Plan to Stay Open: Health System Stability and Recovery* (https://www.ontario.ca/page/plan-stay-open-health-system-stability-and-recovery) , which includes amendments to the *Fixing Long-Term Care Act,*

2021 (https://www.ontario.ca/laws/statute/21f39) through the *More Beds, Better Care Act, 2022* (https://www.ontario.ca/laws/statute/s22016) .

The plan also includes a suite of investments totalling $37 million in 2022–23, and $62 million annually moving forward, to help ensure Ontarians are getting the right care in the right place and help avoid unnecessary hospitalization.

The new funding in 2022–23 includes a number of investments such as:

- $20 million to create a new Local Priorities fund, delivered by Ontario Health, to support timely interventions based on community needs.
- $5 million boost to Behavioral Supports Ontario so the program can increase specialized staff and access to therapeutic supplies and equipment.
- $2.6 million for the Baycrest Virtual Behaviour Medicine program.

The ministry is also taking additional steps under the plan including:

- Reactivating long-term care respite care programs for high-needs seniors to prevent possible hospitalization.
- Opening up long-term care beds that no longer need to be held for pandemic-related isolation purposes through an updated Minister's Directive, which came into effect on August 30, 2022.
- Further exploring the use of vacant LTC beds as hospital-operated transitional or convalescent care beds based on regional availability.
- Working to enable community partnerships to provide more supplies, equipment, and diagnostic testing in long-term care homes to prevent potential hospitalization.
- Expanding specialized supports and services for people in long-term care with complex needs like bariatric, behavioural and dialysis.

This suite of interconnected actions aims to reduce the number of ALC patients in hospitals in the present, while taking the steps needed to support lower ALC numbers in the future. It helps ensure that patients who require hospital treatment can get the emergency treatment, surgeries, and other hospital services they need when they need it. At the same time, it helps ensure that ALC patients being moved receive care in a more suitable setting that offers a better quality of life while they wait for their preferred long-term care home.

Ministry programs

Staffing

In December 2020, the ministry released its staffing plan, A Better Place to Live, A Better Place to Work (https://files.ontario.ca/mltc-ontario-long-term-care-staffing-plan-2021-2025-en-2020-12-17.pdf) (PDF). This plan is based on guidance from multiple partners, organizations, associations, residents, families, the results of the Long-Term Care Staffing Study (https://www.ontario.ca/page/long-term-care-staffing-study) released in July 2020, the interim recommendations from Ontario's Long-Term Care COVID-19 Commission, and the Gillese Inquiry final report.

The plan focuses on six key areas of action:

1. Increasing staffing levels.
2. Disrupting, accelerating and increasing education and training pathways.
3. Supporting ongoing staff development.
4. Improving working conditions.
5. Providing effective and accountable leadership.
6. Measuring success.

A central component of this plan is to increase the hours of direct care provided by registered nurses (RNs), registered practical nurses (RPNs) and personal support workers (PSWs) from the 2018 provincial average of two hours and 45 minutes per resident, per day to a system average of four hours per resident, per day over four years. To implement this plan, the government is investing up to $4.9 billion by 2024–25 to help create over 27, 000 new full-time positions for RNs, RPNs and PSWs in long-term care. In addition, this funding will support a 20% increase in direct care time by allied health professionals including physiotherapists and social workers by March 31, 2023.

In 2021–22, the government provided up to $270 million to long-term care homes to increase direct care for residents to meet the system-level average targets of: 3 hours, per resident, per day for care provided by PSWs, RNs and RPNS; and 33 minutes of care provided by allied health care providers by March 31, 2022. In March 2022, the government announced up to $673 million in 2022–23 to increase the system-level average of care provided by RNs, RPNs and PSWs to 3 hours and 15 minutes per

resident, per day and to increase the care provided by allied health professionals to a system-level average of 36 minutes, per resident, per day by March 31, 2023.

An investment of $1.25 billion and $1.821 billion has been committed for staffing increases in the 2023–24, and 2024–25 fiscal years. In 2021/2022 up to $270 million was invested.

Since the launch of the Staffing Plan, the government has made significant investments in the training and education of PSWs and nurses to support the over 27,000 positions that are being created in long-term care homes.

As part of this historic staffing plan, the Ontario government announced on January 21, 2021, an investment of $2.4 million to train up to 300 personal support workers for positions in long-term care homes in the Ottawa area.

On February 24, 2021, the government announced a further investment of $115 million to train up to 8,200 new Personal Support Workers (PSWs) for high-demand jobs in Ontario's health and long-term care sectors. In collaboration with Colleges Ontario, starting in April 2021, all 24 publicly assisted colleges offer this innovative, fully funded program. As of September 2022, over 8,100 PSWs were enrolled in or graduated from the program.

In March 2021, the ministry launched the third and final phase of the Attending Nurse Practitioners in Long-Term Care Initiative (ANP Initiative), with funding for an additional 15 nurse practitioners. This brings the total nurse practitioners funded through the program to 75. On April 28, 2021, the government announced that they were making $86 million available to train approximately 8,000 PSWs through private career college programs and district school boards programs. As of September 2022, over 10,427 PSWs were enrolled in or graduated from the program.

The investments continued when, on May 14, 2021, the government announced $35 million to increase enrollment in nursing education programs in publicly-assisted colleges and universities across the province. These new spaces became available in the Fall 2021 and Winter 2022 cohorts and will introduce approximately 1,130 new practical nurses and 870 registered nurses into the health care system. This investment also supported the expansion of clinical education placements for nursing and PSW students in long-term care by building supports for preceptors overseeing student placements and backfilling their time while supporting students.

Additionally in October 2021, the government implemented a $10 million annual fund to support ongoing professional development opportunities in long-term care, through the Supporting Professional Growth Fund. The fund supports training opportunities for long-term care staff to help them stay current on best practices in their field.

In addition, in October 2021, the government announced up to $100 million to add an additional 2,000 nurses to the long-term care sector by 2024–25. This funding enabled the creation of two innovative programs. The first is the *BEGIN Initiative: Bridging Educational Grant in Nursing* (https://begin.werpn.com/) , jointly offered by the Ministry of Long-Term Care, the Ministry of Health, and the Registered Practical Nurses Association of Ontario.

The program provides financial support to PSWs and RPNs so they can pursue further education to become registered practical nurses and registered nurses respectively.

The other program created was the *Nursing Program Transformation in Ontario's Colleges*, jointly offered by the Ministry of Long-Term Care, the Ministry of Colleges and Universities, and Colleges Ontario. It introduces hyFlex (i.e., combination of online and in-person) learning models in practical nursing and Bachelor of Science in Nursing programs, to provide students the flexibility to learn as per individual schedules. It also provides up to $6,000 a year in financial support to internationally trained nurses to gain the credentials required to work in Ontario.

On October 28, 2021, the government announced an extension of the temporary wage enhancement for PSWs, which is now permanent. The temporary wage enhancement helped stabilize, attract, and retain the PSWs needed to provide a high level of care during the COVID-19 pandemic and to continue these important supports in the long-term recovery from the pandemic. Approximately 50,000 PSWs were eligible in long-term care for the $3 per hour wage enhancement. On April 14, 2022, the government announced through the *Plan to Stay Open* (https://www.ontario.ca/page/plan-stay-open-health-system-stability-and-recovery) that it was making the PSW wage enhancement permanent.

Announced on November 4, 2021, in the 2021 *Ontario Economic Outlook and Fiscal Review* (https://budget.ontario.ca/2021/fallstatement/index.html) , the government committed to investing an additional $57.6 million, beginning in 2022–23, to hire 225 nurse practitioners in the long-term care sector, including specialized incentives to

help retain nurse practitioners. This announcement also included $342 million, beginning in 2021–22, to add over 5,000 new and upskilled registered nurses and registered practical nurses as well as 8,000 personal support workers.

In partnership with the Ministry of Health, Ontario Health (OH) and the Colleges of Nurses of Ontario (CNO), a Long-Term Care Staffing Pool was announced on January 17, 2022, to identify a pool of internationally educated CNO applicants that can be deployed to long-term care homes in need of staffing support. The staffing pool supports long-term care homes who need to hire staff on a temporary, urgent basis to carry out the added workload for essential services and/or to temporarily replace long-term care workers who are sick or in isolation as a result of the COVID-19 pandemic.

This was followed by a phased expansion of CNO's Long-Term Care Supervised Practice Experience Partnership (SPEP) program to long-term care, beginning in February 2022. The program provides eligible Internationally Educated Nurses (IENs) with the opportunity to obtain a supervised practice experience in long-term care homes that can be used to meet CNO's evidence of practice and language proficiency requirements, which is necessary to qualify for registration to practice as a nursing professional in Ontario. Through the SPEP program, 661 IENs have received licensure as of September 2022. The government launched the *Preceptor Resource and Education Program for Long-Term Care* (https://clri-ltc.ca/resource/prep-ltc/) in February 2022. Through this program, the government is investing $73 million over three years to train and provide clinical placements for over 16,000 PSW and nursing students. The program will provide more opportunities for career development within long-term care and ensure PSW and nursing students receive critical hands-on experience to better serve the needs of residents.

On March 2, 2022, the government announced an investment of $34 million over four years to increase enrolment in nursing and PSW programs at six Indigenous Institutes. This funding will support participating Indigenous Institutes to expand existing programs or create new ones to support culturally responsive education and training of approximately 340 practical nursing, 60 Bachelors of Science in nursing, and 400 PSW students.

On March 7, 2022, the government announced the Temporary Retention Incentive for Nurses (TRIN) to provide Ontario nurses with a lump sum retention incentive of up to $5,000 per person. This payment will help to retain nurses across the health sector

and stabilize the current nursing workforce during this critical time to ensure patients and residents continue to access the health care they need and deserve.

To complement these new programs, the government also launched the *Careers in Caring* marketing campaign in December 2021. The objective of the campaign was to attract new PSW students to the long-term care sector by informing them about available PSW courses and growth opportunities in the sector, as well as promote awareness regarding growth opportunities in the sector for sector professionals. The campaign encouraged people to visit ontario.ca/ltccareers, where they were connected to a wide range of resources on building a long-term care career as a PSW, nurse, or allied staff member.

The Staffing Supply Accelerator Group—established on March 16, 2021—has been working to champion the expansion, acceleration and innovation in training and education for long-term care staff. This group includes various external partners including post-secondary education regulatory bodies professional associations, and long-term care sector representatives. To support the work of the Staffing Supply Accelerator Group, the ministry has also established a Long-term Care Clinical Education Working Group and Long-term Care Bridging/Laddering Task Team.

Increasing staffing levels is a crucial part of fixing long-term care. Broad, sustainable improvements in resident outcomes requires creating a systemic culture of continuous quality improvement with a focus on resident outcomes. To build this culture, the ministry will continue to engage with residents and families to understand what quality of life and quality of care means to them.

Food and nutrition

As part of the overall increase of 1.75% in the level of care funding provided to the sector in 2022–23, the Ontario government is investing over $40 million, representing a 15% increase, in nutritional support funding for long-term care homes in 2022–23. This 15% increase accounts for the estimated 8.3% increase in food costs since 2019, as well as 'hidden' food inflation not captured in the official data, to enable long-term care homes to better provide residents with safe and appropriate food and nutrition services that are in alignment with their plans of care and contribute to better health and quality of life outcomes.

In addition, the government adopted new regulations under the *Fixing Long-Term Care*

Act, 2021 (https://www.ontario.ca/laws/statute/21f39) that will further increase quality of life and care for residents in the area of food and nutrition. For example, homes are now required to deliver menu planning flexibility that better reflects the needs of the residents such as speciality diets and menu substitutions that have consistent nutritional value, to serve menus that provide a variety of foods every day, including fresh produce and local foods in season, and they are required to provide meals and snacks at times that are chosen with support from the home's Residents' Council and its administrator.

Development or increasing long-term care capacity

The government has invested $6.4 billion to build 30,000 net new long-term care spaces by 2028. This includes a $3.7 billion investment beginning in 2024–25, on top of the historic $2.68 billion already invested since Spring 2019. The funding will be used to add new capacity and upgrade older spaces to modern design standards. It supports the government's goal of ending hallway health care, addressing growing waitlists, and ensuring that every resident experiences the best possible quality of life, supported by safe, high-quality care.

In 2020, the ministry announced the Modernized Funding Model for long-term care homes to help achieve the government's long-term care capacity goals. This redesigned model helps break down historic barriers and accelerates the construction of new and upgraded spaces. This model continues to be instrumental in building the long-term care spaces the province needs to provide residents with care they deserve.

The Modernized Funding Model is speeding up development by:

1. Creating four new regional categories based on geographic location (market segment): large urban, urban, mid-size, and rural, enabling the government to address the barriers and needs of different communities.
2. Providing an increase to the Province's construction funding subsidy (CFS), paid over 25 years, tailored to each of these four regional categories.
3. Providing development grants, paid upfront at substantial performance of a project, between 10% and 17% depending on market segment, to cover costs of development charges, land and other construction costs.
4. Helping small operators in rural communities navigate the high cost of

development, while ensuring larger urban centres can secure the loans and real estate they need.

5. Increasing funding to incentivize the construction of basic accommodation spaces, that will be funded through the operating envelope and continuing top-ups for small and medium-sized homes.

In July 2020, the ministry announced another measure to help accelerate long-term care development in the province, namely the Accelerated Build Pilot Program. This innovative program is enabling the creation of up to 1,272 long-term care spaces in three hospital-owned properties in Mississauga, Toronto, and Ajax.

On February 1, 2022, the government celebrated the completion of the first brand-new long-term care home built under the Accelerated Build Pilot program. The new home, named Lakeridge Gardens, is built in Ajax and is located on the same grounds as the Ajax Pickering Hospital. The buildings in Mississauga and Toronto are currently under construction and estimated to open for residents in 2023.

In November 2020, the Ontario government announced the sale of three surplus provincial properties with the requirement that long-term care homes be built on portions of each property. The government is working with Infrastructure Ontario to market, evaluate and sell the sites to meet key priorities of expediting delivery of long-term care on those sites.

Progress on the Oakville site was celebrated on October 13, 2021, when the government announced that the site would be used to build two brand-new long-term care homes. The sale of the Oakville site was finalized and closed on March 31, 2022.

Between March and April 2022, the government announced the sale of three more provincial surplus properties in Mississauga, Toronto and Hamilton with the requirement that long-term care homes be built on the properties.

In total, the Surplus Provincial Lands initiative will add up to 2,240 additional long-term care spaces for seniors.

As of August 2022, Ontario has 31,705 new and 28,648 upgraded beds in the development pipeline. This includes 53,348 new and upgraded beds that are in the planning stage, 5,071 are under construction, and 1,934 have been opened.

This exemplifies the great progress towards our goal of fixing long-term care across the province and delivering on the commitment to build 30,000 net new beds by 2028.

Building more not-for-profit long-term care spaces is essential to building long-term care capacity in Ontario. That is why, on December 2, 2021, the government announced that it would be providing loan guarantees to make it easier for non-municipal not-for-profit homes to secure development loans from Infrastructure Ontario (IO) by launching the Not-For-Profit Loan Guarantee Program.

Securing financing is a long-standing challenge to development faced by the not-for-profit long-term care sector. With the new Not-for-Profit Loan Guarantee Program, $388 million in lending from IO will be unlocked for not-for-profit long-term care homes. Enabling IO lending also reduces not-for-profit operator borrowing costs by using the borrowing power of the Province and eliminates interest rate risk during the mortgage period through a fixed interest rate for 25 years. Increasing not-for-profit capacity in the sector also helps ensure that Ontario's seniors have access to a range of choices and locations for their long-term care needs. To enable capital lending to public hospitals for the purpose of long-term care bed development, the ministry has also negotiated an additional unique guarantee program through a Memorandum of Understanding (MOU) with the Ontario Financing Authority.

Resident safety and security

The health, safety, and wellbeing of long-term care residents is the highest priority for the ministry. That is why the inspections system is central to fixing long-term care. The inspections system exists to keep residents safe—and the ministry continually assesses information and re-prioritizes inspections daily based on harm, or risk of harm to residents. Any abuse or neglect of long-term care residents is unacceptable. The Ministry of Long-Term Care responds immediately when a resident is harmed or is at risk of serious harm.

As part of the work to fix long-term care and ensure long-term care resident safety, the government is investing an additional $72.3 million over three years to increase enforcement capacity. This will double the number of inspectors across the province in 2022–23 and will make Ontario's inspector to long-term care homes ratio one of the highest in Canada.

The ministry has also launched a new and improved proactive inspections program in long-term care homes. The new proactive inspections program takes a resident-centred approach to allow for more direct discussion with residents and to focus on their care needs as well as the services delivered by the home. This initiative reflects what has been learned during the pandemic and responds to the advice of the Long-Term Care COVID-19 Commission and the Auditor General—as well as calls from residents, their families, the public, and those working in the sector.

In addition to improving the inspections program, the ministry has announced a number of other initiatives to improve resident safety and security. For example, the government is providing up to $77 million to help long-term care homes adopt technology to strengthen medication safety. The three-year Medication Safety Technology program will provide supplementary funding to help long-term care homes acquire technologies that can enhance the safety and security of their medication management.

The ministry is also partnering with the Institute for Safe Medication Practices (ISMP) Canada, an independent national not-for-profit organization that seeks the advancement of medication safety in healthcare settings. The goal of the partnership is to strengthen medication safety in long-term care homes. ISMP Canada will build capacity within the long-term care sector through education in three critical areas of medication safety—effective response to medication incidents, effective medication management, safe transitions in care—by providing coaching in quality improvement to long-term care homes, strengthening medication incident analysis through direct in-person and virtual facilitation with long-term care homes, and improving and updating tools used by the sector to measure medication safety and evaluate the safety of medication management systems in homes.

Effective May 15, 2021, the government updated regulations to require designated cooling areas of all homes to be served by air conditioning and to be maintained at a safe and comfortable level during specified periods. All long-term care homes in Ontario are now in compliance with this requirement. In comparison, in summer 2020 nearly 13% of long-term care homes had no air conditioning at all.

Furthermore, under the *Fixing Long-Term Care Act, 2021* (https://www.ontario.ca/laws/statute/21f39) , homes are required to ensure air conditioning is installed in resident rooms by June 22, 2022 unless limited exception criteria are met. As of August 30, 2022, homes have made significant progress in meeting this requirement,

with the vast majority of homes now fully air conditioned.

This progress is a result of the government's investments in the area. The government has invested over $201 million in heating, ventilation and conditioning systems in long-term care homes to enhance resident safety and comfort. $61.4 million of the funding was provided through the Infection Prevention and Control Minor Capital Program, and an additional $23.9 million through the Long-Term Care Minor Capital Program in the 2021–22 fiscal year.

Up to $100 million in joint provincial-federal funding is being provided through the *COVID-19 Resilience Infrastructure Stream of the Investing in Canada Infrastructure Program* (https://www.infrastructure.gc.ca/plan/covid-19-resilience-eng.html#1) , to make upgrades and improvements to HVAC (heating, ventilation, and air conditioning) and sprinkler systems in long-term care homes across Ontario.

Finally, the government is also investing approximately $96.6 million through a Supplementary Fund created in 2021–22 to help all remaining long-term care homes install air conditioning in resident rooms as soon as possible. Up to $50.4 million was provided to homes in 2021–22 and up to $46.2 million is being provided to homes in 2022–23.

Innovation

The province is collaborating with health system partners to provide innovative resident-centred care to support those on the long-term care waitlist. Individuals who need long-term care services report they prefer to remain in their own homes for as long as possible. The government listened by launching a Community Paramedicine for Long-Term Care program to help seniors remain stable in their own homes while also providing peace-of-mind for caregivers. This program was announced in October 2020 for five communities with a total commitment of $33 million over four years. The program was then expanded in November to additional communities with a further commitment of $137 million over four years. On October 22, 2021, the government announced that it was investing $82.5 million over two-and-a-half years to expand the existing Community Paramedicine for Long-Term Care program to an additional 22 communities, making it available to all eligible seniors across Ontario.

This program provides individuals eligible for long-term care and soon to be eligible for long-term care with 24/7 access to non-emergency support, through home visits

and remote monitoring. The program also leverages the training and expertise of paramedics in a non-emergency capacity to help seniors and their caregivers feel safe and supported in their own communities and potentially delay the need for care in a long-term care home. As of August 2022, there are more than 24,000 individuals receiving care through the Community Paramedicine for Long-Term Care program.

On June 4, 2021, the government announced an expansion for behavioural specialized units (BSUs), which is another innovative program for vulnerable long-term care residents. In 2022–23, the government is investing $9.5 million to support seven BSUs across the province. This includes $5.9 million to establish four new BSUs in Penetanguishene (Georgian Manor Home for the Aged), Ajax (Lakeridge Gardens), Scarborough (Bendale Acres), and Toronto (Extendicare Rouge Valley), as well as $3.6 million to continue the operation of three established BSUs in 2019 in St. Catharines (Linhaven), Mississauga (Cooksville Care Centre) and Whitby (Fairview Lodge). BSUs provide specialized care to individuals with responsive behaviours that cannot be effectively supported in their current environment and for whom all other applicable services (e.g. regular long-term care beds, community supports) have been fully explored. Specialized care in a BSU is required due to the frequency, severity and/or level of risk that the responsive behaviours pose towards themselves, co-residents, visitors and/or staff members. A BSU offers specialized and increased staffing, a tailored environment, focussed behavioural assessment and enhanced care planning.

An important way to help drive innovation and quality improvement is by amplifying the voices of residents and their families and caregivers and listening to their insights and experiences. The *Fixing Long-Term Care Act, 2021* (https://www.ontario.ca/laws/statute/21f39) requires every long-term care home to take a survey of residents, families and caregivers to measure their experience with the home. Homes must make every reasonable effort to act on the results of the survey to improve the home. The *Fixing Long-Term Care Act, 2021* (https://www.ontario.ca/laws/statute/21f39) also requires every home to implement a continuous quality improvement initiative, that must include an interdisciplinary quality improvement committee for the home. The committee is intended to support ongoing culture shift in long-term care that encourages continuous quality improvement through collaboration between the long-term care homes' staff and leadership as well as representatives from the Residents' Council and Family Council, if any. Among its responsibilities, the committee makes recommendations regarding priority areas for quality improvement in the home.

Another innovative action taken this year is the creation of the 'Long-Term Care

Homefinder' at ontario.ca/longtermcare (https://www.ontario.ca/page/long-term-care-ontario#section-3) . This new website and search tool provide prospective residents and their families with a one-stop-shop to find and compare long-term care homes across the province, along with other resources to help people make an informed choice when considering long-term care. Each long-term care home has a profile page with helpful information about waiting lists, staff vaccination rates, amenities, inspection reports, contact information, and more. The site also provides information that can help people decide if long-term care is the best option for them and, if so, how to choose a home, apply, and move in.

Future phases of the website and search tool will include more information on each home's profile pages as well as other new features based on user research. When all the information is in place, the 'Long-Term Care Homefinder' will be a valuable resource for all Ontarians who are looking for information about the province's long-term care system.

Lastly—as previously mentioned—the *Fixing Long-Term Care Act, 2021* (https://www.ontario.ca/laws/statute/21f39) includes regulation that gives authority to the Minister to establish a Long-Term Care Quality Centre. The purpose of the Quality Centre will be to support LTC homes in improving resident quality of life and quality of care by providing training, leadership development and compliance coaching, while advancing research on innovative, person centred models of care. The ministry plans to consult with sector stakeholders and partners starting in late Fall/Winter 2022 regarding how best to design and implement the initiative.

The ongoing COVID-19 response and recovery

COVID-19 has exposed long-standing issues in the long-term care sector. It has shone a spotlight on a system strained by critical staffing shortages, increasing capacity pressures, complex and diverse resident needs, gaps between staffing levels and resident needs, and other challenges that the long-term care sector was experiencing well before the COVID-19 pandemic.

Working across government and with sector partners, the ministry focused on addressing these challenges, and fixing Ontario's long-term care system so that residents receive access to the quality care they deserve when and where they need it and experience a high quality of life in a safe, home-like environment.

Since the pandemic began, the government has invested over $2.8 billion in COVID-19 emergency funding for the long-term care sector. This funding has helped the sector to respond and cope with the pandemic. From the earliest stages of COVID-19, the government took decisive action to support all long-term care homes, staff, and residents. The ministry will continue to support homes to reduce any future risks of COVID-19, while balancing the importance of residents' health, wellbeing, and quality of life.

As we move forward, the lessons learned from the pandemic will continue to inform the ministry's actions long after the virus is defeated. Lessons learned from this experience will help inform the measures and investments implemented in 2022–23 and beyond.

Vaccines, testing, and other measures to protect long-term care homes

The incredible progress made on vaccinations has helped mitigate the negative health impacts of the virus within the long-term care sector. This progress is a result of Ontarians' willingness to protect themselves and their families by getting vaccinated, and the measures put in place by the ministry to increase vaccination rates.

On May 31, 2021, Ontario became the first province in Canada to make it mandatory for homes to have COVID-19 immunization policies for staff, students, and volunteers and to set out the minimum requirements that need to be included in these policies.

On October 1, 2021, the government took further action by making COVID-19 vaccinations mandatory for all in-home staff, support workers, students, and volunteers. To promote transparency, the Ministry of Long-Term Care also posted long-term care home staff, student, and volunteer vaccination rates publicly. This announcement was accompanied by additional testing measures.

On December 14, 2021, the government expanded the measures in place to respond to the Omicron wave of the pandemic by expanding the vaccine mandate to all general visitors. In tandem, a number of measures related to testing and limiting spread were announced as well.

Once the key public health and health care indicators began to show signs of continued improvement, the Ontario government, in consultation with the Chief

Medical Officer of Health, began to cautiously and gradually lift temporary public health measures in long-term care homes. This included gradual easement of measures put in place to respond to the Omicron wave in long-term care based on a risk-based approach that balanced measures that were still needed to reduce COVID-19 risk alongside the importance of overall resident health, wellbeing, and quality of life.

On September 12, 2022, the Ontario government announced the rollout plan for the bivalent COVID-19 booster dose, which targets both the original COVID-19 virus as well as the Omicron variants. Access to the new bivalent booster has been prioritized for populations most at risk of severe outcomes from COVID-19, including individuals living and working in long-term care and retirement homes

Long-term care residents, staff and essential caregivers are eligible to receive a COVID-19 bivalent booster, regardless of the number of booster doses previously received, if at least a minimum of 3 months has passed since their last dose.

Getting a booster dose restores protection that wanes over time. The COVID-19 bivalent vaccine targets both the original 2019 virus and the Omicron variant.

2022–2023 strategic plan

2022–23 is a critical year for the Ministry of Long-Term Care and the long-term care sector. Thanks to the incredible uptake in vaccinations among Ontarians and the public health measures put in place by the government, the province is stabilizing and recovering from the COVID-19 pandemic. Recovery includes advancing efforts to stabilize the long-term care sector and continuing to implement the government's plan to fix long-term care so that residents receive the care they need and deserve now and in the future.

It is within this context that the ministry has developed a recovery framework guided by the following key principles:

1. **Resident-centred:** Long-term care homes are primarily the homes of their residents and must be places where they can live with dignity, in security, safety and comfort, and have their physical, psychological, social, spiritual, and cultural needs met, including the particular needs of Indigenous and Francophone

residents. These homes exist for the benefit of residents and their interests should be at the centre of all decisions.

2. **People-focused:** Understanding that meeting the needs of residents depends on an ecosystem of people — staff, caregivers, family members and friends — working in collaboration.
3. **Dedicated to quality:** Committing to the provision of high-quality care and a best possible quality of life for residents in a safe, comfortable, home-like environment through a process of continuous and transparent quality improvement that builds public confidence.
4. **Outcomes-driven:** Committing to clearly defining expected outcomes focused on quality care and quality of life, measuring progress and value for money, and achieving defined results for targeted investments. Activities are continuously evaluated against their contributions to defined outcomes and adjusted accordingly.
5. **Sustainable:** Using approaches, policies and models that maximize available resources through integration and innovation. Homes are able to focus resources on activities that drive quality of care and quality of life in ways that work best for each particular home.
6. **Responsible:** Reflecting many partners, including licensees, the Ministries of Long-Term Care and Health, Ontario Health, regional health stakeholders, family and resident councils, and community service providers (e.g., mental health providers) play different roles in meeting residents' needs. Clearly delineated roles, responsibilities and accountabilities are required.

The principles guiding the long-term care system's recovery also help guide the government's plan to fix long-term care and the ongoing implementation of this plan. The plan is focussed on building a long-term care system where residents receive high quality care, supported by well-trained staff, in state-of-the-art long-term care homes. It was created based on the advice received from the Long-Term Care COVID-19 Commission and the Auditor General. It also takes into consideration and responds to the calls of residents, their families, and the public to fix the long-term care sector.

The plan to fix long-term care is built on the following three pillars:

1. **Improving staffing and care**: *The Fixing Long-Term Care Act, 2021*

(https://www.ontario.ca/laws/statute/21f39) sets out system-level targets for average hours of direct care provided to residents of long-term care homes. This requires hiring and training tens of thousands of personal support workers, registered nurses, and registered practical nurses so that residents can receive the level of care they need and deserve. The government is investing up to $4.9 billion to help hire the 27,000 PSWs, RNs and RPNs to work in long-term care and to help the government reach its system-level target average of four hours of daily direct care provided by PSWs, RNs and RPNs per resident by March 31, 2025, and to provide a provincial target average of 36 minutes daily direct care provided by allied health professionals per resident, per day by March 31, 2023. The legislation establishes interim annual targets and requires the Minister to annually assess and report on progress towards targets and if a target is not met, develop and make public a plan with proposed strategies to assist in achieving the target.

2. **Driving quality through better accountability, enforcement, and transparency**: Holding homes accountable through new legislation and enforcing this accountability through a strong inspections regime coupled with new and updated enforcement tools will help ensure that long-term care homes are meeting the standards expected to care for the residents they serve, while simultaneously improving transparency through tools like the user-friendly Long-term Care Homefinder website (https://www.ontario.ca/page/long-term-care-ontario) . The government has invested $72.3 million over three years to double the number of inspectors and launch proactive inspections in Ontario.
3. **Building modern, safe, comfortable long-term care homes**: Investing and innovating to build the new and upgraded beds this province needs—in both urban and rural communities—so that the province has the capacity to address the need for long-term care spaces now and moving forward. The government has invested $6.4 billion to build more than 30,000 net new beds by 2028 and about 28,000 upgraded long-term care beds across the province.

This plan—and the actions being taken to implement it—will help fix Ontario's long-term care system so that every resident experiences the best possible quality of life, supported by safe, high-quality care. As the long-term care system continues to recover from the significant impact of COVID-19, the continued implementation of this plan will ensure that the sector moves forward stronger and more resilient.

Ministry planned expenditures 2021–2022 ($M)

Category	Amount
COVID-19 approvals	367.6
Other operating	6,750.9
Other capital	135.3
Ministry (Pre-consolidation)	7,253.8
Consolidation adjustments	(4,879.1)
Total	**2,374.8**

Detailed financial information

Combined operating and capital summary by vote

Operating expense

Votes/programs	Estimates	Change from	%	Estimates	Interim actu	Actuals

	2022–2023 $	estimates 2021–2022 $		2021–2022 [1] $	als 2021–2022 [1] $	2020–2021[1] $
Ministry administration program	5,585,800	375,400	6.3	5,961,200	7,219,200	5,085,096
Long-term care homes program	7,112,643,700	707,317,100	11.0	6,405,326,600	6,926,690,700	5,987,246,693
Total operating expense to be voted	7,118,229,500	706,941,700	11.0	6,411,287,800	6,933,909,900	5,992,331,789
Statutory appropriations	314,014	N/A	N/A	314,014	314,014	65,968
Total including consolidation & other adjustments	**2,374,781,114**	**1,584,686,500**	**200.6**	**790,094,614**	**2,406,447,914**	**1,712,409,228**

Ministry total operating expense	7,118,543,514	706,941,700	11.0	6,411,601,814	6,209,567,214	5,992,397,757
Consolidation adjustment — Ontario Health	(4,604,063,800)	969,761,600	N/A	(5,573,825,400)	(4,387,541,100)	(4,185,878,585)
Consolidation adjustment — Hospitals	(139,698,600)	(92,016,800)	N/A	(47,681,800)	(140,234,900)	(90,863,663)
Consolidation adjustment — Ontario Infrastructure and Lands Corporation	N/A	N/A	N/A	N/A	N/A	(3,246,281)
Total including consolidation & other adjustments	**2,374,781,114**	**1,584,686,500**	**200.6**	**790,094,614**	**2,406,447,914**	**1,712,409,228**

Operating assets

Votes/programs	Estimates 2022–2023 $	Change from estimates 2022–2023 $	%	Estimates 2022–2023 [1] $	Interim actuals 2022–2023 [1] $	Actuals 2020–2021 [1] $
Ministry administration program	N/A	(1,000)	(100.0)	1,000	N/A	N/A
Long-term care program	20,430,000	N/A	N/A	20,430,000	N/A	20,429,959
Total operating assets to be voted	20,430,000	(1,000)	(0.0)	20,431,000	N/A	20,429,959
Ministry total operating assets	**20,430,000**	**(1,000)**	**(0.0)**	**20,431,000**	**N/A**	**20,429,959**

Capital expense

Votes/programs	Estimates 2021–2022 $	Change from estimates 2020–2021 $	%	Estimates 2020–2021 [1] $	Interim actuals 2020–2021 [1] $	Actuals 2019–2020[1] $
Long-term care homes program	135,288,600	(389,352,900)	(74.3)	524,641,500	521,893,500	187,675,900
Ministry total operating and capital including consolidation and other adjustments (not including assets)	**2,374,782,114**	**1,584,686,500**	**200.6**	**790,095,614**	**2,406,447,914**	**1,712,409,228**

Total capital expense to be voted	135,288,600	(389,352,900)	(74.3)	524,641,500	521,893,500	187,675,900
Consolidation adjustment — Hospitals	(135,287,600)	389,352,900	N/A	N/A	(521,893,500)	(187,675,900)
Total including consolidation and other adjustments	1,000	N/A	N/A	1,000	N/A	N/A
Ministry total capital expense	1,000	N/A	N/A	1,000	N/A	N/A
Ministry total operating and capital including consolidation and other adjustments (not including assets)	**2,374,782,114**	**1,584,686,500**	**200.6**	**790,095,614**	**2,406,447,914**	**1,712,409,228**

Historic trend table

Historic trend analysis data	Actuals 2019–2020 [1] $	Actuals 2020–2021 [1] $	Estimates 2021–2022 [1] $	Estimates 2022–2023 $
Ministry operating and capital pre-consolidation	4,422,444,323	6,179,954,695	6,936,243,314	7,253,832,114
Consolidation and other adjustments (operating and capital)	(4,041,113,880)	(4,467,545,467)	(6,146,147,700)	(4,879,050,000)
Ministry total operating and capital including consolidation and other adjustments (not including assets)	381,880,443	1,712,409,228	790,095,614	2,374,782,114
Year-over-year change[2]	N/A	39.7 %	12.2 %	4.6%

Ministry organization chart

January 2023

- Paul Calandra, Minister
  - John Jordan, Parliamentary Assistant
- Nancy Matthews, Deputy Minister
  - Peter Spencer, Director, Legal Services
  - Peter Spadoni, Director, Communications
  - Greg Robinson, Executive Assistant to DM
  - Anita Hooper, Assistant Deputy Minister, System Planning & Partnerships
    - Emily Cohen-Henry, Director, System Planning & Partnerships
  - Jeff Butler, Assistant Deputy Minister, Long-Term Care Operations
    - Mike Moodie, Director, Long-Term Care Inspections
    - Cheryl Clarke, Director, Operational Policy and Implementation
    - Abby Dwosh, Director, Funding and Programs
    - Christine Loureiro, Director, Service System Planning & Operational Issues
  - Erin Hannah, Assistant Deputy Minister, Long-Term Care Policy
    - Kelci Gershon, Director, Long-Term Care Policy and Modernization

- Amanda Baine, Director, Strategic Initiatives
- Lori Coleman, Director, Long-Term Care Response
- Carol Strachan, Director, Long-Term Care Staffing Supply

Brian Pollard, Assistant Deputy Minister, Long-Term Care Capital Development

- Hindy Ross, Director, Capital Planning
- Andrea Barton, Director, Capital Program Management
- Phil Cooke, Director, Capital Projects

Susan Flanagan, Assistant Deputy Minister and Chief Administrative Officer, Corporate Services

- Cherrie Lethbridge, Director, HR Strategic Business Unit
- Jeffrey Graham, Director, Fiscal Oversight and Performance
- Shelley Gibson, Director, Business Services and Facilities
- Jim Yuill, Director, Financial Management
- John Amodeo, Director, Corporate Management

Greg Hein, Assistant Deputy Minister, Strategic Policy, Planning and French Language Services

- Robert Francis, Director, Strategic Policy

- Jovan Matic, Director, Research, Analysis and Evaluation
- Jillian Paul, Director, Research, Analysis and Evaluation
- Hanna Ziada, Director, Indigenous, French Language & Priority Populations

Michael Hillmer, Assistant Deputy Minister, Digital and Analytics Strategy

- Kamil Malikov, Director, Health Data Science
- Aileen Chan, Director, Health Data
- Jennifer Bridge, Director, Health Analytics and Insights
- Evan Mills, Director, Digital Health Program
- Christine Sham, Director, Information Management Strategy and Policy

Angela Copeland, Chief Information Officer, Health Services I&IT Cluster

- Arden Tansey, Head, Drugs & Assistive Devices I&IT Solutions
- Kenny Liang, Head, Public Health I&IT Solutions
- Tanya Bobechko, Head, Payment & Registration I&IT Solutions
- Swetlana Signarowski, Head, Corporate I&IT Solutions & Integration Management

Louise Doyon, Head, Long-Term Care and Community Administration I&IT Solutions

Heather Berios, Head, Emergency Health I&IT Solutions & Technology Management

Appendix

Annual report: 2021–2022 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.

In 2021, as part of its plan to fix long-term care, the government passed the *Fixing Long-Term Care Act, 2021* (https://www.ontario.ca/laws/statute/21f39) , which will improve the wellbeing of residents in long-term care and ensure they get the care they deserve.

The Act was designed to implement changes that focus on:

- improving staffing and care
- driving quality through better accountability, enforcement, and transparency
- building modern, safe long-term care homes

In 2021–22, the province entered the second year of the COVID-19 pandemic and had to tackle increasing transmissible variants of the virus, most notably the Delta and Omicron variants. The ministry responded to these challenges by proclaiming landmark legislation, making historic investments, and innovating across the sector.

The *Fixing Long-Term Care Act, 2021*

As previously mentioned, the government proclaimed landmark legislation this year The development of the *Fixing Long-Term Care Act, 2021* (https://www.ontario.ca/laws/statute/21f39) , was informed by external third-party reviewers — such as the

Long-Term Care COVID-19 Commission and Auditor General. It includes new measures to support the three pillars of the government's plan to fix long-term care: improving staffing and care; driving quality through better accountability, enforcement, and transparency; and building modern, safe, comfortable long-term care homes for Ontario's seniors.

Improving staffing and care

As noted above, the government is investing $4.9 bilion to increase direct care for residents in long-term care homes and supporting the training and education of PSWs and nurses for the over 27,000 new positions that are being created in LTC homes. In addition, the government is supporting recruitment and retention of LTC staff through various initiatives, including through the permanent wage enhancement for PSWs, the Temporary Nursing Retention Bonus, and investments to enable ongoing professional development for staff in long-term care homes. The government has also committed to increasing Nurse Practitioners in long-term care homes by investing in an addition 225 Nurse Practitioners, beginning in 2022–23.

Driving quality through better accountability, enforcement, and transparency

The government took many steps this year to improve accountability, enforcement, and transparency. This can be evidenced in the strengthening of the inspections program. The government is providing an additional $72.3 million over three years to increase enforcement capacity. This will double the number of inspectors across the province by next year and will make Ontario's inspector to long-term care homes ratio one of the highest in Canada. As part of this investment the government launched a new and improved proactive inspections program in long-term care homes and is in the process of hiring 193 new inspections staff. This will ensure that there are enough inspectors to proactively visit each home every year, while continuing reactive inspections to promptly address complaints and critical incidents. The proactive inspections initiative reflects what has been learned during the pandemic and responds to the advice of the Long-Term Care COVID-19 Commission and the Auditor General — as well as calls from residents, their families, the public and those working in the sector.

Another step the government took this year to increase transparency and accountability was creating the 'Long-Term Care Homefinder'. This website and search tool provide prospective residents and their families with a one-stop-shop to find and compare long-term care homes across the province, along with other resources to

help people make an informed choice when considering long-term care.

Building safe, modern, and comfortable long-term care homes

As of August 2022, Ontario has 31,705 new and 28,648 upgraded beds in the development pipeline. This includes 53,348 new and upgraded beds in the planning stage, 5,071 are under construction, and 1,934 have been opened. Overall, the government has invested $6.4 billion to build these 30,000 net new long-term care beds. This includes a $3.7 billion investment beginning in 2024–25, on top of the historic $2.68 billion already invested.

The government also made progress on including air conditioning in all long-term care homes. On April 1, 2021, the government updated regulations to require designated cooling areas of all homes to be served by air conditioning and to be maintained at a safe and comfortable level during specified periods. These new regulations came into effect May 15, 2021, and all long-term care homes in Ontario are in compliance. In comparison, the previous year nearly 13% of long-term care homes had no air conditioning at all. Further, under the *Fixing Long-Term Care Act, 2021* (https://www.ontario.ca/laws/statute/21f39) homes are required to ensure air conditioning is installed in resident rooms by June 22, 2022 unless limited exception criteria are met. Homes have made significant progress in exceeding the regulatory requirements by providing cooling throughout their buildings, including in resident rooms. As of August 30, 2022, homes have made significant progress in meeting this requirement, with the vast majority of homes now fully air conditioned, and work is in progress to install air conditioning in all resident rooms in most of the remaining homes.

2021–2022 COVID-19 response

The pandemic continued to evolve in 2021–22 and challenged the province and the long-term care sector in unprecedented ways. Working across government and with sector partners, the government responded to these challenges with all of the tools at its disposal. These tools included vaccines, testing, restrictions, access to PPE and testing supplies and many other measures. These actions helped protect the health and wellbeing of residents, staff, essential caregivers, and visitors to Ontario's long-term care homes.

Since the pandemic began, the Ontario government has invested over $2.8 billion in COVID-19 emergency funding for the long-term care sector. This funding has helped

the sector to respond and cope with the pandemic alongside the enaction of temporary emergency orders and regulatory amendments.

As we move forward, the lessons learned from the pandemic will continue to inform the ministry's actions long after the virus is defeated. Lessons learned will help inform the measures and investments implemented in 2022–23 and beyond.

Vaccines, testing, and other measures to protect long-term care homes

The incredible progress made on vaccinations has helped mitigate the negative health impacts of the virus within the long-term care sector. This progress is a result of Ontarians willingness to protect themselves and their families by getting vaccinated and of the measures put in place by the ministry to increase vaccination rates.

On May 31, 2021, Ontario became the first province in Canada to make it mandatory for homes to have COVID-19 immunization policies for staff, students, and volunteers and to set out the minimum requirements that need to be included in these policies.

The government took further action on October 1, 2021, by making COVID-19 vaccinations mandatory for all in-home staff, support workers, students, and volunteers.

On December 14, 2021, the government expanded the measures in place to respond to the Omicron wave of the pandemic by expanding the vaccine mandate to all general visitors.

Once the key public health and health care indicators began to show signs of continued improvement, the Ontario government, in consultation with the Chief Medical Officer of Health, began to cautiously and gradually lift temporary public health measures in long-term care homes.

On March 14, 2022, the Minister's Directive on Long-Term Care Home COVID-19 Immunization Policy was revoked, shifting from a provincial directive that required homes to have a mandatory vaccination policy to a guidance-based approach that continued to support long-term care homes with their employer-led policies and best practices.

Innovating across the sector

Many of the innovative actions taken by the government this year have already been covered under the previous sections of the annual report. These include unprecedented actions under the development file, the staffing file, and the inspections file. The province has also driven innovation through programs that expand beyond these actions. An example of this can be seen with the Community Paramedicine for Long-Term Care Program.

The Community Paramedicine for Long-Term Care Program was announced in October 2020 for five communities with a total commitment of $33 million over four years. The program was then expanded in November to additional communities with a further commitment of $137 million of over four years. On October 22, 2021, the government announced that it was investing $82.5 million over two-and-a-half years to expand the existing program to an additional 22 communities, making it available to all eligible seniors across Ontario.

Another action taken was investing in innovative medication safety technology. On March 29, 2021, the government announced that it would provide up to $77 million to help long-term care homes adopt technology to strengthen medication safety.

The government helped drive innovation by further amplifying the voices of residents and their families. On July 22, 2021, the government increased funding to the Ontario Association of Residents' Councils (OARC) (https://www.ontarc.com/) and Family Councils Ontario (FCO) (http://fco.ngo/) by nearly 53%, or $481,238. This brought the total funding for these two councils to $1,393,621. Of this funding, $746,100 was for the OARC and $647,521 was for the FCO.

Key performance indicators

The government is fixing long-term care. A key part of this is measuring the province's progress on a number of key performance indicators.

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

- The government is taking action to create a long-term care system that focuses on residents and builds capacity to respond to the growing demand for long-term care spaces.

- As of August 2022, Ontario has 31,705 new and 28,648 upgraded beds in the development pipeline. This includes 53,348 new and upgraded beds in the planning stage, 5,071 are under construction, and 1,934 have been opened.
- Median Time to Placement (excluding individuals waiting to be transferred from one LTCH to another): 130 days
- With over 30,000 net new long-term care beds already in development, Ontario is on track to deliver on its commitment to build 30,000 net new beds by 2028.

Outcome measure #2 — Percentage of long-term care beds classified as "new"

- The percent of long-term care beds classified as 'new' (new beds and upgraded beds to modern design standards) increased from 50.9% in August 2021 to 52% in August 2022, up by ~1.1%.

Outcome measure #3 — Average minutes of direct care (PSW, RPN, RN) per long-term care home resident per day in Ontario

- The *Fixing Long-Term Care Act, 2021* (https://www.ontario.ca/laws/statute/21f39) establishes a system-level target average of four hours of daily direct care provided by RNs, RPNs and PSWs per resident per day by March 31, 2025.
- Also included in the Act are the following interim targets:
  - An average of three hours of direct care to be provided per resident, per day, no later than March 31, 2022.
  - An average of three hours and 15 minutes of direct care to be provided per resident, per day, as well as 36 minutes of AHP care, no later than March 31, 2023.
  - An average of three hours and 42 minutes of direct care to be provided per resident, per day, as well as 36 minutes of AHP care, no later than March 31, 2024.

Outcome measure #4 — Average minutes of direct care (Allied Health Care) per long-term care home resident per day in Ontario

- The *Fixing Long-Term Care Act, 2021* (https://www.ontario.ca/laws/statute/21f39) also establishes a system-level target average of 36 minutes of daily direct care

provided by allied health professionals (such as physiotherapist, occupational therapist and social workers) per resident, per day by March 31, 2023.

- Also included in the Act are the following interim targets:
  - An average of 33 minutes of AHP care per resident, per day, no later than March 31, 2022.

Outcome measure #5 — Number of long-term care homes with recurring compliance orders

- The government launched a new and improved proactive inspections program in long-term care homes and is in the process of hiring 193 new inspections staff. This will ensure that there are enough inspectors to proactively visit each home every year, while continuing reactive inspections to promptly address complaints and critical incidents.

Outcome Measure #6 — Number of proactive long-term care home inspections

- The government launched a new and improved proactive inspections program in long-term care homes and is in the process of hiring 193 new inspections staff. This will ensure that there are enough inspectors to proactively visit each home every year, while continuing reactive inspections to promptly address complaints and critical incidents.

Outcome Measure #7 — Total number of net new beds in the opening stage of the development process

- As of August 2022, Ontario has opened 1,934 new beds (992 net new beds, and 942 older beds being upgraded to modern standards).

Outcome Measure #8 — Waitlist to access a long-term care homes long-stay bed in Ontario

- As of August 2022, Ontario has 31,705 new and 28,648 upgraded beds in the development pipeline. This includes 53,348 new and upgraded beds in the planning stage, 5,071 are under construction, and 1,934 have been opened.
- With over 30,000 net new long-term care beds already in development, Ontario is

on track to deliver on its commitment to build 30,000 net new beds by 2028. This progress will help address the growing waitlist to access a long-term care homes long-stay bed in Ontario.

- Total Long-Stay Waitlist as of June 2022 (excluding individuals waiting to be transferred from one LTCH to another): 38,709

Ministry interim actual expenditures 2021–2022 [3]

Expenditure	Number ($M)
COVID-19 approvals)	993.6
Other operating)	5,940.6
Capital)	521.9
Ministry (Pre-consolidation))	7.456.1
Consolidation adjustments)	(5,049.7)
Total ministry)	**2,406.4**
Staff strength[3] (as of March 31, 2021)	443.7

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Footnotes

- [1] ^ Estimates, Interim Actuals and Actuals for prior fiscal years are re-stated to reflect any changes in ministry organization or program structure. Interim Actuals reflect the numbers presented in the April 2022 Ontario Budget.
- [2] ^ Year-over-year changes are mainly driven by time-limited COVID-19 investments, accelerated builds (capital), staffing strategy and level-of-care.
- [3] ^ Interim actuals reflect the numbers presented in the April 2022 *Ontario Budget for the Health Sector*.