

# CARETO IMPLEMENTATION INITIATIVE

## Consultation Report



St. John's Rehab Research Program -  
Sunnybrook Research Institute

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# ABOUT THE CARETO IMPLEMENTATION INITIATIVE

In February 2022, the City of Toronto approved a historic investment to transform how long-term care (LTC) is delivered in City-run LTC homes (1). This new person-centered approach is branded as 'CareTO' (2). The innovative philosophy puts the individual needs of Toronto's 2,619 LTC residents ahead of routine schedules, enabling people to live with greater connection, autonomy & community that allow them to flourish at any age or ability.

Recognizing the complexity of promoting new practices & policies embedded in CareTO, the City of Toronto engaged researchers at Sunnybrook Research Institute (Sunnybrook Team) to support the implementation.



Lakeshore Lodge

## GOALS

The goals of the Sunnybrook Team were to: a) bring clarity on how to define CareTO; b) support the implementation of the CareTO pilot at Lakeshore Lodge; & c) develop recommendations to support the adoption of CareTO across all 10 City of Toronto-run LTC homes.

This report provides a summary of this work, including insights on the implementation & impact of CareTO.

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1. 2022 Operating Budget Briefing Note - City's proposed approach to Emotion-Centred Care & associated costs:  
<https://www.toronto.ca/legdocs/mmis/2022/bu/bgrd/backgroundfile-175608.pdf>

2. City Council approves new approach to care for long-term care homes:  
<https://www.toronto.ca/news/city-council-approves-new-approach-to-care-for-long-term-care-homes/>



# THREE PHASE APPROACH

## PHASE I:

### CONSULTATION

To help the City of Toronto make evidence-based decisions related to CareTO, the Sunnybrook Team used a three-phased approach to engage with various stakeholders, including residents, family members & staff at Lakeshore Lodge & the City of Toronto's Seniors Services & Long Term Care division. Efforts were undertaken to engage with as many different stakeholders as possible to ensure a variety of perspectives would be taken into account.

## PHASE II:

### SURVEY & STAKEHOLDER MEETING

Between January & April 2022 (**Phase I**), the Sunnybrook Team learned about CareTO. This was achieved by attending meetings with key staff involved in the design & implementation of CareTO, shadowing staff at Lakeshore Lodge & by participating in the monthly CareTO Steering Committee at Lakeshore Lodge.

## PHASE III:

### IN-DEPTH INTERVIEWS

In May 2022 (**Phase II**), the Sunnybrook Team surveyed stakeholders to get a snapshot of CareTO. A half-day consultation with residents, family members & staff at City-run LTC homes allowed for an exchange of knowledge about CareTO.

Between July 2022 & September 2022 (**Phase III**), the Sunnybrook Team undertook in-depth interviews with residents, family members & staff to learn about the implementation & impact of CareTO. This report summarizes the Sunnybrook Team's efforts with this phase of the consultation process. A separate report on Phase I & Phase II was provided to the City of Toronto in July 2022.



## PHASE III GOALS & PROCESS

- Between July & September 2022, the Sunnybrook Team conducted one-to-one interviews with stakeholders at Lakeshore Lodge, including residents, family members, front-line staff & managers.
- Staff were asked what changes they have seen in the way they approach care & how it has impacted the wellbeing of residents. Residents & family members were asked about how they feel the quality of care has changed since CareTO was introduced. All stakeholders shared feedback on what they felt was going well with CareTO & how it could be improved.
- Phase III received ethics approval from the Sunnybrook Health Sciences Centre Research Ethics Board & the Seniors Services & Long-Term Care Ethics Committee.
- Ethics approval was obtained to ensure that any person interested in taking part in an interview had a choice if they wished to participate or not. It also provides protections to participants by requiring the Sunnybrook Team to keep people's identities & the specific details shared anonymous & confidential. Research ethics ensures that people's rights are protected.

## WHO DID WE SPEAK WITH?



A member of the Sunnybrook Research Team conducted interviews with 23 stakeholders:

- 6 Residents
- 4 Family Members
- 13 Staff

The interviews with residents & family members were completed in late July & early August, while interviews with staff were conducted in late August to mid-September.

Residents & family members were provided a stipend of \$25 for their time. Staff were not compensated for their time as per City of Toronto guidelines.

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## WHAT WE LEARNED IN PHASE III

The interviews with stakeholders highlighted several instances where the success of CareTO was apparent across a number of domains. Successes were evident within care relationships & it was clear that the emotion-focused approaches to caring are improving lives for residents & families.



### STAKEHOLDERS ARE HIGHLY SATISFIED WITH THE CARE RELATIONSHIPS

Residents & family caregivers are reporting high levels of satisfaction with the quality of the relationships with staff at Lakeshore Lodge. Residents & family members have commented that interactions with staff are more reciprocal & welcoming. As well, residents & family members know that staff are receptive & responsive to feedback.

*“Well, they’re all friendly. They’ll do anything you ask them really.” - Resident #1*

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*“Yes because there's more attention....and I noticed it with other people. More attention being given to an individual. There's not so much of this walk by and say nothing. It's like walk by and oh, hi, how are you doing?” - Family Member #1*

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*“I can’t believe it, the way we’re treated and looked after...They make you feel like you’re a king.” - Resident #5*

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### EMOTION-CENTERED CARING IS HAVING AN IMPACT

Family members are telling staff that the emotion-centered care is impacting their loved ones & even strengthening their relationships with them. Residents enjoy the activities that have been planned, deriving great meaning from them. Overall, there is a sense of community at Lakeshore Lodge. Residents feel connected to one another & the staff. Residents also see that staff make time to interact with any family & friends that visit them, which contributes to that feeling of community.

*“Yes, where the nurse will say you don’t want to take your pills? They talk to you and all. So this way here, the patient has less stress and anxiety, possibly needs less medication, falls less times, and easier to handle. And the nurse and the PSW [personal support worker] have less difficult or negative interaction and it creates a better work environment. So you have a good work environment between the staff and with the patients. But that’s what I see happening here with it. But personally, I think that’s the key to the success of the programme.” - Resident #3*

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## HOME ENVIRONMENT, DINING & ACTIVITIES

Many residents & family members commented on the home-like environment, describing that it is "spotless", "smells fresh" & that the space is generally welcoming. **Family members commented that there is an overall "good mood" when entering Lakeshore Lodge.** Several positive comments were shared about the food & flexible dining options (i.e., Burlodge food cart) as well as a noticeable increase in activities.

**"The dining has changed...They give us the food that we like, stuff we like to eat." – Resident #2**

**"Yes. The activities have improved, now that [recreation staff member] is here. He works on a Thursday, Saturday and Sunday. We have more activities to keep us busy. That's a major step for us." – Resident #4**

Although there is recognition & appreciation of many noticeable changes occurring at Lakeshore Lodge, **activities & programming remain sensitive issues: residents & family members want more of them.** A challenge noted by staff is that organizing events or activities is time-intensive & requires significant planning. However, residents & family members are eager for more activities to pursue on the weekend.



## STAFF TRAINING & EDUCATION



In our consultations, staff overwhelmingly identified the **training & education** as a major factor promoting the success of CareTO. The in-class training fostered buy-in & strengthened team work, especially across staff members working in different departments. Overall, the education modules were considered to be very effective in driving the transformational cultural change that is foundational to CareTO.

Staff shared that the education was pivotal in building an understanding around what CareTO is & what it means to be person-centered. Sessions got staff “out of their comfort zones”. Staff really appreciated how “fun” it was to receive the education & were happy that the education was a two way, co-creative experience.

So, when we can sit down there [during the education] and really come to understand where each other's coming from, then we can come up with solutions, right?  
– Staff Member #4

For family caregivers, the education was viewed as valuable, but some felt the roll-out of the modules should be less of a priority compared to other components. Specifically, **family members did not consistently view the education as having the most direct impact on their loved one's care**, as they believed that those who provide direct care at Lakeshore Lodge were already doing a great job. Notably, families are experiencing a sense of urgency around implementing CareTO as their loved ones have faced so many challenges related to COVID & their families want them to experience all the benefits of CareTO; thus prioritizing staffing, recreation & dining experiences.

There may be an opportunity for more communication around the need for the education modules & how they translate to better person-centred care. Another strategy being implemented in other LTC jurisdictions is co-education for staff, families & residents, which allows all members of the community to more directly experience the learning & subsequent benefits.

## CARE COACHES

Our interviews revealed that **Care Coaches are instrumental in supporting person-centred care principles from the classroom into practice & in promoting buy-in & teamwork on the units.**

Family caregivers similarly noticed the impact of Care Coaches & reported their active check-ins with residents & genuine concern for their wellbeing made a big difference.



The designated Care Coach role also ensures that staff are well positioned to offer feedback to colleagues without it being viewed as an overstep or unsolicited advice. For example, one Care Coach shared a story of about feedback they provided to a colleague on how they could make their interaction with a resident living with dementia more "sensitive & emotion-centred". Without the Care Coach role, this professional may have hesitated in providing feedback. The success of the Care Coaches was also evident in the recommendations for all departments within the home to have their own Care Coach, which would allow **Care Coaches to provide more tailored "on-the spot feedback..[and] role modeling" across all of the departments.**

**The staff is more engaged.**  
The care coaches are around.  
And, I think they help. They come around and the ask questions, and they're concerned about the care. -  
Family Caregiver #2

The Care Coaches .. that are disseminating the information, and then being people that work on the units...**that's huge, to be able to look for, to look towards your peers for advice.** -  
Staff Member #7

So I guess being [a care coach] allows me to say, 'hey, this is my experience. **And in my experience I have learned this way to do things, or this way to approach.**' -  
Staff Member #15



## CULTURE CHANGE

CareTO is an iterative process where residents' expectations shape CareTO, & CareTO shapes residents' expectations. As CareTO elevates resident agency, new expectations will arise.

### CARETO IS CREATING A NOTICEABLE CHANGE IN CULTURE

From our interviews with stakeholders (residents, family members & staff), a salient theme was that residents at Lakeshore Lodge feel cared for & valued. **As a result, their expectations of what care in LTC looks like is changing.** Residents are more frequently approaching staff to engage in non-task based interactions, in part because they feel that staff are more approachable & less hurried than before. This may also be due to increasing staff ratios & that the COVID-19 pandemic conditions have become less restrictive. Regardless, it appears that residents feel more empowered & their capacity to exercise agency is elevated.

### THE CHANGE IN CULTURE WILL LEAD TO NEW EXPECTATIONS FOR CARETO

CareTO is iterative in nature in that as CareTO makes improvements in the LTC community, new opportunities for change may emerge. As a result, resident, family member & staff expectations of care have shaped CareTO & in turn, CareTO shapes their evolving expectations. Residents & family members may even begin asking for resources or services they thought were not previously attainable before CareTO. We anticipate there will be new requests by stakeholders to elevate the care environment as CareTO continues to roll-out. **As well, as new residents arrive to Lakeshore Lodge, we may see expectations change.**

### EXAMPLES OF HOW EXPECTATIONS ARE CHANGING

Many examples focused on **feeling at home**. For instance, residents enjoyed the new art, but felt it could be curated or grouped in more meaningful ways. Residents & family members would like to see more more activities, along with more vibrancy, patterns & softness in the communal spaces. Residents who are wheelchair users & their family members would like more outdoor patio spaces where their loved one can see beyond high walls that obscure their sight line.

In our own living spaces, we can often choose how we want to spend our day, as well as our furniture & art we would like to see on the walls. These are not choices that residents necessarily have.

These increasing expectations for a homelike environment are a sign that CareTO is working.



## SUSTAINING CARETO

While stakeholders are confident that CareTO is sustainable at Lakeshore Lodge, they recognized that CareTO requires a significant investment of staff, materials & supplies. From our interviews, it is clear that stakeholders believe even greater investments can be made, with calls for more staff & program supplies.

Although momentum has been high, family members are concerned about maintaining it & want to be assured that there are strategies that can be used to cultivate enthusiasm over the long-term.

“ I know sometimes how long these things take to fully implement and with that, your reintroduction into the other homes So, I don't know. That time frame seems long. I don't know how you would speed it up because I've known a lot of different plans of care coming in and nothing comes to fruition from them. **All of a sudden you stop hearing about something that they wanted to change and it's gone...** Because it's a good sounding approach and I hope it's maintained and kept and if there's improvements along the way they're implemented and it gets spread throughout.

- Family Caregiver #1

*Sustainability concerns include costs, maintaining the momentum of the cultural change & training of new staff & volunteers.*

Staff believed that the education was critical to sustaining CareTO. They told us that continuing education in the form of dynamic “refreshers” will be needed to take into consideration changes in the home & broader culture. That said, there were are concerns about the capacity to train new staff & volunteers, as there may be challenges getting everyone up to speed.

When asked about metrics of success for CareTO, which could provide needed data to support its' sustainability, some domains included seeing residents being more “awake”, spending less time in their rooms alone, less need for medications to help manage mood or behaviours & improved staff retention rates. The sustainability of CareTO will also depend on the on-going responsiveness to the unique, fluid & diverse demographics of each City-run LTC home.

“ Well, because I have no anxiety about the care, because I'm so comfortable because they're taking so much care. **So I don't need an extra medication to calm me down, for depression or whatever.**

We have a social worker here ... she comes every week to talk to us and just spend two, three hours talking. Just having conversation.

- Resident #3



“ I want to see the data. How many hours are you spending with the resident? **And do we have it in the budget to give them more?**

- Family Member #4

# LAKESHORE LODGE LESSONS



Based on our work, we have identified four key lessons that will strengthen the roll-out of CareTO in other City-run LTC homes.

- **Building Teamwork** – Lakeshore Lodge management has worked together as a team & promotes team work among other staff. Accounting for this is education both in the classroom & on the floors, as well as commitment & a high level of energy for fostering a cohesive team.
- **Ongoing Communication** – The communication is constant, whether it is to promote buy-in with staff, reminding them why a new approach to care is needed, or communicating with external stakeholders about CareTO. Sustainability depends on this on-going communication & highlighting the changes & successes – this will help keep stakeholders engaged & momentum going.
- **Unwavering Commitment to Culture Shift** – The high level of commitment to CareTO among the team takes a lot of emotional & intellectual effort. When our team asked about advice to other homes wanting to adopt CareTO, this commitment is highlighted.
- **Valuing Stakeholder Feedback** – At Lakeshore Lodge, there is frequent engagement of the families, residents & staff about CareTO, which is also important to keep CareTO moving forward at Lakeshore Lodge & beyond.

## Identified Communication Gap:

Although residents & family members are satisfied with their level of care & have noticed changes, there is still a lack of understanding of what CareTO is about. Residents & family members have commented that the amount of information directed to them about CareTO is either too dense (i.e., too much text) or inaccessible (i.e., display with materials is too high to read for wheelchair users). Better communication strategies tailored to the information needs of residents & families are needed to address this issue.



# MOBILIZING CARETO TO ALL LTC HOMES

## CareTO

With regards to mobilizing CareTO to other City-run LTC homes, there are a number of implementation considerations that should be taken into account. One is the diversity of residents living across the various homes, which indicates that a singular approach to care will not work. For CareTO to be successful, it is necessary to focus on the process as opposed to fixed care components. Importantly, there was already a high level of personalized care being provided to residents at Lakeshore Lodge, but CareTO now provides a framework that allows for shared understandings & goals on how to provide care in a consistent & person-centered manner. The ability to provide feedback on the roll-out of CareTO is something that staff already appreciate at Lakeshore Lodge.

*“I think we’ve developed something really special now.... And it’s not a program, I think of it as a methodology that really works.” - Staff Member #3*

Consequently, LTC homes should work to be intentional around the changes they wish to implement & on-going communication with all stakeholders - residents, family members & staff - will be required to foster buy-in & to build (or enhance existing) teams. The Lakeshore Lodge Team has expressed a high level of excitement about CareTO arriving in the other City-run LTC homes & to see how lessons learned from their site may be applied elsewhere. Hence, it is recommended that other sites engage with Lakeshore Lodge to help with their implementation of CareTO, which in turn may also lead to opportunities for Lakeshore Lodge to learn from other sites to continue to strengthen their own on-going implementation of CareTO.

Overall, the CareTO initiative has achieved a number of early successes but is a time intensive endeavor that requires a lot of energy. There are on-going concerns about sustainability in a sector that has been stigmatized. Communication across all levels (homes, City of Toronto, Provincially & beyond) will be critical to ensure that adequate resources can be retained to maintain & enable the spread of CareTO.





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## THE SUNNYBROOK TEAM

The Sunnybrook Team is based at the St. John's Rehab Research Program at the Sunnybrook Health Sciences Centre. Drs. Sander Hitzig & Christine Sheppard are leading the CareTO initiative with the support of Julia Hemphill.

The Sunnybrook Team has a strong track-record of using implementation approaches to co-design & evaluate complex interventions for seniors' health & wellbeing. This includes supporting: a) the City of Toronto with the development of a new integrated service model for seniors' social housing; b) the implementation of new technologies in long-term care; & c) development & evaluation of new approaches to care at Sunnybrook Hospital, including the use of patient navigators for older adult patients with complex care needs.

## HOW TO CONTACT US?

Questions about the CareTO Implementation Initiative can be directed to Sander Hitzig at:  
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