



## 9. Long-Term Care Services

### WHAT IS THE SERVICE?

Long-Term Care Services (LTC) provide quality resident-focused care within municipal long-term care homes and offer programs that meet the needs of clients within the community.

Long-term care homes are for individuals who are no longer able to live independently. Services are delivered within a residential setting by a team of qualified professionals. The goal is to maximize quality of life and safety for residents. Services include: 24-hour nursing and personal care; dietary and nutritional assessments; spiritual, recreational and social activities.

Municipalities are required by legislation to operate LTC homes; however operators can also include for-profit organizations and not-for-profit agencies. All LTC operators are provincially funded and governed by the same legislation and standards set by the Ministry of Health and Long-Term Care (MOHLTC).

Some municipalities provide programs (for example adult day care centres, homemakers and meals on wheels) in the community which provide support to clients and family caregivers enabling clients to remain independent in their own homes.

### WHAT ARE THE MAJOR SERVICE DELIVERY ISSUES?

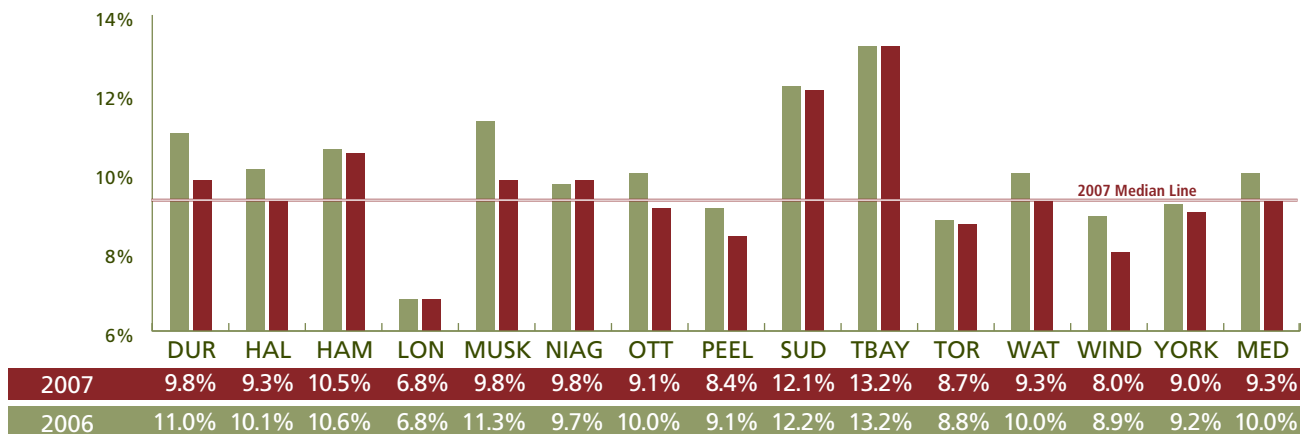
Issues facing the delivery of LTC include:

- ▶ Community expectations - municipalities are mandated by legislation to operate a LTC home to ensure communities have access to service. This responsibility has entrenched municipal LTC operators as integral parts of their communities and established high community expectations for accessible, responsive and quality LTC services
- ▶ Financial pressures - municipal homes often accept a higher percentage of lower income residents resulting in less revenue for the operations. Municipalities also experience higher wage arbitration settlements due to their perceived ability to pay
- ▶ Regulatory pressures - intensified scrutiny of LTC services has resulted in increased regulatory obligations
- ▶ Demographics – longer life expectancies resulting in older adults facing more complex medical conditions, coupled with an aging population has meant growing challenges for LTC operators

**WHAT ARE THE RESULTS?**

**How many citizens aged 75 and over have access to long-term care beds?**

**FIG. 9.1** Percentage of Population over 75 years of age that can be served from all Long-Term Care Beds in each Municipality?



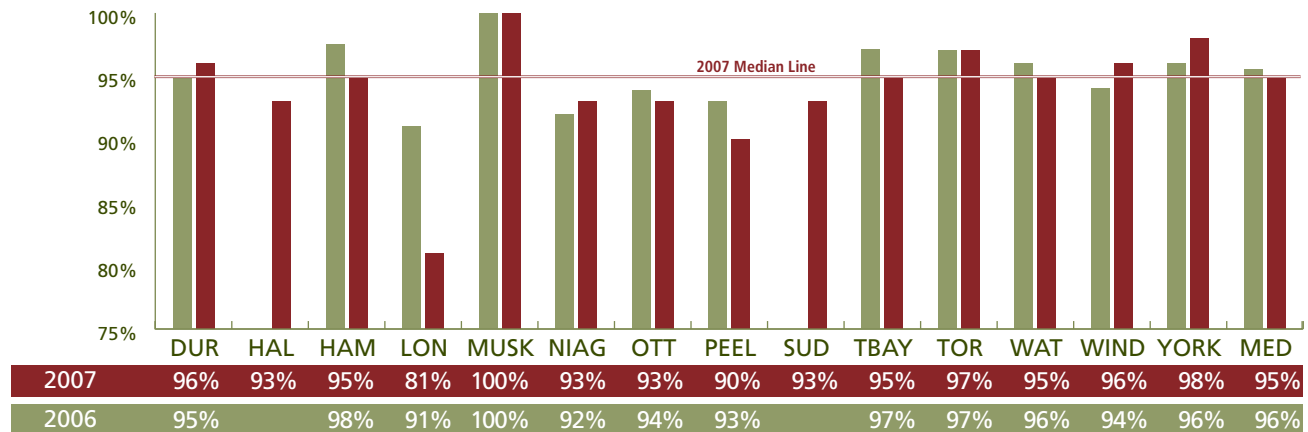
*Note: The minimum provincial standard for a given community is to provide long-term care beds to 10% of the population 75 years of age and over.*

Figure 9.1 shows the number of LTC beds provided by all service providers (for-profit, not-for-profit, and municipal) within a given community as a percentage of the population aged 75 and over. The declining trend observed in most communities, shows that the number of available beds has not kept pace with the growing/aging population.

When considering LTC capacity, it is important to recognize the role that LTC plays within the broader health care system. The introduction of Local Health Integration Networks (LHINs) in Ontario has created a strong emphasis on system integration and ensuring the appropriate mix of health services within communities. As a result, the need for LTC beds within a given municipality is influenced by the availability of other services, such as hospital beds, supportive housing units, adult day spaces, etc. These services are designed to work together to provide a continuum of health care for citizens.

### Are long-term care residents satisfied?

FIG. 9.2 Long-Term Care Resident Satisfaction in Municipal Homes



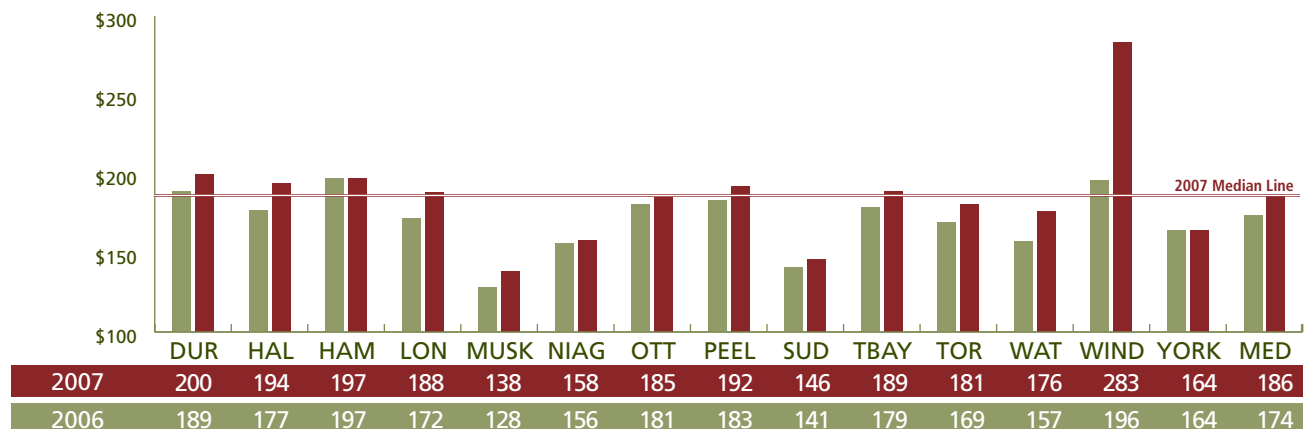
Note: Residents of municipal long-term care homes were not surveyed in 2006 in Halton and Greater Sudbury.

Figure 9.2 shows the percentage of LTC residents/family members who are satisfied with municipal LTC homes as a place to live. Surveys are typically conducted annually.

Unlike one time transactional services, LTC services are delivered to residents 24 hours a day, 7 days a week. The customer relationship is continuous with several individual customer service encounters occurring in a given day. Maintaining strong client satisfaction throughout each service delivery experience is challenging for LTC operators. Municipal LTC providers' comprehensive quality improvement and training programs have allowed them to successfully meet this challenge. Municipal LTC homes consistently experience high client satisfaction ratings. This accomplishment is significant given the complexity of the customer service experience in LTC.

### How much does it cost to provide one long-term care bed for a day?

FIG. 9.3 Long-Term Care Facility Cost (CMI Adjusted) per Long-Term Care Facility Bed Day.



Note: Based on calculations using the Ministry of Health and Long-Term Care Annual Report Data

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Figure 9.3 shows the cost of operating a municipal LTC bed for one day, which is increasing in most municipalities. To improve the comparability of the results, the costs have been adjusted by the Case Mix Index (CMI) which adjusts cost to reflect the differences in the level and intensity of care required by residents in each long-term care home.

While the MOHLTC sets minimum standards and operating requirements for LTC services, each municipality must address local service level requirements and priorities. As noted above, current provincial funding is insufficient to adequately meet the care needs of LTC residents and the associated operating costs of a '24/7' residential service. To ensure quality of care and resident safety, many municipalities voluntarily contribute additional resources to their LTC operations to maintain standards of care that exceed provincial standards.

In 2007, the City of Windsor relocated residents to a new home which required an overlap of staffing at two homes for cleaning, stocking, training and workflow purposes for an approximate six month period during the year. For this reason the 2007 operating cost per bed day increased significantly compared to prior years.

### WHAT SHOULD YOU CONSIDER WHEN REVIEWING THESE RESULTS?

Each municipality's results are influenced to varying degrees by a number of factors, including:

- ▶ Service level - support and type of programming provided as determined by Council
- ▶ Role of Local Health Integration Networks (LHINs) - establishing the mix of health services for a given community
- ▶ Demographics - age of the population and specific needs of the client
- ▶ Staffing levels - higher cost structure for wages and benefits
- ▶ Uncontrollable price variables - pay equity legislation and wage arbitration
- ▶ Other providers – private and not-for-profit participation in the long-term care business

For more information about the results, contact the Municipality's representative listed in Appendix F, page 94.