



# Caring for Seniors: A Call for Federal Leadership

## Proposed Platform Commitments for Long-Term Care

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Seniors' care in Ontario — and across Canada — stands at a pivotal crossroads. The COVID-19 pandemic sent waves of tragedy through our sector and laid bare the dangers of pre-existing under funding, under staffing and over regulation.

The sector as a whole sorely needs significant reform to transform into a properly resourced, people-centred provider of care to seniors and vulnerable adults — and Canadians understand that the need for action is urgent. Public expectations for change in the sector are at an all-time high, as evidenced by the recent Angus Reid poll where 75% of respondents said long-term care (LTC) needed either significant changes or a total overhaul.<sup>1</sup>

Urgent federal leadership on this issue is imperative. Seniors' care is a top priority for our society. Seniors' care and aging populations are issues in every province, and there is a need for significant standalone investment. With an aging population, federal partnership with the provinces is critical – this cannot just be up to the provinces. Federal governments in the past have led on critical healthcare files such as dedicated funding for homecare, mental healthcare, and creation of the *Canada Health Act*.

With a federal election anticipated this year, it is imperative that each party respond to this challenge with a set of policies and commitments that would help the provinces and territories achieve transformational change in LTC. With LTC leadership and front-line staff exhausted from 18 months of the pandemic, the sector is on the brink of collapse. Change cannot occur without a substantive federal commitment to lead, partner and invest in care for seniors.



<sup>1</sup> <https://angusreid.org/canada-long-term-care-policy/>

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# Five Seniors' Care Platform Commitments for Federal Parties

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## 1. National Standards and a Dedicated Stream of LTC Funding as Part of the Canada Health Transfer

The longstanding problems in seniors' care are well documented and known to all federal parties. For years, seniors' care has been underfunded at the provincial level and all but ignored at the federal level. This has to change. As the Parliamentary Budget Officer recently revealed, meeting new minimum standards in terms of hours of daily care, availability of beds and increasing pay and benefits to retain staff in the sector will require additional funding in excess of \$10 billion per year.<sup>2</sup> Currently, the federal government contributes indirectly to LTC funding through the Canada Health Transfer – but without a specified amount dedicated to LTC, this money is not finding its way to the frontlines of seniors' care.

Canadians expect the federal government to play a leadership role in working with the provinces to fix LTC by coming to the plate with funding to ensure the national standards that are currently being developed can be achieved. Federal parties wanting to be taken seriously in their aim to fulfill this expectation need their platforms to commit to:

- > **Support new National Quality Standards and Requirements for LTC by designating specific LTC funding as part of the Canada Health Transfer of at least \$10 billion per year to the provinces and territories to ensure those standards can be met.**

### *Emotion-Focused Care as Part of the National Dementia Strategy*

The data speaks for itself: 564,000 Canadians are currently living with dementia, with this number expected to grow to 937,000 by 2032.<sup>3</sup> The current National Dementia Strategy includes “Building the evidence base to inform and promote the adoption of effective interventions” as an area of focus. We already know what works for some dementia residents in LTC, and that is emotion-focused models of care, such as the Butterfly and Eden models.



Canadians expect the federal government to play a leadership role in working with the provinces to fix LTC.

<sup>2</sup> <https://www.pbo-dpb.gc.ca/en/blog/news/RP-2122-013-M--cost-estimate-motion-77-improvements-long-term-care--estimation-couts-decoulant-motion-77-ameliorations-concernant-soins-longue-duree>

<sup>3</sup> Alzheimer Society Canada. <https://alzheimer.ca/en/Home/About-dementia/What-is-dementia/Dementia-numbers>

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Models such as these are proven to help seniors whose physical needs are cared for in LTC but whose emotional needs are not currently prioritized, leading to responsive behaviours, depression and inability to thrive. Provinces need federal funding to help implement these models in their homes so that residents with dementia can be cared for emotionally as well as physically.

- > **Add emotion-focused models of care as part of the National Dementia Strategy and include funding for provinces to adopt these models as part of the new LTC funding in the Canada Health Transfer.**

Parties who fail to make commitments to LTC will be harshly judged by a public that understands now is the time for a big federal commitment to LTC — one that values seniors’ dignity and the quality of their care.

## 2. National Health Human Resource Strategy and Leadership on Immigration

Serious staffing issues in LTC existed prior to the pandemic; over the last 18 months, the situation has worsened into a full-blown crisis. With each wave of the pandemic, personal support workers (PSWs) and other frontline workers exited LTC in droves and many are now on mental health leave. This has left homes scrambling to fill vacancies and provide the level of care that seniors and their families expect and require. Coming out of the pandemic, this situation will not resolve itself without a concerted, coordinated national effort to improve the working conditions for care providers and encourage more workers to enter the field of seniors’ care, and healthcare more broadly. As we recover and look to build stronger, more resilient health and senior care sectors, Canada is in dire need of a National Health Human Resource Strategy. Every federal party platform should include a commitment to:

- > **Develop and implement a National Health Human Resource Strategy that supports provinces and territories to educate, train, recruit, and retain workers in seniors’ care.**

Across the country, and especially in Ontario, LTC homes desperately need PSWs – they are the backbone of the seniors’ care industry, and COVID-19 has exacerbated the shortage of PSWs facing our aging population. Under the current National Occupational Classification (NOC) system, PSWs are classified as “semi-skilled workers” (NOC-C), and therefore ineligible for Express Entry. As a result, few international students choose to enroll in PSW programs in Canada. This severely limits the potential to grow the PSW workforce through immigration.





Statistics Canada as well as Employment and Social Development Canada (ESDC) are currently overhauling the NOC's numbering system. These revisions, slated for implementation in 2022, will introduce a new categorization representing the degree of Training, Education, Experience and Responsibilities (TEER) required for a given occupation. Under the new TEER system, PSWs (NOC 3413—Nurse aides, orderlies and patient service associates) will be recognized as a TEER 3 occupation: skilled workers requiring more than six months but less than two years of post-secondary education or on-the-job training.

The federal government needs to recognize the value of PSWs and help grow this workforce by immediately implementing the TEER Skills Ranking System for Express Entry. Many PSWs have additional training in specialized care techniques. Canada needs these people. Seniors need these people. And every federal party needs to respond by:

- > **Committing to immediately adopting the new TEER Skills Ranking System for Express Entry.**

Even after the adoption of the new TEER system, few PSWs will be sufficiently competitive to qualify for permanent residency under the current "Comparative Ranking System" (CRS). Awarding additional CRS points via Ministerial Instruction (as has previously been provided to priority occupations) would provide an opportunity for PSWs to be competitive under future intakes. Parties should further commit to:

- > **Award additional CRS points to PSW Express Entry applications via Ministerial Instruction.**

These actions would create more immigration opportunities for PSWs with varying levels of skill and experience and go a long way towards solving the health human resource challenges that are a major obstacle to meaningful, lasting LTC reform.

COVID-19 has exacerbated the shortage of PSWs facing our aging population.

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### 3. Federal Insurance Backstop

Liability insurance is essential to the continued operation of the LTC sector in Ontario and across Canada. But of the handful of insurance companies in Canada that deal with LTC, very few will insure homes for anything related to COVID-19 or communicable disease, including influenza. This inability to access comprehensive insurance represents an existential threat to LTC; provincial funding agreements expressly require LTC homes to carry Commercial General and Medical Malpractice Liability Insurance.

Further, both federal and provincial legislation requires not-for-profit (NFP) organizations to carry liability insurance covering both operations and volunteer boards. This insurance prevents volunteer boards from facing undue personal liability, without which NFP LTC homes will struggle to fill their governance positions. It also means that, in the case of malpractice, an LTC home would not be bankrupted and forced to cease operations.

This increased risk of liability has also meant that most LTC homes have seen their premiums and deductibles drastically increased upon renewal. Directors and officer's insurance premiums have also increased, in excess of 20 per cent or more in some instances. In some instances, insurers are no longer accepting new business in the senior care segment or LTC sector leaving some homes unable to secure insurance altogether.

Clearly, there is no comprehensive market solution to this problem. Government intervention is required. Every federal platform should include a commitment to:

- > **Stabilize Canada's LTC sector and ensure the well-being of its residents by providing a federal insurance "backstop", and then working with LTC homes and the insurance sector to permanently resolve this issue.**



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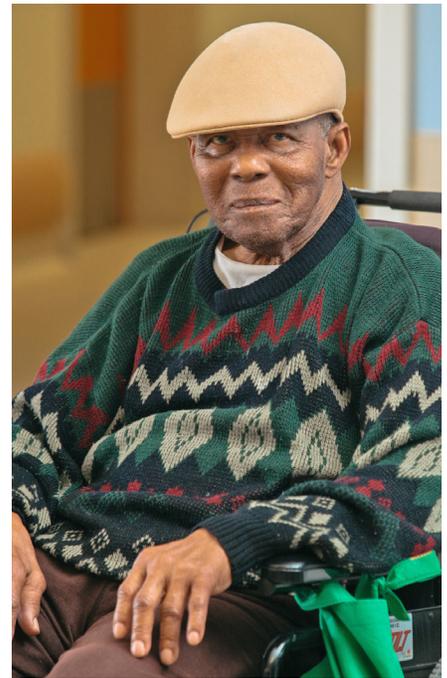
## 4. CMHC Funding and Support

As seniors age and their needs become more intense and complex, many will need to move to LTC homes. The challenge is that wait lists are lengthy across the country, resulting in long wait times for admittance. Across Canada, there is a dangerous shortage of LTC spots — even as demand for these spaces grows.

In Ontario alone, the need for more LTC beds is overwhelming. 34,000 existing beds need to be redeveloped by 2025, of which only 15,000 have funding allocated. And despite that fact that 15,000 new LTC beds already under development will help increase system capacity by 2025, Ontario's Financial Accountability Office has highlighted that at least 55,000 additional new beds are needed by 2033 if the current wait list of six months is to be maintained.<sup>4</sup>

Investments in seniors' housing, including housing where care is provided, are urgently needed. But currently, there are no federal capital funds or federal assistance provided to LTC homes. This is a significant gap in federal support for seniors — a gap the provinces have demonstrated time and again that they are unable to fill. The Canada Mortgage and Housing Corporation (CMHC) was once involved in LTC financing and needs to be directed to again assist LTC homes in meeting their capital needs. At the same time, the Canada Infrastructure Bank should be encouraged to continue looking into ways to support the development of more LTC homes across the country. To solve the complex challenge of building and renewing LTC homes across Canada, an immediate federal commitment to LTC capital development is required from every one of Canada's federal parties. Party platforms should commit to:

- > **Invest in building and repairing affordable seniors' housing across the continuum by dedicating funding from the National Housing Strategy and other federal affordable housing funding and financing programs for seniors.**
- > **Expand federal infrastructure funding, through the Canada Infrastructure Bank or other means, to include the development of new LTC homes and the redevelopment of older ones.**
- > **Allow NFP LTC homes access to competitive, third-party mortgage rates by directing the CMHC to include NFP LTC homes in its Mortgage Loan Insurance program eligibility criteria.**



<sup>4</sup> <https://www.fao-on.org/en/Blog/Publications/ontario-long-term-care-program>

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## 5. Canada Research Chair in Not-for-Profit Long-Term Care Applied Research Excellence

In Ontario, NFP LTC homes provide an average of 40 per cent more hours of direct daily care to residents when compared to their for-profit peers. NFP homes have lower staff turnover, lower rates of hospital admissions and lower rates of mortality. When the pandemic wreaked havoc on LTC facilities across Ontario, less than 22 per cent of LTC deaths were in NFP homes, despite the fact that NFP homes make up 46 per cent of all LTC beds in the province.

Importantly, NFP homes are community-owned and responsive to community needs. They are not required to return a profit to shareholders, and so are able to invest every dollar into expanding their care, services and operations. As a result, the vast majority of Ontarians waitlisted for an LTC spot in the province list community-owned, NFP homes as their first preference.

Federal governments in the past have signalled their commitment to certain policy areas by funding Canada Research Chairs. Despite Canada's rapidly aging population and the significant pressures this will cause, there are currently no Canada Research Chairs dedicated to the study of long-term care and seniors' care.

Given all the advantages that the community-owned model presents, applied research is needed in LTC to understand more about the unique strengths of this ownership model, learn about new models of care and how they can be applied throughout Canada, and help with the dissemination of the knowledge that is built up in the NFP sector. Parties should commit to:

- > **Fund a Canada Research Chair in Not-for-Profit Long-Term Care Applied Research Excellence.**

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# Seniors' Care Can't Wait



Over the last 18 months, every federal party has put its leader and MPs in front of a microphone to decry the state of seniors' care in Canada and demand better. A 2021 election is an opportunity to turn these words into action by putting forward a set of policies and commitments that would result in real, meaningful and lasting change. This must include dedicated and sufficient funding for LTC to meet new National Standards, steps to resolve the staffing challenges that are hollowing out the sector, a commitment to solving the insurance crisis, a meaningful federal role in capital funding for new and redeveloped LTC beds, and a new Canada Research Chair in not-for-profit LTC. The Canadian public is demanding change. It is time for political parties to deliver.



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AdvantAge Ontario has been the trusted voice for senior care for over 100 years and is the only provincial association representing the full spectrum of the senior care continuum. Our more than 400 members include not-for-profit, charitable, and municipal long-term care homes, seniors' housing, assisted living in supportive housing and community service agencies.