

Note: The government has objected to the evidence redacted on the basis of privilege.

Long-Term Care Home Development Framework

Programs, Policy and Development Unit

Foundational Briefing

September 2020

Historical Context

- Historically, provincially regulated long-term care homes fell into three categories - nursing homes, municipal homes for the aged and charitable homes for the aged.
- Until 1991 nursing homes were the responsibility of the Ministry of Health and homes for the aged (municipal and charitable) were the responsibility of the Ministry of Children, Community and Social Services.
- Each program had different administrative systems and the approaches to development and implementation of design standards differed.
 - Structural standards for nursing homes were regulated under Regulation 832 of the 1972 *Nursing Homes Act* and those for homes for the aged were contained in design manuals and policy guidelines.
- The *Long-Term Care Home Statute Law Amendment Act, 1993* amended the different governing legislations for long-term care homes and all long-term care homes were brought under the Ministry of Health. The legislation did not address building design features. Different structural standards continued to be in place.
- In 1998, long-term care homes were provided a structural classification depending on the degree to which they met the standards in Regulation 832.

Design Standards

- Design standards for long-term care homes were first introduced through the Nursing Home Act, 1972.
- The Ministry of Long-Term Care (the “ministry”) released the first set of policy-based minimum design standards in the *Long-Term Care Facility Design Manual, 1999* (effective April 1, 1998), which were contractually applicable to homes developed or redeveloped with ministry funding.
 - The standards introduced the concept of the Resident Home Area (RHA), with a maximum of 32 residents per RHA to create a more home-like design. It also included a maximum of 2 residents per room.
- The *1999 Design Manual* and the *Long-Term Care “D” Facility Retrofit Design Manual, 2002* were updated and combined into one document in 2009 when the ministry released the *Long-Term Care Home Design Manual, 2009*.
- The release of the *Long-Term Care Home Design Manual, 2015* updated the *Long-Term Care Home Design Manual, 2009*, and is the most recent update.

Long-term care beds structurally classified “B”, “C” and “Upgraded D” (see Appendix A) were built to older design standards that permitted 3 and 4 bed resident bedrooms and did not always require an ensuite washroom

2015 Long-Term Care Design Standards

- The *Long-Term Care Home Design Manual, 2015*, outlines the ministry's current design standards for long-term care homes being developed or redeveloped in Ontario.
 - It includes the current, minimum long-term care home design standards for new and redeveloped homes, in addition to standards in Ontario Regulation 79/10 under the Long-Term Care Homes Act, 2007 (sections.9-22).
- The *Long-Term Care Home Design Manual, 2015* includes design objectives, design standards for long-term care homes' resident, staff and public spaces. There are also best practices, which are suggestions for optional design features that further promote quality design and care outcomes.
- The self-contained RHAs, and new standards for resident personal space, help long-term care home operators to provide the increasingly complex care required by today's long-term care home residents and to better contain and prevent the transmission of infection diseases.



Challenges with Older Homes

- When long-term care beds were first classified, the oldest beds structurally classified “D” did not meet the structural standards under the 1972 Nursing Home Regulation.
- Today, the physical design of older long-term care homes can create challenges for providing quality of care for residents, including:
 - Lack of privacy in 3 and 4-bed resident bedrooms
 - Institutional rather than home-like design
 - Room sizes and door widths inhibit use of equipment and movement
 - Washrooms are not fully accessible
 - Small or centralized dining rooms making movement and feeding difficult
 - Cramped lounge and activity space
 - Beds may be far from windows
 - No air conditioning
- Redevelopment programs have been established by the ministry to bring existing long-term care capacity up to an identified standard and enable the provision of quality care to residents in a safe and secure environment.

Redevelopment Programs – Over the Years

Redevelopment Program	Description	Year Announced
“Redeveloped D Beds” Program	Redevelop approximately 16,000 beds with a “D” structural classification, which did not meet 1972 Nursing Home Act Regulation	1998
Long-Term Care Home Renewal Strategy	Redevelop over 35,000 older long-term care beds structurally classified as “B”, “C” or “Upgraded D” beds	2007
Enhanced Long-Term Care Home Renewal Strategy	Increased incentives to enable the redevelopment of the remaining 30,000 older beds by 2025	2014
Long-Term Care Home Development Program	Modernized program to enable the redevelopment of older long-term care beds structurally classified as “B”, “C” or “Upgraded D”	2018

The Need for Additional Capacity

- As the needs of long-term care residents grow increasingly diverse and complex, Ontario's changing demographics have also increased demand for health services, including long-term and community care.
- As existing long-term care capacity was being redeveloped, some homes required additional capacity to support a financially viable home over the longer-term. In addition, some communities were experiencing greater demand for long-term care capacity.
- In response, the ministry has announced various initiatives to add new capacity in areas of need that also meet ministry objectives and policy priorities.



Development Programs - Over the Years

New Capacity Program	Description	Year Announced
20,000 New Beds Program	Multi-year strategy to develop approximately 20,000 new beds	1998
Emergency Department Action Plan Program	Multi-year strategy to in communities experiencing long-term and community care pressures as an expansion of community care services, added 1,750 new and replaced 662 beds	2006
LHIN-Requested Beds	A total of 296 new and redeveloped LHIN-requested beds funded by the LHINs in conjunction with Long-Term Care Home Renewal Strategy projects	2009
Aging with Confidence: Ontario's Action Plan for Seniors	Develop 5,000 new long-term care beds to be in operation by 2022	2017
Long-Term Care Home Development Program	Modernized program to develop new long-term care beds	2018

The Long-Term Care Home Development Program

Highlights of the Development Program

- All regular licensed long-term care beds have a structural classification that indicates the design standard to which the bed was built (see Appendix A).
- The oldest beds in the province, structurally classified “Upgraded D”, were upgraded through the D Bed program but do not meet the 1972 design standards (see Appendix B).
- The ministry released the 2019 Application for Long-Term Care Home Development in October 2019 under the Long-Term Care Home Development Program focussed on:
 - **Developing new long-term care beds** means the construction of net new long-term care spaces to current design standards in a new or existing home in Ontario. These net new beds will increase access to long-term care, ease hospital capacity pressures and help end hallway health care.
 - **Redeveloping long-term care beds** means either renovating an existing long-term care home or replacing an older existing home with a new home that meets current design standards. Redevelopment helps to ensure that the long-term care sector is able to provide more appropriate care to those with complex health conditions in safe and secure environments.
- In response to COVID-19 pandemic, the ministry extended the application deadline to September 25, 2020.

Development Objectives

The ministry is working to create a 21st century long-term care system that is resident-centered and builds capacity and access for residents and caregivers to ensure people get the care they need, when they need it

Integration & Partnership



Encourage partnerships with health, social, cultural, and linguistic organizations, including Indigenous peoples and Francophones, as well as educational institutions to improve system flow and ensure resident needs are met.

Innovation



Leverage cutting-edge health technologies, digital health solutions, as well as innovative design applications and solutions to provide better, more efficient resident-centered care.

Licensee Diversification



Enable leadership in long-term care from new non-profit, municipal and for-profit long-term care providers, including cultural and linguistic organizations, Indigenous peoples, and Francophones.

Development Policy Priorities

More Flexible Care Structures



Address the needs of residents who are medically complex, cognitively impaired, physically dependent, and whose care needs cannot be met within existing long-term care programs.

Expanded Care Models



Respond to specialized care needs through the provision of specialized services, linguistic or culturally-specific care, and the use of technology-supported care, such as novel dementia programming and culturally specific programming, and services.

Increased Care Capacity



Expand access to basic beds in long-term care homes and facilitate patient and resident flow across care settings.

Types of Development Projects

1

Creating New Beds

Adding new long-term care beds

2

Hybrid Builds

Adding new and redeveloping existing long-term care beds

3

Redeveloping Beds

Redeveloping existing long-term care beds

- The timeline for each project is dependent on a number of factors such as the size and scope of the project, and the completion of applicable requirements.
- Generally, once the long-term care home applicant has a site and a viable project plan, long-term care beds take an average of 36 months to develop.
- After a long-term care home development project is complete, a new licence (for up to 30 years) or approval (no expiry) must be issued upon meeting requirements in the *Long-Term Care Homes Act, 2007*, and other conditions stipulated by the ministry.

Development Framework – At A Glance

Terms and conditions must be met before funding is provided

An on-site review is required before capital occupancy approval will be issued

The *Long-Term Care Home Capital Development Funding Policy, 2020* stipulates how the ministry may support the development and redevelopment of a long-term care home.*



The *Long-Term Care Home Design Manual, 2015* stipulates design standards for long-term care homes developed or redeveloped in Ontario. Additional standards are in Regulation 79/10 under the *Long-Term Care Homes Act, 2007*.



The *Long-Term Care Homes Act, 2007* and Regulation 79/10 stipulate requirements for operating a long-term care home. During construction an Occupancy Plan, showing the home will provide a safe and secure home for its residents, must be ministry-approved.



Development Approval Pathway

Planning Stage

Application Submitted

Project Approved

Development Agreement Executed

Building Stage

Design Approved

Start of Construction Approved

Occupancy Plans Approved

Open Stage

Occupancy Approved

Occupancy

Ministry approval at key milestones in the development process is required

- Application submitted under an open call for applications.
- Applications are evaluated and selected projects are approved for funding.
- Development Agreement is signed.



- Design plans, tender and financial documents and an occupancy plan are submitted to the ministry for review and approval.
- Regular construction reports are submitted to the ministry.



- A long-term care home is approved for occupancy.
- The first resident moves into the home once an approval, or license with a term of up to 30 years, under the *Long-Term Care Homes Act, 2007* is issued.



Long-Term Care Home Development Modernization

Current Status

- As of August 2020, there are 129 active long-term care home development projects, representing the development of 8,937 new long-term care beds and redevelopment of 11,727 existing beds.
 - Of the 129 active projects, 32 projects are in the Building Stage, representing the development of more than 1,600 new long-term care beds and the redevelopment of close to 3,000 existing long-term care beds. Of these projects, 10 projects, representing the development of more than 750 new long-term care beds and redevelopment of close to 7,000 existing beds, have been approved to start construction.
 - Since June 2018, 5 long-term care home development projects, representing the development of 12 new long-term care beds and redevelopment of almost 200 existing long-term care beds, have been completed.
- Despite ongoing initiatives to enhance long-term care home development, ongoing barriers continue to create challenges that are preventing the development and redevelopment of long-term care homes.

Context for Modernization

- Stakeholders have expressed concern with the current process citing internal and external barriers to development, including:
 - Increasing costs of upfront expenses including development charges, land and construction.
 - Difficulty receiving the needed financing from financial institutions.
 - Unique challenges in urban or rural areas occur across the province.
 - Length of time for approvals, including municipal approvals.
- Through program, policy and process improvements, the ministry has identified and implemented strategies that better align the Long-Term Care Home Development Program with provincial priorities that focus on generating long-term care capacity, eliminating hallway health care and improving the residents experience.
- The ministry's modernization strategy is moving away from a one-size fits all approach and will enable the government to address the different barriers and needs across the province.

Modernizing the Development Program

Modernizing Long-Term Care Development in Ontario: Three Key Approaches

Modernization of the Long-Term Care Development program is necessary to meet the government's commitment of creating 30,000 new and redeveloped long-term care beds in 10 years, ending hallway healthcare, and creating a responsive and flexible long-term care system.

The Ministry of Long-Term Care (MLTC) is working with Infrastructure Ontario (IO) to develop three key approaches poised to address historical barriers faced by operators and expedite development/redevelopment of LTC beds.

1. Leveraging Surplus Provincial Lands for LTC Development

Government committed to evaluate Provincial surplus properties prior to sale, for potential repurposing to achieve LTC outcomes. [REDACTED] sites have been identified for expedited disposition for LTC outcomes:

1. Oakville Land Assembly—Parcel 1 (Oakville)
 2. 7231 Martin Grove (Vaughan)
 3. 100 Bloomington Road (Aurora)
- [REDACTED]

2. Implementing the LTC Development Enhanced Funding Model

Recognizing the unique differences in LTC development across the province, the ministry and IO have designed an Enhanced Funding Model which includes:

- Establishing specific market segments to enable funding that addresses unique barriers across the province and
- Introducing up-front capital funding and an increase to the Construction Funding Subsidy specific to each market segment

3. The Accelerated Build Pilot Project

Recognizing the development barriers in large urban centres, the pilot would build up to 1,280 new long-term care beds at four new LTC homes by 2021 in Mississauga, Toronto and Ajax to meet the following objectives:

- Address barriers associated with costs of acquiring and availability of land in large urban centres;
- Accelerate construction in areas of high need

Government Commitments:

- Creating 30,000 new and redeveloped beds to modern design standards in 10 years
- Ending hospital overcrowding, including reducing Alternate Level of Care (ALC) pressures to end hallway healthcare; and
- Creating a 21st century long-term care system that is resident centred, builds capacity, and is responsive and flexible to residents and sector needs.

Development Barriers:

- Barriers associated with LTC development have arisen to varying degrees across the province, and can include:
 - Land availability;
 - Increasing costs of land, goods and services; and
 - Operational inefficiencies
- These barriers can be either unique to urban or rural areas or can occur across the

Modernized Funding Policy

- The ministry has worked with Infrastructure Ontario to create a Long-Term Care Home Development Modernization Strategy to ensure that beds are developed and redeveloped where they are needed most to meet the needs of Ontarians.
- Recognizing the common and unique challenges with long-term care home development across the province, the ministry and Infrastructure Ontario have designed an Modernized Funding Policy, which includes:
 - Differentiating between types of geographic locations (“market segments”) to enable funding approaches that support bed development and redevelopment in large urban, urban, mid-sized, and rural markets; and
 - A capital development grant for upfront costs including development charges, and an increase to the existing Construction Funding Subsidy that is specific to each type of geographic location.
- The Modernized Funding Policy addresses concerns raised by stakeholders about the structure and sufficiency of funding and is supported by market research conducted in January 2020 and the stakeholder consultations.

Leveraging Provincial Surplus Lands

- In 2018, the Province announced a commitment to create a more efficient process for selling surplus government properties while also requiring sites be evaluated prior to sale to determine suitability to achieve Government's social objectives of increasing affordable housing and long-term care spaces.
- The ministry is working closely with IO, Ministry of Government and Consumer Services (MGCS) and Ministry of Municipal Affairs and Housing (MMAH) to develop and implement the Government's objectives on the surplus sites.
- As of June 25, 2020, the ministry received TB approval to proceed with further due diligence, prepare for market, and assess bids for [REDACTED] surplus sites with the requirement to develop long-term care outcomes on the sites.
- The [REDACTED] sites are located in the Greater Toronto and [REDACTED] Area, and identified based alignment with areas of identified need and projected future growth in demand for long-term care and where value could be leveraged to achieve the Government's objectives.
- The ministry and IO expect to market the [REDACTED] sites in phases, based on readiness, beginning in October 2020.

Accelerated Build Pilot Program

- Large urban centres are areas of high service need but have been difficult areas to build in due to factors such as the cost of land.
 - The Accelerated Build Pilot Program leverages hospital-owned lands addressing the land barriers associated with development.
- The pilot was launched in July 2020 to test the viability of implementing accelerated construction and procurement schedules for four projects in three large urban centres:
 - Two homes, with up to 320 new beds each, to be developed in Mississauga.
 - One home, with up to 320 new beds, to be developed in Toronto.
 - One home, with up to 320 new long-term care beds, to be developed in Ajax.
- The expedited delivery would rely on modular construction techniques and procurement based on qualifications rather than price to enable the homes to be build in 14 months.
- The current design standards would be applied with funding available to encourage innovation in design that enhance infection prevention control, respond to resident care needs, respond to resident diversity and/or enable operational sustainability.
- The current long-term care operating model, and operating funding, would be applied after the First Resident Date.

Reducing Red-Tape

In addition to modernizing the program, the ministry has increased efficiency and reduced red-tape through:

Public Consultations: Modernized public consultations process by providing the ministry with greater flexibility on format, duration, and when public consultation is sought as part of the licensing transaction process (Bill 66, *Restoring Ontario's Competitiveness Act, 2019*).

Funding Policies: Consolidating funding policies to provide greater clarity for long-term care home operators.

2019 Application: Released a new 2019 Application that adds value to the development and redevelopment of beds, and increases efficiency by eliminating a step in the review and approvals process

Responding to COVID-19

- Despite planning for a surge of COVID-19+ admissions in hospitals, during Wave 1 of the COVID-19 pandemic, outbreaks and deaths predominately impacted the province's long-term care homes.
- By April 28, 2020 approximately 75 per cent of reported deaths as a result of COVID-19 were in long-term care and 24 per cent of all long-term care homes in the province were in outbreak.
- Building on the measures activated under *COVID-19 Action Plan for Protecting Long-Term Care Homes*, the ministry recommended additional measures that could be implemented to contain and prevent the spread of COVID-19.
 - **Optimizing Existing Long-Term Care Space:** work with Infrastructure Ontario and/or Canadian Red Cross and local health systems to identify opportunities for minor renovations in existing long-term care homes that would enhance cohorting, isolation capacity, and infection prevention and control measures.
 - **Temporary Relocation Strategies:** work with local health systems to identify opportunities to temporarily relocate approximately 5,400 residents and minimize the impact of COVID-19 in Ontario's long-term care homes (see Appendix C).
- While some health system partners initiated temporary relocation strategies, the recommendations continue to be reviewed and considered by the ministry.

Appendices

Appendix A: Structural Classification

Long-term care beds have structural classification that reflects the design standard to which they were built. Redeveloped beds are re-classified “New” once the redevelopment is complete.

Structural Classification	Definitions
“New” Beds	Beds that comply with the 1999 Long-Term Care Facility Design Manual, 2002 Long-Term Care “D” Retrofit Facility Design Manual, or the 2009 or 2015 Long-Term Care Home Design Manual
“A” Beds	Beds that substantially comply with the 1999 Long-Term Care Facility Design Manual
“B” Beds	Beds that substantially exceed the structural standards of the 1972 Nursing Homes Act Regulation
“C” Beds	Beds that meet the structural standards of the 1972 Nursing Homes Act Regulation
“Upgraded D” Beds	Beds that do not meet the structural standards of the 1972 Nursing Homes Act Regulation but were upgraded under the 2002 D Bed Upgrade Option Guidelines (by spending a minimum of \$██████/bed on approved improvements to benefit resident health, safety or well-being)

Appendix B: Design Standards Comparison

Nursing Homes Act, 1972

Design Manual, 2015

More Home Like Setting

- | | |
|---|--|
| <ul style="list-style-type: none"> • More institutional-like | <ul style="list-style-type: none"> • More home-like with Resident Home Areas to create smaller units that give residents more intimate and familiar living spaces |
|---|--|

Elimination of 4 Bed Wards

- | | |
|---|--|
| <ul style="list-style-type: none"> • Three and four-beds per room permitted • Lack of Privacy | <ul style="list-style-type: none"> • No more than two beds per room • Home-like design |
|---|--|

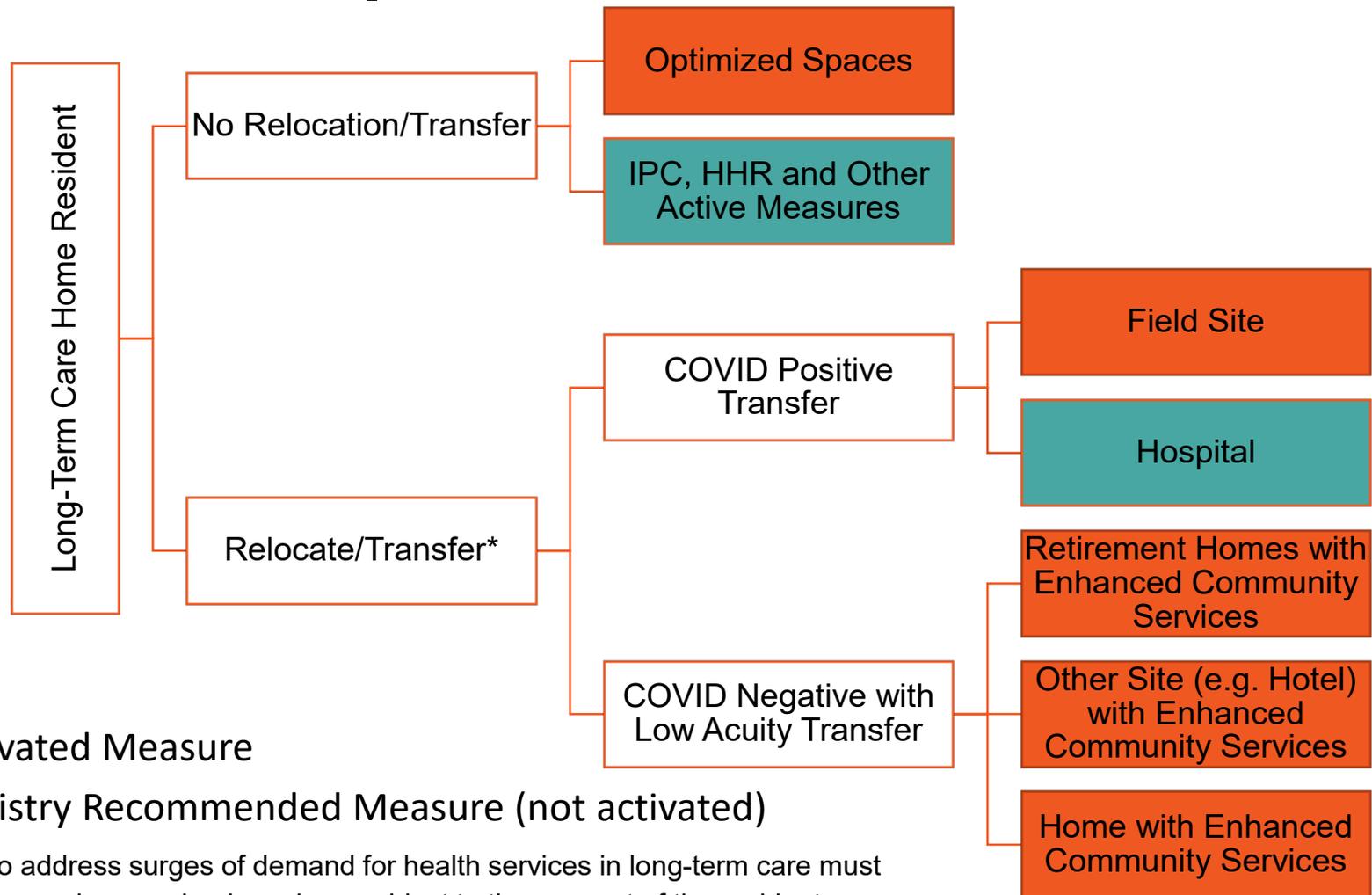
Larger Bedrooms

- | | |
|---|---|
| <ul style="list-style-type: none"> • Single-Bed Units at least 10.22 square meters (110 sq. ft.) • Two-Bed Room Unit at least 16.72 square metres of floor space (or 8.36 sq. meter per resident) (90 sq. ft) | <ul style="list-style-type: none"> • Single bed rooms - minimum 11.15 square metres (120 sq. ft.) of usable net floor space • Two-Bed Room Unit: minimum 10.68 square metres (115 sq. ft.) of usable net floor space per resident |
|---|---|

Resident Washrooms

- | | |
|--|---|
| <ul style="list-style-type: none"> • One washbasin and one flush toilet for every four beds | <ul style="list-style-type: none"> • Washroom in all resident bedrooms |
|--|---|

Appendix C: Measures to Prevent and Contain the Spread of COVID-19



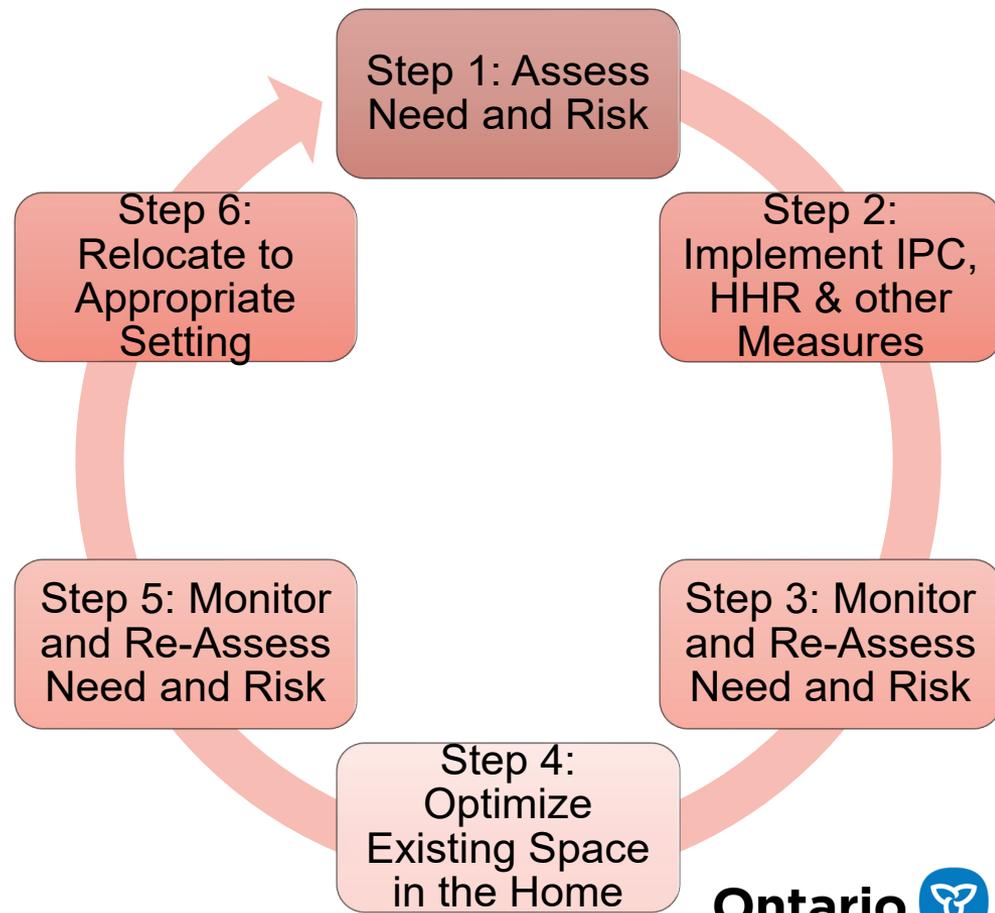
*Transfers to address surges of demand for health services in long-term care must be made on case by case basis and are subject to the consent of the resident or substitute decision maker.

Draft Proposed Implementation Plan

- Assessments of need and risk are completed at the home level taking into account outbreak prevalence, clinical considerations and occupancy targets.
- Steps 1, 2 and 3 continue to be implemented for all homes. Steps 4, 5 and 6 are activated on a case-by-case basis based on re-assessments, with an initial focus on older homes and homes in outbreak.

Key Players

- Long-Term Care Residents
- Ontario Health/ Regional Tables
- Long-Term Care Homes/Staff
- Long-Term Care Inspectors
- IPAC Professionals,
- Public Health Units
- Hospitals
- Governmental & non-governmental partners



Recommended Phase 1 Temporary Relocation Strategy (not activated)

As of May 11, 2020, of the 2,725 confirmed resident cases of COVID-19 more than 2,000 residents, representing almost 78 per cent of all resident cases, were in Toronto, Ottawa and surrounding areas.

LHIN/Community	Number of Resident Cases (Number of Homes)
Toronto Central Central Central East (Scarborough & Toronto only)	>1,000 resident cases (47 homes) Almost 1,000 resident cases are in 26 homes where > 10% of residents are COVID-19+
Central West (Mississauga & Etobicoke only) Mississauga-Halton (Mississauga & Etobicoke only)	> 600 resident cases (13 homes) Almost all resident cases are in 9 homes where > 10% of residents are COVID-19+
Champlain (Ottawa only)	> 300 resident cases (10 homes) Almost 300 resident cases are in 7 homes where > 10% of residents are COVID-19+