



Recommendations to Address System Pressures in the Long Term Care Sector

Submission to Ontario's Long-Term Care COVID-19 Commission

Regional Municipality of Peel

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Region of Peel Submission

Ontario's Long-Term Care COVID-19 Commission

Introduction

The Region of Peel is home to 1.4 million residents living in the cities of Mississauga and Brampton and in the Town of Caledon. As is the trend across the country, seniors are the fastest growing age group in Peel. It is expected that by 2041, one in five residents in Peel will be over the age of 65. In addition to this, accelerated growth is expected among the oldest seniors in Peel, with the proportion of residents 85 years and older anticipated to grow from 1 per cent to 3.8 per cent between 2011 and 2041. The 85+ years cohort also represents the most frequent users of long term care and health care resources, with increasingly complex care needs.

The rapid rise and growth of the aging population creates increasing pressures across the seniors' services sector, including all levels of government. The COVID-19 pandemic has exacerbated these pressures, and had a devastating impact on Ontario's seniors, particularly people living in long term care homes. Appropriate staffing, funding and resources, would have better prepared long term care homes to manage outbreaks and saved lives. To ensure the safety of vulnerable seniors, their caregivers and long term care staff and that we don't return to the terrible scenario of more lives lost, the Province needs to take swift and significant action to support seniors along the continuum of care.

The Region of Peel commends the Commission for their leadership and efforts to influence much needed improvements across the long term care sector. There are aspects of strong alignment between the Commission's recent interim recommendations for the Province, and the Region of Peel's recommendations. In particular, there is alignment as it relates to needed investments in Infection Prevention and Control (IPAC) supports and a comprehensive human resources strategy. Beyond these immediate measures, it is imperative that the provincial government apply a system lens to their response to strengthen and ensure the sustainability of the sector. The Region of Peel submission details additional recommendations to address system gaps related to enhancing supports for seniors with complex care needs, and the role of innovative supports and care solutions across the continuum (including home care and community support services) to address pressures in the long term care sector.

Municipal Role in Long Term Care

The *Long-Term Care Homes Act, 2007* mandates municipalities to operate at least one long term care home. As a municipal long term care operator, the Region of Peel cares for people with complex care needs, fills gaps in service to address community need and, as a decided leader in the sector, is transforming care through an emotionally based person-centred approach. Currently, the Region owns and operates 703 long term care beds, across five municipal long term care homes.

Moreover, the Region's term of council priority to ensure seniors have access to the services they need, responds to health system demands for enhanced community and home care services that support seniors across a continuum of care. Through its five long term care homes, the Region of Peel also supports up to 1000 people (clients and caregivers) through its Adult Day Services (ADS) program, and one short stay respite bed is available for 20-30 individuals, depending on the number of weeks booked per visit. The aim of the ADS program, caregiver supports and system navigation supports are to provide a continuum of care and support transitions from community to long term care when required.

Regional Response to the COVID-19 Pandemic

The Region of Peel continues to prioritize safeguarding the people living and working in our long term care homes during the pandemic, while maintaining a focus on providing high quality, compassionate and person-centred care. Since early March, the Region has worked collaboratively with system partners (health and social services) to mitigate risks associated with the COVID-19 pandemic and implement innovative solutions to maintain family and social connections for people living in long term care homes in these challenging times. Regional homes reacted quickly to adopt several measures including:

- **Staffing:** The Region of Peel acted ahead of the emergency order, asking staff to choose to work at only one health care site beginning on April 3, 2020. Many part-time staff have been provided full-time hours to ensure enough staffing in the homes as a result of this practice, and over 150 staff have been hired or redeployed to address increased staffing needs related to the pandemic.
- **Supportive Care Units:** Regional ADS spaces remain closed due to increased restrictions in Peel Region. These spaces were transformed into Supportive Care Units to cohort and isolate COVID-19 positive residents. All staff working with COVID-19 positive residents are also provided with the option of receiving Regionally funded temporary housing to support safe, working self-isolation.
- **Infection Prevention and Control:** Staff has continuously been reviewing the new provincial directives and guidelines to ensure necessary information and training is disseminated to front-line staff at Regional long term care homes to support processes including the effective use and stewardship of personal protective equipment (PPE).
- **Communication:** While visitors have been restricted in Regional long term care homes, social connections for residents have been maintained. Virtual visits are facilitated through reconfigured iPads and window visits are enabled through phones. It has been critical to maintain connections with families. This has included ongoing communication through weekly virtual townhalls, as well as setting up a Long Term Care Family Inquiry Line to provide timely responses to emails and phone calls.

Despite our ability to act quickly to protect residents and staff, the pandemic has amplified long-standing systemic vulnerabilities in long term care homes, such as chronic under-resourcing, lack of supportive technology, increasing care needs of people living in long term care homes, insufficient infection prevention and control training and practices, and staffing needs. Further, the Region's ADS program has been challenged to provide ongoing virtual support to its clients and caregivers with a skeleton staff due to most staff being redeployed to long term care.

Recommendations

The Region of Peel is well positioned to respond to the Commission given our role as a municipal long term care home provider and focus on enhancing supports and services for seniors as a current Term of Council priority.

Recommendations for the Commission's consideration are organized into four themes below.

1. Investments in effective Infection Prevention and Control strategies, and streamlining pandemic response

Supporting Long Term Care homes to implement sustainable Infection Prevention and Control (IPAC) strategies

The lives of our most vulnerable were compromised as a result of lack of investment in IPAC, insufficient staffing and training in IPAC best practices, and a lack of preparedness for a pandemic of this scale with sufficient personal protective equipment (PPE). Systematic and rigorous IPAC measures are crucial to managing the COVID-19 pandemic and should be an immediate and non-negotiable priority for the provincial government.

The Region has led a coordinated response with other health sector partners to implement safety measures including strict screening protocols, infection prevention and control supports, distribution and management of PPE and temporary closure of ADS and community programs. In addition to core IPAC training that all long term care staff receive upon hiring, the Region of Peel has identified staff within each home as IPAC leads to provide support to the home. The Region of Peel has also implemented several measures to audit, measure and report on PPE.

While these IPAC measures have allowed the Region to manage the pandemic in our long term care homes to-date, they are challenging to sustain, and have also resulted in financial impacts for the Region and its five homes. Recent funding provided by the Province through the Long-Term Care Preparedness plan will help to address IPAC challenges in the home, but this short term funding is not sufficient to meet demand nor does it allow for a long term sustainable approach to infection prevention control across the sector.

The inability to acquire sufficient high-quality PPE from the provincial government in a timely manner was a significant challenge, especially early in the pandemic. The provincial requirement that long term care homes must have less than 7 days of stock to make a request creates uncertainty in the homes and means that homes were often left to procure PPE elsewhere, which also led to price gauging. Further, our

suppliers have also shared that in some cases, acute care customers such as hospitals were provided priority access before the long term care sector. The Provincial government needs to ensure homes are adequately supplied with PPE both through the course of the pandemic and as a proactive measure in the event of future pandemics moving forward.

Additionally, only one of the Region of Peel's five identified IPAC leads has formal IPAC certifications. **Having an IPAC specialist (i.e., a dedicated staff person with formal IPAC training) within each home would allow homes to more effectively train staff, including those being rapidly hired on to address surge capacity, as well as oversee and implement IPAC measures effectively.** Having a dedicated specialist within each home can also help to streamline advice and prevent confusion in the event of an outbreak.

Recommendations:

- The Ministries of Long-Term Care and Health should provide dedicated and continuing funding for IPAC resources in each home including funding for a dedicated IPAC specialist to oversee, reinforce, and support proper IPAC measures in all long term care homes. Ontario Health and Public Health Ontario should provide dedicated IPAC expertise for long term care consultation and onsite assessments as required.
- The provincial government should support homes to address challenges with inventory management and ensure that long term care homes are prioritized for appropriate PPE both throughout the course of the pandemic and in the event of future pandemics, including a robust supply to manage outbreaks.

Streamlined and Coordinated Communication and Direction

Inconsistent and varied communication channels throughout the course of the pandemic has also been difficult to manage, impacting the sector's ability to implement direction. Throughout the pandemic, long term care homes have received several directives, memos, guidance documents and protocols from key system stakeholders including the Ministry of Long-Term Care, Ontario Health, Public Health Ontario, Local Health Integration Networks, Hospitals, and Regulatory Colleges. While these communications are necessary, they were often not coordinated, changed rapidly and sometimes were in contradiction with each other. This caused a lack of clarity, potential for misinterpretation and gaps in implementation across the sector.

While the Region of Peel understands that the pandemic evolved quickly, and as a result direction and measures needed to adapt accordingly, timelines for directions were often a challenge. **Many directives from the Province came down with requirements for very quick implementation, despite the fact that long term care homes had been advocating for direction on an earlier timeline. This made it challenging for homes to make appropriate changes within requested timeframes.** Further, news releases that happened before information was shared with the sector created anxiety for people living in our long term care homes, families and staff, and created additional pressure on home operators.

Finally, as community support services, and specifically ADS programs are now aiming to reopen, redesign and redevelop, they are further challenged to meet growing need in the community with inadequate support from the provincial government to ensure uniformity across the sector. These programs play an important role in supporting vulnerable seniors to age in place in the community, including those that are awaiting long term care placement. Policies and resources that support community support services to reopen effectively and recognize the key role that home care and community support services play in strengthening overall health system capacity should also be prioritized.

Recommendations:

- The provincial government should work collaboratively with key health system partners to streamline and coordinate communications and directives to support improved clarity and consistent implementation across the sector.
- The provincial government should work with the Community Support Services sector to develop and provide appropriate policy direction and resources to reopen in person programs and plan for continued virtual supports for seniors and their caregivers.

2. Creating a stable and sustainable workforce strategy, including immediate investment in staffing to respond to COVID-19

Issues related to fair wages and increasing opportunities for staff recruitment, training and retention have been of particular importance during COVID-19 and will continue to be a priority as the needs and demands on long term care and seniors' services increase.

Provincial Emergency Orders require that healthcare professionals only work in one location, which led to a loss of staff across the Region of Peel's five long term care homes. This happened at a time when staffing needs in the home were increasing, to ensure appropriate infection prevention and control measures such as enhanced cleaning and cohorting were taken. As an initial pandemic response, and due to immediate staffing needs, the Region of Peel implemented several short-term staffing solutions:

- Long term care staff were cross trained in other skills such as cleaning, and 67 Regional staff were redeployed temporarily to the five long term care homes. However, as services reopen these staff are required back in their base positions.
- Regional staff who were previously in part time roles have been moved into full time positions. This creates additional costs for the Region, which are taken on by local property taxpayers without additional funding from the Province.
- Cohorting has proven to be an effective preventative measure and is fundamental for contact tracing. While it is only mandated during outbreaks, we have continued to cohort residents and staff on each floor, but this makes it challenging to find coverage from a small staffing pool and can create staff shortages.

Staff shortages will lead to a loss of engagement in meaningful interaction and activities with people living in our long term care homes which will result in worsening outcomes, such as increasing depression, antipsychotic medication use and falls, as well as decreased resident and family satisfaction. Additional activation staff in cohorted areas would support meaningful and person-centred care in small groups and individual engagement activities to ensure physical distancing and safety.

In addition to chronic understaffing issues, the COVID-19 pandemic has also highlighted long-standing issues related to precarious part time work, and lower wages across the sector, as well as large turn over in the sector related to these issues. For example, while the Region of Peel has been able to transition some part time employees into full time positions, many part time staff are unable to work enough hours since they are unable to pick up shifts at more than one home. The Region has been calling on the Province to develop a comprehensive human resources strategy to address these challenges and make positions within the long term care sector more competitive.

Recent provincial investments, including short term pay increases for Personal Support Workers in the long term care sector is a significant step in the right direction, demonstrating a provincial commitment to enhancing the workforce to meet demands in long term care. However, **additional and more sustainable funding is required to address staffing shortages and ensure appropriate staffing ratios to maintain quality care and ensure a sustainable and robust workforce across the seniors' care continuum over the longer term.**

Recommendations:

- The provincial government should work with system partners to develop and implement a long term, integrated health human resources strategy to meet the demands on the long term care workforce, focusing on education and training, recruitment, retention, and remuneration for all staff.
- The provincial government should make significant long-term investments to build adequate workforce capacity and training to address staffing ratios and the ability to provide care to patients with complex conditions, such as dementia.

3. Funding and support for person-centred care and specialized dementia care

Supporting the adoption of emotion-based care models

The ability to provide quality, emotion-based care to people living with dementia in long term care homes has been further challenged by the COVID-19 pandemic. Since 2010, there has been a 50 per cent increase in the proportion of people living in our long term care homes with dementia, with nearly 2 out of 3 people in the Region of Peel's LTC homes impacted by dementia.ⁱ The needs of these individuals are complex and it is essential that long term care homes have the necessary resources to provide appropriate person-centred care.

Since 2017, the Region of Peel has been working to implement the Butterfly model of care across our long term care homes. This model shifts the way in which care is provided, from being task-oriented to more emotion- and compassion-based care for the residents. Long term care homes that have implemented the model have seen significant improvements in resident quality of life, particularly in areas related to the early identification and management of responsive behaviours and resident and staff safety. Evaluations of these homes demonstrate that residents become less agitated and react more positively to their social interactions with staff and the dementia friendly home environment, thereby reducing the need for resource-intensive specialized units.

Through the COVID-19 pandemic, the Region has remained dedicated to providing emotionally-focused care through the Butterfly model. However, the foundation of the model is creating a home like environment for residents and this has been challenging during the pandemic due to staffing challenges, communal dining is replaced by tray service in individual rooms, residents are unable to freely engage with others, and families have to follow IPAC measures to ensure residents are kept safe. **Providing emotionally-driven dementia care in the face of the pandemic is critically important, to support the wellbeing of people living in our homes. It is also important that quality of care is not sacrificed, as long term care home resources are stretched to respond to the pandemic.**

The Region of Peel commends the Province for their recent commitment to implement a minimum of four hours of direct care per resident. **In order to implement the minimum four hours of care and enhance quality of care, additional resources from the Province are required. Further, the Province needs to prioritize the emotional wellbeing of people living in long term care homes to enable health service providers to improve quality of life outcomes for seniors.** Key steps should include:

- A philosophy and more fulsome definition of emotional wellbeing in the Ontario Regulations (under *The Long-Term Care Act, 2007*).
- A mandate requiring an assessment and plan of care for emotional wellbeing in the *Mandatory Resident Quality Inspection*.
- Collaboration with academic institutions and trusted advisors in developing meaningful measures and validated assessments for the emotional wellbeing of staff, people living in homes and their families
- Mandates to ensure that living environments are smaller (10 to 12 people), dementia friendly, and more 'home-like'
- Funding to train staff, volunteers and families on supporting emotional-wellbeing for residents
- An updated funding formula that accounts for specialized dementia care
- Working collaboratively with people living with dementia, their families and partners such as the Alzheimer's Society to eliminate dementia-based bias, develop joint solutions and identifying ongoing needs for person centred care within homes
- Exploring opportunities to better support people living with dementia who are transitioning from home care to long term care placement to enable continuity of care and smooth care transitions.

Recommendations:

- The Ministry of Long-Term Care should enhance supports across the long term care sector by:
 - Re-evaluating the funding model for residents with responsive behaviours to ensure that base funding better matches staffing resources to resident care needs;
 - Funding dedicated and consistent training to build staff competencies related to emotionally focused and person centred care to manage dementia and responsive behaviours;
 - Enhancing specialized support programs, including Behaviour Supports Ontario and specialized Nurse Practitioners to complement staffing levels in long term care homes; and,
 - Investing in supportive structural design to ensure that the physical design of current and future long term care homes supports all residents, including those with dementia
- The provincial government should implement and adequately resource a minimum daily standard of care of four hours per resident based on level of acuity.

Supporting the mental health of seniors and caregivers

The COVID-19 pandemic has created an environment where social isolation of vulnerable seniors is widespread, which can negatively impact mental wellbeing. Prior to the pandemic, the Region of Peel has been calling on the provincial government to make sure that the mental health needs of seniors are accounted for within a comprehensive provincial mental health strategy. Along with dementia care, supports that address the broader mental health needs of seniors remains a gap in available services. Data collected by AdvantAge Ontario demonstrates that an increasing proportion of people living in long term care homes (over 40 per cent) are experiencing a range of mental health illnesses including anxiety, schizophrenia and bipolar disorder.ⁱⁱ In addition, people with psychiatric illnesses often end up living in long term care, due to lack of appropriate supportive housing options in the community.

In the face of greater social isolation, and restrictive environments that don't allow for as much interaction with staff or families, supporting mental health and wellbeing is a key challenge. Further, social opportunities and mealtime interactions that can help to support mental wellbeing within the home have been impacted by the need for social distancing. The Region of Peel welcomed the decision by the Province to reintroduce essential caregivers into homes and has received great support from families while successfully supporting both emotional wellbeing and preventing infection. It is critical that connections to essential caregivers are maintained to support emotional wellbeing.

The Region of Peel is making every effort to minimize the impact of COVID-19 restrictions on social connections and the home like environment in our long term care homes. While visitors have been restricted, virtual visits are facilitated through reconfigured iPads and window visits are enabled through phones. However, **isolation and a lack of personal connection with staff, family and other people living in**

our homes can still have a significant toll on the mental health of people living in long term care homes and their families. The provincial government should ensure that seniors and their caregivers have the appropriate resources to address their mental health needs.

Recommendation:

- The Ministry of Health, the Ministry of Long-Term Care, and the Ministry for Seniors and Accessibility should ensure that the long term care sector has access to mental health specialists, and plan for and address the broad mental health needs of seniors and their caregivers.

4. Funding and supports to meet community needs and client complexity along the seniors' care continuum

Robust and equitable funding for home care and community support services

Inadequate funding for home care and community support services is a contributing factor to local health systems being able to respond to the COVID-19 pandemic and support the wellbeing of vulnerable seniors. Unmet demand for long term care has been accelerated by the COVID-19 pandemic and the need for homes to move away from three and four bed living environments. **Many clients who access community support services are awaiting long term care placement and have increasingly complex care needs, including advanced dementia.** It can be challenging for families to manage these care needs, and individuals may end up in hospital waiting for a long term care bed to come available, creating further pressure on the acute care system. According to a recent report by the Canadian Institute for Health Information, 1 in 9 residents could be supported in the community with appropriate supports (i.e. not requiring long term care). If home care and community support services are appropriately resourced, this can help to delay the need for long term care placement, support aging in place and allow for better use of finite resources in long term care.ⁱⁱⁱ

The Region's ADS program, which provides programming and respite care for vulnerable seniors in the Peel community has seen a 22 per cent increase to waitlists since the onset of the pandemic as services were put on hold in mid-March. Peel has many clients with high levels of complexity; however, funding from the Ministry (through the Local Health Integration Networks) is not proportional to the number of complex clients.

The ability to respond to the evolving nature of client needs in the context of the pandemic and increasing pressures on caregivers is impeded by the ongoing need for redeployed staff to address new pressures on long term care operations. This is in addition to the fact that our Region is chronically underfunded and current funding formulas do not accurately account or compensate for high-growth and high-demand communities, leading to increasing waitlists and unmet demand. This vicious cycle has been further exacerbated by the pandemic.

The two Local Health Integration Networks serving Peel (Central West and Mississauga Halton) currently receive per patient funding for home and community care services that is well below the provincial average. Using the funding allocations for *Community Home Care* and *Community Support Services*¹ along with the projected 2019 populations², per capita funding was calculated to be **\$160** and **\$197** for Central West and Mississauga Halton LHINs, respectively. By contrast, the per capita funding for the same services was **\$243** for Ontarians. **Equitable and consistent funding will allow municipalities like Peel to implement sustainable solutions to support seniors in the community both throughout the pandemic and in the longer term.** Funding and supports for these services, in addition to emergency funding to address COVID-19 pressures in long term care and hospital settings can help to address surge capacity and prevent more acute care settings from getting overwhelmed by COVID-19 response efforts.

Recommendation:

- To alleviate pressures on long term care and delay the need for long term care placement, the Ministry of Health and Ministry of Long-Term Care should address historical inequities in funding for home and community care services using a provincial resource allocation strategy that recognizes the needs of high-growth communities, increased capacity needs of the home and community sector, and supports caregivers.

Investment in the redevelopment of Long Term Care homes

Challenges associated with older A-rated homes like Peel Manor have been exacerbated by the pandemic and made surge capacity a significant challenge (i.e. supporting isolation and containment in current design). While long term care home redevelopment is an opportunity to meet the changing needs of people living in long term care homes, many older buildings have remained ineligible for funding. Recent announcements from the provincial government have indicated a newly redesigned funding model that is expected to support the building of additional, modern long term care homes providing seniors with quality care. However, Peel Manor has yet to qualify for any financial assistance from the Province despite its age and deteriorating condition. **Funding to support the redevelopment of Peel Manor and the Region's long term care homes is essential to ensure that the existing infrastructure can be enhanced to support necessary infection prevention measures, improve accessibility, and support the expansion of necessary health and social services for seniors and their caregivers.** Adequate and accessible funding will also allow long term care homes to build smaller living environments, which will support IPAC measures, while also creating a more home like environment that enables emotional care.

¹ Ontario Treasury Board Secretariat. (2020). *Public Accounts of Ontario: Ministry Statements and Schedules 2019-2020*. Government of Ontario. <https://files.ontario.ca/tbs-public-accounts-2019-20-ministry-statements-schedules-en-2020-09-23.pdf>

² LHIN Population Projections 2019, Ontario Ministry of Health and Long-Term Care, IntelliHEALTH Ontario, Date Extracted: November 23, 2020

The planned Seniors Health and Wellness Village at Peel Manor will not only transform the facility to meet modern design standards and provide exceptional dementia care, but also provide health and social service supports to Peel's growing and aging population using a campus of care model. Plans for the new facility include:

- a 177-bed long term care home with an enhanced facility design that improves infection prevention and control (IPAC);
- inclusion of 59 "Butterfly" dementia care beds, with 29 of them tentatively targeted as specialized behavioural support beds, to allow residents with complex health needs to be better served;
- an integrated care model including expanded Adult Day Services program, providing wrap around care for clients and caregivers;
- an 8-bed respite care unit;
- a seniors-focused integrated health care clinic to serve clients and their caregivers;
- accessible dental care; and
- other health and social services co-located on the site.

While the Province has modernized its long term care capital funding program and committed to redeveloping 15,000 long term care beds over the next 5 years, critical projects like the one at Peel Manor are still unable to access funding. **Funding for modernized and comprehensive build projects like the Seniors Health and Wellness Village should be considered as an immediate investment for the Province with far reaching impacts related to accessibility and integration of care for local seniors.**

Recommendation:

- The Ministry of Long-Term Care should provide funding for modernized and comprehensive build projects like the Seniors Health and Wellness Village at Peel Manor to enable improved structural design that accounts for IPAC needs and support our shared vision for delivering integrated supports and services for seniors that promote aging in place.

Conclusion

The Region of Peel welcomes recent investments by the provincial government to support the long term care sector through the course of the pandemic. In addition to these responsive measures, the Province needs to address the long-standing challenges related to staffing, underfunding and resources, that would have better prepared long term care homes to manage the COVID-19 pandemic. To ensure both the safety and wellbeing of vulnerable seniors, their caregivers and long term care staff, the Province needs to take swift and significant action to support seniors along the continuum of care.

ⁱ Regional Municipality of Peel. The Butterfly Model – Supporting Person-Centred Care for People Living with Dementia. (<https://peelregion.ca/council/agendas/2019/2019-01-10-revised-rc-agenda.pdf> - Item 12.2); Brampton, ON: 2019.

ⁱⁱ Continuing Care Reporting System, RAI-MDS Quarterly, January 1, 2010 to June 30, 2015 (as cited in Ontario Association of Non-Profit Homes and Services for Seniors 2016-2017 Pre-Budget Submission).

ⁱⁱⁱ Canadian Institute for Health Information. Seniors in Transition: Exploring Pathways Across the Care Continuum. Ottawa, ON: CIHI; 2017.