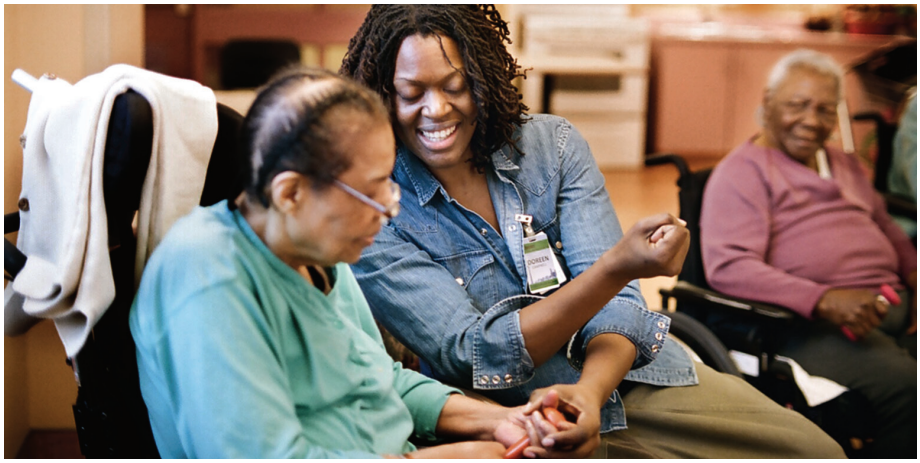
The Way Forward:
Next Steps to Meet the Needs of Ontario's Seniors

AdvantAge Ontario
Advancing Senior Care

It is time to change the face of seniors' care. Our grandparents, parents, and future generations deserve to age gracefully in their own homes for as long as possible – and get the best quality care when and where they need it.

We believe that a focus on an actionable health human resources strategy, affordable and supportive housing, enhanced community services and supports, and sufficient investments in long term care funding will keep seniors independent for longer and help government in its goal to end hallway health care.



AdvantAge Ontario and our members are committed to making Ontario the best place to grow old. In our 2020 Provincial Budget submission, The Way Forward: Next Steps to Meet the Needs of Ontario's Seniors, we put forward 10 recommendations to improve seniors' care and help solve hallway health care. These are listed on the reverse and our key priorities are highlighted below.

Key Priorities

Three key priorities are critical to our solutions – and to building a 21st-century seniors' care system.

More people to care for people.
Our parents and grandparents can't get the care and support they need without qualified, compassionate people on the front lines to provide it. To make sure the care is there, the province should work with system partners to develop and implement an integrated health human resources strategy that addresses the care and service needs of seniors wherever they live.

Funding stability to improve care.
Under the current, overly complex funding model, long term care homes are subject to significant annual swings in funding, sometimes leading to layoffs and reduced levels of care. The province needs to work with the sector to stabilize long term care funding to ensure continuity in front-line staff and direct care.

Funding for more front-line care.
No plan to recruit additional care workers will succeed without government making the necessary investments. Already, community providers and long term care homes struggle to do more with less. Especially as we prepare to add 15,000 new long term care beds, we need government to ensure funding keeps pace with acuity and inflationary increases so we can pay for more people on the front lines and continue to provide safe, high quality care.

> "To improve things, we really need capable and consistent staffing. If we can guarantee enough regular, well-trained staff, it will make a world of difference. We are caring for the most vulnerable people, and we need to take care of these seniors in the best way we can."
>
> Peter S., PSW

Summary of Recommendations

Recommendation 1
The province should work with system partners to develop and implement a long term, integrated health human resources strategy. The strategy should incorporate short, medium and long term tactics focusing on education and training, recruitment, retention and technology.

Recommendation 2
The province should invest an additional $550 million in new long term care funding to increase the provincial average of care to 4 hours per resident per day.

Recommendation 3
The province should work with the federal government and municipalities to increase the supply of affordable, appropriate and accessible housing for seniors.

Recommendation 4
The MOH should work together with the MOLTC and the MMAH to coordinate programs and provide additional funding to expand supportive housing for seniors. This should include a single funding envelope for capital, operations and support services that can be flexibly used by the organization.

Recommendation 5
The province should provide funding and regulatory support to facilitate the spread and scale of campuses
of care.

Recommendation 6
In collaboration with the sector, the province should stabilize long term care funding to ensure continuity in front-line staff and direct care and introduce a quality improvement incentive that would provide additional funds to homes that consistently meet or exceed high standards of resident care.

Recommendation 7
The province should provide inflationary increases to the long term care base and supplementary funding envelopes to ensure services can be sustained.

Recommendation 8
The province should provide incentives to the long term care sector to redevelop older homes and build new ones including but not limited to increasing the construction funding subsidy per diem components by 30% from 2015 funding levels and prioritizing government land for new and redeveloping long term care homes.

Recommendation 9
The province should work with the sector to create a redevelopment strategy that re-examines timeframes and provides tools and incentives to operators.

Recommendation 10
The province should ensure funding under the new minor capital program is equitable across the sector and that no homes face a reduction in funding they currently receive to maintain their home and ensure structural compliance.

About AdvantAge Ontario

AdvantAge Ontario has been the trusted voice for senior care for 100 years.

We are community-based, not-for-profit organizations dedicated to supporting the best possible aging experience.

We represent not-for profit, charitable, and municipal long term care homes, seniors' housing, and seniors' community services.

AdvantAge Ontario
Advancing Senior Care

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AdvantAge Ontario

Advancing Senior Care

The Way Forward: **Next Steps to Meet the Needs of Ontario's Seniors**

2020 Provincial Budget Submission

Introduction

"No one ever thinks it will happen to them, but it does. It's a heart-wrenching experience, but from the moment our family entered the building for the first time, we were warmly welcomed. It's a daunting experience to meet so many people wandering the halls with dementia. How does one react? The staff made us feel comfortable immediately and introduced us to a few residents who had gathered around. They even gave us a few anecdotes about each person – what they liked, who they were. The residents were treated like normal people, not patients. All interactions we saw on that first day were with respect, humour and kindness."

As this excerpt from an August 2019 letter in *The Ottawa Citizen*[1] so honestly conveys, it is a "heart-wrenching" decision to place a loved one in long term care. But, it also shows that it can be the best decision – for the person needing care and for family members needing the peace of mind that their loved one is getting that care.

When the time comes that a senior living in Ontario needs support – whether it is community services, home care, supportive housing or long term care – they should have the comfort of knowing that they can access what they need, when they need it. As a province, that means preparing for and embracing the demographic reality that seniors now outnumber children under 15[2] and that by 2046, they will represent nearly a quarter of Ontario's population.[3]

In light of this urgency, the Ontario government has taken a number of positive steps in the last year to start improving seniors' care and reducing hallway health care. New long term care beds have been approved, additional funding has been provided for community services including seniors' supportive housing, and some initial reductions in red tape and administrative burdens will help give front-line staff time back for care and streamline new bed development. Ontario Health Teams will offer the potential of more integrated client-centred care. And the establishment of a dedicated ministry and Cabinet position for long term care has further underscored the government's commitment.

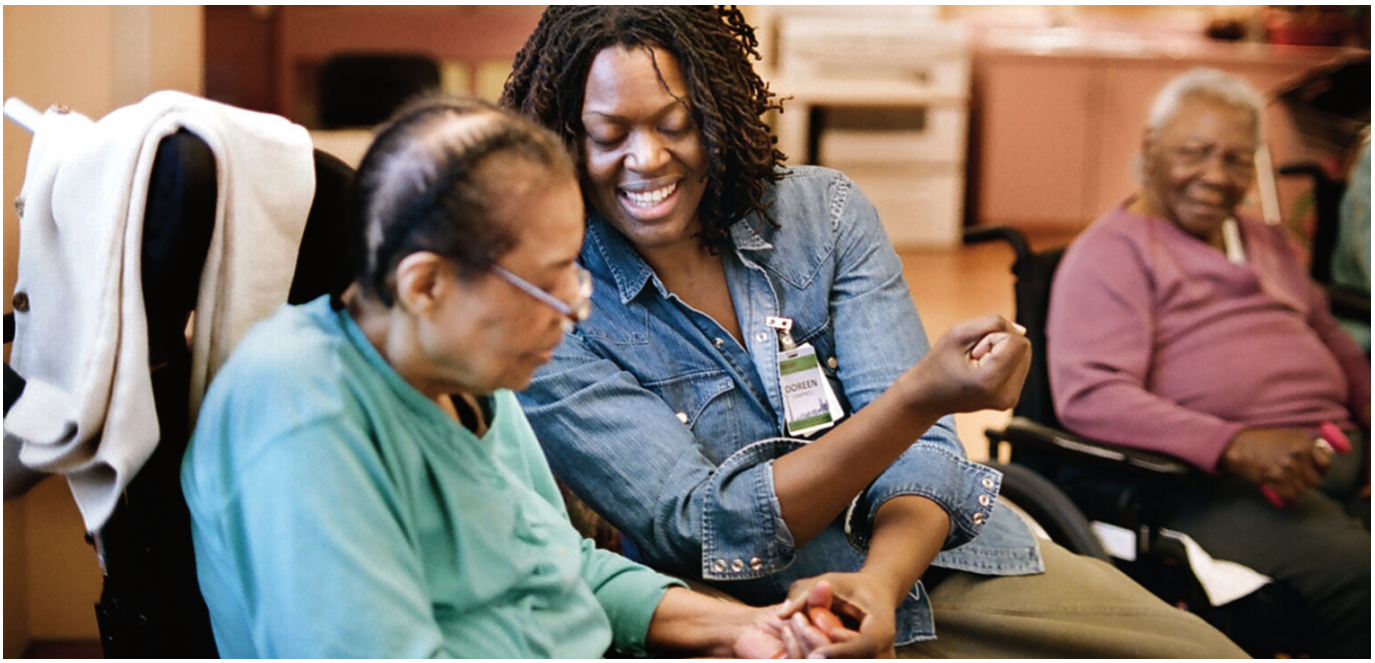
These are all very promising changes. Now it's time to take the next step on the way forward to meet the needs of Ontario's seniors. Our long term care system still fails to keep up with demand. Too many people are unable to access the supports they need at home, long term care wait lists have hit a record high, and too many seniors are unnecessarily taking up hospital beds while those with acute needs are treated in hallways.

It's time to take the next step to meet the needs of Ontario's seniors.

AdvantAge Ontario and our community-based charitable, municipal and not-for-profit members remain committed to working with this government to improve the health care system for our aging population. We are the only provincial organization that represents the full spectrum of seniors' care, which means we bring a unique and important perspective to the table. Our 400 members serve close to 50,000 seniors from across the province and have strong insights into the people and communities they serve.

In the pages that follow, we have put forward our solutions to the challenges that are straining the health care system and leaving people waiting too long for care. Taking action on these is the next step toward a 21st century seniors' care system.

More People to Care for People



Almost without exception, any report or study looking at the challenges in providing safe, quality care to seniors in Ontario, particularly in long term care homes, has pointed to the need for more staff. There may not be agreement on exactly how many positions or how best to add them, but there is no dispute about the significant benefits for residents and front-line workers in having more people to provide care – or the serious consequences if understaffing continues.

The critical shortage of appropriately trained staff is challenging in urban areas and desperate in rural and remote Ontario. Enormous workloads and overbearing regulations and red tape, along with increasingly complex care needs, place a huge mental, emotional and physical strain on front-line staff and make it very hard to attract new and qualified workers to our sector.

We must also consider future human resource needs. The government has committed to adding 15,000 new long term care beds over the next five years. But we can't successfully open these new beds without a plan to attract, recruit, train and retain staff to care for the people in them. We estimate that this will require at least 8,560 additional personal support workers and nurses.[4]

Nurses are essential to providing safe and effective care, and their role is even more crucial as residents in long term care are now frailer and have more complex conditions than ever before. Nurses typically prefer to work in hospitals[5] and it has become increasingly difficult to find those who want to work in long term care.

PSWs are the backbone of the health system and deliver the majority of daily care to residents. It is estimated that there were 90,000 PSWs in Ontario in 2011 of which about 63% were in long term care.[6] What is alarming, however, is the number of PSWs leaving their positions: it's estimated that while 7,500 PSWs graduate from various programs each year, about 9,000 leave the workforce annually.[7]

Because of these challenges, many homes are forced to regularly operate short-staffed of PSWs and nurses. This is not acceptable to residents, their families or other front-line staff who become burned out as a result.

There is so much that depends on – and that can be gained from – taking meaningful steps to tackle this issue. Government has recognized this urgent need and committed to taking steps to address the health human resources crisis with the development of a long term care staffing strategy. This is critical to ensuring residents in existing long term care beds get the care they need while enabling the successful opening of the promised 15,000 new beds. But any long term care staffing strategy must be part of a fully-integrated, full-spectrum health human resources strategy that addresses the needs of seniors – and all Ontarians – regardless of care setting.

A robust health human resources strategy will mean fewer seniors in alternate level of care (ALC) beds in hospital waiting for long term care. It will also reduce wait times for those getting support at home who need placement in long term care and potentially free up resources to help more people to live independently in the community for longer. And it will go a long way to increase system efficiencies and cost savings — for example, through a reduced need for costly overtime.

A successful strategy needs to not only be comprehensive and focus on the long term but also include short- and medium-term tactics to quickly address the most critical issues that the sector is experiencing now. It should be developed in close collaboration with representatives from across the continuum of seniors' care, including consumers, caregivers, advocates, researchers, and associations like AdvantAge Ontario. As a starting point, we have recommended several elements and tactics.

PSWs in crisis

According to a recent HealthForceOntario survey[8]:

over 50% of PSWs are retained for fewer than five years

43% said they left due to burnout

62% who are currently working would leave due to stress/burnout

Tactics for Addressing the HHR Crisis

1. Education and Training

Challenges: Many prospective students cannot afford to take time off and go to school. Educational programs are not easily accessible in all areas of the province.

Proposed Solutions:

> Provide tuition relief for students in health-care-related programs
> Support organizations in providing paid placements and on-the-job training through apprenticeship programs
> Work with colleges to develop specialized curricula and provide financial assistance for those wishing to pursue specialized health care training
> Establish satellite training centres to provide access to continuing and specialized education throughout Ontario
> Support the creation of more living classrooms for PSWs in training

2. Recruitment

Challenges: We need to find ways to eliminate barriers so more new graduates work in the seniors' sector. Many newly-educated PSWs end up working outside of health care, and nurses are more likely to take positions in hospitals than in long term care.

Proposed Solutions:

> Facilitate recruitment of foreign-trained health care workers
> Focus on targeted solutions for rural and remote communities, such as incentives and assistance for people who choose to work in regions where they are most needed
> Cut red tape to give employers more flexibility to hire and deploy the most appropriate staff
> Explore non-traditional positions, such as PSW aides

3. Retention

Challenges: Staff in long term care are burning out and leaving the sector due to understaffing, over-regulation and lack of support. Our efforts must also focus on retaining existing workers.

Proposed Solutions:

> Work with the sector to provide health and wellness programs
> Provide incentives to organizations to provide growth and development opportunities, including career laddering for PSWs and registered practical nurses (RPNs)
> Offer training supports, including backfill funding, to help staff maintain and improve their competencies
> Reduce unnecessary red tape and administrative burdens that take workers away from front-line care

4. Technology

Challenges: Health care has not kept pace with other sectors in terms of adoption of technology. There are many helpful tools that can be put in place to improve seniors' care and address human resource issues.

Proposed Solutions:

> Facilitate and support the spread and scale of integrated, interoperable electronic health record systems
> Incentivize the development, spread, and scale of innovative technologies that can address the staffing gaps and create greater system efficiencies

We do not expect government to solve this problem on its own. We are already working with our members and stakeholders to develop solutions. But provincial leadership is urgently needed to develop and implement a strategy that invests in and supports the delivery of critical front-line care and services for Ontario's seniors.

Recommendation #1

The province should work with system partners to develop and implement a long term, integrated health human resources strategy. The strategy should incorporate short, medium and long term tactics focusing on education and training, recruitment, retention and technology.

An increased investment in front-line staff is also critically necessary, especially in long term care. Residents coming into homes today are older, frailer and have more complex care needs than ever before. Current long term care funding is insufficient to address growing resident acuity. The need to increase staffing and related funding was a priority recommendation in a 2008 report on the quality of life and care of residents in long term care commissioned by the previous government.[9] For 10 years, little was done on this recommendation; as a result, the sector has fallen further and further behind.

Currently, long term care residents receive an average of 3.45 hours of daily care.[4] We have strongly urged successive governments to increase funding to support a minimum provincial average of four hours of care per resident per day to meet increased acuity. An investment to support this additional half-hour of care is needed now more than ever. Research clearly shows that more staffing will mean better-quality care, better resident outcomes and greater resident safety.[10,11] Staff recruitment and retention will likely be increased as the level of burn out diminishes. In addition, more staff will also mean more time for care – and more time to know each resident and provide personalized support.

Recommendation #2

The province should invest an additional $550 million in new long term care funding to increase the provincial average of care to 4 hours per resident per day.

Needing more care

Seniors entering long term care are older and have higher care needs, yet funding for staffing levels has barely shifted in response to this change:

86% need daily help with activities such as dressing, bathing, and eating

over 80% are living with dementia and other cognitive impairments

45% exhibit aggressive behaviours[12]

From the Front Lines:
Debra's Story

"I've worked for my current employer for over 10 years now in many roles. I started as a dietary aide, then became a housekeeping/laundry aide, and am now a PSW.

I truly value connecting with the residents and the impact that I have on them. I like to make them feel that they have something positive in their lives. However, we, the care staff, definitely need more support. Our residents are so diverse now, and there is never enough time or enough people. We're task focused and have to give "cut and paste" care as we rush from room to room, counting down the number of residents we have yet to see. I desperately want to give each resident more time, but I am often left with no choice but to do the bare minimum to ensure everyone gets help.

I see the effect on other PSWs as well. When we're short-staffed and rushed, I notice others aren't using devices properly or proper body mechanics, which often leads to injuries. We definitely need more funding for more people, which will allow us to give more safe, personalized care."

Debra M., PSW
Municipal Long Term Care Home

Supporting Aging in the Community

Not every senior will need long term care as their independence declines. Most seniors would prefer to stay in their community for as long as they can be supported there. But the reality is that there are few options for Ontarians as they age other than long term care, limited publicly-funded home care and retirement homes for those who can afford them.

We need to explore, trial and support a full range of cost-effective options for seniors as their care needs change. Bold government leadership is needed to encourage providers to try new models of compassionate, integrated and person-centred seniors' care in the community.

As a first step, we should be making sure seniors have adequate and suitable housing. **We are very pleased that the province is working with the federal government to address the affordable housing shortage in Ontario.** Seniors have specific housing needs that, if met, can help to facilitate greater independence for longer. Smart investments to increase supply will help older Ontarians remain part of their communities at a fraction of the cost of ALC beds and long term care.

Seniors also need housing that is easily accessible and can accommodate mobility challenges. The prevalence of disability increases with age.[13] Seniors with disabilities can often be accommodated at home with modifications and adaptations to their existing homes. There is a need to support home modifications while ensuring that new developments meet accessibility design standards.

Seniors living in rural and remote areas of the province who want to age in their communities are likely to have even fewer choices. These seniors will need financial support to renovate their homes to accommodate disabilities so they can live independently for longer.

Two immediate and concrete steps the government can take to help facilitate the development of seniors' housing are to allocate a proportion of surplus provincially owned properties for this purpose and to incentivize affordable seniors' housing development in rural and remote areas.

Increasing the supply of affordable, appropriate, and accessible housing will help seniors remain independent, easing the pressures on long term care and reducing hallway health care. All three levels of government need to work together and make this a priority.

Recommendation #3

The province should work with the federal government and municipalities to increase the supply of affordable, appropriate and accessible housing for seniors

Many seniors in Ontario require more support with homemaking, meals, and personal care than they can access through publicly-funded home care. However, not all seniors can afford private retirement residences. As a result, they are forced into long term care prematurely. That is because we have a "missing middle" in our care continuum.

Growing older at home

Ninety-two percent of Canadian seniors live at home[14] and **85%** of them want to age at home for as long as possible.[15] However, in 2016, of the **1.3 million** senior-led households in Ontario, **17%** were in core housing need[16], meaning that their current housing is not adequate, suitable, or affordable.[17]

We need to fill the missing middle with a strong community support sector and a robust supply of affordable supportive housing[i] options for seniors. Recent government commitments to expand these programs are an important step, but much more can and must be done.

Having adequate supports is critical to helping seniors stay in their communities, close to their families and friends. A recent report from the Canadian Institute for Health Information (CIHI) showed that between 23-31% of seniors in Ontario admitted to long term care might have been supported at home or in the community, including seniors who have dementia but have low cognitive and functional impairment.[18] Having access to the appropriate supports in the community or in supportive housing settings could delay or avoid long term care admission for seniors not requiring that level of care. In addition, appropriate supports in the community can also reduce emergency department visits and hospital admissions.[19]

Supportive housing does not necessarily require capital development. Support services can be put in place in settings where older Ontarians already live close to one another, such as seniors' non-profit housing.

Significantly, the average cost to the province for someone receiving home and community care is about $40 a day and in assisted living is about $59 a day. This is considerably less than the average daily cost of $650 for one person in an ALC bed.[20,21] Caring for seniors in the most appropriate setting for their needs is best for them and the most efficient use of finite health care dollars.

Funding for supportive housing is bound in layers of red tape. Funds are provided through different envelopes, multiple ministries (Health, Long-Term Care, Municipal Affairs and Housing), and LHINs, leading to inconsistencies. A single funding envelope that covers capital, operating, and care costs for supportive housing, to be used flexibly, would eliminate red tape, help expand these programs efficiently and effectively, and reduce hallway health care. Cross-ministerial initiatives providing coordinated funding for supportive housing would build a strong community care sector and give more options to seniors.

Recommendation #4

The MOH should work together with the MOLTC and the MMAH to coordinate programs and provide additional funding to expand supportive housing for seniors. This should include a single funding envelope for capital, operations and support services that can be flexibly used by the organization.

Cost comparisons across settings[20,21]

Home care	$40/day
Supportive housing	$59/day
Long term care	$150/day
Hospital ALC	$650/day

i Supportive housing for seniors, also referred to as assisted living for high risk seniors, is typically a congregate setting where seniors can live relatively independently but receive supports, as required, with cleaning, shopping, meal preparation (or congregate dining option), bathing, dressing, etc.

Long term care homes that are left vacant following redevelopment present a ready opportunity to expand supportive housing and the number of seniors' campuses across the province. Campuses often include long term care, housing, and community services. About 300 long term care homes across Ontario are slated to redevelop by 2025. Leveraging the vacant buildings to create campuses will allow many more seniors to benefit from these vibrant communities where people of varying levels of need live together.

AdvantAge Ontario sponsored and collaborated on leading edge research on campuses of care. The results indicated that a campus model can provide continuity of care, enable seniors to remain in the community longer, provide economies of scale and contribute to system efficiencies.[22]

Flexibility in regulation and a willingness to remove red tape barriers will help facilitate the spread of innovative models like campuses.

Recommendation #5
The province should provide funding and regulatory support to facilitate the spread and scale of campuses of care.

Long term care homes that are left vacant following redevelopment present a ready opportunity to expand supportive housing and seniors' campuses.

Growing to Support a Community: Knollcrest Lodge Campus of Care

Nestled within a small town of 1,700 people, Knollcrest Lodge in Milverton has changed considerably since it was first built in 1972.

Its evolution from "just a long term care home" to become a campus of care began in 1990 when a Community Outreach Service was added. Since then, the home has developed many partnerships, resulting in a wide range of programs and services being offered on its Wellness Campus. Services are health-care related, such as physiotherapy, optometry, Life Labs, and even a dental clinic for children. And services are community-related, such as a law firm, drop-off centre for water testing, drop off for medical supplies, congregate dining, and a Mother and Child clinic offered through the Perth District Health Unit. The Campus is also home to a new hub that offers transportation, Meals on Wheels, wellness and exercise programs, blood pressure clinics, friendly visiting, and home maintenance and repair.

In 2015, the campus expanded beyond long term and community care with the opening of Milverton Place, a 12-unit apartment building. Residents who call Milverton Place home benefit from all of the diverse programs offered on campus.

Almost 30 years in the making, the Wellness Campus has steadily grown over the years to support not only seniors but people of all ages in this rural area. It has become a centre of wellness, and it is now a vital, necessary hub for the community.

From the Front Lines:
Peter's Story

"I used to work in the business and technology sector before moving over to health care. I've been a PSW now for five years. The work is very challenging, but seeing joy in the residents' faces and hearing them say "thank you" makes it all worthwhile.

When the home where I work is short-staffed, it often uses agency nurses. Although somewhat helpful, this really impacts resident care. The agency usually sends a new PSW each time, and I have to teach and orient each one every single time. This causes all of us to slow down. I also see that some residents are hesitant to receive care from these unfamiliar workers. All of this is very stressful to home staff, and I've seen many, many people burn out.

To improve things, we really need capable and consistent staffing. If we can guarantee enough regular, well-trained staff, it will make a world of difference. We are caring for the most vulnerable people, and we need to make sure we can take care of these seniors in the best way we can."

Peter S., PSW
Charitable Long Term Care Home

Investments to Protect our Loved Ones

We are pleased that the province has taken steps toward reducing red tape and increasing flexibility in the long term care home funding model.

We must ensure that long term care funding is stable and sufficient. Under the current, overly complex funding model, homes are subject to significant annual swings in funding based on measures of resident acuity. These fluctuations create considerable instability financially and, in terms of service continuity, often require layoffs and reduced levels of care.

Compounding this is the fact that acuity is a relative measure, meaning that homes can lose funding even if the needs of their residents have increased. Moreover, acuity assessments are based on two-year-old data and do not reflect current residents' care needs. And the current model perversely reduces funding to homes as resident outcomes improve, penalizing homes for successful quality improvement initiatives. A quality improvement incentive can help to sustain these initiatives, thus improving care and outcomes as well as efficiencies for homes and the system.

Any changes made to funding should be phased in over time so that these adjustments themselves do not destabilize the sector.

Recommendation #6

In collaboration with the sector, the province should stabilize long term care funding to ensure continuity in front-line staff and direct care and introduce a quality improvement incentive that would provide additional funds to homes that consistently meet or exceed high standards of resident care.

In Budget 2019, the long term care sector saw an overall increase of 1.7%, less than the rate of inflation. In fact, funding for direct care increased by only 1%, which is insufficient to meet the increasingly complex care needs of today's long term care residents.

Our members and the residents in their care were grateful that the new Minister of Long-Term Care took swift action to mitigate changes that would have resulted in overall funding reductions for some homes. We now urge government to take the way forward by ensuring funding keeps pace with resident acuity and inflationary increases, so long term care homes can continue to provide safe, high quality care.

Recommendation #7

The province should provide inflationary increases to the long term care base and supplementary funding envelopes to ensure services can be sustained.

The number of seniors waiting to move into long term care is at a record high, with the most recent provincial figure over 36,000.[23] The government's commitment to add 15,000 new beds over five years and redevelop 15,000 existing beds, along with recent investments in community care, have the potential to reduce wait lists and help end hallway health care.

We are concerned, however, that these targets will not be attainable without more funding, supports and flexibility to build new beds and redevelop existing ones. Even as costs rose significantly in the last four years, the construction funding subsidy (CFS) remained static. Long term care homes do not have the capacity to fundraise the millions of dollars needed to supplement provincial capital dollars. Pressures are even greater for urban homes, where the cost of land is at a premium, or homes in remote areas where construction costs are incredibly high. To ensure successful bed development, government should increase the CFS to reflect rising costs, reduce red tape barriers to development, and provide easier access to government land where available and where affordable property is scarce.

Creating Social Connection through Virtual Reality

The first of its kind, the Virtual Reality for Seniors (VRS) Program at the Yee Hong Centre for Geriatric Care is helping to reduce isolation and build intergenerational social connections. Initially funded by the then-Ministry of Seniors Affairs through the Seniors Community Grant Program from 2017-2019, the VRS Program allows seniors to interact with others from the community to create vital, new social connections.

> "Since the launch of the VR Program at the Yee Hong Centre, residents and participants across our long term care and community-based programs have been interacting with virtual reality technology. Whether they are competing against each other in fun, competitive gameplay that works up a sweat, or taking virtual trips around the world with their family members, the VR Program has been sparking joy and excitement among our seniors and their caregivers. With this program, we are challenging the stereotypes that portray seniors as passive observers to technological advancements and encouraging their life-long learning."

Kathy Yang
Program Coordinator, Programs and Services Development
Yee Hong Centre for Geriatric Care

Recommendation #8

The province should provide incentives to the long term care sector to redevelop older homes and build new ones including but not limited to increasing the construction funding subsidy per diem components by 30% from 2015 funding levels and prioritizing government land for new and redeveloping long term care homes.

While we want to ensure that older long term care homes are modernized, we need to take a pragmatic approach so that we do not lose beds. We encourage government to work with the sector to create a redevelopment strategy that re-examines timeframes and provides tools and incentives to operators. One area to consider would be to prioritize renovations required to ensure resident safety, such as fire sprinklers. For homes that meet safety standards, redevelopment deadlines should be extended to allow time to plan appropriately to complete their redevelopment projects and raise the needed funds.

Recommendation #9

The province should work with the sector to create a redevelopment strategy that re-examines timeframes and provides tools and incentives to operators.

Many homes not eligible for redevelopment still require minor or major renovations and repairs, such as replacing roofing, windows, or furnaces. We are pleased that government has committed to consulting with the sector to develop a new minor capital program for long term care homes as has been in place for hospitals for many years. To be successful, access to capital must be equitable across the sector so support goes to homes that are most critically in need. This will ensure homes remain structurally compliant and – above all – safe for their residents. No homes should face a net loss in structural compliance funding because of the transition to the new program.

Recommendation #10

The province should ensure funding under the new minor capital program is equitable across the sector and that no homes face a reduction in funding they currently receive to maintain their home and ensure structural compliance.

Conclusion

It is time to change the face of seniors' care so that our grandparents, parents, and future generations can age gracefully in their own homes for as long as possible – and get the best quality care when and where they need it.

We believe that a focus on an actionable health human resources strategy, stable and affordable housing, enhanced community services and supports, and sufficient investments in long term care funding will help to keep seniors independent for longer and help government in its goal to end hallway health care.

AdvantAge Ontario and our members are committed to making Ontario the best place to grow old. We believe the recommendations proposed are what we need to find the way forward to a 21st century seniors' care system in Ontario. We are ready to work with government, our partners, residents and families to reach this goal.

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The province should work with the sector to create a redevelopment strategy that re-examines timeframes and provides tools and incentives to operators

Recommendation 10
The province should ensure funding under the new minor capital program is equitable across the sector and that no homes face a reduction in funding they currently receive to maintain their home and ensure structural compliance.

About AdvantAge Ontario

For 100 years, AdvantAge Ontario has been the trusted voice for senior care.

AdvantAge Ontario is the only provincial organization representing the full spectrum of community-based seniors' care, including long term care, retirement and supportive housing, life-lease housing, social housing and community services. Our nearly 400 members have a strong history of putting residents first, reinvesting in care, and building up their communities, caring for 36,000 long term care residents and providing 8,000 seniors' housing units across every corner of the province.

Our charitable, not-for-profit and municipal members are deeply connected to their communities, including small towns, rural areas, urban neighbourhoods, and ethnic, cultural and religious communities. By reinvesting every surplus dollar to expand and improve care and services, our members maximize government investment to serve seniors' needs. Many also add in their own resources obtained through fundraising, in addition to nearly two million volunteer hours per year.

Over the last century, AdvantAge Ontario has witnessed the evolution of health care and we have adapted as seniors' needs have changed. Our members lead the way in innovation. To provide the best possible quality of life for residents and peace of mind for families and caregivers, our members use evidence-informed practices and implement new models of care for seniors with a range of needs.

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AdvantAge Ontario

Advancing Senior Care

AdvantAge Ontario is the trusted voice for senior care. We are community-based, not-for-profit organizations dedicated to supporting the best possible aging experience. We represent not-for profit, charitable, and municipal long term care homes, seniors' housing, and seniors' community services. The Association and our members have been advancing senior care since our foundation in 1919.

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