



Long-Term Care Homes Committee Report - for Information

Title: Long-Term Care Update Report - October, November and December 2024

From: Megan Garland, Director of Long-Term Care and Senior Services

Date: January 23, 2025

Report Number: LTC 2025-003

Report Purpose:

This report is for information.

Report Summary:

Receive Long-Term Care Update Report for October, November and December 2024.

Background/Analysis:

The Committee of Management is responsible for governance oversight and to act as the Committee of Management under the Fixing Long-Term Care Act, 2021 and regulations there under, and as may be delegated by Council. All members of the County Council are members of the Committee of Management.

Long-Term Care Services - Regulatory Compliance:

Both Bruce County long-term care homes, Brucelea Haven and Gateway Haven, remain in compliance with the FLTCHA and associated regulations. The homes conduct regular audits. Administrators, management teams and the Director of Long-Term Care and Senior Services continue to monitor the status of the homes.

Director's Update

Support for Seniors and Caregivers Act, 2024

On December 2, 2024, the Ontario government announced its intention to introduce new legislation aimed at enhancing long-term care (LTC) services for seniors. This initiative includes a significant funding commitment of \$114 million to support various measures such as emotion-based care models, improved community access to LTC, expanded adult day programs, increased respite services for caregivers of people with dementia, and other improvements to seniors' care.

Key Features of the Proposed Amendments to the Fixing Long Term Care Act:

- **Dementia Care and Services:** The legislation mandates that all LTC homes must have a structured dementia care program, similar to other existing care programs.
- **Cultural and Religious Sensitivity:** The amendments will strengthen requirements for LTC homes to respect the cultural, linguistic, religious, and spiritual needs of residents.
- **Medical Director Role Change:** The title of “Medical Director” will be changed to “Clinical Director,” and Nurse Practitioners will be authorized to fill this role alongside physicians.
- **Accountability for Abuse and Neglect:** A new offence will be introduced to hold individuals accountable for the abuse or neglect of LTC residents, enabling prosecution of those directly responsible for mistreatment.
- **Enhanced Inspections and Investigations:** Includes the authority to require third-party expert assessments and issue production orders and search warrants to investigate offences under the FLTCA. Additionally, a new general offence will be introduced for LTC home licensees failing to comply with any FLTCA provisions, and fine amounts for convictions will be harmonized across both for-profit and non-profit LTC homes.

interRAI LTCF Transition

The Ministry of Long-Term Care in Ontario has announced the transition from the RAI-MDS 2.0 to the interRAI LTCF (iLTCF) resident assessment instrument. This new mandatory standard for quarterly resident assessments, advised by the Canadian Institute for Health Information (CIHI), aligns Ontario with other provinces and territories. The transition aims to enhance the quality and efficiency of the assessment process, reduce administrative burdens on long-term care homes, and ultimately improve the quality of care for Ontario residents.

The homes will undergo this transition in January 2026 at which time our Case Mix Index will be frozen for a period of 2 years.

Administrator’s Update

Current Census (December 31st, 2024)

BLH: 144

GWH: 100

Occupancy (as of December 31st, 2024)

BLH: 99.28 %

GWH: 98.98 %

MINISTRY OF LONG-TERM CARE:

Brucelea Haven:

Brucelea Haven had a Ministry of Long-Term Care inspection during the month of October, wherein the inspector reviewed the compliance order related to skin and wound and critical incidents. During this inspection it was concluded that the home satisfied the requirements of the compliance order and there were no findings of non-compliance.

The report can be found at www.publicreporting.LTC.net

Gateway Haven:

Gateway Haven had a Ministry of Long-Term Care inspection on November 6-7, 12-13, 2024 wherein the inspector reviewed one critical incident, and the compliance orders related to Abuse and Neglect and reporting certain matters to the Director. During the inspection it was concluded that the home satisfied the requirements of the compliance order and there were no findings of non-compliance, and one written notification was provided for Infection Prevention and control, specific to auditing completion.

The report can be found at www.publicreporting.LTC.net

Staffing

Brucelea Haven six co-op students from three local high schools have completed placements in food services, maintenance, recreation and leisure, and healthcare. Both homes are currently recruiting for additional co-op students for semester 2.

Both homes continue to explore opportunities to work with local colleges to provide opportunities for additional student placement.

Personal Support worker Stipends and Incentive Programs

Since November 2023 the Ontario government has provide a “Personal Support Worker Stipends and Incentives Program” which provides the following;

- Stipend of \$ 5,400 for PSW staff who complete their clinical placement
- \$ 5,000 for PSW to commitment to 6 months of employment.
- \$ 10,000 for PSW to commitment to 12 months of employment.
- \$ 10,000 for Relocation incentive to Northern or Rural Homes.

Currently, the homes have had 14 PSW access the clinical placement program and Gateway Haven has had 9 new employees access the commitment and/or the relocation funds

Family and Residents Councils:

Family and Resident Councils are active in both homes (total of 4 councils). These councils provide an opportunity for both family and residents to have direct discussions with each other and our staff as they may wish. Attendance by LTC staff at these meetings is at the request of the Council. The Administrator is generally asked to attend all meetings of both groups and senior staff (Nursing, Environmental) also receive invitations to attend.

Both homes host Family and Friends Town Halls, which are well attended.

Resident and Family Satisfaction Surveys:

In 2024, the homes implemented interRAI Self-Reported Quality of Life Surveys which is a reliable, standardized and valid instrument for measuring resident and family satisfaction with Long Term Care homes. Using the interRAI Self-Reported Quality of Life Surveys, the homes can determine how residents experience day-to-day life and benchmark the results of the surveys with other homes across Ontario.

The survey results highlight the strengths and areas for improvement at both Brucelea Haven and Gateway Haven. Brucelea Haven had over 90% and Gateway Haven had 73 % of its responses surpassing the median, particularly excelling in mealtimes, residents' control over their time, recommendations from residents, family visitation, and staff respect.

Residents expressed high satisfaction with comments like “one of the better parts of my life” and “the best long-term care facility in Grey/Bruce.” Areas for improvement, shared by both homes, include enhancing social interactions, evening/weekend activities, fostering closer friendships, offering access to favorite foods, and improving staff responsiveness.

Both homes are actively addressing these areas for improvement by working closely with Resident and Family Councils to develop action plans, ensuring continuous improvement and a positive living environment. Further detail can be found in attached power point.

Monthly Newsletter for Family, Friends, Residents and Staff:

Attached is the October, November and December 2024 monthly newsletter for families, friends, residents, and staff from both homes. The newsletters are intended to foster a stronger sense of community and communication among our residents and their families.

Physical Plant and Equipment (planned and unplanned):

Brucelea Haven has several capital projects that were completed by the end of 2024 including replacement of the flooring in all the tub rooms as well as the 4th floor dining rooms, and the replacement of the grease trap in the kitchen.

Gateway Haven capital project that was completed by the end of 2024 included replacement of two Arjo tubs, replacement of the front building sign, installation of automatic door openers, and replacement of entrance keypads.

Financial/Staffing/Legal/IT Considerations:

No additional considerations currently.

Link to Strategic Goals and Objectives:

Community and Partnerships - Build a strong and inclusive community

Report Author:

Information was provided by Emily Kussmann, Administrator at BLH, and Emmy Seeley Administrator at GWH to form this report.

Departmental Approval:

Megan Garland
Director of Long-Term Care and Senior Services

Approved for submission:

Christine MacDonald
Chief Administrative Officer

Attachments:

2024 Resident and Family Survey Results BLH

2024 Resident and Family Survey Results GWH

October, November and December 2024 monthly newsletter for families, friends, residents, and staff from both homes.