

Standing Committee on Finance and Economic Affairs, Pre-budget Consultation:

CRFCN Speaking Notes January 12, 2022 10 am.

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Passcode: 259344

Grace: I'm Grace Welch co-chair of the Champlain Region Family Council Network, and chair of our advocacy committee. Jane Coyle and I will be co-presenting on behalf of the network and we would like to thank you for the opportunity to speak to you today about the issues and concerns facing long-term care in our region and across Ontario.

I have been an essential caregiver and volunteer in LTC since 2008 and have been involved in advocating for improvements in the sector since 2012. I was a member of the advisory panel for the 2020 Ministry Staffing Study.

Jane joined our executive in 2020. She was an essential care giver for her mother who was a resident in one of the regions LTC homes that was hit hard by COVID in the first wave. She is also the co-chair of the Almonte Country Haven Family Council.

Our network is a volunteer group that supports Family Councils in the 60 LTC homes in the Champlain region. We meet regularly with the region's family councils and other family council networks from across the province. If you would like to learn more about our work, I invite you to visit our website. The link is at the top and bottom of our written submission which I hope you have had a chance to look at.

As the voice for concerned families, we bring issues forward to all levels of governments, with the goal of improving the quality of life and quality of care for residents in LTC.

We have prepared submissions and presentations for this very committee, every year since 2015. Sadly, we are repeating many of the recommendations we made when we first appeared before you 7 years ago.

Advocates for quality care in long term care know that the ravages of the pandemic in LTC, can be traced back directly to long-standing systemic issues:

- chronic under-staffing
- poor compensation and working conditions for front-line staff
- the need for more beds and redevelopment of older homes
- ineffective inspection processes
- over documentation at the expense of care
- and a climate of for-profit

The pandemic continues to demonstrate, that as a society, we have failed the nearly 78,000 residents in LTC and their families. Long-term care has become a place to be feared. Very few people see long-term care as a positive option when they can no longer be safely supported at home and need 24 hour medically supervised care.

We are asking that Long-term care be fundamentally transformed from an institutional, task-oriented model to one that puts the needs and preferences of residents at the focus of care - that is "person or resident centred care". To quote the Ministry LTC Staffing study from 2020... "we need to make long-term care a better place to live, and a better place to work".

Turning it over to Jane

Jane: There have been significant investments in LTC since the pandemic began, but there remain many challenges.

Critical to the success of these investments is addressing **staffing** challenges.

Chronic understaffing is the number one concern we hear from families.

Staffing shortages have a direct negative impact on residents' quality of life and quality of care. Residents are suffering daily, and their rights infringed upon due to insufficient staffing levels.

Staff are overwhelmed, underpaid, undervalued, and are leaving the long-term care sector. Even before the pandemic, most homes worked short staffed. How can the system be expected to function safely on a day-to-day-basis with chronic understaffing let alone during a crisis?

Residents can't wait until 2024/25 to receive 4 hours of care, which means, recruitment and retention issues must be urgently addressed.

The government announced subsidies to attract new workers, but we are hearing disturbing stories about PSW students in private colleges

- not being treated fairly or
- insufficient staff to mentor for clinical placements; or
- students leaving prior to employment due to the working conditions
- or the work not being a good fit.

This investment in training PSWs and nurses **will be** wasted, unless, the government gives priority to developing a robust Human Health Resource Plan that focusses on recruiting the right people and includes plans for retention that improve working conditions and compensation, not only for today, but for the needs of homes to be constructed in the next 2-5 years.

The culture of long-term care must change to one that focusses on person-centred care; one that fosters supportive relationships between staff, residents, and their families. Person-centred care also empowers staff and offers job satisfaction. But this type of care is difficult to provide without adequate staffing levels.

Building design also has to change to support person-centred care. We call long-term care homes, but they are nothing like homes and LTC homes continue to be built as large hospital-like institutions. We recommend current building standards be revised to create smaller home-like environments for residents, that promote improved comfort, privacy, ventilation, temperature control, and infection control.

We welcome the improved inspection and enforcement process, but want to see it balanced with coaching, sharing information, and promoting best practices across homes to promote quality improvement initiatives and consistency of best practices.

As the regulations for the new LTC Act are revised, we expect to see a regulatory framework that emphasizes quality and care over unnecessary onerous reporting.

We're pleased the role of essential care givers has been recognized as essential to the emotional and physical well-being of residents. And as LTC is transformed, residents, families and caregivers need to be included in planning, decision-making and policy development. They are the eyes and ears on the ground

Grace:

The roadmap for long-term care reform and transformation has already been provided the many, many studies of LTC, most recently the COVID-19 Commission Report and the 2020 staffing studies. The Commission recommendations represent the opinions of residents, families, staff, and experts on how long-term care can be rebuilt on a foundation of compassion, dignity, and respect for both the residents and all those who provide their care.

The Premier has said LTC must be fixed. We can't wait any longer. We owe it to

- the nearly 4,000 frail seniors in LTC who lost their lives to COVID
- to the existing residents and their families,
- and the 100,000 staff who provide their care

to create long-term care system that would make the people of Ontario proud.

Thank you for your time and we look forward to your questions.