



Long Term Care Information Guide

A comprehensive look at LTC
in Ontario for you and your family

Greater Toronto Area



**SINCE 2013, FREE RETIREMENT
HOME SEARCH ASSISTANCE.**
OTTAWA'S ONLY NON-COMMISSION BASED
SENIORS HOUSING COUNSELLING TEAM.
**OFFERING FREE EDUCATION,
PLANNING & REFERRALS.**

Welcome!

Thank you for your interest in our Long Term Care Information Guide which we hope you'll find interesting, informative and educational, regardless of where you are on your LTC journey. In it, we will be sharing comprehensive detail covering a number of topics, all broken down in easy to understand language.

Our Contents:

1: What is Long Term Care?	2
2: What are the Types of Building?	3
3: Costs, Funding and Subsidies	4
4: Private, Municipal and Not For Profit	6
5: Care Provision and Staffing	7
6: Quality Improvement Plans and Accreditations	10
7: Reports and Waitlists	11
8: Categories of Client	12
9: Bill 7 and How Could It Affect Me?	13
10: Due Diligence	13
11: How to Apply	15
12: LTC Resources	16
Who is Solva?	18

1: What is Long Term Care?

Long Term Care is available to all Ontario residents, over the age of 18 in receipt of an OHIP card. There are eligibility criteria and you have to be assessed. You may qualify for LTC if you:

- require 24-hour nursing care and personal care
- require assistance with your activities of daily living
- require on-site supervision or monitoring to ensure your safety or well-being
- have care needs that cannot be met through publicly-funded community-based services (like Home and Community Care Support, formerly the LHIN)
- do not have the resources to privately pay for care services either at home or in a retirement community

Long Term Care is akin to a nursing home. There are 626 Long Term Care homes in Ontario that look after more than 78,000 residents.¹ Long Term Care can usually provide very high care supports including assisting residents who are fully immobile (utilizing mechanical lifts), those who need feeding support, those who have feeding tubes and traches; those who have advanced dementia, those who have difficulties with degenerative diseases like Parkinson's, Multiple Sclerosis and ALS.

In Ontario, Long Term Care homes are regulated and funded by the provincial government, and each home is granted a license to operate by the provincial government. Home and Community Care (formerly the LHIN) determines who is eligible to be admitted to long-term care, and they manage the wait lists. All LTC facilities are legally required to follow the mandates of the *Long-Term Care Homes Act, (2007)* which is to make sure residents receive safe, consistent and high quality care. There is also the updated *Fixing Long Term Care Home Act (2021)*.

¹ *Financial Accountability Office of Ontario in information provided to FAO by the Ministry of Long Term Care, 2019*

In our **Resources** section, there is a link to a comprehensive guide to the Act, which simplifies all the legal requirements and the governance and expectations of every single home.

2: What are the Types of Building?

Every LTC home has to be licensed or approved and the term of the license, and ultimately the fee schedule for the resident, is dependent on the classification of building. This is because there is a wide variation in buildings, structures, designs and where they are geographically located.

You may hear or see mention of a 'New Bed', as well as an A, B, C or D classification building. This is referring to the following:

A 'New Bed' building refers to a property built since 1998 and which conforms to current design standards.

An 'A' classification refers to a building built before 1998 which almost meets 1998 design standards.

A 'B' building is one that substantially exceeds 1972 design classification standards but does not meet A bed criteria.

A 'C' building meets 1972 design standards.

A 'D-Upgrade' does not meet the 1972 design standards, but has been upgraded through the 2002 'D bed program'

A 'D' building does not meet 1972 design standards. When their license expires, it will not be renewed unless improvements are made to meet current design standards.

A Long Term Care building, regardless of its age or design, is going to look and feel medical.

It is not as sterile or clinical as a hospital maybe, and it is not as hospitality focused as a retirement home, but it could be a different aesthetic to what you're used to. It's important, if you're able to, to visit homes you're considering putting on your list to understand more about their offering, their care and staffing and your overall feelings about the facility. During Covid, this was not possible and there will be other times in the future when homes will be closed to the public for outbreak reasons - flu and gastro cases, as well as Covid cases still happening. If there is no time to visit or you're unable to, you can still do some further research to make your informed decisions. Read further our sections on ***Quality Improvement Plans, Reports and Wait Lists and Due Diligence.***

3: Costs, Funding and Subsidies

Long Term Care homes receive funding from the Ministry of Long Term Care, and the amount they get depends on the number of beds they have and the types of service they provide. Also, the classification of each bed, as discussed earlier. As a resident you are also expected to pay towards your room and board, which also contributes towards greater costs like building maintenance, the mortgage on a property and utilities. Prices were not increased during Covid, but as of 1 October 2022, they have risen slightly. Please [click here](#) for a breakdown of all new and updated costs.

The provincial government provides funding for all the staff and supplies related to nursing and personal care in the home, as well as funds the residents' social and recreational programs and support services. Also raw food that is used to make meals. In addition, long term care homes receive additional funding to provide for things like falls prevention equipment. The government sets the rate for resident fees and provides subsidies for residents as needed. Below are figures from 2020 for Ontario's annual funding:

- \$5.76 billion overall for provincial LTC care and services
- \$201.61 per resident, per day (\$73,587 per year, per person) of which;
- Approximately \$102.34 per day is for nursing and personal care (such as assistance with personal hygiene, bathing, eating, and toileting)
- \$12.06 per day for specialized therapies, recreational programs, and support services
- \$9.54 per day for raw food (ingredients used to prepare meals)²

The above is what the government is contributing. You or your loved one as a resident, also have to pay. There are three types of rooms within LTC; a basic room, a semi-private room and a private room, and there is a different price accordingly. You can choose up to five homes to be waitlisted for, and up to the three room types. So, you can be on many different lists, each one moving at a different pace. Please see our section on ***How to Apply*** for more details about the process and the options. As well, the section on ***Category of Client***.

As of 1 October 2022, the following charges apply:

Basic Room: \$1938.46/m

A basic room is usually two people in the same room, sharing a washroom. However, in some of the newer homes, a basic room could be one person in the room, sharing a washroom with another resident. A basic room is more about the cost than the layout or number of people in the space.

Semi Private Room: \$2204.30/m (older bed class B-D) ***to \$2336.92/m*** (new bed or A class). A semi-private room is one person in a room sharing a washroom with another person in their own room.

² 2020 Ontario Budget, LTCH Level-of-Care Per Diem Funding Summary (April 1, 2020)

Private Room: \$2536.14/m (older bed class B-D) **to \$2769.14/m** (new bed or A class). A private room accommodated one person with their own washroom which is not shared.

Long Term Care is also not means tested, meaning that all Ontarians have the right to Long Term Care through eligibility criteria alone and you can't be denied a place because you have money (like a private pension, savings, investments, property etc). If you do not have any savings, then the government will look to further subsidize you, and only then will you be asked to prove income. If the average price right now for a basic room is \$1938/m and you do not have that much as your income, you can apply for a 'Rate Reduction'. With this, your income is evaluated and you will pay all that you can afford, LESS \$149 which is left for you per month for use at your discretion, usually for personal items and sundries (new clothing, preferred soaps, creams or shampoo for example). See section 9 on **How to Apply** for further details.

4: Private, Municipal and Not For Profit

Ownership of Long Term Care homes in the province fall into one of three categories. They are those that are privately owned by companies or individuals and are run as businesses 'For Profit'. Next, there are those that are owned by Municipalities, like the City of Toronto (which operates 10 LTC homes). Finally, there are those that are owned by various groups or organizations, religious entities that operate with a 'Not-for-Profit' status.

Because we know that all of the province's LTC homes receive the same amount of funding depending on their classification and bed status, and there is no way to ask for additional sums in charges or fees (like in retirement homes), the money the home gets from the government is usually 'it'. They have to make that money work and last and make sure they are not abusing anything financially; they have to be accountable. As such, all LTCs have to produce an annual audited report detailing their spending, and this is then reviewed and audited again by the government before being sent back to the home to be presented at both the Resident's and the Families' Councils.

Many long term care homes have a fundraising committee or in the cases of the Not for Profits, a charitable foundation, where they can collect extra funds from supporters to spend on additional programming, staffing; to buy new or better equipment, to landscape a garden...all things that cost money but which the government doesn't always provide for.

Reading financial reports of any home you're interested in should give you an idea of how well they manage their budgets and how they are spending their money. Generally though, as is fact by the pure definition, a For Profit business is run to make a profit. A Not for Profit, isn't. For Profit companies will have investors, shareholders, those needing dividends and will be looking to make a profit to cascade down. A Not for Profit will be looking to take every cent and invest in the home and its people and services. This is not to say at all that those LTCs operating For Profit are bad. Far from it - but it is a general rule of thumb that the Not for Profits have 'more' money to spend on and within their facilities because no penny is given elsewhere.

5: Care Provision and Staffing

Long Term Care is staffed by a compilation of professionals including Registered Nurses, Registered Practical Nurses, Personal Support Workers, Health Care Aides, Dietary personnel, Recreational aides and there is a Medical Director, who is a physician that works closely with the Director of Care, a licensed RN. There are also allied care professionals, like social workers and physiotherapists and occupational therapists. Many LTC homes, if not all, also rely on volunteers for support. These roles can be frequent visits to help with feeding residents or occasional help like at an event or fundraiser.

Care in Long Term Care, as we have mentioned, is for those who are often compromised and who can no longer safely remain at home, or within a retirement community. This may be because the retirement residence cannot support their level of care, or the person does not have the financial means to pay for it.

The following is a breakdown of residents in LTC in Ontario in 2019³ and the ailments or illnesses they were being supported with:

- 90% had some form of cognitive impairment
- 86% of residents needed extensive help with daily activities such as getting out of bed, eating, or toileting
- 80% had neurological diseases
- 76% had heart/circulation diseases
- 64% had a diagnosis of dementia
- 62% had musculoskeletal diseases such as arthritis and osteoporosis
- 61% were taking 10 or more prescription medications
- 40% needed monitoring for an acute medical condition
- 21% had experienced a stroke

The levels of care that can be provided in Long Term Care homes does vary unfortunately. ALL facilities do provide 24/7 care and services, with qualified nurses and their care teams. However, not all are equipped to support advanced dementia clients for instance. It is super important if you're looking to be on a list for a home and there is dementia, to make sure those homes you're putting on your list have the ability to help you.

If you're familiar with licensed retirement homes, you'll know that every resident has to have a written care plan made in conjunction with the Director of Care, which is to be minimally updated every six months, according to law. There is an initial assessment (ahead of a move in) and then a more detailed assessment to be completed within two weeks of that move.

In Long Term Care, a care plan is also needed for each resident. The plan of care must be based on an assessment of the resident and the resident's needs and preferences. The

³ Excerpted from [This is Long-Term Care 2019](#) by the Ontario Long Term Care Association

plan of care must cover all aspects of the resident's care, including medical, nursing, personal support, nutritional, dietary, recreational, social, restorative, religious and spiritual care.⁴ (See our **Resources** section for a link to the Guide, which is an excellent resource for further, easy to understand reading about the law governing LTC).

Also, within 24 hours of a move in to a LTC home, the following initial plan of care must be made and communicated with all direct care staff: The care plan must identify the resident and must include all of the following:

- Any risks the resident may pose to themselves, (including any risk of falling) and interventions to mitigate those risks;
- Any risks the resident may pose to others (including potential behavioural triggers) and safety measures to mitigate those risks;
- The type and level of assistance required relating to activities of daily living;
- Customary routines and comfort requirements;
- Drugs and treatments required;
- Known health conditions, including allergies and other conditions the Home should be aware of, including interventions;
- Skin condition, including interventions; and
- Diet orders, including food texture, fluid consistencies and food restrictions.

There is also a Resident's Bill of Rights in Long Term Care, just as in licensed retirement homes. This must be displayed in an easy to see area in the home so everyone can easily read it. The Bill of Rights must be adhered to and if a resident, staff member or family member feels that it is not, they have the ability to formally complain to the Ministry for LTC.

⁴ *Long Term Care Home Act, (2007) via health.gov.on.ca*

The Bill of Rights covers many areas, including respect, abuse, care, cleanliness of the home, privacy, participation in care decisions and consent to treatment. You can go to www.cleo.on.ca and type in Bill of Rights in the search bar to read much more detail.

6: Quality Improvement Plans and Accreditations

The Excellent Care for All Act (ECFAA), (2010), mandates that all healthcare organizations develop and make public an annual Quality Improvement Plan (QIP). These QIPs are the key way through which healthcare organizations across the province, including LTC homes, can improve the quality of care they deliver. Some LTC homes actually have links to their QIPs on their website. Two examples are Baycrest in Toronto and Bruyere in Ottawa.. QIPs are like school reports for Long Term Care homes. They show areas that they're doing well in and areas that need improvement. It is a very objective overview and it has the same ranking and set of guidelines for all, so you can actively compare apples to apples.

Something that is maybe a little more subjective is the Accreditation Level a home can receive by Accreditations Canada. This is for Canadian health care services and programs to take if they choose, to be rigorously assessed against global standards. Many, but not all Long Term Care homes are accredited, with some rated Exemplary. Accreditation in LTC is there to help LTC homes understand how they operate, how they support staff and residents, how they maintain a healthy work environment; ultimately to improve all outcomes and decrease risk. You can read more about Accreditations in LTC by visiting www.accreditation.ca/qmentum-ltc-accreditation

7: Reports and Waitlists

In 2018, the Ontario government pledged to increase the number of LTC beds in the province by 15,000 over the period to 2024. Between 2018-2019, there were almost 35,000 Ontarians waiting for a bed, with an average wait time of 152 days. You may feel

that you will never get a place because the lists are so long, but it's super important to remember that there are lists within lists in LTC and fortunately everyone is treated uniquely. You're not all in a huge melting pot and your number is pulled at random like in Bingo. There are considerations for each person's situation and needs and so it could be that your specific wait would not be as long as the person next to you. Please see the next section, 8) ***Categories of Client*** for more details.

Home and Community Care Support Services used to be known as the LHIN (the Local Health Integration Network). When it was, there used to be a direct web link that you could access to see all the wait times of LTC homes. Unfortunately, with the rebranding of this provincial government department, the overall wait times list is no longer available. Instead, if you would like to check on wait times, you will need to search for the name of each home and on its information page, it will show how many beds they have and what the average wait is. Remember again, that wait times are different for everyone.

Type in www.ontario.ca/page/long-term-care-ontario and then scroll down to add the name of the home you're considering. Details will come up for it.

Luckily, the link to looking at reports for LTC homes does still work! Here, you can add a name or a location and start the search from there. This is the most objective way of being able to see how LTC homes have fared in inspections and what the inspectors have been focusing on. There are spot inspections and there are also mandatory inspections if there are any allegations of abuse or neglect. www.publicreporting.ltchomes.net

8: Categories of Client

We have talked about every individual on the LTC lists being treated individually and having their own needs assessed. This is done through priority categories, and each person who applies for long-term care is assigned a priority category. This is why it is important not to take an arbitrary look at the waitlist times of a home and deduce that you

will be waiting up to four years for your spot. The priority category of each person on the waitlist also affects wait times, but the lists actually move quickly and fluidly and change daily. There is a huge component of staff and co-ordinators with Home and Community Care whose role it is to keep on top of it all, to ensure there are always places being filled. The breakdown of priority categories is as follows:

Category 1: People who need immediate admission to LTC and cannot have their needs met at home, or who are in hospital, when a hospital is in crisis. It can also refer to people already in a LTC home that is closing within 12 weeks.

Category 2: People who need to be reunified with their spouses/partners who are currently residing in a long-term care home, and who meet eligibility requirements (including care needs).

Category 3A: People waiting for a long term care home serving those of a particular religion, ethnic origin or culture. People who have high care needs, but can still be supported at home until a bed becomes available. People in hospitals waiting for long-term care. People already in a long-term care home, and who may have been placed in crisis, who are seeking a transfer to a home of their choice.

Category 3B: People waiting for a long-term care home serving those of a particular religion, ethnic origin or culture. People with care needs who are currently managing at home with supports, either through Home and Community Care and/or private pay services. Wait times for clients in this category are much longer.

Category 4A: People with care needs who are currently managing at home with their supports. Wait times for people in this category are much longer.

Category 4B: People with care needs who are currently managing at home with supports. Wait times for clients in this category are much longer.

Veteran - People who are veterans and are applying to be placed in LTC homes that contain Veteran Priority Access Beds.

9: Bill 7 and How Could It Affect Me?

You may have heard or read in the news about the implementation of Bill 7 by the Ontario government. Its purpose is to help free up acute care hospital beds by getting those who need LTC to move, but it's proving controversial as ultimately the government's care arm, Home and Community Care Support Services can move a patient to a LTC home within 100km, without the patient's consent. It's not as black and white as that, as HCCSS only invokes this 'power' if the patient refuses to accept a local short list or idle bed, BUT, it is still a possible reality for others and could result in a \$400/day fee paid to the hospital to remain there once you've been deemed medically stable and ready to discharge.

If you or a loved one end up in hospital and can no longer go home, or into a retirement community, talk to your assigned social worker about what options you do have and ask for a representative of Home and Community Care to explain further to you how Bill 7 might impact your stay or your decision making.

10: Due Diligence

It's important to always do your due diligence when identifying your preference(s) when it comes to making your LTC selections. The hard part is that it's very difficult to quantify one LTC over another. As noted above, LTC is operated differently from privately paid for retirement homes and assisted living. There is much more governance and regulation which is standardized across each facility. Paying someone to help you choose which LTC home to go to is something Solva would not recommend as each individual situation is different and you (as the family) must do your research. It is your subjectivity and feelings about a home that will guide your decisions. However these are considerations:

1 - You may consider ownership and who owns these properties. While they all roughly receive the same funding from the Ministry and have a set co-pay for accommodations, consider that some do additional fundraising and/or have large volunteer resources to

further support residents.

That said, we have seen 'not for profit' establishments not operate well to the extent that they have sought the advice from 'for profit' homes on how to implement efficient and effective practices to better manage their money and expenditure.

2 - Age of the building. Most people will be inclined to choose facilities based on age and condition of the property. Newer class A buildings will have greater accessibility and resident focused design. However, we would also suggest that you look deeper into the care and staffing. Sometimes an older property will offer the greatest levels of care, with the happiest of staff and residents.

You'll see this more while touring the properties. Take note too of the staffing levels and if they're stable; have the people been working there a long time?... Do they look happy to work there? Can you speak to a member of the families council and ask them more nitty gritty questions that you won't find on public reports or online? Ask them about their overall experience and what they like about the home and what could be improved. How the care is, what the management is like, what the process is like for feedback and transparency.

3 - Location of the building. First and foremost, having Mom or Dad close to you will mean that you can visit them more often. Your visits will be exceptionally important to their wellbeing. When selecting your preferred location, consider if it will allow you to visit more frequently, or whether you're prepared to travel that little bit further to find a place that you'd like them to be.

4 - Always be advocating. Unfortunately, even though LTC is heavily regulated it is important to be a voice and advocate for your loved ones no matter what eldercare accommodations you choose. Understand that every LTC's primary focus is on supporting your loved one with their activities of daily living, their nutrition and overall wellness. Companionship is something that can get overlooked especially as there is often not

enough time for 1-1 social interactions. Some families look to hire a companion to take Mom or Dad on a walk or to sit outside; to paint their nails or massage their hands, brush their hair, do puzzles, activities or reading with them. To be there visiting when they cannot be. Unfortunately, although the government is funding a large portion of the care/services the companionship aspects are not generally included.

5 - Alternative options. Some people turn to LTC because they're not sure about alternative options. There are some retirement homes that can support residents who have higher care needs, but these are all privately paid options. The offering and experience is different to LTC, but it is not always feasible. Our team at Solva Senior Living can help you navigate alternatives or transitional options while waiting for Long Term Care.

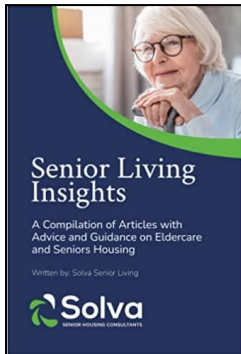
11: How to Apply

For Long Term Care: The number to speak to at HCCSS (Home and Community Care and support services) is 310-2222. You don't need a referral to call and there is also no area code needed if you call within Ontario. HCCSS will usually look to come and meet you in person to conduct an assessment, and they will do the majority of the application process for you. You will be asked to complete a 'choice form' where you can list up to five homes that you would like to be on the list for. And then you wait....

12: LTC Resources

Below are some great links to programs, services and organizations that could help you with your research and learning.

Solva has also produced a book, which is a collection of articles we've written to help understand seniors' housing, planning, options, industry jargon, regulations and much more. You can download or order a printed copy from Amazon.ca by typing in 'Senior Living Insights' into the search bar.



As well, we have a great introductory resource in our Elder Care booklet, which is a printed pamphlet sharing some great initial detail on 'Making a Plan' and things to consider as you look to age in place or make housing decisions. It is free, and we would be very happy to mail one to you. Call or email us at 647-847-4719 or

gtha@solvaseniorliving.ca for your copy.

LTC RESOURCES

Ontario.ca: The Ontario Government offers resources for citizens from choosing a long term care home, how to apply, what living at one is like and how to pay for it. They also have a database of the long term care homes that is searchable.

<https://www.ontario.ca/page/long-term-care-ontario>

Home and Community Care Support Services (formerly LHIN and CCAC): HCCSS is in charge of the waitlist for long term care. They decide who qualifies for the waitlist and what priority they have.

<https://healthcareathome.ca/long-term-care/>

Public Long Term Care Reports: The Ministry of Long Term Care inspects long term care homes in Ontario and posts findings in a public registry. Reports can be routine inspections, critical incident inspections, complaints inspection or follow up inspections.

<http://publicreporting.ltchomes.net/en-ca/default.aspx>

Ontario Long Term Care Association (OLTCA): Is a membership based organization for Long Term Care homes to be associated with. They promote safe, quality long term care to Ontario seniors and resources for Long Term Care home operators.

<https://www.oltca.com>

Ministry of Long Term Care: The Ministry oversees funding, policies and acts associated with Long Term Care. Their website provides information about complaints process, policies, and quality inspection program among other things.

<https://www.health.gov.on.ca/en/public/programs/ltc/default.aspx>

TheHealthLine.ca: provides resources and details about long term care homes for different HCCSS regions. Details like contact information, address and administrators can be found on their website.

<https://www.thehealthline.ca/>

Guide to the LTC Act (2007): This is a comprehensive guide giving an oversight to the law in place with the LTC Act 2007. It's an excellent resource for understanding legal requirements from the Resident's Bill of Rights to Program Requirements, Medical services, Complaints procedures and Families Councils.

https://health.gov.on.ca/en/public/programs/ltc/docs/ltcha_guide_phase1.pdf

Ontario Association of Residents' Councils: Funded by the province, through the Ministry of LTC, this body is there to support all Residents' Councils in LTC with education and resources.

<https://www.ontarc.com/residents-bill-of-rights.html>



**SINCE 2013, FREE RETIREMENT
HOME SEARCH ASSISTANCE.**
OTTAWA'S ONLY NON-COMMISSION BASED
SENIORS HOUSING COUNSELLING TEAM.
OFFERING FREE EDUCATION,
PLANNING & REFERRALS.

Who is Solva?

Solva Senior Living is an education and information based Seniors Housing company based in Ottawa and serving the communities of Eastern Ontario, Toronto and the GTHA. We are a small but mighty team that has extensive knowledge in retirement living, long term care and elder care. At Solva, we help seniors and their families with navigating retirement living and LTC and provide support, referrals and guidance for next steps. This could be planning ahead for a retirement home move or immediate, at need assistance to find a suitable home now.

The purpose of this guide is to provide you with as much detail on LTC as we can, for free. We do not believe you should ever have to pay for publicly accessible information, nor pay someone for their subjective opinion on which LTC home would be 'right' for you or your loved one. We hope the information within this booklet will help save you many hours of research and keep your dollars in your pocket. If you have any questions or would like to discuss anything further, please reach out to us and it would be our pleasure to set up an appointment. **647- 847- 4719** gtha@solvaseniorliving.ca