



## STAFF REPORT ACTION REQUIRED

### Long-Term Care Homes & Services Capital Renewal Plan

<b>Date:</b>	October 5, 2015
<b>To:</b>	Executive Committee
<b>From:</b>	General Manager, Long-Term Care Homes & Services
<b>Wards:</b>	All
<b>Reference Number:</b>	

#### SUMMARY

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This report provides City Council with an update on the Long-Term Care Homes & Services (LTCHS) Capital Renewal Plan, and seeks approval to proceed with a staged approach to address mandatory redevelopment of five (5) long-term care homes, and details the financing requirements.

The plan includes, as adopted by City Council on July 16, 2013 in the report "Update and Next Steps of Proposed Redevelopment of Seaton House and Revitalization of George Street", development of a long-term care home as part of the George Street Revitalization (GSR) Project; and as amended by City Council on December 16, 2013 in the report "Long-Term Care Homes & Services Capital Renewal Strategy" to explore the potential acquisition of land nearby or neighbouring Ward 24 for a potential long-term care home.

The staff recommended Capital Renewal Plan has been developed within the context of the City's current long-term care bed inventory.

#### RECOMMENDATIONS

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The General Manager, Long-Term Care Homes & Services recommends that:

1. City Council adopt the Long-Term Care Homes & Services Capital Renewal Plan and direct the General Manager, Long-Term Care Homes & Services to proceed with the provincially mandated long-term care homes redevelopment staged approach as outlined in Table 3 of this report, subject to City Council's approval of the 2016-2025 and future year Capital Budget and Plans;
2. City Council authorize the General Manager, Long-Term Care Homes & Services to enter into discussions with the Ministry of Health and Long-Term Care and Local

Health Integration Networks to negotiate bed allocations and movements between locations, and the scheduling of redevelopment projects as outlined in this report; and

3. City Council authorize the General Manager, Long-Term Care Homes & Services to enter into discussions with Humber College Lakeshore Campus regarding opportunities for a teaching long-term care centre of excellence, and provide a report to Community Development and Recreation Committee by mid-2016 on the outcome of those discussions.

### **Financial Impact**

The 2015 introduction of an Enhanced Long-Term Care Home Renewal Strategy by the Ministry of Health and Long-Term Care (MOHLTC) makes the City of Toronto eligible to receive a base construction per diem of \$16.65 for each redeveloped bed, which is an increase of \$3.35 above the previous construction per diem of \$13.30. The construction per diem is provided on each approved bed over a 25-year period following the first admission into the new home. Homes redeveloped to a Leadership in Energy and Environmental Design (LEED) Silver standard or better will receive an additional \$1.00 per diem funding and, in recognition of the higher costs associated with smaller homes, homes of 160 or less beds will receive an additional \$0.75 per diem funding.

The estimated cost to redevelop five (5) of the City's long-term care homes is estimated to be \$414.0 million (excluding George Street Revitalization, as costs associated with that project have been captured under a separate report entitled "George Street Revitalization - Recommended Scope and Approach") over the next 15 years, of which \$138.6 million will be contributed by the Ministry of Health and Long-Term Care (MOHLTC) post-construction and following the first admission into the new home. The Capital costs to redevelop these five (5) homes have not been included in the 2015-2024 10-Year Capital Budget and Plan.

Based on the LTCHS proposed framework, it is estimated that \$246.5 million, comprised of \$115.0 million for the Castlerview Wychwood Towers Redevelopment project (2019-2023), \$83.0 million for the Oriole Yard/Esther Shiner Boulevard project (2019-2022) and \$118.5 million for the Seven Oaks Redevelopment project (2022-2026 – note that \$70.0 million is outside the proposed ten year plan), would be required within the next 10 years. The cost of construction would be cost shared with the MOHLTC as shown in Table 1 below with the City providing upfront funding for the redevelopments. The potential sale or alternative use of two possible surplus properties has not been factored into the above cost estimates but could be used to off-set capital costs.

Capital funding from the MOHLTC is only available for redevelopment or major retrofits and not for ongoing capital maintenance costs to keep facilities in a state of good repair (SOGR).

The 2016-2025 Capital Budget and Plan Request for LTCHS is \$94.3 million, which includes \$82.6 million distributed over 10 years for capital maintenance, of which \$48.1 million related to SOGR and Health & Safety projects for the five homes in the

redevelopment plan (Carefree Lodge, Castlevue Wychwood Towers, Fudger House, Lakeshore Lodge and Seven Oaks) of which \$24.8 million could be avoided if the Capital Renewal Plan proceeds as recommended.

**Table 1. Long-Term Care Homes and Services Capital Renewal Plan**

(In Thousands)	Estimated Project Cost	MOHLTC Recoverable Debt
<b>Capital Redevelopment Projects</b>		
George Street Revitalization*	--	--
Castlevue Wychwood Towers	115,000	41,230
Oriole Yard/Esther Shiner Boulevard	83,000	26,864
Seven Oaks	118,500	39,620
Lakeshore Lodge	97,500	30,923
<b>Total (All projects)</b>	414,000	138,637

\* Included in *"George Street Revitalization – Recommended Scope and Approach"* report.

Funding for redevelopment is not included in the 2015-2024 Capital Budget and Plan. The cost estimate, excluding George Street Revitalization, is \$414.0 million, of which \$138.6 million is recoverable from the MOHLTC.

The sale of 306 Finch Avenue East (current Carefree Lodge site) could potentially generate an additional \$10 million to offset land remediation at the Oriole Yard/Esther Shiner Boulevard site for the new long-term care home.

The Deputy City Manager and Chief Financial Officer has reviewed this report and agrees with the financial impact information.

### **Equity Impact**

LTCHS is committed to delivering exemplary care and service to residents and clients with a specific goal to respond to emerging community needs and serve vulnerable individuals. The long-term care sector in Toronto serves equity-seeking groups including frail seniors, people with disabilities, individuals with cognitive impairment and mental health issues. Effective operation of a continuum of long-term care services ensures that appropriate accommodation is available to a variety of equity-seeking groups.

The 2015 Seniors' Month Proclamation observed "seniors are the fastest growing segment of the population and it is estimated that by 2031, our city will be home to 1.2 million seniors. As a group, seniors are unique in their needs and require specialized services and resources. More than half of the seniors in our city are immigrants and many of them speak a language other than English. As they age, they will need their city to support them. The City of Toronto is committed to providing equitable services for seniors across our communities and promoting dialogue between them and the organizations that serve them. The City of Toronto Seniors Strategy sets out the path that the city will take to

become an age-friendly city and a welcoming place for seniors where they can access the services and resources they need."

The Capital Renewal Plan is designed to support the needs of current and future long-term care residents and is in alignment with City initiatives including the Toronto Seniors' Strategy, Poverty Reduction Strategy and Toronto Strong Neighbourhoods Strategy 2020. The City strategic priorities, Social Development – Strengthen Neighbourhoods and Enhance the City's Quality of Life, Good Governance – Strengthen Intergovernmental Relationships and Enhance the City's capacity to serve Toronto's Diversity, and Fiscal Sustainability – Improve Service and Financial Planning, will also be advanced by addressing community need through leveraging partnerships, by ensuring available resources are aligned to provide better care and service to meet the needs of specific resident and client groups.

## **DECISION HISTORY**

City Council on May 5, 2015 adopted the report, "Provincial Funding for Enhanced Long-Term Care Home Renewal Strategy" with the amendment that City Council request the Minister of Health and Long-Term Care to review the Enhanced Long-Term Care Home Renewal Strategy and include a construction funding escalation factor above the fixed rate per diem to account for inflation. The report provides information on the increased flexibility and funding now available from the Ministry of Health and Long-Term Care; redevelopment of the City's long-term care homes identified for mandatory redevelopment is an excellent opportunity to meet the current and future care and service needs of seniors.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2015.CD3.7>

Government Management on August 11, 2014 adopted with amendment the report, "251 Esther Shiner Boulevard – Oriole Yard – Opportunities for Long-Term Care" that the Director, Real Estate Services explore and consult with General Manager, Long-Term Care Homes and Services on the potential for seniors and long-term care homes, commercial transit-oriented development and a proposed long-term strategy for mixed-uses at Oriole Yard and surrounding City-owned property and opportunities to enhance commuter parking and transit operations in the vicinity of Oriole Yard and report back to the Government Management Committee in 2015.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2014.GM32.18>

City Council on December 16, 2013 adopted the report, "Long-Term Care Homes & Services Capital Renewal Strategy" with an amendment to potentially acquire land nearby or neighbouring Ward 24. The report seeks authorization for LTCHS to proceed with its capital renewal planning based on the proposed framework and to undertake necessary due diligence to proceed with planning based on the framework and strategy, which include integrating and co-locating services as part of the George Street Revitalization (GSR) Project.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.CD25.8>

City Council on July 16, 17, 18 and 19, 2013, adopted the report, "Update and Next Steps of Proposed Redevelopment of Seaton House and Revitalization of George Street". The

report recommends an approval in principle for the redevelopment of Seaton House and that necessary due diligence be undertaken by Shelter Support and Housing Administration (SSHA) and LTCHS to develop detailed plans for new facilities on George Street to include an emergency shelter, a long-term care home and a service hub.

The report also directs the General Manager, Long-Term Care Homes & Services, to report to the Community Development and Recreation Committee on how the Seaton House redevelopment can be integrated into the division's overall long-term care home capital redevelopment strategy and service plan.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.EX33.17>

City Council on May 7, 8, 9, and 10, 2013, adopted the report, "The Toronto Seniors Strategy" to address the needs of an aging population and make Toronto more age-friendly through services provided by City divisions, agencies and corporations. One of the recommendations within *The Toronto Seniors Strategy: Towards an Age-Friendly City*, under the Social Participation theme, identifies that LTCHS will develop a Capital Renewal Strategy for its B and C homes that includes community space as part of its design to support the creation of community hubs.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.CD20.1>

## **ISSUE BACKGROUND**

### **City-wide Commitment to Care**

LTCHS has a City-wide Commitment to CARE (Compassion, Accountability, Respect, Excellence) provided throughout Toronto in ten (10) long-term care homes, nine (9) supportive housing sites, four (4) adult day programs and to thousands of seniors and vulnerable individuals in their own homes.

Each City of Toronto long-term care home provides 24-hour resident-focused interdisciplinary approach to care and service. Services provided to residents include nursing and personal care, medical services, recreational programming, dietetics and food services, laundry, social work, spiritual and religious care, housekeeping, maintenance, trust and administrative services. Dementia care, physiotherapy, occupational therapy, dental care, optometry, complementary care, art and music therapy, lesbian, gay, bisexual and transgendered (LGBT) supports, community outreach and extensive volunteer programs are also available in every home.

In keeping with the City's motto, *Diversity Our Strength*, and to meet the needs of residents and improve access to care, special language and cultural services are offered at select homes including Armenian, Cantonese, French, Ismaili, Japanese, Jewish, Korean, Mandarin, Portuguese, Russian, Spanish and Tamil.

Each home is a thriving, active community that is designed to meet the physical, intellectual, social, cultural, emotional and spiritual needs of residents. Multi-disciplinary care teams work together to ensure that residents are provided with quality care in safe, secure, healthy, comfortable environments that promote independence, mobility and individuality.

## Redevelopment of the City's Long-Term Care Homes

In 2007, the Provincial Government announced a capital renewal strategy for long-term care homes in Ontario with a B or C structural classification. The provincial government's plan to redevelop 35,000 older long-term care beds in five (5) phases over a 10-15 year period, with about 7,000 beds being redeveloped every two to three years presented a challenge for service providers, including the City of Toronto, who operate multiple sites because planning dependencies are subject to MOHLTC approval within each phase. LTCHS, along with other long-term care providers, expressed concern with the phased approach preferring a system-wide planning approach to redevelopment.

In early 2015, the MOHLTC announced details on an Enhanced Long-Term Care Home Renewal Strategy intended to help accelerate the modernization of long-term care homes across the province, including scheduling homes for redevelopment based on prioritizing sites and support for operations in redeveloping older sites. Enhancements include establishing a dedicated project office to oversee the Enhanced Renewal Strategy; revising and increasing the Construction Funding Subsidy; increasing preferred accommodation premiums for new homes; and scheduling homes for redevelopment as opposed to a phased application process.

At the time of the provincial announcement six (6) of Toronto's long-term care homes (1,569 of its 2,641 Ministry approved beds) needed to be redeveloped as the provincial strategy makes it mandatory for designated homes to be in compliance with the updated long-term care home design standards. One home, Kipling Acres (Ward 2) is currently under redevelopment; Phase 1 opened in 2014 and Phase 2 will open in 2016. Kipling Acres was able to redevelop on its existing acreage. For the remaining five (5) sites classified as B and C, the option to build while remaining on site is not feasible.

**Table 2.**

The five (5) remaining City of Toronto homes classified as either B or C are:

Home	Ward	# of Beds	Structural Classification	Last Renovation	Initially Constructed
Carefree Lodge	24	127	C	1991	1967
Castleview Wychwood Towers	21	456	C	1975	1975
Fudger House	28	250	B	1985	1965
Lakeshore Lodge	6	150	C	1990	1990
Seven Oaks	43	249	C	1988	1988

## Aging Physical Plants

In 1998, the MOHLTC introduced a new set of design standards for long-term care homes intended to create consistency across the province and to modernize buildings originally constructed to house a less frail resident population with fewer and simpler medical conditions. The standards were revised in 2009 and an updated Long-Term Care Home Design Manual (2015) was released in February of this year with standards applicable to homes being developed or redeveloped.

Given the evolution of the standards, there are physical plant considerations with older sites such as with common dining rooms, resident enjoyment at mealtime may be reduced because multiple seating's are required; privacy is limited in older homes without ensuite

washrooms; and access can be restricted when rooms are not large enough to accommodate assistive devices such as lifts, wheelchairs and transfer aids.

LTCHS's 10 year capital plan (2015-2024) includes \$82.6 million in capital maintenance, of which \$48.1 million is associated with the five homes targeted for redevelopment. Approximately 50% (\$24.8 million) of this capital maintenance could be avoided if the Capital Renewal Plan proceeds as recommended. Delay in proceeding will increase the capital maintenance costs by an average of \$4.8 million per year of delay and decrease the percentage of capital maintenance costs that could be avoided. In addition, changes in building codes, MOHLTC compliance orders and/or other legislative requirements (e.g. *Accessibility for Ontarians with Disabilities Act* (AODA), Technical Standards and Safety Authority (TSSA), *Occupational Health and Safety Act* (OHSA), etc.) may place added capital cost pressures.

### **Local Health Integration Networks**

The City of Toronto operates within the boundaries of five (5) Local Health Integration Networks (LHINs). Four (4) of these funding agencies are involved with mandatory redevelopment. Central West LHIN for Kipling Acres; Toronto Central LHIN for Castlerview Wychwood Towers, Fudger House and Lakeshore Lodge; Central LHIN for Carefree Lodge; and Central East LHIN for Seven Oaks. Wesburn Manor, located in the Mississauga Halton LHIN was redeveloped in 2004 as part of the D structural classification rebuild program.

Consultations with the LHINs indicate that they want the City to continue to specialize in meeting the needs of vulnerable, marginalized and hard-to-serve populations who are often among the most difficult for Community Care Access Centres (CCACs) to place into long-term care.

### **Related Reports to Council**

The George Street Revitalization (GSR) project is a co-location opportunity for LTCHS and Shelter Support and Housing Administration (SSHA) for a new emergency shelter, long-term care home, transitional assisted living, affordable housing and service hub to better meet the needs of vulnerable individuals on the current Seaton House site. A separate report, "George Street Revitalization – Recommended Scope and Approach", with details on the redevelopment of Seaton House, a long-term care home, transitional assisted living, affordable housing and service hub is before City Council.

At the request of Council, LTCHS and Real Estate Services (RES) are investigating the feasibility of re-purposing Oriole Yard, located on Esther Shiner Boulevard. Initial investigation by RES suggests there is potential for higher order uses, considering development in the surrounding area. The close proximity to North York General Hospital makes this a prime location for an innovative seniors care campus, including the relocation of Carefree Lodge and other housing/level of care options supported through a network of community partners. RES have engaged Build Toronto to conduct a feasibility study, including site planning Oriole Yard for long-term care uses, identifying options for relocating yard functions, and determining the costs associated with site remediation and operational moves. A report to City Council is expected in Q4 2015.

## **COMMENTS**

The LTCHS Capital Renewal Plan coordinates redevelopment and ensures construction, demolition and redevelopment are completed with minimal disruption to residents, and have minimal impact on overall service levels during each redevelopment project yet provide flexibility to meet the needs of current and future residents, adapt to changes in the sector and respond to emerging priorities.

### **Guiding Principles**

LTCHS established the following guiding principles for the redevelopment planning:

- Deliver current level of service (2,641 Ministry approved beds) to support high-quality specialized resident-focused care while seeking to maximize cost savings and efficiencies.
- Promote and preserve partnerships, including ethnocultural, volunteer and community linkages.
- Respond to emerging community needs and serve vulnerable individuals.
- Minimize resident disruption related to capital renewal.
- Advance the Toronto Seniors Strategy with a City-wide commitment to CARE (Compassion, Accountability, Respect and Excellence) by strategically locating its homes throughout the City and by providing community hub space in support of healthy aging.

### **Challenges and Opportunities**

LTCHS is committed to addressing the following challenges and opportunities and is committed to maintaining flexibility within the capital renewal plan.

- The allocation of long-term care beds across the City of Toronto homes crosses the boundaries of five (5) Local Health Integration Networks each with their own local service priorities.
- Development and redevelopment of long-term care homes require approvals from City Council, the Ministry of Health and Long-Term Care and the individual Local Health Integration Networks.
- Newer and more energy efficient building systems help address climate change and efficient service delivery is attainable with co-location of services in community hubs.

### **Community and Stakeholder Consultation**

Independent consultants have conducted preliminary stakeholder consultations, as well as feasibility and land use studies for all sites including cost estimates and assessments alongside qualitative and quantitative research to help determine current and future needs for long-term care.

Creva Group were retained to carry out a land use and feasibility study of the five redevelopment sites in terms of planning and zoning, architectural and cost criteria, although several other factors were also considered in their overall assessment of feasibility and risk in each redevelopment scenario.



Assessments for each site requiring mandatory redevelopment have been thoroughly reviewed using the following:

- Achieve Regulatory Compliance
- Improve Operational Performance
- Improve Asset Performance
- Meet Client Requirements
- Manage Risk

Qualitative and quantitative research was conducted by SHS Inc. to determine current and future needs for municipal long-term care, and to identify opportunities for the City to grow its reputation as a sector leader, innovator and community partner in providing high-quality, resident-centred long-term care. This work included literature review, data and demographic analysis and projections.

In addition, the external consultants conducted multi-stakeholder consultations, including focus groups, interviews, and surveys with over 270 individuals and groups. Some focused on the physical plant design; others evaluated the preliminary strategy and how to adjust it to maintain service levels and keep homes in existing neighbourhoods; further opportunities for change and improved quality of life were explored to inform program and service development. All of the information has been carefully reviewed and informs the Capital Renewal Plan.

Consultations represent an initial opportunity to provide feedback, more are planned once the capital renewal plan is approved and prior to implementation. It was challenging for some groups to be consulted on a plan still in development, however review of the options and proposed home specific scenarios shaped discussion, leading to some general consensus and redefining alternatives for other sites.

Upon City Council approval of the Capital Renewal Plan and as stipulated in the *Long-Term Care Homes Act, 2007*, LTCHS will conduct additional public consultations including a formal public interest test on the need for long-term care beds prior to commencement of redevelopment.

LTCHS has a long-established commitment to partnering with the community and inviting the community to collaborate in planning enhancements to care and service programs and in achieving positive outcomes. Part of this outreach includes the Ward Councillors who regularly attend in-home functions and have introduced neighbourhood relationships to help shape the unique culture of each of the homes while promoting public accountability.

### **Staff Review**

Staff due diligence augmented work by the consultants regarding key concepts found within the literature review and supported by consultations, specifically the role that long-term care homes have as community hubs to meet the needs of residents and the

surrounding neighbourhoods; the leadership role the City can play in terms of caring for residents with increasingly complex care requirements, opportunities for teaching and learning within the broader sector, enhanced integration with other levels of care including community services and hospital-based care.

At a site specific level, review of feedback from the consultations regarding the capital renewal strategy noted that the size of the resident home areas (units) were seen as of particular importance when compared to the size of the home itself; in terms of creating a home-like environment, the relationship between residents and staff was considered paramount.

The MOHLTC Design Standards define a Resident Home Area (RHA) as "a self-contained unit for residents of that area to use" which provides accommodation for a maximum of 32 residents. Redeveloping to the maximum 32 beds, as at Kipling Acres, will be the normal standard for future LTCHS redevelopments as it allows for exact comparisons and operational standardization between RHAs.

Engagement with home-specific stakeholders represents the initial stages of consultation regarding the redevelopment with residents, families, volunteers and local community partners. Feedback received encompassed both the proposed strategy as well as opportunities that redevelopment will afford. Suggestions proposed related to improved physical spaces, opportunities for enhanced programming and supports as well as how best to ensure continued resident-centred care. The importance of maintaining linkages and relationships with community partners were also explored, with particular emphasis on the transitional periods related to redevelopment.

System-level consultations with organizations such as CCACs, LHINs and the MOHLTC emphasized the need for coordinated redevelopment within the City homes and the broader long-term care system, mindfulness of cross-LHIN boundary issues and the significant role that the City plays both in service delivery as well as leadership within the long-term care sector as a whole.

### **Aging Population**

As detailed in the Toronto Seniors Strategy, the population is aging, with the growth in seniors outpacing overall population growth. From 2001 to 2011, the senior population aged 65 years and older rose 11.7%; Toronto has a higher proportion of seniors 65 years and older (14.4%) when compared to the Greater Toronto Area (11.5%), and adults aged 80 years and older have experienced particularly rapid population growth during this same time, growing by 43.8%. By 2041, it is expected that the number of seniors 65 years and older will make up 24.2% of the total population, the proportion of those over the age of 80 years will increase 160% during this 30 period year period. While seniors are not the only driver of demand for long-term care, they are over-represented and changes in their population will be reflected in the demand for, and resident populations of future long-term care homes.

The ratio of long-term care beds per 100 seniors 65 years and older is 3.99 based on the number of seniors living in Toronto in 2011. When only municipal beds are included, this

ratio decreases to 0.7. If the number of long-term care beds remains the same, given population growth, by 2041, the overall ratio would decrease to 1.8 long-term care beds, or 0.3 municipally-operated per 100 seniors.

### **Changes in the Sector and Clients**

The changing nature of the long-term care sector is well documented. In addition to the demographics of an aging population, future long-term care residents will have significant medical issues, belong to many more and different ethnic and cultural groups, require mobility devices, larger beds and lifting devices.

Within the City of Toronto boundaries, 60% of all homes, accounting for 74% of all long-term care beds (not-for profit, for-profit and City-owned) are subject to mandatory redevelopment under the MOHLTC Capital Renewal Strategy. Toronto residents have been gradually losing access to long-term care beds as some providers, faced with the challenge of redeveloping on existing sites or acquiring another property, have chosen to relocate due to the escalating costs of real estate. Based on 2010 data, Toronto Central LHIN has the third lowest number of long-term care beds per population 75+ across all LHINs. In the past decade more than 830 beds in Toronto Central LHIN have downsized, closed, moved or been returned to the MOHLTC.

### **Service Efficiency Study**

A recommendation in the Service Efficiency Study for LTCHS, as presented to the City Manager in August 2012, recommended a focus on the redevelopment of homes, maintaining the same number of beds but possibly consolidating to fewer homes, shifting to continuing care campuses and selling surplus lands. While the Service Efficiency Study was focused on identifying the most cost-effective means of delivering long-term care services, stakeholder consultations for capital renewal included factors in addition to financial economies of scale, and while the focus on cost savings and integrated service remains, redevelopment planning addresses both current and future community needs, partnerships, care enhancements for vulnerable individuals and optimal level of services.

When reviewing long-term care bed allocations across the City, there was concern raised from community stakeholders and it was strongly felt that consolidation of homes would negatively impact the communities served. In preparation of the Capital Renewal Plan, LTCHS has remained committed to sustaining service levels and addressing the overall need for long-term care within Toronto. The division's current level of service supports high-quality specialized resident-focused care while promoting and preserving partnerships, including cultural and community linkages, responding to emerging community needs and serving vulnerable individuals.

### **Maintaining Service during Redevelopment**

LTCHS operates 17% of all long-term care beds in the City of Toronto, therefore transition plans are in line with the Guiding Principles and aim to keep beds in service for as long as possible. Beds will only be temporarily reduced (held in abeyance) as a last resort and for the shortest length of time possible. In the recommended plan the maximum is 78 beds in abeyance and the longest period of time is three (3) years. This

represents 5.8% of the total beds to be redeveloped or 2.7% of the overall beds operated by the City.

### Redevelopment Scheduling

In order to minimize disruption to residents during the redevelopment process, a multi-phased plan sees homes developed/redeveloped in sequence. The City, as a service provider with multiple homes facing redevelopment, must sequence projects. By sequencing redevelopment and utilizing available land options, LTCHS will minimize resident displacement and disruption during capital renewal. A new long-term care home built on George Street will serve as the catalyst for sequencing redevelopment.

**Table 3  
Capital Renewal Plan Summary: Staged Approach**

	<u>Project</u>	<u>Current</u>	<u>Last Major Renovation</u>	<u>Project Estimate</u>	<u>Future</u>	<u>Construction Years</u>	
Toronto Central LHIN (856 beds)	George Street	N/A	N/A	Included in GSR	378 beds	2017 to 2021	Toronto Central LHIN (832 beds) - 30 beds
	Esther Shiner Boulevard	N/A	N/A	\$83.0M	160 beds	2020 to 2022	
	Carefree Lodge	127 beds	24 years	N/A	Surplus Property	N/A	
Central East LHIN (249 beds)	Castleview Wychwood Towers	456 beds	40 years	\$115.0M	256 beds	2021 to 2024	Central East LHIN (240 beds) - 3 beds
	Seven Oaks	249 beds	27 years	\$118.5M	246 beds	2024 to 2027	
Central LHIN (127 beds)	Lakeshore Lodge	150 beds	25 years	\$97.5M	192 beds	2026 to 2029	Central LHIN (160 beds) + 33 beds
	Fudger House	250 beds	25 years	TBD	TBD	TBD	
	<b>Total</b>	<b>1232 Beds</b>		<b>\$414.0M</b>	<b>1232 Beds</b>	<b>13 Years</b>	

### George Street, Ward 27

The George Street Revitalization (GSR) project combines the expertise of SSHA, LTCHS and other City partners, maximizes capital and operating efficiencies with an opportunity to enhance services to under-served individuals in a shared location. Redevelopment of Seaton House and the George Street site, planned for 2017-2021 construction allows LTCHS to coordinate redevelopment with SSHA and others without having to acquire new land and without having to temporarily close a home while it is redeveloped and continues to address service needs in the downtown core for hard to serve and vulnerable individuals. The plan calls for a new 378 bed long-term care home, emergency shelter (redeveloped Seaton House), transitional assisted living, affordable housing and service hub at the George Street location.

### **Castleview Wychwood Towers, Ward 21**

Operations in the existing 456 bed home will continue until the completion of the new long-term care home on George Street. Then, residents from Castleview Wychwood Towers (CWT) will be given the option to move into the new home or transfer to another home through CCAC relocation. Downsizing of CWT will be required to ensure space is available for current shelter clients admissible to long-term care. A maximum of seventy-eight (78) beds would be placed in abeyance during demolition and redevelopment of a new 256 bed long-term care home on Christie Street, construction planned 2021-2024. Upon completion, the 78 beds would be returned to service. Residents that were temporarily relocated to George Street would be given priority to return to CWT.

### **Esther Shiner Boulevard (Oriole Yard) and Carefree Lodge, Ward 24**

Carefree Lodge, currently the smallest home with 127 beds is situated on a land-locked ravine and it is not economically justified for redevelopment as new design standards would only allow for a 78 bed home on the current site with its northern and eastern edges located in the City's Natural Heritage System and a greater portion of site affected by City Ravine and Natural Feature Protection By-Law which limits redevelopment. There is however, the opportunity to reallocate thirty-three (33) CWT beds to a new site and develop a slightly larger 160 bed long-term care home to achieve operating efficiencies and potentially expand palliative care services or convalescent care, on the nearby City-owned Oriole Yard/Esther Shiner Boulevard site addressing a growing need at a central location with close proximity to North York General Hospital. Construction at Oriole Yard, 251 Esther Shiner Boulevard, is planned for 2020-2022. Carefree Lodge would continue to operate at the existing location until the new home opens, at that time residents would be relocated. The Carefree Lodge site at 306 Finch Avenue East could then be re-purposed or sold once the residents have moved into their new home.

### **Seven Oaks, Ward 43**

The existing 249 bed Seven Oaks is across the street to Rouge Valley Centenary Hospital. Redevelopment will allow for an integrated community health approach, including a newly built 246 bed long-term care home to better integrate with the Hospital and nearby Toronto Community Housing for outreach and healthy aging programs to reduce and avoid hospitalization. Seven Oaks would continue to operate in the existing location until the completion of CWT in 2024; residents would then be given the option to transfer to another home via CCAC relocation. A total of thirty-eight (38) beds would be placed in abeyance during redevelopment and three (3) beds would be reallocated to other sites. Upon vacating the existing building, it would be demolished and a new home constructed 2024-2027.

### **Lakeshore Lodge, Ward 6**

Lakeshore Lodge, a 150 bed home, is located on land that is under a 99 year lease (January 1988 to December 2086) with Humber College of Applied Arts and Technology. The long-term lease provides a unique partnership opportunity with the College's Lakeshore Campus; discussions are focusing on student placements from a number of faculties and to formally explore development of a teaching long-term care centre of excellence. This would support enhanced resident care as well as educational and research opportunities. Redevelopment may be on the current site or in the immediate

vicinity. The area has a growing senior population and LTCHS are seeking ways to expand community agency partnerships with Storefront Humber and LAMP Community Health Centre. The newly built 192 long-term care bed home is planned for construction in 2026-2029. Beds at Fudger House will sustain service levels during redevelopment of Lakeshore Lodge.

### **Fudger House, Ward 28**

Fudger House, a 250 bed home, will remain in operation until all other redevelopment projects are complete (estimate 2029). It is anticipated that in fifteen years, two other homes, Bendale Acres (Ward 38), built in 1965 and renovated in 1995 and Cummer Lodge (Ward 24), built in 1970 and renovated in 2000, will be in need of upgrade or redevelopment. There is potential that the availability of long-term care beds in the downtown area will be reduced by operators who elect not to proceed with redevelopment. The MOHLTC/ Toronto Central LHIN may approach the City requesting it operate additional beds and the Fudger House location will give the City this flexibility. The current 250 bed Fudger House could also provide possible expansion of the City's long-term care home bed inventory beyond 2030 when, according to Hemson Consulting Ltd. in the Toronto Seniors Strategy, seniors are expected to make up 21% of the City of Toronto population. And, opportunities will be investigated with the community to possibly re-purpose 439 Sherbourne Street; given the site's geographic location, there is interest in exploring ways to further LTCHS' leadership/partnership in LGBT care, which could include a community hub, alternate housing supports or service delivery.

### **Surplus Properties or Alternate Use**

The proposed plan includes declaring the property occupied by Carefree Lodge (306 Finch Avenue East) as surplus within the LTCHS Capital Renewal Plan. Comparative land sales analysis conducted by Creva Group, DTAH, and R.E. Millward estimate the land value between \$4.0M and \$14.1M. The sale of this property could be re-invested to off-set the land remediation costs associated with the Oriole Yard/Esther Shiner Boulevard site (estimated to be \$10 to \$12 million), as it is within the LTCHS requested 10 year capital budget and plan. More Study about possible alternative uses of this site is required.

### **Commitment to Care**

With a long-history of involvement in long-term care, a record of excellence and the growing range of needs across the city, the City of Toronto is well positioned to continue its leadership and innovative role, specializing in filling gaps not generally pursued by other operators and service providers including the opportunity to specialize care and service to meet the needs of vulnerable and hard to serve populations, those who are often the most difficult to place in long-term care settings.

### **Toronto Seniors Strategy and Community Hubs**

As outlined in the Toronto Seniors Strategy, community hubs are to be included as part of the mandatory redevelopment. Long-term care homes provide for both the health and social care needs of residents; as social wellbeing of an individual directly impacts their physical and mental health, providing multiple connections between homes and other

levels of health and social care, including formal and informal community infrastructure, enhance quality of life.

The MOHLTC is conducting stakeholder consultations on a Community Health Capital Program (CHCP) Policy, details of which are expected within the next few months. The policy is intended to unify various capital investment policies, provide expanded project eligibility criteria, consistent capital cost share and space standards, and expedite the capital planning and implementation process. Under this new policy framework, LTCHS projects that integrated community health hubs may be eligible for additional funding over and above the Provincial Construction Funding Subsidy (CFS) Policy for Long-Term Care Homes. LTCHS will continue to monitor this emerging policy and incorporate community health hubs into its capital planning.

### **Poverty Reduction and Toronto Strong Neighbourhoods Strategy 2020**

The City has identified 31 specific neighbourhoods as falling below the neighbourhood equity score and requiring special attention. Of the City's long-term care homes that require mandatory redevelopment, Kipling Acres (in progress), George Street and Seven Oaks are located in and near Neighbourhood Improvement Areas and these homes require additional consideration regarding the population they serve. When compared to the City as a whole, a larger proportion of the residents in these neighbourhoods face income-related issues, may struggle with housing costs, and they may have less opportunities to obtain appropriate care and supports.

## **CONCLUSION**

Mandatory redevelopment has allowed LTCHS to prepare a complete Capital Renewal Plan; to access enhanced MOHLTC funding to offset costs the City would ultimately incur; to begin engagement and visioning with residents, their families, staff and other stakeholders on co-location opportunities, creating community hubs, and forming strategic alliances that will produce capital and operating efficiencies.

The lead principal consultant for the planning and feasibility studies, along with the principal consultants responsible for the stakeholder consultation, demographic and literature review study, have confirmed alignment of the LTCHS Capital Renewal Plan with their respective reports and findings.

Throughout development of the capital renewal plan, including consultations, qualitative and quantitative research indications are that the role of the City in long-term care is to meet the complex health and social needs of Toronto's under-served populations. Approval of the Capital Renewal Plan allows LTCHS to proceed with planning for the phasing of the mandatory redevelopment of five (5) sites, maximizing provincial capital project funding, improving living environments and creating a stable structure of long-term care homes that are integrated with the community and other City services to address the current and future needs of residents.

The LTCHS Capital Renewal Plan takes into consideration only the need to redevelop the City's current long-term care bed inventory and is not intended to preclude the possibility the City may want to increase the number of long-term care beds it operates in the future

as preserving long-term care services is a critical community need especially with an aging population.

## **CONTACT**

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## **SIGNATURE**

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## **ATTACHMENTS**

Attachment #1: Carefree Lodge/Esther Shiner Blvd. Plan Synopsis  
Attachment #2: Castleview Wychwood Towers Plan Synopsis  
Attachment #3: Fudger House Plan Synopsis  
Attachment #4: George Street Plan Synopsis  
Attachment #5: Lakeshore Lodge Plan Synopsis  
Attachment #6: Seven Oaks Plan Synopsis