

3

LONG TERM CARE FUNDING RESOLUTION

The Health and Emergency Medical Services Committee recommends the adoption of the recommendations contained in the following report, October 19, from the Commissioner of Health Services:

1. RECOMMENDATIONS

It is recommended that:

1. Council receive this report for information and approve the proposed Long Term Care (LTC) Funding Resolution (*see Attachment 1*).
2. The Regional Chair be authorized to correspond with the Minister of Health and Long-Term Care and local MPPs, requesting that they support and adopt the recommendations in the attached resolution.

2. PURPOSE

The purpose of this report is to secure Council support for the proposed LTC Funding Resolution and authorize the Regional Chair to communicate Council's endorsement and support for the resolution to the Minister of Health and Long-Term Care and local MPPs.

3. BACKGROUND

While in opposition in 2003, the current Liberal government analysed LTC funding in the Province of Ontario and determined that an additional \$6,000 per resident per year would be a reasonable sum to provide adequate care to clients. In fact, LTC funding was effectively compared to funding provided for inmates in provincial jails and it was found that the province actually spent approximately \$59,247 per inmate per year, and only \$45,461 per LTC resident per year—a difference of \$13,786 per year. It is however important to note that The Regional Municipality of York contributes funding to the Region's LTC facilities, which results in LTC residents receiving more than inmates in provincial jails. Although the government has increased funding to LTC facilities since the election, funding for direct care and services to residents to date represents only \$1,916.25 per year.

3.1 Need for Funding Increase

The need for additional funding has been well documented through a number of mechanisms and studies. LTC residents often have multiple chronic illnesses and require specialized care and services. More than half suffer from dementia and other mental health illnesses, and over three-quarters require rehabilitation to maintain their level of

functioning. According to the Province's own classification data, the acuity levels in LTC facilities have risen by more than 20% since 1993 and many residents require complex medical/nursing care and treatments. Additionally, residents suffering from dementia require a high staff ratio to meet their very complex and challenging needs, which is not reflected in the funding facilities receive. The following list of documents outlines some other studies and reports which also support the need for the funding increases.

3.1.1 Level of Service Study

In 2001, a Level of Service Study was commissioned by the Ministry of Health and Long-Term Care (MOHLTC) and conducted by PriceWaterhouse Coopers. The study compared the amount and type of care received by residents in Ontario LTC settings with those in other Canadian, American and international jurisdictions. It was concluded that of the 11 jurisdictions studied, Ontario was ranked the lowest in the amount of nursing and therapy services provided to residents in LTC facilities. The study found that Ontario provides on average 2.04 hours of care per resident per day as compared to 2.44 hours of care per resident per day in the next lowest jurisdiction, Manitoba, with the highest being 4.4 hours of care per resident per day, in Maine, USA [PriceWaterhouse Coopers. (2001). *Report of a Study to Review Levels of Service and Responses to Need in a Sample of Ontario Long Term Care Facilities and Selected Comparators*].

3.1.2 Provincial Auditor's Report

The Provincial Auditor, in his 2002 Annual Report, included the Level of Service Study in his review of LTC. He stated that they had found no evidence to indicate that the MOHLTC had addressed the results and he outlined recommendations for ensuring that, "...the funding provided to LTC facilities is sufficient to provide the level of care required by residents and that the assessed needs of residents are being met."

3.1.3 Provincial Coroner's Report

The 2005 Casa Verde Coroner's Jury recommended that the MOHLTC immediately fund and set standards requiring all LTC facilities to increase staffing levels to, on average, no less than 0.59 Registered Nurse hours per resident per day and 3.06 hours per resident per day overall nursing and personal care for the average Ontario Case Mix Measure (a measure of the level of care and acuity of residents at a given facility). The current provincial average is approximately 2.4 hours per resident per day in overall nursing and personal care hours. The current average for the Regional Municipality of York is 2.7 hours per resident per day.

4. ANALYSIS AND OPTIONS

Currently, the province funds an average of approximately \$46,538 per resident per year (inclusive of client revenues) for all LTC residents in Ontario including those who reside in facilities owned and operated by The Regional Municipality of York. The Regional Municipality of York contributes approximately \$19,710 per resident per year to the

Region's LTC facilities. Other facilities (private and charitable) provide additional revenues either through resident fees or fundraising activities. With the additional requested provincial LTC funding of \$4,083.75, enhanced service levels to residents can be provided, and, depending on the requirements attached to the funding, a reduction to the Municipal subsidy may also be realized.

In the 2004–2005 budget the provincial government increased the funding for LTC residents by \$96.3 million or \$1,273 per resident per year. In the 2005–2006 provincial budget, a \$264 million funding increase was announced for long term care. This amount includes projects and activities such as; operating dollars for new facilities, co-payment adjustments, property tax, structural compliance premiums, pay equity, convalescent care etc. While these initiatives are worthy, they do not directly impact on the level of bedside care and services for residents. Of that amount, only \$47.6 million or \$642 per resident per year in new money is actually going towards direct care and services.

4.1 OANHSS Funding Advocacy

The provincial Long Term Care Association, the Ontario Association of Non-Profit Homes and Services for Seniors (OANHSS), is planning an intensive funding campaign to lobby the provincial government for additional funding in the next provincial budget. The Association believes that the 2006–2007 budget is the last chance the sector will have, before the government goes into pre-election mode, to push hard for funding that responds to the needs of LTC residents.

As part of this campaign, OANHSS is asking for support from member organizations by having their Boards (in the case of charitable organizations) or Committees of Management (in the case of municipal organizations) endorse and forward resolutions to the government to increase the per diem funding to residents of LTC facilities in the fiscal year 2006–2007 by \$4,083.75 per resident per year in order to achieve the goal of \$6,000 per resident per year.

Endorsement and approval by Regional Council of the attached LTC Funding Resolution will provide support to this campaign and help to place additional pressure on the government to meet their commitments in this regard.

4.2 Relationship to Vision 2026

The adoption of the resolution by Regional Council and by the MOHLTC contributes 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 additional funding would provide enhanced resources and service levels for residents in all LTC facilities and provide additional system capacity to care for clients.

5. FINANCIAL IMPLICATIONS

This year's new funding from the MOHLTC amounted to only a 1.5% increase which was not even sufficient to keep pace with inflationary pressures of approximately 3.0%. As a consequence, new funding for direct care and services to residents to date represents only \$1,916.25 per resident per year or less than a third of the government's \$6,000 promise.

Residents in the Region's LTC facilities receive approximately \$46,538 per resident per year from the Province plus approximately \$19,710 per resident per year in funding from the Region for a total of \$66,248 per resident. The additional \$6,000 in provincial LTC funding would result in residents of the Region's LTC facilities receiving \$72,248 per year. This additional funding would result in increased quality of care and potentially in a reduction to the municipal subsidy (see Table 1).

Table 1
The Regional Municipality of York's LTC Funding per Resident

Funding Provider	Funding Per LTC Resident Per Year
Current Funding:	
Provincial Funding	\$46,538
Municipal Subsidy	19,710
Total	\$66,248
Requested Funding:	
Additional Provincial Funding	6,000
Revised Total	\$72,248

6. LOCAL MUNICIPAL IMPACT

Implementation of the provincial LTC funding would provide significant enhancements to the level and quality of care provided to York Region citizens in LTC facilities.

7. CONCLUSION

Adoption of the recommendations by Regional Council will help to support our advocacy campaign and will place additional pressure on the government to meet the \$6,000 per resident per year target in additional funding. Implementation of the remainder of the funding will provide significant enhancements to the care and services required by residents of LTC facilities.

The Senior Management Group has reviewed this report.

(The attachment referred to in this clause is attached to this report.)