3
LONG TERM CARE SUPPORTIVE CARE PROPOSAL

The Health and Emergency Medical Services Committee recommends the adoption of the recommendations contained in the following report, January 20, 2005, from the Commissioner of Health Services:

1. RECOMMENDATIONS

It is recommended that:

1. Health and Emergency Medical Services Committee and Regional Council approve the submission of a proposal to the Ministry of Health and Long-Term Care (MOHLTC) for the designation and funding of supportive care beds at the Newmarket and Maple Health Centres.

2. Subject to approval of the proposal for designation of beds and provincial funding, staff be authorized to negotiate an agreement with the MOHLTC for the funding to operationalize the program and that the Commissioner of Health Services and Medical Officer of Health be authorized to execute any agreements with the MOHLTC.

3. Health and Emergency Medical Services Committee and Regional Council authorize staff to do all things necessary to effect the above.

2. PURPOSE

The purpose of this report is to obtain approval from Health and Emergency Medical Services Committee and Regional Council for the submission of a proposal to the MOHLTC for the creation and designation of supportive care beds at the Newmarket and Maple Health Centres.

3. BACKGROUND

In early 2005, the MOHLTC is expected to announce a program to further expand the utilization of short stay beds in designated long term care facilities. This new initiative is called the Supportive Care Program. The program is a form of sub-acute care that allows for the earlier discharge from hospital of individuals that require ongoing convalescent and rehabilitative care before being suitable for discharge to community or long term care facilities.

The Long Term Care and Seniors Branch (LTCSB) currently has six short-stay beds which provide respite and convalescent care for residents in the community and clients being discharged from hospitals. The LTCSB has historically delivered this service without receiving an enhanced level of funding. The Supportive Care Program will allow

the LTCSB to expand its capacity, intensify clinical support and provide an increased level of funding for provision of these services.

4. ANALYSIS AND OPTIONS

The funding provided under this initiative will permit the continued focus of the LTCSB's long term care facilities on difficult to serve or hard to place clients with higher care requirements, enhance the level of service provided and increase the subsidy from the MOHLTC for the delivery of these services.

4.1 Overview of Initiative

The Supportive Care Initiative is designed to relieve the pressure for acute care beds by permitting the early discharge of clients into supportive care beds in designated long term care facilities. Clients in this program will require intensive rehabilitation and therapy for a period of up to 90 days to maximize their functional abilities and level of independence.

4.2 Need for Supportive Care Beds

Based on the Health Services Restructuring Commission's recommended and proposed service levels for Sub Acute Care services (March 2000), a benchmark of 13 beds per 100,000 population is suggested. That benchmark suggests that a total of 104 sub acute care beds are required for York Region residents, a portion of which would be suitable for supportive care. The exact number of beds will be prescribed by the MOHLTC when it formally issues the request for proposal.

4.3 Proposal Overview

The LTCSB is proposing that up to 32 beds at the Newmarket Health Centre and up to 26 beds at the Maple Health Centre be converted and designated for the Supportive Care Program. The exact number will be determined when the MOHLTC formally releases the request for proposal.

Our extensive experience in delivering a wide range of high quality, customer-focused programs and services, our ability to integrate the supportive care beds into the LTCSB's existing continuum of care, and our focus on meeting the needs of the difficult to serve/hard to place clients with complex care requirements uniquely positions us to deliver supportive care services in York Region. Other benefits of the Supportive Care Program are that it will help to free up acute care beds in the community, facilitate movement of patients out of acute care beds, and deliver services to these clients in a more cost effective manner. Both the Maple and Newmarket Health Centres currently provide supportive care under the existing short-stay bed program.

The proposed conversion of existing long term care beds for supportive care will require minimal investment in building renovations or costs for additional furniture and equipment. The Newmarket and Maple Health Centres were designed and built to

accommodate heavy complex care clients and are the only long term care facilities in the Province of Ontario with built-in ceiling lifts in all resident bedrooms and washrooms.

All resident rooms have electric beds and built-in ceiling lifts to facilitate care of clients unable to weight bear, to assist with client transfer and to maximize client independence. The proposed units are also equipped with high-low therapeutic bathing systems, extra large dining rooms and common spaces that accommodate wheelchairs and other large seating equipment.

Adjacent to each of the units is designated space for physiotherapy and rehabilitation programming and equipment.

4.4 Relationship to Vision 2026

The conversion of these beds for supportive care will contribute to the attainment of the Vision 2026 goals of developing Quality Communities for a Diverse Population and Responding to the Needs of our Residents. The LTCSB offers a continuum of community-based, outreach, day and institutional services that support clients with a diverse range of care and support needs. According to the Canadian College of Health Services Accreditation 2004 Survey Report, "these initiatives and programs demonstrate a good knowledge of needs in the community" and an "in-depth understanding of the population it serves and of the programs that are available to meet the needs of the population."

5. FINANCIAL IMPLICATIONS

The MOHLTC will provide an additional per diem of approximately $60/bed/day for each of the designated supportive care beds. This would translate into an additional subsidy of $21,900/bed/year. If all 58 beds were approved for supportive care, this would result in an additional Ministry subsidy of $1,270,200 per year. This funding will cover the increased cost of providing supportive care services. Our current CMI (Case Mix Index) adjusted MOHLTC funding is $143.25/bed/day. This includes approximately $49 in client and preferred accommodation revenues and $94 in Ministry subsidy. In addition, the Region contributes $54/bed/day to the cost of the operation of the facility. The municipal subsidy for these beds would not change, however, the Region's contribution as a percentage of total cost would decrease due to the additional provincial subsidy. If the proposal is approved, the 2005 LTCSB Budget will be adjusted to reflect the actual increased level of funding based on the number of approved beds.

6. LOCAL MUNICIPAL IMPACT

The implementation of this program will improve specialized supportive care health services for citizens across York Region.

7. CONCLUSION

In early 2005, the MOHLTC is expected to announce its new Supportive Care program. The Health Services Department is looking to submit a proposal to be designated as a sponsor agency for this service and create supportive care beds at the Newmarket and Maple Health Centres. Participation in this program will be of direct and immediate benefit to the heavy complex care of clients served by York Region Health Services, will facilitate the early discharge from hospital of individuals that require ongoing rehabilitation and therapeutic support before discharge to a community setting. The delivery of this program will also help to free up beds in the acute care sector.

Delivery of this service is consistent with the LTCSB Business Plan objective of meeting the demand for the provision of programs and services for clients with heavy, complex physical, cognitive and/or behavioural care requirements. As well, this initiative is congruent with the LTCSB's approved Vision and Mission of being leaders in the development and implementation of long term care programs and services that promote health, well-being and independence.

The Senior Management Group has reviewed this report.