

Long-Term Care Homes & Services Environmental Scan and Update on Council Approved Advocacy Recommendations

Date: August 25, 2016

To: Community Development and Recreation Committee

From: General Manager, Long-Term Care Homes & Service

Wards: All

SUMMARY

When adopting the 2016-2020 Service Plan for Long-Term Care Homes & Services, City Council requested that the General Manager, Long-Term Care Homes & Services provide a subsequent report that included environmental scan details and an overview of advocacy efforts and requirements. This report provides additional demographic data related to growing needs and opportunities that will better support the delivery of long-term care and services to seniors in Toronto, and provides an update on Council supported advocacy recommendations to the Province.

Staff will continue to bring to City Council's attention emerging issues and identify opportunities where the City can, within available resources, plan and deliver needed services to vulnerable individuals or, as necessary, seek Council's support to advocate for legislative or funding reforms to senior levels of government.

RECOMMENDATIONS

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

1. City Council receive this report for information.

FINANCIAL IMPACT

There is no financial impact resulting from the adoption of this report. The Deputy City Manager and Chief Financial Officer has reviewed this report and agrees with the financial impact information.

EQUITY IMPACT STATEMENT

Long-Term Care Homes & Services is committed to delivering exemplary care and service to residents and clients, designed to respond to emerging community needs and serve vulnerable individuals; improve outcomes for residents and clients through innovative approaches in care, restorative therapies and programs that enhance quality of life. Effective operation of a continuum of long-term care services ensures that appropriate accommodation, care and services are available to all eligible individuals.

DECISION HISTORY

City Council on February 3, 2016 adopted the report, "Healthy People First: Opportunities and Risks in Health System Transformation in Ontario" requesting the Minister of Health and Long-Term Care to adjust Local Health Integration Network (LHIN) boundaries to create geographic alignment with the boundaries of municipalities, school boards, and public health units, including creating one Local Health Integration Network for the City of Toronto.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2016.HL9.3>

City Council on November 3 and 4, 2015, adopted the report, "Long-Term Care Homes & Services 2016-2020 Service Plan" which will guide the planning and delivery of long-term care services over the next five years provided in City-operated long-term care homes and to clients receiving services in the community.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2015.CD7.1>

City Council on November 3 and 4, 2015, adopted the report, "Long-Term Care Homes & Services Capital Renewal Plan" which outlines a staged approach to mandatory redevelopment of City-operated long-term care homes, subject to future Capital Budget approvals.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2015.EX9.7>

City Council on November 3 and 4, 2015, adopted the report, "George Street Revitalization – Recommended Scope and Approach" which outlines a project to create housing and programs for homeless and vulnerable seniors including a 378-bed long-term care home, a 100-bed emergency shelter for men, assisted living, affordable housing, and associated services.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2015.EX9.6>

City Council on May 5, 6 and 7, 2015, adopted the report, "Provincial Funding for Enhanced Long-Term Care Home Renewal Strategy" requesting that the Minister of Health and Long-Term Care include a construction funding escalation factor above the fixed rate per diem to account for inflation.

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

City Council on December 16, 2013 adopted the report, "Provincial Health System Funding Reform Related to Long-Term Care Homes & Services" urging the provincial government to provide an adequate level of operating and construction funding and to ensure all funds are distributed equitably across the entire long-term care sector.
<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.CD25.7>

City Council on May 7, 2013 adopted the "The Toronto Seniors Strategy". The goal of the Toronto Seniors Strategy is to create a sustainable process for ensuring that Toronto becomes age-friendly. Long-Term Care Homes & Services has a critical role in supporting implementation of the Strategy.
<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.CD20.1>

COMMENTS

When adopting the 2016-2020 Service Plan for Long-Term Care Homes & Services (LTCHS), City Council requested the General Manager, Long-Term Care Homes & Services to include in a subsequent report, an environmental scan with recommendations, including advocacy recommendations to the Province, that analyze demographic data and the services that will be needed to address growing needs.

LTCHS is one of the City's operating divisions responsible and accountable for direct delivery of care and services to seniors within the City of Toronto. A number of other divisions, including but not limited to Social Development Finance and Administration, Shelter, Support and Housing Administration, Toronto Community Housing, Parks, Forestry and Recreation, Toronto Public Health, Toronto Paramedic Services, Toronto Police Services, all of whom participated in developing and advancing the Toronto Seniors Strategy, TO Prosperity – Poverty Reduction Strategy, Toronto Strong Neighbourhood Strategy 2020, work together with LTCHS and community partners to support the City's Strategic Directions.

When preparing the 2016-2020 Service Plan, LTCHS collaboration involved a wide range of stakeholder groups along with research, consultations and information gathering.

Environmental Scan

Demographics

Residents in City owned and operated long-term care homes come from over 50 countries of origin, speak 38 different languages, and identify themselves with 34 different faiths or denominations. These numbers confirm the need for culturally and linguistically sensitive and flexible services to cater to a wide variety of cultures and languages. This is further confirmed by data from the Conference Board of Canada (2011), which indicates that the ethnic and linguistic profile of the emerging cohort of the aged is also changing: 22.8 per cent of Ontario's population identify themselves as a member of a visible minority (up from 15.8 per cent in 1996), and 26.6 per cent report a mother tongue other than English or French.

Population Trends

In 2011, Toronto accounted for 43.0 per cent of the Greater Toronto Area (GTA) population. The City is home to 44.0 per cent of the GTA's working age population, aged 25 to 64 years and 49.0 per cent of GTA seniors aged 65+ years and older. Toronto has a higher proportion of seniors 65+ (14.4 per cent) when compared to the GTA Regions (11.5 per cent). These statistics are important because while seniors are not the only driver of demand for long-term care, they are over-represented in long-term care and changes in their population group will be reflected in the demand for, and resident populations of, long-term care homes.

The senior cohort is expected to increase dramatically in the coming years. Between 2011 and 2031, the projection from City Planning indicates the expected increase to be 33 per cent as the 55 to 64 age group has increased 37.3 per cent since 2001, and this growing group of Baby Boomers will be entering their senior years over the next decade.

The Ontario Ministry of Finance also prepares population projections for the City. Their projections predict that Toronto's senior population will increase 45.5 per cent by 2024, to reach 549,120 persons. This means the City will be home to some 171,000 more seniors in 10 years, bringing their proportion of the overall population to 17.5 per cent. The population aged 80 years and older, which is the primary age group of seniors in need of long-term care, is expected to increase to 29.5 per cent of the population, a significant growth in elderly seniors who tend to have more complex care needs.

Persons with Disabilities

When the Ontario disability rate for seniors (37.1 per cent for persons aged 65 years and older) from the Statistics Canada Canadian Survey on Disability is applied to the Toronto population, the rates suggest that in 2011/2012, there were an estimated 140,030 persons in Toronto aged 65 years and older living with a disability that impacts their daily life. Furthermore, an estimated 87,608 of these seniors were aged 75 years and older, indicating there is a strong need for supports for more elderly seniors with disabilities.

These data also demonstrate that there are a large number of soon-to-be seniors with disabilities in Toronto – of the 340,985 persons aged 15 years and older with disabilities in the City of Toronto in 2011/2012, 127,839 (or 37.5 per cent) were between the ages of 45 to 64 years. This population group will be entering their senior years over the next couple of decades and will put increasing pressure on the need for support services and/or long-term care.

Immigration Trends

According to 2011 National Household Survey data, 49 per cent of those living in Toronto, or 1,252,215 people, identified themselves as an immigrant in 2011. This percentage is higher than the rest of the Greater Toronto Area and Hamilton (38 per cent) as well as the Canada-wide rate of 21 per cent. Approximately 33 per cent of these immigrants living in Toronto arrived between 2001 and 2011. In 2011, the majority of recent immigrants (arriving within the past 5 years) to Toronto were born in Asian countries (66.4 per cent). The most common places of birth were the Philippines, China and India at 14.5 per cent, 13.4 per cent, and 9.8 per cent of all recent immigrations, respectively. The next largest group of immigrants by place of birth were those born in the Americas, at 15.0 per cent. Immigrants can have cultural and language implications for long-term care delivery.

Diversification

According to the 2011 Census, 45 per cent of Toronto residents had a mother tongue other than English or French. The top 3 non-English languages spoken at home included Chinese dialects at 7.6 per cent of the population, Tamil at 2.0 per cent, and Spanish at 1.9 per cent. Of the top-15 non-English home languages in Toronto, Mandarin is the fastest growing, increasing by 32 per cent since 2006. The number of Bengali, Persian, Tagalog, and Spanish speakers is also increasing. The City will need to continue to ensure that the appropriate language and cultural services are offered in areas where there are large linguistic and cultural groups in order to help achieve service efficiencies and specialized supports.

According to data from the five GTA Local Health Integration Networks (LHINs), each LHIN has a Francophone population of at least 1.7 per cent, going as high as 2.3 per cent in the Toronto Central LHIN. Only 37 long-term care beds in the Greater Toronto Area are currently designated for francophone residents, and these beds are located at Bendale Acres, which is a City of Toronto long-term care home.

LGBT

Current research estimates that up to 7 per cent of the senior population is openly lesbian, gay, bi and transgender (LGBT), indicating a significant need for LGBT-friendly and supportive services in long-term care in Toronto. In keeping with the City's motto, Diversity Our Strength, all City long-term care homes and community-based programs offer LGBT supports.

Income

The proportion of the City's population in low-income in 2011 was 19.3 per cent. Research (McMaster Health Forum, 2015) found that lower income Canadians are more likely than high-income Canadians to experience multiple morbidities, requiring perhaps more complex care. In City of Toronto long-term care homes, 48 per cent of residents are subsidized and require financial assistance or rate reductions and 7 per cent are administered by the Office of Public Guardian and Trustee.

Homelessness

While there is less research available on the causes of homelessness in later life than during adulthood or adolescence, McGhie et al. cite a 2004 study by McDonald, which found that in Toronto 70 per cent of (homeless) people over 50 became homeless between the ages of 41 and 60 as a result of family breakdown, eviction, and/or a loss of employment.

Health

According to the Canadian Health Care Association, the top reasons for seniors' admission to long-term care are:

- Cognitive impairment (most commonly caused by dementia)
- Incontinence (closely associated with overall functional decline)
- The aftermath of stroke
- Falls resulting in fractures.

Role of the City in Long-Term Care

There are 627 long-term care homes in Ontario operating 78,120 beds, 54 per cent of the beds are operated by for-profits, 25 per cent operated by charities/non-profits and 21 per cent by municipalities. In Toronto 52 different organizations operate 84 long-term care homes with 15,222 beds; 17 per cent of the beds are City of Toronto directly-operated.

As a municipal service provider, LTCHS fills a gap in service for hard-to-serve or underserved Torontonians, who may lack family support, struggle with poverty, homelessness, substance abuse, or social isolation and lack resources to access long-term care. As well, LTCHS are recognized leaders in behavioural support and City homes have a long history of demonstrated knowledge of dementia, delirium, and mental health issues in the delivery of care.

Capital Renewal Plan and Service Plan

The Long-Term Care Homes & Services Capital Renewal Plan allows LTCHS to proceed with the staged mandatory redevelopment of five long-term care homes to meet new design standards, explore affordable housing opportunities and advance the vision to be leaders in excellence and ground-breaking services for healthy aging. The Capital Renewal Plan promotes and preserves partnerships, responds to emerging community needs, serves vulnerable individuals and ensures residents will continue to receive excellent care and services, throughout redevelopment, in City-operated long-term care homes. It also links to the George Street Revitalization project, which includes a 378-bed long-term care home to be operated by LTCHS.

The 2016-2020 LTCHS Service Plan will guide the delivery of long-term care services provided in City-operated long-term care homes and to clients receiving services in the community. Existing work, research, published literature and stakeholder consultations were utilized to develop the priority areas:

- Deliver exemplary care and service through a continuum of care
- Serve vulnerable individuals and respond to emerging community needs
- Lead advances in long-term care and support services to seniors.

Projections

The Association of Municipalities of Ontario (2011) estimates a need of more than 176,000 long-term care beds in Ontario by 2036 – more than double the 77,000 beds currently operating in the system, assuming a direct proportional increase occurs and no other care alternatives are considered.

Locally, the need for beds in the Mississauga Halton, Central West, Central, Toronto Central, and Central East LHINs is expected to increase 28 per cent by 2020, based on the ratio of seniors 75 years and over to available beds in 2010. Despite these projections, the Ministry of Health and Long-Term Care has not indicated an intention to provide funding for any increase in the number of beds in the foreseeable future.

The City of Toronto operates 2,641 approved beds including 2,542 long-term care beds, 66 convalescent care beds, 17 short-stay respite beds and 16 behavioural support beds.

On average, wait times for placement in a City of Toronto long-term care home are between 6 months and 3 years for bed type (basic, semi-private or private) of choice.

Table 1 Wait-lists for City Homes, June 2016

Location	# beds	monthly average availability	basic	semi-private	private
Bendale Acres	302	6	359	37	47
Carefree Lodge	127	2	108	20	40
Castleview Wychwood Towers	456	11	70	22	0
Cummer Lodge	391	8	449	92	199
Fudger House	250	5	37	8	8
Kipling Acres*	192	3	354	84	149
Lakeshore Lodge	150	4	114	49	73
Seven Oaks	249	7	255	23	29
True Davidson Acres	187	3	183	48	53
Wesburn Manor	192	2	294	156	246

Note, there are currently 145 beds are in abeyance at Kipling Acres until the opening of Phase II in fall 2016.

If the current number of long-term care home beds and municipal beds in the City of Toronto remains the same, the ratio of beds available for City of Toronto seniors aged 65+ will decline from 0.68 beds per 100 seniors in 2011 to 0.31 beds in 2041, and for seniors aged 75+ the ratio will experience an even larger decline, from 1.36 beds per 100 seniors aged 75+ in 2011 to just 0.55 beds in 2041. The proportion of seniors in the City of Toronto will nearly double from 2011 and 2041.

As of July 1, 2016, there are 73 applicants on the wait-list for Adult Day Programs, Homemakers & Nurses Services has 312 individuals on the wait-list and Supportive Housing Services has a wait-list of 14.

Updates on Council Supported Advocacy Strategies

Funding Increases

LTCHS staff will advise City Council on any new provincial funding opportunities that arise and will provide updates on the current funding requests before the province, including:

- LTCHS has six long-term care homes identified for mandatory redevelopment that will benefit from the enhanced base construction funding per diem, raised from \$13.30 to \$16.65 for each redeveloped bed, as announced in 2015. City Council has asked the province 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.
- City Council has asked the province as part of its Health System Funding Reform (HSFR) to address resident acuity, levels of care, behaviours and to meet the urgent need for additional resources to adequately care for the frail, elderly and other vulnerable individuals by increasing operating funding by \$4.00 per resident day, an increase that would provide the City with an additional \$3.8 million annually.
- To ensure that the long-term care home sector is not destabilized and the City's current funding level is not negatively impacted if all supplemental funding streams are equalized across all long-term care providers as part of HSFR, City Council has advocated for a provincial investment of \$2.00 per resident day.

Legislative Barriers

LTCHS staff are working with Local Health Integration Networks (LHINs) and Community Care Access Centres (CCACs) to review admission criteria and remove barriers to long-term care for clients that require complex continuing care, including individuals with long-term illness or disabilities, history of homelessness, mental health issues, substance abuse, addictions, incarceration, behavioural issues and/or lack of family supports.

As part of the George Street Revitalization (GSR), there are unique program opportunities to support Shelter, Support and Housing Administration clients' transition to long-term care and acquire special resident home area designations for these aging populations. LTCHS staff will advise City Council if further support for the designation is required.

Service Planning

LTCHS staff will pursue provincial designation as a Centre for Learning, Research and Innovation in Long-Term Care if/when the Government of Ontario next announce funding to enhance the quality of care in the long-term care sector through education, research, innovation, evidence-based service delivery and knowledge transfer. LTCHS as a municipal provider with long-standing and diverse partnerships is also well-positioned to become a teaching long-term care home in the future. LTCHS staff will seek City Council approval on these future options before proceeding.

Community hubs connect people, services and programs and are vibrant centres of community life generating economic and social benefits. City staff are monitoring the Province's Community Hubs Strategy in support of service integration, access to capital funding and access to surplus public lands. LTCHS staff will advise City Council if additional action is required.

Healthy aging in place initiatives, as outlined in the Ontario Seniors Strategy, promote health and wellness and enhance the provision of home and community care services. The December 17, 2015 release of "Patients First", a discussion paper from the Ministry of Health and Long-Term Care indicates priorities to standardize and strengthen home and community care are in sync with City of Toronto and LTCHS initiatives. The transfer of direct responsibility for service management and delivery from the CCACs to the LHINs and redefinition of boundaries so that the City of Toronto is contained within one from the current five creates further opportunities. City staff, including LTCHS representatives are part of these discussion tables and will advise City Council if additional action is required.

Religiously Appropriate Meals

LTCHS, in a separate report to Community Development and Recreation Committee entitled "Provision of Religiously Appropriate Meals in Long-Term Care Homes" will provide information to City Council on the priority for this meal service with a recommendation to ask the provincial government to develop a separate, case specific funding mechanism for the provision of cultural and religious meals in long-term care homes throughout Ontario, and then to provide the necessary funding to enable long-term care homes to properly meet the need.

Addressing Community Needs

There is currently no opportunity for City Council to consider the possible expansion of the City's long-term care bed inventory as the provincial government has not signalled any plans to increase the number of licenced long-term care beds in Ontario. However, with 60 per cent of all long-term care homes, including not-for-profit, private and City operated, representing 74 per cent of all long-term care homes beds within the City of Toronto boundary mandated for redevelopment, there is a significant risk in future years of long-term care homes closing or moving outside of the City due to land costs.

Land and construction costs for many smaller operators are too expensive within existing communities; some sites are too small or land-locked prohibiting redevelopment at existing locations. Some operators are looking to less expensive land outside the City of Toronto for redevelopment planning. For those operators that will proceed with mandatory redevelopment, temporary closure of beds (held in abeyance) during construction, on average 2 years, will further limit access to long-term care within the City.

LTCHS will advise City Council of any future opportunities to be responsive to community need and access of provincial funding for the expansion of Homemakers & Nurses Services, Supportive Housing Services and Adult Day Programs.

The Long-Term Care Homes & Services 2016-2020 Service Plan and Capital Renewal Plan, along with the Ontario Seniors Strategy, Toronto Seniors Strategy, TO Prosperity – Toronto Poverty Reduction Strategy, Toronto Strong Neighbourhoods Strategy 2020 and others identify the growing needs of an aging demographic, many of whom are financially vulnerable, with multiple health and social risks.

The City of Toronto, with its recent designation as a World Health Organization (WHO) Age-Friendly City is positioned to further support the goals of active aging as a life-long community progress with possible future expansion of the City's long-term care bed inventory, further specialization to address continuing complex care needs of the aging developmentally delayed population and recognition and funding to support the municipal role as a Centre for Learning, Research and Innovation in Long-Term Care.

Challenges, opportunities, and evolving issues such as cultural training for staff, language and translation services, increasingly complex care needs and programming for older LGBT seniors trend first in Toronto. Additional Ministry of Health and Long-Term Care funding is required to meet the challenges of more diverse resident populations, through supplemental operating funding and specialized initiatives.

Sector leadership from LTCHS combined with new and enhanced funding will support residents in long-term care homes and clients living in their own homes for as long as possible with programs and services to better meet the increasingly complex and diverse needs of the growing and diverse aging population in Toronto.

Staff will continue to report to City Council regarding emerging issues, challenges and opportunities and will include financial requirements as part of future Operating and Capital Budget submissions.

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