

Published plans and annual reports 2023-2024: Ministry of Long-Term Care

Plans for 2023-2024, and results and outcomes of all provincial programs delivered by the Ministry of Long-Term Care in 2022-2023.

Ministry overview

Ministry's vision

The Ministry of Long-Term Care (the “ministry”) is improving long-term care, so that every resident experiences the best possible quality of life, supported by safe, high-quality care. The government understands that seniors in long-term care, and all Ontarians, want a health system where care is connected and convenient to access.

Our goal is to make health care more convenient for Ontarians by connecting them to the care they need, when and where they need it — whether in a long-term care home, a hospital, or at home.

Long-term care plays a crucial role in this interconnected system and this approach will help support resident quality of care and quality of life. The ministry’s work to improve long-term care is built on four pillars: (1) further integrating long-term care within the broader care continuum, (2) improving staffing and care, (3) driving quality and better accountability, enforcement, and transparency, and (4) building modern, safe, comfortable homes.

Ministry programs

Continuum of care

The government is working hard so that every Ontarian is connected to the health care they need when they need it. Whether that person lives in a big city or a remote spot in the north, whether they need care on a temporary basis or a continual basis,

and whether their care needs are straightforward or complex; every Ontarian deserves the right care in the right place. That is why the government is taking action to strengthen all aspects of health care by making it easier for Ontarians to connect to the care they need. This includes long-term care.

Earlier this year, the government released *Your Health: A Plan for Connected and Convenient Care*. The plan focused on providing people with a better health care experience by connecting them to more convenient options closer to home while shortening wait times for key services across the province and growing the health care workforce for years to come. Included in this plan was the creation of two new pilot projects designed to better connect long-term care residents to diagnostic services. These diagnostic services include x-rays, ultrasounds, and other services, which help improve residents' quality of life and reduce avoidable emergency department visits or hospital stays. The province has put forward initial investments of \$350,000 and \$1,875,000 annually over the next two years for these two pilot projects.

The first pilot project is with Humber River Hospital in Toronto. Enhanced diagnostic services offered through Humber River Hospital will include:

- Increasing the number of hours for pre-booked appointments for x-ray and ultrasound services.
- Non-urgent resident transport for x-ray and ultrasound services at Humber River Hospital.
- Increasing the number of hours a long-term care home can connect with a nurse navigator that supports long-term care homes with needs, assessments and coordinating with other health care teams.

The second pilot project is with Royal Victoria Regional Health Centre in Barrie. Enhanced diagnostic services offered through the Royal Victoria Regional Health Centre will include:

- Increasing access to x-ray services for long-term care residents who fall and require a non-urgent x-ray.
- Access to a nurse navigator at the hospital to support the long-term care resident to navigate services.
- Non-urgent resident transport for x-ray services at Royal Victoria Regional Health

Centre.

As a next step, the province will work with partners such as hospitals and community labs on a broader provincial plan to provide faster and more convenient access to care for all long-term care residents across Ontario. This may include finding creative and innovative ways to connect residents with services inside their long-term care home, instead of travelling to a hospital or clinic.

The government is also continuing to collaborate with health system partners to provide innovative person-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 plays a crucial role in integrating long-term care within the broader health continuum.

The program was first announced in 2020 for five communities with a total commitment of \$33 million over four years. It was then expanded later that year to additional communities with a further commitment of \$132 million over four years. The following year 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. As part of Budget 2023, the government announced an additional \$174 million investment over two years, starting in 2024–25, to fund the Community Paramedicine for Long-Term Care Program through 2025–26.

This program provides individuals on the waitlist 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 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 March 2023, more than 35,000 clients have received care since the Community Paramedicine for Long-Term Care program launched.

Another way to make care more connected and convenient is by expanding the province's Behavioural Specialized Units (BSUs). BSUs provide vulnerable long-term care residents with complex care needs like dementia with safe, quality care in the comfort of a long-term care home instead of a hospital. Specialized care in a BSU is

required due to the frequency, severity and/or level of risk that a person's 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.

In 2022, the government announced that it was investing \$5.91 million to create four new BSUs at long-term care homes in Ajax, Penetanguishene and Scarborough. The four new BSUs with 79 specialized beds build on the government's previous investment of 62 specialized beds in three existing BSUs at other locations throughout the province.

The four new BSU investments were:

- \$1.12 million for a 16-bed BSU at Lakeridge Gardens in Ajax, operated by Lakeridge Health. This BSU is expected to open in September 2023.
- \$1.03 million for a 16-bed BSU at Georgian Manor Home for the Aged in Penetanguishene, operated by Simcoe County.
- \$1.55 million for a 15-bed BSU at Bendale Acres in Scarborough, operated by the City of Toronto.
- \$2.21 million for a 32-bed BSU at Extendicare Rouge Valley in Scarborough, operated by Extendicare Canada Inc.

Currently, there are a total of 15 BSUs with 306 beds at long-term care homes provincewide.

In August of 2022, the government announced a \$20 million investment for 2022–23 and \$35 million approved for 2023–24 in a new *Local Priorities Fund* operated by Ontario Health (OH). This initiative will fund 189 local projects across the province. These projects are focused on the needs of each local community with the overall goal of helping seniors with complex medical needs like dementia and bariatric care connect to specialized care and supports in their long-term care home instead of a hospital. Some of the local projects will do this by helping residents get the specialized care they need in their long-term care home without having to go to the emergency room or be admitted to hospital. Others will support the admission of people into homes who no longer require acute care in hospital, but who have complex needs that can be difficult to accommodate without specialized services and supports.

Another innovative project that the government supported in the past year was the Seniors' Housing Complex in Kenora. The Ministry of Long-Term Care invested \$4.5 million to build dedicated spaces for health care at this new mixed-use complex. The complex will include 56 independent living suites for residents as well as dedicated health spaces to provide a range of specialized services and supports on site to ensure residents and the surrounding community can receive the right care in the right place, instead of in a hospital or long-term care home.

Integrating health and housing services at this complex is an innovative approach that helps:

- Postpone and reduce the demand for long-term care and hospital services in Northwestern Ontario, including reducing the number of hospital patients who go on to be designated as Alternate Level of Care (ALC), by providing another living option.
- Improve access to supportive and culturally sensitive services by having on site, coordinated services that consider the unique needs of the population.
- Help seniors remain in their home community by providing affordable housing.

The project is being developed by the Kenora District Services Board, together with the All Nations Health Partners, which includes Indigenous partners and organizations like the Kenora Chiefs Advisory, Waasegiizhig Nanaandawe'iyewigamig, and Grand Council Treaty #3, who provided input into the design of the complex and the supports and services to be offered there.

On top of all of these initiatives, the government also passed legislation that helps ensure Ontarians receive care in the setting that is most appropriate for their needs. This legislation was the *More Beds, Better Care Act, 2022* (<https://www.ontario.ca/laws/statute/s22016>). It includes a suite of interconnected actions that aim to reduce the number of ALC patients in hospitals this year and moving forward. The legislation 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 receive care in a more suitable setting, such as a long-term care home, that offers a better quality of life while they wait for their preferred long-term care home.

As part of the *Your Health: A Plan for Connected and Convenient Care*, the Ministry of Health introduced new "As of Right" rules to allow health care professionals that are

registered or licensed in another province or territory to practice in Ontario immediately while they await registration with an Ontario regulatory college. If passed, this change would help health care workers overcome excessive red tape that makes it difficult for them to practice in Ontario and help bolster our health care workforce.

Regulatory amendments

Since the coming into force of the *Fixing Long-Term Care Act, 2021*

(<https://www.ontario.ca/laws/statute/21f39>) and its general regulation in April 2022, the ministry has continued to take targeted actions to advance the plan to fix long-term care and support the government's broader health system priorities. Informed by engagement with key partners and stakeholders and feedback from the public, the ministry has refined the regulatory framework with consideration of the lived experience of residents and long-term care homes and emerging needs in the sector. Regulatory amendments came into effect on April 11, 2023, which:

- Amend staffing qualifications for some roles to ensure requirements are proportionate with responsibilities and accountabilities of the role.
- Modernize medication management and drug administration requirements to allow registered health practitioners to practice to their full scope of practice.
- Enable personal support workers to administer drugs where they have received training if it is not a controlled act or substance and only when assigned and supervised by a nurse.
- Bolster the resident experience by updating air conditioning requirements and holding licensees accountable for failure to comply and bringing more clarity in the areas of falls prevention and management as well as skin and wound care.

These amendments support the ongoing delivery of quality care to long-term care residents in Ontario, support the best possible quality of life, and advance our efforts to address the critical staffing needs of the long-term care sector.

Improving staffing and care

In December 2020, the ministry released *A better place to live, a better place to work: Ontario's long-term care staffing plan*. This four-year plan is based on guidance from multiple partners, organizations, associations, residents, families, the results of the 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-level average of four hours per resident, per day by March 31, 2025. To implement this plan, the government is investing up to a total of \$4.9 billion by 2024–25 to help hire and retain thousands of RNs, RPNs and PSWs in long-term care. In addition, this funding is supporting a 20 per cent increase (to a system-level average of 36 minutes per resident, per day) in direct care time by allied health professionals (AHPs) such as resident support aides, physiotherapists, occupational therapists, and social workers by March 31, 2023.

In March 2023, as part of the staffing plan, the government announced an investment of up to \$1.25 billion in 2023–24 to help hire and retain nurses, PSWs, and AHPs in Ontario long-term care homes and increase direct care time and the achievement of the system-level average targets for 2021–22 of three hours by RNs, RPNs and PSWs, and 33 minutes by AHPs. This investment built off the \$270 million investment made in 2021–22 and the \$673 million investment in 2022–23. An investment of \$1.82 billion has been committed for staffing increases in 2024–25. These historic investments fund several ongoing programs. Through these various programs the Ontario government is helping to train, educate, hire, retain, and support thousands of healthcare workers in the long-term care sector.

In December 2022, the government communicated an investment of almost \$20 million over three years, starting in 2022–23, to enhance resident access to social support services provided by registered social workers, social service workers and

other allied health professionals to increase overall health, well-being, and quality of life in long-term care homes. Social support services provided by registered social workers, social service workers and other allied health professionals are to work towards a best practice minimum of 30 minutes of care per resident every four weeks.

The *Hiring More Nurse Practitioners for Long-Term Care* program is a great example of this. Last fall the government launched an investment of \$57.6 million over three years to recruit and retain up to 225 additional nurse practitioners in the long-term care sector. As part of the program, long-term care homes can request funding for eligible employment expenses - including salary, benefits, and overhead costs - for newly hired nurse practitioners. The funding also provides up to \$5,000 in relocation support for nurse practitioners who are hired to work full-time in rural communities and who have agreed to provide a minimum of 12 months of service.

The *Supporting Professional Growth Fund* is another important ongoing initiative. Originally implemented in fall 2021, the government continues to support this important fund through an investment of \$10 million annually. This funding supports training and education opportunities for long-term care staff to help them stay current on best practices in their field. This helps to improve staff retention by highlighting long-term care as a career destination with rewarding opportunities for continuous learning and development.

In addition, 2,000 nurses will be added to the long-term sector by 2024–25 through two programs funded by the Ontario government. The first is the *BEGIN Initiative: Bridging Educational Grant in Nursing*, 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. The government is investing up to \$100 million in these two programs.

There is also the phased expansion of the Colleges of Nurses of Ontario's *Long-Term Care Supervised Practice Experience Partnership* (SPEP) program. 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 Colleges Nurses of Ontario's (CNO) 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, 1,440 IENs have completed the program as of the end of 2022.

The government also launched the *Preceptor Resource and Education Program for Long-Term Care* 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 PSWs and nursing students. The program will provide more opportunities for career development within long-term care and ensure PSWs and nursing students receive clinical hands-on experience to better serve the needs of residents.

Another ongoing multi-year investment is the \$34 million investment over four years to increase enrolment in nursing and PSW programs at six Indigenous Institutes. This funding is being used to support participating Indigenous Institutes to expand existing programs or create new ones to support culturally responsive education and training of approximately 340 practical nurses, 60 RNs, and 400 PSW students.

Increasing staffing levels is a crucial part of improving long-term care and ensuring that care is connected and convenient across the health system and the ministry will expand and introduce more programs and initiatives under the LTC Staffing Plan over the course of 2023–24. The ministry also recognizes that broad, sustainable improvements in resident outcomes requires 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.

Building Modern, Safe, Comfortable Homes for Seniors

The government is investing \$6.4 billion to build 58,000 new and upgraded long-term care beds across the province 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 is being 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 across the care continuum.

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.

That year, the ministry also announced the *Accelerated Build Pilot Program*. Using a range of measures such as modular construction, rapid procurement and the use of hospital lands, this innovative program tests if elements of the development process for long-term care home projects can be completed faster than traditionally under the regular build program. Through the program, up to 1,272 long-term care spaces are being created in three hospital-owned properties in Mississauga, Toronto, and Ajax. A description of each project is outlined below:

- One home, Lakeridge Gardens, with 320 new long-term care beds, was developed by Lakeridge Health in Ajax and opened in March 2022.
- One home, Humber Meadows, with up to 320 new beds, to be developed by Humber River Hospital in Toronto is estimated to open for residents by May 31, 2023.
- Two homes, collectively called Wellbrook Place. One of these homes will have 312 beds (92 new and 220 redeveloped beds), and one will have 320 new beds for a total of 632 beds. Wellbrook Place is being developed by Trillium Health Partners in Mississauga and is estimated to open for residents in late fall 2023.

Securing financing is a long-standing challenge to development faced by the not-for-profit long-term care sector. That is why the government is providing loan guarantees to make it easier for non-municipal not-for-profit homes to secure development loans from Infrastructure Ontario (IO) through the *Not-For-Profit Loan Guarantee Program*. Enabling IO lending 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 helps ensure Ontario's seniors have access to a range of choices and locations for their long-term care needs. For example, a Ministry of Long-Term

Care loan guarantee helped enable the capital lending required to commence construction of Foyer Richelieu Welland in early May 2023. This 128 bed Francophone home, that also includes 10 new hospice beds, will be opened to south Niagara area residents in June of 2025. To enable capital lending to public hospitals for the purpose of long-term care bed development, the ministry has negotiated an additional unique guarantee program through a Memorandum of Understanding with the Ontario Financing Authority for hospital-based long-term care development projects.

The Ontario government also announced an increase to the construction funding subsidy in November 2022. This time-limited additional funding is helping to support eligible projects that start construction between April 1, 2022, and August 31, 2023. These projects will receive an additional construction subsidy of up to \$35 per bed, per day for 25 years. Eligible not-for-profit applicants can convert up to \$15 of the supplemental funding into a construction grant payable at the start of construction, to increase projects' upfront equity and enable them to secure financing.

As of March 2023, Ontario has 31,705 new and 28,648 upgraded beds in the development pipeline. This includes 52,928 new and upgraded beds that are in the planning stage, 5,043 beds are under construction, and 2,382 beds have been opened.

Driving quality and better accountability, enforcement, and transparency

The health, safety, and wellbeing of long-term care residents is the highest priority for the ministry. Fostering a culture of continuous quality improvement is key to improving resident outcomes and supporting a sustained high-performing system. The ministry has also finalized a draft quality framework for long-term care that is aligned with the Quadruple Aim goals of the broader health system. The ministry is consulting with sector stakeholders and partners regarding how best to design and implement the quality centre and to identify initial performance indicators under the quality framework.

An efficient and effective inspections regime is also central to fixing long-term care and ensuring safe homes and services for long-term care residents. 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 harm.

The government is investing an additional \$72.3 million over three years to increase enforcement capacity. Supported by this investment, the government has doubled the number of inspectors in the field completing on-site inspections and responding to complaints, which allows issues to be resolved more quickly and helps ensure that every long-term care resident lives with dignity in a safe environment.

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.

An important way to increase accountability and transparency 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 and a report published on its website. 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 any representatives from the Residents' Council and Family Council. Among its responsibilities, the committee makes recommendations regarding priority areas for quality improvement in the home. Among other things, the report must describe the home's priority areas for quality improvement and provide the results of the survey of residents, their families and caregivers, and actions taken based on those results.

Another step the government has taken to improve transparency is providing the *Long-Term Care Homefinder* for the public. The homefinder is available at [ontario.ca/longtermcare](https://www.ontario.ca/longtermcare) (<https://www.ontario.ca/page/long-term-care-ontario>). This website and search tool provides 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, 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.

2023–24 strategic plan

2023–24 is a critical year for the Ministry of Long-Term Care and the long-term care sector. As Ontario's seniors' population continues to grow, it is more important than ever that we continue building a health system where services are connected and convenient to access across the broader care continuum. This is a system where every long-term care resident receives the right care in the right place.

It is within this context that the government is continuing to advance its plan to fix long-term care. The plan is focussed on building an integrated health system where long-term care residents receive high quality care, supported by well-trained staff, in state-of-the-art homes.

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

- 1. Supporting the broader continuum of services for seniors:** The government is working to integrate care across the health system so that every Ontarian receives the right care in the right place — whether in a long-term care home, a hospital, or at home. This interconnected approach helps improve quality of care and preserves hospital capacity. Actions taken under this pillar include the *Your Health: A Plan for Connected and Convenient Care* and the *More Beds, Better Care Act, 2022* (<https://www.ontario.ca/laws/statute/s22016>). This also includes \$35 million in funding annually from 2023–24 to 2025–26 for the Local Priorities Fund to help those with complex medical needs connect to specialized care and supports in long-term care homes without having to go to the emergency room or be admitted to hospital.
- 2. 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 LTC homes. This requires hiring and training thousands of PSWs, RNs, and RPNs so that residents can receive the level of care they need and deserve. The government is investing up to \$4.9 billion to help support, hire, and train PSWs, RNs, and RPNs to work in long-term care. This investment is helping the government reach its system-level target average of

four hours of daily direct care provided by RNs, RPNs and PSWs per resident by March 31, 2025, and its provincial target average of 36 minutes daily direct care provided by allied health professionals per resident, by March 31, 2023 —and to sustain this level of care moving forward. This year, the level-of-care per diem is also increasing by 2.4%, including a 9.7% increase in the nutritional support per diem. This amounts to additional funding to long-term care homes of \$138.5 million in 2023–24.

3. **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. The government has invested \$72.3 million over three years to increase enforcement capacity. Supported by this investment, the government recently announced that Ontario had doubled the number of inspectors in the field.
4. **Building modern, safe, comfortable 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. With over 31,000 new and 28,000 upgraded beds in the development pipeline, the government is making real progress under this pillar.

To guide the implementation of this plan, the ministry follows a framework based around six key principles. These principles are the following:

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 across a broader continuum of care.
3. **Dedicated to quality:** Committing to the provision of high-quality care and the

best possible quality of life for residents in a safe, comfortable, home-like environment through a process of continuous quality improvement that also 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, OH, 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 plan to improve long-term care — and the key principles guiding its implementation — will help improve Ontario's long-term care system so that every resident experiences the best possible quality of life, supported by safe, high-quality care. Furthermore, it will help ensure that all Ontarians have access to care that is connected and convenient when and where they need it.

Ministry planned expenditures 2021-2022 (\$M)	
Category	Amount
Other operating	8,299.7
Total	3,149.6

Category	Amount
Other capital	83.7
Ministry (Pre-consolidation)	8,383.4
Consolidation adjustments	(5,233.8)
Total	3,149.6

Detailed financial information

Combined operating and capital summary by vote

Operating expense						
Votes/programs	Estimates 2023-2024 \$	Change from estimates 2022-2023 \$	% ****	Estimates 2022-2023 [1] \$	Interim actuals 2022-2023 [1] \$	Actuals 2021-2022 [1] \$

Ministry administrati on program	7, 1 32, 100	(11, 500)	(0 . 2)	7, 1 42, 600	7, 3 47, 900	7, 2 97, 364
Long-term care homes program	8, 2 92, 225 , 40 0	1, 15 8, 88 4, 10 0	16 . 2	7, 1 33, 340 , 80 0	7, 1 00, 021 , 40 0	6, 8 40, 867 . 27 1
Total operating expense to be voted	8, 2 99, 357 , 50 0	1, 15 8, 87 3, 10 0	16 . 2	7, 1 40, 484 , 40 0	7, 1 07, 369 , 30 0	6, 8 48, 164 , 63 5
Statutory appropriatio ns	314 , 01 4	N/A *****	N/ ***** A ***	314 , 01 4	314 , 01 4	55, 366
Ministry total operating expense	8, 2 99, 671 , 51 4	1, 15 8, 87 3, 10 0	16 . 2	7, 1 40, 798 , 41 4	7, 1 07, 683 , 30 0	6, 8 48, 220 , 00 1
Consolidatio	(4,	384,	N/ *****	(4,	(4,	(4,
Total including consolidation & other adjustments	3, 1 49, 616 , 81 4	752, 580, 800	31 . 4	2, 3 97, 036 , 01 4	2, 6 15, 717 , 20 0	2, 3 49, 850 , 21 2

n adjustment - Ontario Health	988 ,08 5,0 00)	021, 200	A ...	604 ,06 3,8 00)	355 ,04 3,6 00)	361 ,72 1,1 32)
Consolidatio n adjustment - Hospitals	(16 1,9 69, 700)	(22, 271, 100)	N/ A ...	(13 9,6 98, 600)	(13 6,9 22, 500)	(10 2,1 71, 913)
Consolidatio n adjustment - Ontario Infrastructur e and Lands Corporation	N/A	N/A	N/ A ...	N/A	N/A	(2, 216 ,89 4)
Consolidatio n adjustment - School Boards	N/A	N/A	N/ A ...	N/A	N/A	(32 ,25 9,8 50)
Total including consolidation & other adjustments	3,1 49, 616 ,81 4	752, 580, 800	31 .4	2,3 97, 036 ,01 4	2,6 15, 717 ,20 0	2,3 49, 850 ,21 2

Operating assets

Votes/pr ograms	Esti mat es 202 3-2 024 \$	Chang e from estima tes 2022-2 023 \$	% ****	Esti mat es 2022 -202 3 [1] \$	Inter im actu als 2022 -202 3 [1] \$	Actu als 2020 -202 1 [1] \$
Ministry administr ation program	N/A *****	N/A *****	N / A ***	N/A *****	N/A *****	N/A *****
Long- term care program	20, 430 ,00 0	N/A *****	N / A ***	20,4 30,0 00	N/A *****	20, 429 ,95 9
Total operating assets to be voted	20, 430 ,00 0	N/A *****	N / A ***	20,4 30,0 00	N/A *****	20, 429 ,95 9
Ministry total operating assets	20, 430 ,00 0	N/A *****	N / A ***	20,4 30,0 00	N/A *****	20, 429 ,95 9

Capital expense

Votes/program s	Esti ma tes 202 3-2 024 \$	Cha nge from esti mat es 2022 -202 3 \$	% ****	Esti ma tes 202 2-2 023 [1] \$	Int eri m act ual s 202 2-2 023 [1] \$	Act ual s 20 20- 20 21 [1] \$
Long-term care homes program	83, 731 ,80 0	(51, 556, 800)	(3 8. 1)	135 ,28 8,6 00	51, 557 ,80 0	51 1, 75 2, 97 5
Total capital expense to be voted	83, 731 ,80 0	(51, 556, 800)	(3 8. 1)	135 ,28 8,6 00	51, 557 ,80 0	51 1, 75 2, 97
Ministry total operating and capital including consolidation and other adjustments (not including assets)	3,1 49, 617 ,81 4	752, 580, 800	20 0. 6	790 ,09 5,6 14	2,4 06, 447 ,91 4	1, 71 2, 40 9, 22 8

						5
Consolidation adjustment - Hospitals	(83 , 73 1, 8 00)	51, 5 56, 8 00	N/ A ...	(13 5, 2 88, 600)	(51 , 55 6, 8 00)	(5 11 , 7 52 , 9 75)
Total including consolidation and other adjustments	1, 0 00	N/A	N/ A ...	1, 0 00	N/A	N/ A ...
Ministry total capital expense	1, 0 00	N/A	N/ A ...	1, 0 00	N/A	N/ A ...
Ministry total operating and capital including consolidation and other adjustments (not including assets)	3, 1 49, 617 , 81 4	752, 580, 800	20 0. 6	790 , 09 5, 6 14	2, 4 06, 447 , 91 4	1, 71 2, 40 9, 22 8

Historic trend table

Historic trend analysis data	Actuals 2020-2021 [1]	Actuals 2021-2022 [1]	Estimates 2022-2023 [1]	Estimates 2023-2024
Ministry operating and capital pre-consolidation	\$6,179,954,695	\$7,359,972,976	\$7,276,087,014	\$8,383,403,314
Year-over-year change ^[2]	N/A *****	19.1 %	-1.1%	15.2%
Consolidation and other adjustments (operating and capital)	\$ (4,467,545,467)	\$ (5,010,122,764)	\$ (4,879,050,000)	\$ (5,233,785,500)
Ministry total operating and capital including consolidation and other adjustments (not including assets)	\$1,712,409,228	\$2,349,850,212	\$2,397,037,014	\$3,149,617,814

Ministry organization chart

December 2023

Stan Cho, Minister

John Jordan, Parliamentary Assistant

Melissa Thomson, Deputy Minister

Peter Spencer, Director, Legal Services

Peter Spadoni, Director, Communications

Melissa Mobilio, Executive Advisor to DM

Gillian Steeve, Assistant Deputy Minister, System Planning & Partnerships

Emily Cohen-Henry, A/Director, System Planning & Partnership

Kelly McAslan, Interim Assistant Deputy Minister, Long-Term Care Operations

Mike Moodie, Director, Long-Term Care Inspections

Nadine Rhodd, A/Director, Operational Policy and Implementation

Ifeolu Ogunyankin, A/Director, Funding and Programs

Christine Loureiro, Director, Service System Planning & Operational Issues

Sean Court, 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



Appendix – Part I

Annual report: 2022–2023 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 the four years since then, the government has made incredible progress fixing the long-term care system. This work continued in 2022–23 as the government made significant investments, launched innovative programs, and passed landmark legislation to improve long-term care in Ontario so that every long-term care resident experiences the best possible quality of life, supported by safe, high-quality care.

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*. 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 and the Auditor General report. It includes new measures to support 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 both now and in the future.

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 professionals to a system-level target average of 36 minutes 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, then a plan with proposed strategies to assist in achieving the target must be created and made public.

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 continuous quality improvement initiative. Another requirement is for homes to take a survey of the residents, their family/caregivers, to measure their experience with the home. Requirements for the administration and content of the survey may be set out in regulation. In addition, the legislation enables the creation of a Long-Term Care Quality Centre to support continuous quality improvement efforts by long-term care home.

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 regulatory 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 or Re-Inspection Fees 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.

The legislation includes new measures to help build safe, modern, and comfortable homes including additional measures 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 is working to build a long-term care sector where every resident experiences the best possible quality of life, supported by safe and high-quality care.

Plan to stay open: Health system stability and recovery

On August 18, 2022, the Ontario Government introduced the *Plan to 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 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 OH, to support timely interventions based on community needs.
- \$5 million boost to Behavioural 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 receive care in a more suitable setting, such as a long-term care home, that offers a better quality of life while they wait for their preferred long-term care home.

Continuum of care

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. In 2021, the program was expanded to include all 55 certified paramedic services in the province, making it available to all eligible seniors across Ontario. As

part of Budget 2023, the government announced an additional \$174 million investment over two years, starting in 2024–25, to continue the Community Paramedicine for Long-Term Care Program through 2025–26.

As of March 2023, the Community Paramedicine for Long-Term Care Program has provided care to more than 35,000 individuals in their homes and has a 98% satisfaction rating among clients, caregivers and other health care providers associated with the program.

In 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 invested \$9.5 million to support seven BSUs across the province. This included \$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).

Improving staffing and care

Historic progress was made this year to improve staffing in Ontario's long-term care homes. The government continued to hire and train personal support workers, nurses, and other health care workers for the long-term care sector through a number of programs.

In February 2021, the government announced an 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 all 24 publicly assisted colleges now offer this innovative, fully funded program. By the end of the 2022–23 fiscal year, over 11,711 PSWs were enrolled in or graduated from the program.

The next month the ministry launched the third and final phase of the *Attending Nurse Practitioners in Long-Term Care Initiative*, with funding for an additional 15 nurse practitioners. This brings the total nurse practitioners funded through the program to 75. This was followed by an announcement making \$86 million available to train approximately 8,000 PSWs through private career college programs and district school boards programs. Through the 2021 Ontario Economic Outlook and Fiscal

Review, Ontario also committed to further investments in 2022–23 to add 8,000 additional personal support workers to the health and long-term care workforce. Between winter 2020 and January 2023, over 23,600 people were in training or had completed training in a PSW program.

The investments continued when 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, that fall the government implemented a \$10 million annual fund to support ongoing education and training 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.

The government also 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*, 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 introduced 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.

In April 2022, the government announced through the Plan to Stay Open that it was making the PSW wage enhancement permanent. The temporary wage enhancement was originally announced to help 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.

Announced in the *2021 Ontario Economic Outlook and Fiscal Review*, the government committed to investing an additional \$57.6 million, beginning in 2022–23, to hire up to 225 nurse practitioners in the long-term care sector. 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 2022, Ministry of Long-Term Care partnered with Humber College to pilot the PSW Training Pilot which provides existing long-term care home employees (e.g., resident support aides) the opportunity to upskill and transition into a PSW role using an accelerated online training module. The program has now been expanded for an additional three years beginning in 2023–24 and is targeting an additional 600 individuals working in long-term care homes by 2025–26.

In partnership with the Ministry of Health, OH and CNO, a Long-Term Care Staffing Pool was announced in January 2022, to identify a pool of internationally educated CNO applicants that could be deployed to long-term care homes in need of staffing support. The staffing pool supported long-term care homes who needed 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 were 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, 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, 1,440 IENs have completed the program as of the end of February 2023.

The government also launched the Preceptor Resource and Education Program for Long-Term Care 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 clinical hands-on experience to better serve the needs of residents.

In March 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 nurses, 60 registered nurses, and 400 PSW students.

Later that month the government announced the Temporary Retention Incentive for Nurses to provide Ontario nurses with a lump sum retention incentive of up to \$5,000 per nurse. This incentive helped to retain nurses across the health sector and to stabilize the nursing workforce.

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/lccareers](https://www.ontario.ca/page/careers-long-term-care) (<https://www.ontario.ca/page/careers-long-term-care>), 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.

Providing nutritional food is an important aspect of improving a resident's quality of life. 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 invested over \$40 million (representing a 15% increase) in nutritional support funding for long-term care homes in 2022–23. This 15% increase accounted 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.

Building safe, modern, and comfortable homes

As of March 2023, Ontario has 31,705 new and 28,648 upgraded beds in the development pipeline. This includes 52,928 new and upgraded beds in the planning

stage, 5,043 beds under construction, and 2,382 beds that opened. Overall, the government is investing \$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 celebrated the completion of the first brand-new long-term care home built under the Accelerated Build Pilot Program in March 2022. The new home, named Lakeridge Gardens, is built in Ajax and is located on the same grounds as the Ajax Pickering Hospital.

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. 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 November 2022, the Ontario government announced a time-limited increase to the construction funding subsidy. This additional funding is helping to support eligible projects that start construction between April 1, 2022, and August 31, 2023. These projects will receive an additional construction subsidy of up to \$35 per bed, per day for 25 years. Eligible not-for-profit applicants can convert up to \$15 of the supplemental funding into a construction grant payable at the start of construction, to increase projects' upfront equity and enable them to secure financing.

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. In February 2023, the government announced that Ontario had hired 193 new long-term care inspection staff, including 156 new inspectors. These new hires doubled the number of inspectors in the field completing on-site inspections and responding to complaints. With this change, Ontario now has one of the highest inspector to long-term care home ratios in Canada. As part of this

investment the government launched a new and improved proactive inspections program in long-term care homes to proactively visit homes, while continuing reactive inspections to promptly address complaints and critical incidents.

Another step the government took in 2022 to increase transparency and accountability was creating the *Long-Term Care Homefinder* (<https://www.ontario.ca/page/long-term-care-ontario>). 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.

The government also made great progress on driving quality in 2022 through improving air conditioning in Ontario long-term care homes. In 2021 the government updated regulations to require designated cooling areas of all homes to be served by air conditioning, which is operated to maintain the temperature in the designated cooling area at a comfortable level for residents 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 were required to ensure air conditioning was installed in resident rooms by June 22, 2022, unless limited exception criteria were met. As of April 3, 2023, 603 homes (96.3%) are now fully air conditioned. To encourage compliance and strengthen enforcement, the government created a \$25,000 Administrative Monetary Penalty for long-term care home licensees that fail to comply with certain regulatory air conditioning requirements.

This progress is a result of the government's investments in the area. In 2021–22, the government invested approximately \$156 million in heating, ventilation, and air conditioning systems in long-term care homes to enhance resident safety and comfort. Up to \$61.4 million of the funding was provided through the Infection Prevention and Control Minor Capital Program, and up to an additional \$23.9 million through the Long-Term Care Minor Capital Program. Up to \$100 million in joint provincial-federal funding was also being provided through the *COVID-19 Resilience Infrastructure Stream of the Investing in Canada Infrastructure Program*, 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 also invested up to \$50.4 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. In 2022–23, the government provided an additional \$39.2 million through the Supplementary Funds to continue to support homes with their air conditioning installation.

The government also requires long-term care homes to publish a report on their continuous quality improvement initiative for each home on its respective website. Among other things, the report must include a description of the home's priority areas for quality improvement. Homes are required to publish their first interim report by August 11, 2023.

2022–23 COVID-19 response

Last year Ontario turned the corner in the fight against COVID-19. Thanks to the continued efforts of Ontarians, the province reached a point where it could begin to safely reduce public health measures in long-term care homes. In consultation with the Office of the Chief Medical Officer of Health, guidance and requirements that were no longer necessary were adjusted. These updates were made in light of the high vaccine uptake among residents and the availability of safe and effective antivirals that reduce the risk of severe outcomes to residents. The changes brought Ontario into alignment with other provinces across the country who had already made similar adjustments.

The removal of burdensome restrictions was a continuation of the safe, cautious, and balanced approach that the province has employed since the beginning of the pandemic. This approach included providing significant funding and taking decisive action when it was necessary. 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. The lessons learned from the pandemic will also continue to inform the ministry's actions moving forward so that long-term care homes are as safe as possible for residents and staff.

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

- Median Time to Placement (excluding individuals waiting to be transferred from one long-term care home to another): 127 days as of December 2022.

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 52.0% in August 2022 to 52.4% in January 2023, up by 0.4%.

Outcome measure #3 - Average hours 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, as well as 33 minutes of AHP care, no later than March 31, 2022. The Minister has publicly confirmed the achievement of these targets.
 - 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 - Number of long-term care homes with recurring compliance orders

- The *Fixing Long-Term Care Act, 2021* (<https://www.ontario.ca/laws/statute/21f39>) included a number of changes designed to enhance operator accountability and give inspectors more effective tools to enhance enforcement and reduce the number of recurring compliance orders. Administrative monetary penalties (AMPs) are one such tool giving the ability to issues penalties up to \$250,000 to homes not complying with an order to address regulatory non-compliance.
- As of March 31, 2023, 58 AMPs have been served to licensees totalling \$206,800.

Outcome measure #5 - Number of proactive long-term care home inspections

- The government launched a new and improved proactive inspections program in long-term care homes and has hired 193 new inspections staff (156 of which are inspectors). This ensures that there are enough inspectors to proactively visit each long-term care home by 2025, while continuing reactive inspections to promptly address complaints and critical incidents.
- As of April 3, 2023, 85 proactive inspections have been carried out which amounts to 14% of Ontario long-term care homes.

Outcome measure #6 - Total number of net new beds in the opening stage of the development process

- As of March 2023, Ontario has opened 2,382 new beds (1,228 net new beds, and 1,154 older beds being upgraded to modern standards).

Outcome measure #7 - Total number of net new beds in the opening stage of the development process

- Total Long-Stay Waitlist as of December 2022 (excluding individuals waiting to be transferred from one long-term care home to another): 39,561.

Ministry interim actual expenditures

2022-2023 [3]

Expenditure	Number
COVID-19 approvals (\$M)	993.6
Other operating (\$M)	5,940.6
Capital (\$M)	521.9

Expenditure	Number
Ministry (Pre-consolidation) (\$M)	7 . 4 5 6 . 1
Consolidation adjustments (\$M)	(5 , 0 4 9 . 7)
Total ministry (\$M)	2 , 4 0 6 . 4
Staff strength ^[3] (as of March 31, 2023)	4 4 3 . 7

Updated: December 15, 2023

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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 and/or program structure. Interim actuals reflect the numbers presented in the *2023 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 *2023 Ontario Budget for the Health Sector*.