

Appendix A – Current Status to Second Interim Recommendations

Leadership and Accountability in Long-Term Care Homes	Response
<p>Require that there is a clear lead for the quality of care amongst the leadership team of the Executive Director, Director of Nursing and Personal Care and Medical Director in each LTC home. This individual must be on-site each day in a full-time position and be held accountable for resident quality of care and the Province provide the financial resources necessary to effectively support the lead for quality of care in carrying out their role and responsibilities.</p>	<p>The Ministry of Long-Term Care (the Ministry) agrees that accountable leadership is critical to achieve a high quality of resident care. We have initiated work in this area and will continue to make progress to improve the clarity of roles and accountabilities across leadership positions.</p> <p>Already, the Ministry has worked with stakeholders to develop a Guidance Document to provide clarity on the role and responsibilities of the Medical Director, and to support them in preparing and responding to future waves of COVID-19. The guidelines will also assist in making decisions on the transfer of residents to alternate settings where appropriate. We anticipate the Guidance Document will be released this month.</p> <p>We will also soon release a staffing plan that will outline our comprehensive approach to addressing a range of long-standing staffing issues in long-term care. This plan will include further work related to the role and accountabilities of the Medical Director and overall medical leadership, as well as other leadership roles. This builds on advice from the Staffing Study Advisory Group to clarify the role and accountabilities of the Medical Director position to bring greater consistency in medical leadership to the staff team. They also recommended that the Medical Director should work closely with the Director of Care, who provides critical day-to-day, on-site clinical care leadership in collaboration with the Assistant Director of Care, Nurse Practitioners and/or Nursing Supervisors with expertise in geriatric medicine.</p>

Performance Indicators	Response
<p>Include performance metrics, such as resident and family satisfaction, staff engagement, staffing levels and supply of PPE in the LTC home performance reports.</p>	<p>The Ministry agrees that performance metrics currently collected and made publicly available are limited in their ability to provide insight into both the overall quality of care and resident quality of life. The Ministry will review and evaluate options to collect new performance metrics as part of a broader initiative to develop a new quality framework and performance measures to guide oversight and quality improvement in long-term care homes. Broad, sustainable improvements in resident outcomes require creating a systemic culture of continuous quality improvement focused on resident outcomes.</p> <p>As noted in the letter, currently the Long-Term Care Performance Report (LPR) provides indicators over time for each LTC home and compares them to provincial benchmarks or provincial averages. These were developed in consultation with home operators and advocacy groups such as the Ontario Long Term Care Association, AdvantAge Ontario and Family Councils Ontario.</p> <p>Licensees are currently required under the Long-Term Care Home Act, 2007 to survey their residents and families at least once every year to measure their satisfaction with the home and the care, services, programs and goods provided at the home. This requirement will be assessed in the development of new performance metrics to measure and report on quality of care in LTCHs.</p>
<p>Publicly post the home performance reports in a single and centralized location so that the public and other homes can assess and compare homes to one another. This information should be updated more frequently and be presented with the inspection status of each home in a user-friendly manner so that the public can search and access a comprehensive picture of each home’s performance.</p>	<p>The Ministry is in the process of creating a more user-friendly version of the performance data currently collected. In addition, the Ministry will review and evaluate options to post the home performance reports publicly on a regular timetable.</p>

Inspections – The discontinuance of annual Resident Quality Inspections (RQIs)	Response
<p>Reintroduce annual Resident Quality Inspections for all LTC homes and require all reactive inspections occurring during the pandemic to include an IPAC Program review. This will ensure that all LTC homes receive an IPAC protocol review and assessment and that possible violations are identified whenever there is a MLTC inspection in the home during the pandemic.</p>	<p>As mentioned in your letter, based on the recommendations of the Auditor General’s 2015 report, the Ministry increased focus on risk-based inspections like complaints and critical incidents, while continuing resident quality inspections.</p> <p>The Ministry is committed to having an updated, proactive inspection approach to complement inspections that are initiated due to complaints or critical incidents. The Ministry will develop and implement plans for increased proactive inspections in 2021. Along with the proactive inspection work, the Ministry will also review the IPAC protocol during inspections.</p> <p>The Office of the Chief Medical Officer of Health, Public Health will support IPAC policies as needed.</p>
<p>Request appropriate funding in the upcoming 2021 provincial Budget to hire and train a new cadre of inspectors to implement the annual RQIs on each LTC home in the system. These resources are important to address the current need as well as the anticipated demand that will be created with the additional new beds that will be coming on stream in the next two to five years.</p>	<p>The Ministry has recently received approval to recruit additional long-term care inspectors and recruitment is now underway.</p> <p>As part of establishing a revised, proactive inspection regime, the Ministry will adjust resource needs as required on an ongoing basis.</p>

Inspections – Enforcement	Response
<p>Improve enforcement by prioritizing timely responses to non-compliance with IPAC and Plan of Care orders.</p>	<p>The Ministry is committed to the safety, quality of care and quality of life of residents. Our LTC Inspections Branch uses a risk-based inspection framework to ensure the highest risk issues are prioritized. The Ministry will continue to prioritize follow-up inspections based on risk to residents.</p> <p>Orders related to IPAC are currently considered high priority orders for timely follow-up and completion. Orders related to plan of care that have been assessed as immediate risk or are related to a situation that resulted in an outcome that has a seriously negative impact on one or more residents’ health, quality of life and/or safety are currently considered high priority orders for timely follow-up and completion.</p> <p>The Ministry will ensure processes are in place to monitor targets to ensure timelines are being met.</p>

Inspections – Coordination of Inspections	Response
<p>Eliminate the siloed approach to MLTSD, Public Health and MLTC inspections through cross training, the establishment of a centralized system of report sharing, and inspector teams to address specific cross-cutting issues. Information sharing on intersecting legislative requirements, such as IPAC, would ensure the consistent communication and application of standards and cross training would enable inspectors from all three organizations to be dispatched to support homes in emergency situations.</p>	<p>Inspectors for the Ministry, Public Health and the Ministry of Labour, Training and Skills Development (MLTSD) are responsible for ensuring that requirements under the Long-term Care Homes Act (MLTC), Health Protection and Promotion Act (PH) and the Occupational Health and Safety Act (MLTSD) respectively are followed. In some instances, cross-cutting issues would fall under all three pieces of legislation. Each has a defined role with a specific scope, which relates primarily to inspection (MLTC, PH and MLTSD), outbreak management and liaison.</p> <p>The Ministry agrees there is scope to improve the effectiveness of inspections through improved collaboration among inspectors. Work to date includes:</p> <ol style="list-style-type: none"> 1. Development, in collaboration with Regulatory Compliance Ontario, of a Regulatory Modernization Act resource document that provides information and key points of contact. This will assist the Ministry and MLTSD to appropriately share information from inspections. 2. Regular meetings with MLTSD and Public Health Ontario to identify additional opportunities to collaborate. 3. Established leads within the Ministry and MLTSD for sharing inspection information. Weekly reports of inspections completed by MLTSD are shared with the Ministry, highlighting any concerns. And, in turn, the Ministry shares concerns it has identified with the MLTSD lead. 4. Provision of education on the MLTSD inspection process to MLTC inspectors and vice versa. <p>In January 2021, a formal governance structure will be established to identify ongoing opportunities for further collaboration among the Ministry, MLTSD and public health units. This will include information-sharing on IPAC, formalizing systems for sharing reports (pursuant to the <i>Regulatory Modernization Act</i> and applicable privacy legislation) and addressing cross-cutting issues, and exploring ways to leverage the roles of each organization.</p>