
August 22, 2022

Ontario's Plan to Stay Open – Implications for Residents in LTC

Dear LTC Residents and supportive partners,

Last Friday, August 19th, our Provincial Government announced a plan called [Ontario's Plan to Stay Open: Health System Stability and Recovery](#). The plan, consisting of five strategic goals, has significant impact and interface with the Long-Term Care (LTC) sector in Ontario. The five strategic goals of this plan are:

1. Preserving Hospital Capacity
2. Providing the Right Care in the Right Place
3. Further Reducing Surgical Waitlists
4. Easing Pressure on Emergency Departments
5. Further Expanding Ontario's Health Workforce

Ontario's Plan significantly affects the LTC sector, and therefore, has the potential to significantly impact your lived experience, as residents, living in your LTC homes. This bulletin is written with you, residents, in mind and with you, residents as recipients of this document. It is important to us at the Ontario Association of Residents' Councils (OARC) that we continue to share issues that matter to you, while also keeping you informed about how OARC works proactively with government and other stakeholder groups, to ensure that the resident perspective is always considered and prioritized.

Last Thursday, prior to the public announcement and subsequent release of Ontario's Plan to Stay Open, OARC was called to a meeting with over 30 stakeholders including LTC owners and operators, LTC and hospital management teams, LTC Associations, LTC Family Councils, and Ministry of Health and Ministry of LTC representatives from multiple levels across multiple branches. The meeting was designed to share the pillars of the plan that directly affect LTC and receive questions and comments. What I heard candidly and succinctly was government's promise that "safety is paramount." I also heard that while the pillars of the plan are formulated, there are many details that have yet to be ironed out, and in so doing, there will be several consultative discussions with government and stakeholders beginning the week of August 22, 2022. OARC will be part of those discussions. To that end, I released the following statement in response to the Plan:

Culture change requires that the status quo be challenged. Today's announcement does just that. I am encouraged that the announcement rests on the principles of safety and collaboration. OARC remains committed to reflecting the resident voice when consulting with government. I am encouraged that government will be hosting webinars as early as next week with Residents' Councils, creating a forum for solutions-generated conversations and understanding. I am also encouraged that government is seeking comprehensive consultation amongst a wide variety of LTC stakeholders including residents, to work out the very important details of each of the six initiatives announced today. Lastly, I am encouraged by government's intent to enable the building of community partnerships with the goal of creating LTC environments that are better equipped to serve residents.

Dee Tripp, Executive Director, OARC

The portions of the plan, that directly affect the LTC sector centre around the strategic goal of "Providing the Right Care at the Right Time." Recognizing that there are currently thousands of unused resident spaces, referred more commonly as 'beds' in the LTC sector, the Plan affects LTC by:

- Utilizing many of the designated "isolation" beds (those set aside for COVID-19 infection) for admission of new residents (currently who are in hospital, awaiting a LTC home availability)
- Introducing a legislative amendment that would enable ALC patients to be moved into a LTC home temporarily while they wait for their preferred LTC home. (ALC stands for Alternative Level of Care. When someone is deemed ALC, they do not require the intensity of hospitalization, and can live with their health concerns addressed outside of the hospital i.e., LTC home or elsewhere. Many ALC patients are in hospital now, waiting for accommodation in a LTC home).
- Reactivating Respite and Convalescent care LTC programs that serve to provide high-needs seniors/people living in the community with temporary LTC accommodation while their caregivers and family members regroup, and rest.
- Increasing financial investment in supports to existing LTC residents (Behavioural Supports Ontario (BSO) and a Local Priorities Fund)
- Enabling community partnerships to provide assistance in LTC homes (supplies, equipment, diagnostic services) to prevent potential hospitalization

As I pause to think of the LTC sector, I think of the courageous and committed residents, team members, families and supporters who are still navigating through precarious conditions. The COVID-19 restrictions and incredible team member (staff) shortages are still reflected by residents' reports that their sense of well-being has been adversely affected. Many residents continue to share their pandemic experiences with OARC, describing the impact of missed or cancelled showers, non-existent social and recreational

activities, Agency staff in abundance, exhausted team members, poor dining and dietary experiences, Residents' Council meetings being cancelled, etc. LTC as a sector is fragile.

It is important to realize that we cannot 'paint the sector with one wide and sweeping paintbrush.' While there are thousands of 'vacant beds' in the LTC sector, the sector, as a whole is, fragile and ill-equipped to assist hospitals and successfully manage an influx of new residents. The state of readiness varies from home to home, from region to region, from urban to rural setting. Whilst we talk about 'the sector', 'the system', 'the process', or 'the beds', **we must remember that we are in fact talking about PEOPLE;** whether they be patients, families, potential LTC residents, LTC team members, existing LTC residents, and many more! **We cannot forget that the wellness of people must be at the centre of the solution.** I was encouraged to hear a government decision-maker specifically say while explaining that safety is paramount, a safe bed means one that is staffed accordingly.

OARC is concerned about the implementation and implication of this Plan and is committed to contributing to critical consultations with government and stakeholders on issues including:

- Fall season (flu and cold season), combined with presence of COVID-19 causing outbreak in LTC homes. Homes may need the isolation beds they are now being asked to fill.
- Geographic proximity: how far is reasonable for residents to live away from their families?
- Consent: a pillar of our democracy, we cannot lose this.
- Definition of 'safe' transfer of a patient to become a resident in a LTC home: what are all aspects to consider in deciding if a LTC home has a safe place for a patient to move to, and who ultimately makes the decision if a home has a safe accommodation or not?
- Ongoing COVID-19 restrictions and definition of 'outbreak' severely hamper residents' quality of living and availability of team members to serve out their roles day to day.
- The admissions process for new residents takes a considerable amount of time, coordination and effort and the process can be emotionally taxing on everyone involved. Residents who enter LTC under the Respite or Convalescent Care programs require the same fulsome admission process, therefore homes that offer these programs must be equipped with sufficient team members to manage this process.

- The human resources status in LTC homes is precarious and can shift dramatically in hours if an outbreak is determined which has implications on increasing the number of residents in a home.
- Community partnerships are critical in leveraging much needed assistance for LTC homes including human resources, supplies, and equipment.

Just as culture change in LTC occurs one conversation at a time, the success of Ontario's Plan to Stay Open: Health System Stability and Recovery depends on having respectful, transparent, fully informed conversations one patient at a time, one resident at a time, one family at a time. Collaborative solutions-oriented consultations are necessary. While LTC owners and operators, health units, government ministries, hospital management teams, and other stakeholders have opinions on the readiness of LTC homes to be a significant part of the 'fix', LTC residents are living in those homes 24 hours a day, 7 days a week. OARC will continue to reflect the resident voice in these matters at every possible opportunity, looking to the future with optimism. Together we will settle in on the best course of action that will protect our Health Care System, optimize the spaces available in LTC homes for new residents and focus on safety, collaboration and people's wellbeing.

Respectfully yours,

Dee Tripp
Executive Director, OARC

To read the Ministry of LTC Deputy Minister's Memo regarding LTC initiatives in the Plan, click here:

https://www.ontarc.com/documents/bulletins/20220818DMMemo_ALC%20Changes_FIN_AL.pdf

To read details of Ontario's Plan to Stay Open: Health System Stability and Recovery click here:

<https://www.ontarc.com/documents/bulletins/20220818moh-plan-to-stay-open-en.pdf>