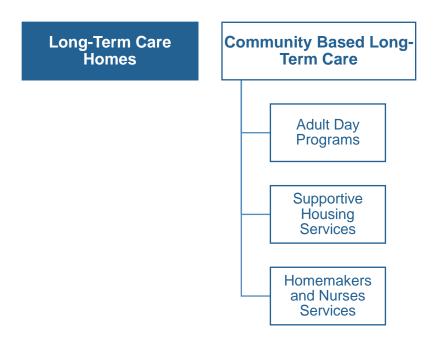
M TORONTO

I Cong-term care



PROGRAM MAP

Long-Term Care Home & Services



Shaded boxes reflect the activities covered in this report

Long-Term Care Homes & Services (LTCHS) provides a continuum of high quality long-term care services to eligible adults in both long-term care homes and the community. LTCHS are leaders in excellence and ground-breaking services for healthy aging.

The scope of services provided includes:

- Ten long-term care homes providing permanent, convalescent and short-stay admissions;
- Community support programs, including adult day programs, supportive housing services and homemakers and nurses services.

All City operated long-term care homes provide 24-hour resident-focused care and service including nursing and personal care, behavioural support programs, medical services, recreational programming, dietetics and food services, laundry, social work, spiritual and religious care, housekeeping, maintenance, trust and administrative services. Lesbian, gay, bi and transgender (LGBT) supports, community outreach and extensive volunteer programs are also available. Each home features a welcoming environment, offering special services and programs, including language and cultural partnerships, designed to provide the best possible quality of life and to respond to the needs of each individual resident. Homes provide permanent admission and may also offer convalescent and/or short-stay admissions.



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 partnerships including Buddhist, Cantonese, Farsi, French, Hispanic, Ismaili, Japanese, Jewish, Korean, Mandarin and Portuguese are available in select homes.

LTCHS believes that the creation of an effective continuum of care is best built and maintained through strong partnerships with other healthcare organizations and community partners. By positively engaging community relationships LTCHS can enhance the experience for residents and clients and help improve their quality of life. Formal and informal partnerships, collaborations, connections and service alliances include all faith and cultural groups; schools and places of higher learning; disease and advocacy groups; media and government; arts organizations and service clubs.

LTCHS has a long-established commitment and openness to working with the community and inviting community members into our homes. These relationships bring richness to our environments, helping to shape a unique culture while promoting public accountability. This includes a volunteer Advisory Committee on LTCHS that provides program advice and input about services and quality of life enhancements for residents and clients. The Committee has broad community representation, and enhances community connections, assists work in community needs assessment and facilitates effectiveness in systemic advocacy.

Each home also has its own Advisory Committee to act in an advisory capacity to advise the Administrator and home management on residents' quality of life issues and to make suggestions about local community needs that the home may be able to respond to. While members of each Home Advisory Committee bring their own skills and expertise to the table, they are supported in their work through regular reports from the Residents' Council and Family Council. This allows the Home Advisory Committee to remain current and up-to-date on the internal community in the home. Each Home Advisory Committee has a unique opportunity to be informed and aware of resident and family member concerns, issues or suggestions, while balancing this perspective with the larger local community.

Funding responsibilities for long-term care services are shared by the Ministry of Health and Long-Term Care (MOHLTC), five Local Health Integration Networks (LHINs), resident/client user fees and the City of Toronto, with rates set by the Ontario government. Long-term care home residents with limited income and residing in a Basic Accommodation room may be eligible for a subsidy to reduce the accommodation fee that they pay. Community clients served in the Adult Day Program pay a nominal fee, which is subject to an income test. The other community programs do not charge a user fee, but the services are available to only low income vulnerable clients.

The MOHLTC regulates and inspects all of Ontario's long-term care homes on a regular basis. In addition, LTCHS has been *Accredited with Commendation* for going beyond the requirements of Accreditation Canada's Qmentum accreditation program and demonstrating an ongoing commitment to quality and risk management.

SUMMARY OF PERFORMANCE MEASUREMENT RESULTS

Question	Indicator/Measure	Internal Comparison of Toronto's 2017 vs. 2016 Results By Quartile for 2017		Chart & Page Ref.
How many municipally operated long-term care home bed days are provided for a resident 75 years of age or older?	# Bed Days/ Population 75 Years of Age or Over (Service Level)	Increased # Bed Days/ Population 75 Years of Age or Over increased in 2017 (Service Level)	2 Toronto is at median compared to others for the number of bed days relative to the population 75 years of age or over (Service Level)	20.1 20.2 Pg. 6/7
How many municipally operated long-term care beds are there?	Number of Municipally Operated Long-Term Care Beds (Service Level)	Stable Unchanged number of long-term care beds (Service Level)	N/A	20.3 Pg. 8
What proportion of all long-term care beds does the City operate?	Municipally Operated Long-Term Care Beds as a Percentage of all Long- Term Care Beds in the Municipality (Community Impact)	Stable Toronto's municipal share of all long-term care beds was stable (Community Impact) (no graph)	2 Toronto's municipal share of all long-term care beds is slightly above median compared to others (Community Impact)	20.4 Pg. 8
What is the supply of long-term care beds relative to residents 75 years of age or older?	Percentage of Long-Term Care Community Need Satisfied (Beds as a Percentage of Population 75 Years of Age and Over) (Community Impact)	Stable Number of long-term care beds was stable relative to the population 75 years of age or older in 2017 (Community Impact)	3 Toronto has a lower percentage of long-term care beds relative to the population 75 years of age or over compared to others (Community Impact)	20.5 20.6 Pg. 9/10
How satisfied are long-term care home residents and their families?	Long-Term Care Resident/Family Satisfaction (Customer Service)	High and relatively stable High rate (91%) of satisfaction among long- term care home residents and families (Customer Service)	4 Toronto maintains a high rate of resident and family satisfaction, however it is lower compared to others (Customer Service)	20.7 20.8 Pg. 11



Long-Term Care 2017 Performance Measurement & Benchmarking Report

Question	Indicator/Measure	Internal Comparison of Toronto's 2017 vs. 2016 Results	External Comparison to Other Municipalities (MBNC) By Quartile for 2017	Chart & Page Ref.
How much does it cost per day to provide a long-term care bed?	Long-Term Care Home Operating Cost (CMI Adjusted) per Long-Term Care Home Bed Day (Ministry Submissions) (Efficiency)	Stable Cost per bed day was stable (Efficiency)	1 Cost per bed day is lower compared to a majority of others (Efficiency)	20.9 20.10 Page 12/13

SUMMARY OF OVERALL RESULTS

Internal Comparison of Toronto's 2017 vs. 2016 Results	Internal Comparison of Toronto's 2017 vs. 2016 Results	External Comparison to Other Municipalities (MBNC) By Quartile for 2017	External Comparison to Other Municipalities (MBNC) By Quartile for 2017
Service Level Indicators (Resources)	Performance Measures (Results)	Service Level Indicators (Resources)	Performance Measures (Results)
1 - Increased 1 - Stable 0 - Decreased	0 - Favourable 4 - Stable 0 - Unfavourable	0 - 1st quartile 1 - 2 nd quartile 0 - 3 rd quartile 0 - 4th quartile	1 - 1st quartile 1 - 2nd quartile 1 - 3rd quartile 1 - 4th quartile
100% stable or increased	100% favourable or stable	100% in 1st and 2nd quartiles	50% in 1st and 2nd quartiles

For an explanation of how to interpret this summary and the supporting charts, please see the Guide to Toronto's Performance Results. These quartile results are based on a maximum sample size of 11 municipalities.

M Toronto

SERVICE LEVEL

Examining the number of long-term care beds in the City of Toronto provides an indication of service levels. The number of long-term care beds operated by the City has remained constant since 2003. In addition to municipally operated long-term care beds, there are long-term care homes in Toronto operated by other service providers including the for-profit and charitable sectors.

20.1 - HOW MANY MUNICIPALLY OPERATED LONG-TERM CARE HOME BED DAYS

ARE PROVIDED FOR A RESIDENT 75 YEARS OF AGE OR OLDER? 5.0 4.5 4.0 3.5 3.0 2.5 2.0 1.5 1.0 0.5 0.0 2014 2015 2016 2017 # Bed Days/ 4.34 4.32 4.20 4.27 Population 75 years of Age or Over

Chart 20.1 shows the number of bed days per the city's population 75 years of age and over.

Chart 20.1 (City of Toronto) Municipal Long-Term Care Home Bed Days per Population 75 Years of Age and Over

In 2017, there were 916,150 funded municipal operated long-term care home bed days. Toronto's 2017 population 75 years of age or older was 214,593. The number of bed days per population 75 years of age and over is therefore 4.27, an increase from last year.

20.2 – HOW MANY MUNICIPALLY OPERATED LONG-TERM CARE HOME BED DAYS ARE PROVIDED FOR A RESIDENT 75 YEARS OF AGE OR OLDER IN OTHER MUNICIPALITIES?

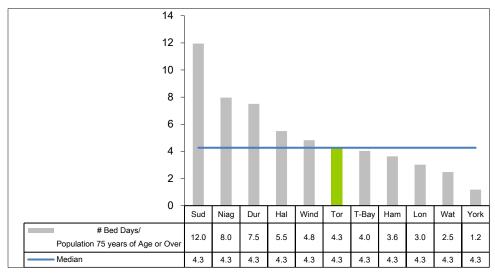


Chart 20.2 shows the 2017 number of bed days per population 75 years of age and over for Toronto and other municipalities.

Chart 20.2 (MBNC 2017) Municipal Long-Term Care Home Bed Days per Population 75 Years of Age and Over

In terms of the highest number of bed days per population 75 years of age and older, Toronto ranks sixth out of eleven (second quartile). The need for long-term care beds is influenced by the availability of long-term care beds operated by other service providers and the availability of other services, such as hospitals, complex continuing care and other community care services, such as supportive housing and adult day programs. These services are designed to work together to provide a continuum of health care for citizens.

In addition, municipalities and districts in northern communities tend to hold a significant proportion of long-term care beds provided in the area. Without municipal participation, some areas of the province would have even more limited access to long-term care beds.

20.3 – HOW MANY MUNICIPALLY OPERATED LONG-TERM CARE BEDS ARE IN TORONTO?

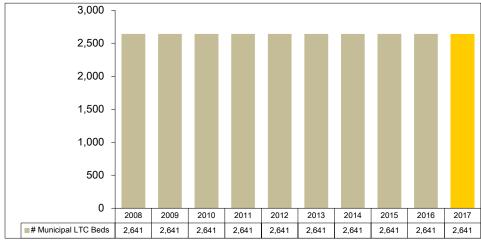


Chart 20.3 shows the number of municipally operated long-term care beds in Toronto. This number has remained at 2,641 beds since 2003.

Chart 20.3 (City of Toronto) Number of Municipally Operated Long-Term Care Beds

COMMUNITY IMPACT

When individuals require care from a long-term care home, they and/or their families can quickly face a crisis if admission is not possible in a timely manner. Additionally, the lack of available long-term care beds can often result in an applicant taking admission in a long-term care home that may not be their first choice.

20.4 – WHAT PROPORATION OF ALL LONG-TERM CARE BEDS ARE OPERATED BY TORONTO AND OTHER MUNICIPALITIES?

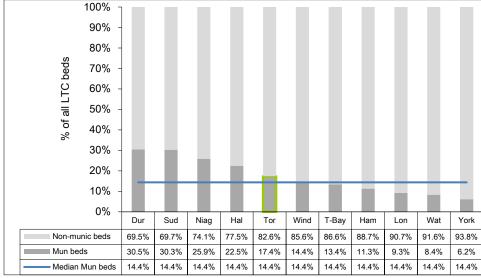
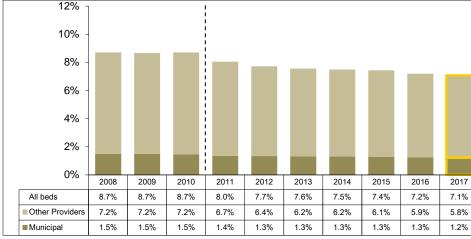


Chart 20.4 presents 2017 data on the percentage share of long-term care beds in the community that are provided by the municipality and by other service providers (non-municipal beds).

Chart 20.4 (MBNC 2017) Municipally Operated Long-Term Care Beds as a Percentage of All Long-Term Care Beds

In terms of the highest percentage of long-term care beds operated by a municipality, Toronto ranks fifth of eleven (second quartile). The City of Toronto operates 17.4 percent of the 15,187 long-term care beds from all service providers in Toronto. The remaining 82.6 percent are provided by other service providers.





NRNNTN

Chart 20.5 provides an indication of how many long-term care beds there are in Toronto from all service providers as a percentage of the population 75 years of age and over. The results for 2010 and prior years are not based on the revised senior population estimates.

Chart 20.5 (City of Toronto) Long-Term Care Beds as a Percentage of Population 75 Years of Age and Over

This measure is intended to provide an indication of potential need. It should be noted that many seniors continue living in their own homes, with relatives or in other shared living arrangements. The declining percentage (beds relative to population 75 years of age and over) over the ten-year period reflects the fact that the relatively unchanged supply of long-term care beds has not kept pace with the 22 percent growth in Toronto's senior population from 2008 to 2017. It is important to note that the age requirement for individuals eligible to reside in long-term care is 18 years and older; when taking into account vulnerable individuals less than 75 years of age, the supply of long-term care beds is even less.



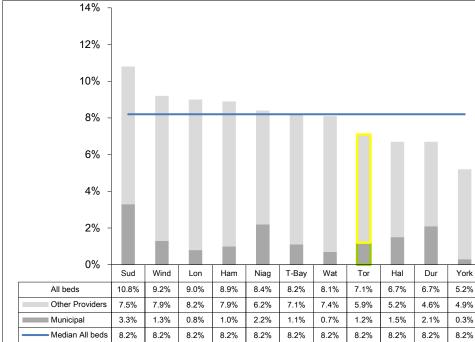


Chart 20.6 reflects 2017 data for Toronto and other municipalities on the number of longterm care beds from all service providers as a percentage of the population 75 years of age and over.

Chart 20.6 (MBNC 2017) Long-Term Care Beds as a Percentage of Population 75 Years of Age and Over

Toronto ranks eight of eleven municipalities (third quartile) in terms of supply of long-term care beds (from all service providers) relative to the population 75 years of age and over. Toronto is sixth of eleven (second quartile) in terms of municipal beds. In terms of other providers, Toronto ranks eighth place of eleven (third quartile).

M Toronto

CUSTOMER SERVICE

Achieving a high level of satisfaction among residents, clients and families is a priority for Toronto's long-term care homes. Toronto's *Your Opinion Counts* surveys are circulated annually for completion and results of these surveys are used to guide continuous quality improvement.

20.7 – HOW SATISFIED ARE RESIDENTS AND FAMILIES IN TORONTO'S LONG-TERM CARE HOMES?

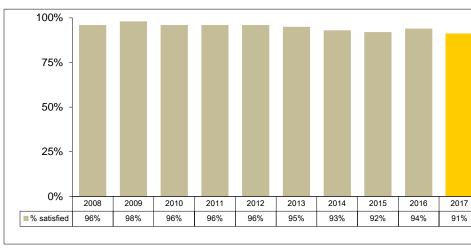
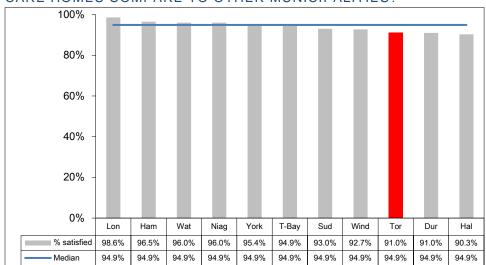


Chart 20.7 provides the percentage of residents in City of Toronto long-term care homes and their families who are satisfied with the homes as a place to live.

In 2017, the overall percentage satisfied was relatively stable with a decrease by 3 percent from the previous year, but still very high at 91%.

Chart 20.7 (City of Toronto) Percentage of Residents and Families Satisfied with Toronto's Long-Term Care Homes

Accreditation Canada has recognized the *Your Opinion Counts* survey tool and administration process as appropriate for assessing resident/client experience dimensions, capturing representative results and adequately ensuring data security and confidentiality.



20.8 – HOW DOES TORONTO'S RESIDENT AND FAMILY SATISFACTION IN LONG-TERM CARE HOMES COMPARE TO OTHER MUNICIPALITIES?

Chart 20.8

compares the 2017 satisfaction rate of Toronto's residents in long-term care homes and their families to other municipalities.

Chart 20.8 (MBNC 2017) Percentage of Residents and Families Satisfied with Long-Term Care Homes

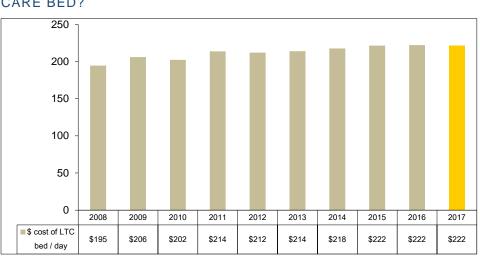


In terms of resident and family satisfaction, Toronto ranks ninth of eleven municipalities (fourth quartile), but still very high with 91 percent satisfaction. It should be noted that the survey tools used by the observed municipalities are not standardized—they differ in terms of rating scales, language and length. It should also be noted that residents in Toronto's long-term care homes require increasingly complex interventions (e.g. challenging behaviours, associated dementias and mental illnesses) and come from over 66 countries of origin, speak 31 languages and represent 37 different faiths/denominations.

Municipal long-term care homes have historically experienced high satisfaction ratings from residents and their families as a place to live. All municipal long-term care service providers maintain comprehensive quality improvement programs to ensure safe, high quality care and services for the residents in their homes

EFFICIENCY

A unit of measurement of efficiency in long-term care homes is the cost per day to provide a long-term care bed. The needs of each long-term care resident vary, requiring a different scope of service and/or level of care. As a result, there can be significant and legitimate variances in cost. These requirements vary from one home to another, from one year to another and from one municipality to another. To improve the comparability of results for this efficiency measure, costs are adjusted by the case mix index (CMI), which is a numerical factor that partially adjusts costs to reflect differences in the level and intensity of nursing care required by residents.



20.9 – HOW MUCH DOES IT COST TORONTO PER DAY TO PROVIDE A LONG-TERM CARE BED?

Chart 20.9 provides Toronto's CMIadjusted long-term care cost per bed day.

The 2017 cost of Toronto's long-term care bed per day was stable at \$222.

Chart 20.9 (City of Toronto) Long-Term Care (CMI-Adjusted) Operating Cost per Bed Day

20.10 – HOW DOES TORONTO'S COST OF PROVIDING A LONG-TERM CARE BED COMPARE TO OTHER MUNICIPALITIES?

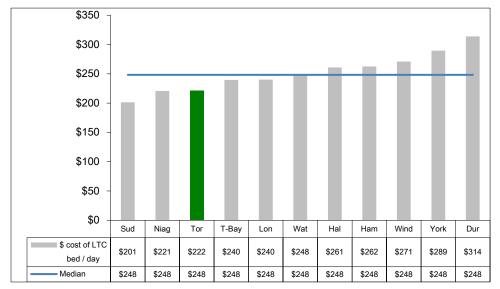


Chart 20.10 compares Toronto's 2017 result to other municipalities for the Case Mix Index (CMI) adjusted longterm care cost per bed day.

Chart 20.10 (MBNC 2017) Long-Term Care (CMI-Adjusted) Operating Cost per Bed Day

Toronto ranked third of eleven municipalities (first quartile) for the lowest cost of long-term care cost per bed day.

Long-Term Care Homes & Services continues to search for efficiencies and reduction of net municipal costs by streamlining operations wherever possible. Toronto has however preserved high resident/client care and safety standards. Long-Term Care Homes & Services has restructured and streamlined its operations to match available funding wherever efficiency is possible outside of direct resident care, safety and key drivers of quality of life.

2017 ACHIEVEMENTS AND 2018 PLANNED INITIATIVES

The following initiatives have improved or will help to improve the effectiveness of Toronto's Long-Term Care Homes & Services (LTCHS):

2017 Achievements

- Supported leadership excellence in healthy aging through continuous improvement, customer service, education, innovation, research, teamwork, partnerships and technology.
- Continued implementation of the Council-approved 2016-20 LTCHS Service Plan.
- Updated the LGBT Toolkit for creating culturally competent care for lesbian, gay, bisexual and transgender persons in long-term care and community-based services.
- Opened Phase II of Kipling Acres, bringing 145 long-term care beds back into service along with new community hub space.
- Developed and initiated implementation of a resident/client centred model of care.
- Enhanced quality of care and quality of life for residents by refining and refreshing the division's Approach to Care model. Developed and implemented standardized systems and processes that improved data accuracy.
- Shared innovations and best practice as leaders in excellence and ground-breaking services for healthy aging at provincial conference.
- Commenced implementation of modernization project of a new electronic healthcare record and resident information management system.
- Celebrated 10-year partnership with Korean community at Castleview Wychwood Towers.
- Received the Community Partnership Award granted by the Volunteer Advisory Committee of Toronto Intergenerational Partnerships.
- Organized the 26th annual Toronto Challenge fund and awareness raising event to benefit over 40 non-profit organizations that are improving the quality of life for Toronto seniors.
- Celebrated the volunteer contributions of approximately 2,300 individuals of all ages and backgrounds who contributed 136,000 hours of service.

2018 Planned Initiatives

- Support the Toronto Seniors Strategy to meet growing demand for long-term care services resulting from changing demographic and new populations.
- Continue the implementation of the 2016 2020 Service Plan's key priorities: deliver exemplary care and services, serve vulnerable individuals and respond to emerging needs; and lead advances in long-term care and support services to seniors.
- Introduce the new Model of Care, supported by a state-of-the-art electronic healthcare record system and realignment of staffing to strengthen care and rehabilitation services.
- Operate approved beds in 10 long-term care homes across Toronto, each connected to its local community and responsive to local needs. The homes offer a combination of long-stay, short-stay and convalescent care beds, behavioural supports, young adult care, and specialized services.
- Serve clients at 9 supportive housing sites providing 24 hour assistance with personal care, light housekeeping, laundry, medication reminders, security checks, light meal preparation, wellness and health promotion, and a Registered Practical Nurse on site 24/7 at each location.



- Offer light housekeeping, laundry, shopping and meal preparation to help approximately 3,000 individuals to remain in their own homes and community.
- Offer a variety of quality activities and services in 4 locations through the Adult Day Programs, and provide a safe and supportive environment for individuals who have cognitive impairment or are socially isolated.

Factors Influencing Results of Municipalities

Influencing factors can create variances in comparison data from year-to-year and from municipality-to-municipality. The results of each municipality included in this report can be influenced to varying degrees by factors such as:

- Costs: The long-term care home costs can be a misleading efficiency measure unless costs are weighted and adjusted for acuity levels, wage differentials, funding changes, qualitative outcomes and service levels. For the purpose of reporting MBNC data, costs are adjusted for acuity levels only.
- Location/Supply: Availability and supply of municipal long-term care beds differ per community. Municipal and district homes in northern communities hold a significant proportion of the long-term care beds provided in the area. Without municipal participation, some areas of the province would have even greater limited access to long-term care services. Conversely, municipal and district homes in southern and urban communities make up a smaller proportion of overall long-term care beds given the significant number of long-term beds operated by other provider types. As a result, this may lead to greater choice of long-term care homes in these communities.
- Municipal Long-Term Care Home Mix: Some municipalities only administer long-term care homes while others have a mix of homes and/or community based programs (e.g. supportive housing, homemakers and nurse services, adult day programs). These are distinct services with significantly different cost structures.
- Provincial Standards: Ministry of Health and Long-Term care imposed funding reduction if long-term care home occupancy levels fall below 97 percent for permanent beds.
- Staffing Mix: Costs are affected by staffing levels, the ratio of registered versus nonregistered staff and the Case Mix Index (CMI).