Long Term Care in Ontario

Residential Facilities

Nursing Homes

How Nursing Homes Are Organized and Administered

Nursing homes or “long term care homes”, as they are called in Ontario, are residential facilities that provide 24-hour skilled nursing care and supervision. They offer higher levels of personal care and support than those offered by retirement homes or supportive housing and cater to individuals, usually seniors, who have serious long term health care needs that cannot be fulfilled in the home. However, they also provide short-stay services in order to provide family caregivers with a break from caregiving duties or to provide the resident with support to regain strength and confidence, usually following a stay in a hospital.

Long term care homes are owned and operated by various organizations including private corporations, municipal councils and non-profit organizations such as faith, community, ethnic or cultural groups. However, all applications to long term care homes are coordinated by the local Community Care Access Centre (CCAC). Once the CCAC has conducted an assessment to determine eligibility, the next step is to choose the homes to which to apply. The CCAC will provide lists and basic information about homes in the area. An individual may apply to a maximum of three homes. The fees for all nursing homes in Ontario, regardless of ownership, are set by the Ontario Ministry of Health and Long-Term Care.

Eligibility/Requirements for Admission

In order to qualify to move to a long term care home, a person must:

- be 18 years of age or older
- possess a valid Ontario Health card
- have health care needs that cannot be met with any combination of caregiving or community-based services in the home
- have health care needs that can be met in a long term care home

The CCAC will determine eligibility by conducting an assessment of health needs and the availability of alternative care options such as home care and informal caregivers.

Income/Asset Test

An income or asset test does not form part of the assessment conducted by the CCAC. Anyone who meets the above criteria is eligible to apply for a spot in a nursing home regardless of their financial situation.

Costs

Fees for nursing homes are standardized across Ontario, regardless of ownership, and are established by the Ministry of Health and Long-Term Care (MOHLTC). The MOHLTC provides funding for homes. The amount paid by residents for their accommodation is called a “co-payment”. Costs for accommodation in a long term care home depend upon the type of accommodation.
Nursing Home fees include:

- furnishings (e.g. bed, chair), meals (including special diets), bed linens and laundry, personal hygiene supplies, medical/clinical supplies and devices (e.g. walkers, wheelchairs for occasional use), housekeeping, pastoral services, social and recreational programs, medication administration and assistance with the essential activities of daily living.
- nursing and personal care on a 24-hour basis and access to a physician and other health professionals.

Additional services such as hairdressing, cable TV, and telephone services, transportation, etc. are usually available for an additional fee. All long term care homes have dining rooms and common rooms, and may also have features such as a lounge, gift shop, beauty salon, chapel or garden.

If an individual’s income is not sufficient to pay for the basic accommodation, there is a subsidy available. However, it is only available for basic accommodation. The CCAC will assess whether an individual’s income is indeed insufficient to cover the cost of the nursing home based on income tax returns. If such is the case, the total monthly income of the individual less $100 will be taken to cover the cost of a basic bed, and the rest of the cost will be covered by the provincial government.

### Retirement Residences
Retirement residences are residential facilities that provide accommodation and services to autonomous seniors. However, a select few retirement residences across Ontario contain special units or floors designated for seniors who are functionally dependent; i.e. they cannot perform 2 or more of the activities of daily living without substantial assistance. These units are usually designed for seniors with Alzheimer’s or other forms of cognitive impairment. However, as the residents’ health gets progressively worse, they must be transferred to a nursing home.

Retirement residences are privately owned, operated and regulated. They are in charge of their own admissions procedure, waiting lists and fees. Residents are responsible for paying their own fees, and no government subsidies are available for accommodation in a retirement residence.

### Home Care
**Government-subsidized Home Care**
How Government-subsidized Home Care Is Organized and Administered

Home care services allow seniors to live at home independently for as long as possible. There are four main categories of Home and Community Support Services:

- Visiting health professional services that provide health care in the home such as skilled nursing
- Personal care and support that can help with a variety of daily living activities such as bathing, dressing, toileting, eating and more
- Homemaking services that assist with routine household activities such as menu planning and meal preparation, shopping, light housekeeping and more
- Community support programs offer a wide variety of services such as meal delivery, transportation, caregiver relief, adult day programs, social and recreational services, security checks and more

Home care subsidized by the provincial government is administered by local Community Care Access Centres (CCAC). Once contacted, the local CCAC will send over a case manager, who will conduct an assessment of the senior’s needs and develop a care plan to meet the senior’s needs.
Eligibility/Requirements for Admission
To receive home care services from a CCAC, a person must have:

- a valid Ontario Health card
- needs that cannot be met on an outpatient basis; e.g. a client may need help with bathing at home
- a medical condition that can be adequately treated in the home
- a need for at least one professional or personal support service

Income/Asset Test
An income or asset test does not form part of the assessment conducted by the CCAC. Anyone who meets the above criteria is eligible to apply for home care regardless of their financial situation.

Costs
CCAC services are provided at no cost to clients. CCAC allocates the services depending on assessment and availability.

Private Home Care
CCAC resources are limited and go to the neediest. As a result, many seniors get inadequate amounts of CCAC services and have to rely on private home care services to receive the appropriate amount of care.

Costs of Private Home Care

<table>
<thead>
<tr>
<th>Type of Service</th>
<th>Provincial Average</th>
<th>Toronto</th>
<th>Ottawa</th>
<th>Kingston</th>
<th>Windsor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meal Delivery (per meal)</td>
<td>$5.18</td>
<td>$5.13</td>
<td>$5.08</td>
<td>$5.28</td>
<td>$4.67</td>
</tr>
<tr>
<td>In-home Meal Preparation (per hr)</td>
<td>$20.77</td>
<td>$19.92</td>
<td>$23.02</td>
<td>$24.05</td>
<td>$22.99</td>
</tr>
<tr>
<td>Laundry/House Cleaning (per hr)</td>
<td>$19.93</td>
<td>$19.73</td>
<td>$19.99</td>
<td>$19.72</td>
<td>$21.28</td>
</tr>
<tr>
<td>Personal Care: Bathing/Dressing (per hr)</td>
<td>$21.13</td>
<td>$20.27</td>
<td>$23.82</td>
<td>$24.15</td>
<td>$22.83</td>
</tr>
<tr>
<td>companionship/Supervision (per hr)</td>
<td>$20.47</td>
<td>$19.77</td>
<td>$22.28</td>
<td>$24.58</td>
<td>$23.19</td>
</tr>
<tr>
<td>Skilled Nursing (per hr)*</td>
<td>$29.45 – $69.00</td>
<td>$30.00 – $69.00</td>
<td>$34.14 – $52.00</td>
<td>$40.00 – $52.00</td>
<td>$42.21 – $57.00</td>
</tr>
<tr>
<td>Occupational Therapy (per hr)</td>
<td>$98.31</td>
<td>$87.79</td>
<td>$103.00</td>
<td>$95.83</td>
<td>N/A</td>
</tr>
</tbody>
</table>

* Fees range depending on what kind of nurse, such as a registered nurse (RN) or licensed practical nurse (LPN), delivers care.

Typical Home Care Scenarios

Scenario 1: Low Level of Care
Mrs. Williams is an 85 year old widow still living at home. She has osteoarthritis and leg edema that is relieved by support stockings. However, because her fingers are arthritic and she cannot bend forward, she requires assistance to put on her stockings. She is able to get around her home using her rollator.

Two months ago Mrs. Williams had a significant fall and lost 9 kg. Both her daughters assist Mrs. Williams on weekends and in the evenings and the husband of one of her daughters maintains the house, lawn, etc. Her daughters report that Mrs. Williams complains that she forgets to eat and that the food in the refrigerator has spoiled. When they are with her, she eats very little and sometimes chokes on her food. To ensure that she eats safely, Mrs. Williams needs meals delivered to her home and also requires a home maker to supervise her meals. To increase her safety, Mrs. Williams requires a home safety assessment as well as some assistance with bathing.

Care Plan

- Meal Delivery: 2 meals a day for weekdays with Meals on Wheels or other meal delivery programs
- Meal Supervision: 1 hour a day for weekdays including recording her meal intake and providing stand-by assistance if patient chokes
- Bathing: 2 times weekly, 1 hour each
- Dressing: 20 minutes for weekday mornings to assist with putting on support stockings
- Occupational Therapist: to provide initial assessment for home safety and to make recommendations
In addition, there will be expenses for two visits of an occupational therapist including a 1 hour initial assessment and 45 minutes follow up after equipment has been installed. The two visits will cost $172.04 altogether.

**Scenario 2: Intermediate Level of Care**
Mr. Leung is a 72 year old widower. He lives alone in an apartment in a senior’s apartment building in a small community outside of the city. Mr. Leung has cataracts in both eyes and has been diagnosed with dementia. His son assists Mr. Leung in the evenings but is not available on the weekends, so he needs meal preparation on weekends. He occasionally forgets to take his medicines and does not eat properly. His son has arranged for him to attend an Adult Day Program four times a week, but worries that he may not remember the days and will sleep in. Although he does not wander out of his apartment, he requires help to get to and from the bus so that he will not get confused and wander.
Mr. Leung requires supervision with bathing, laundry, meal preparation and clean-up.

<table>
<thead>
<tr>
<th>Services Required</th>
<th>Covered by Government*</th>
<th>Services Required To Be Paid by Client</th>
<th>Cost per Unit</th>
<th>Monthly Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-home Meal Preparation</td>
<td>0</td>
<td>4 hrs/wk</td>
<td>$20.77/hr</td>
<td>$332.32</td>
</tr>
<tr>
<td>Personal Care: Bathing/Dressing</td>
<td>3 hrs/wk</td>
<td>5 hrs/wk</td>
<td>$21.13/hr</td>
<td>$422.60</td>
</tr>
<tr>
<td>Adult Day Care Program (including transport)</td>
<td>Managed &amp; operated by the CCAC at low daily cost to senior</td>
<td>4 times/wk (low daily fee)</td>
<td>$13.00 – $15.00/day</td>
<td>$208.00 – $240.00</td>
</tr>
<tr>
<td>Safety Supervision</td>
<td>2 hrs/wk</td>
<td>0</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Supervision with Medication</td>
<td>1 hr/wk</td>
<td>1 hr/wk</td>
<td>$20.47/hr</td>
<td>$81.88</td>
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<tr>
<td>Laundry/House Cleaning</td>
<td>2 hrs/wk</td>
<td>0</td>
<td>$19.93/hr</td>
<td>$159.44</td>
</tr>
<tr>
<td><strong>TOTAL per Month</strong></td>
<td></td>
<td></td>
<td></td>
<td><strong>$1,204.24 – $1,236.24</strong></td>
</tr>
</tbody>
</table>

* The hours of care allotted by the CCAC mentioned above are an estimate only. Actual hours allotted by the CCAC may be more or less depending on a formal care assessment and regional availability.
Scenario 3: High Level of Care

Mrs. Jensen is 88 years old and lives with her husband, who is 93 yrs old, in a two-bedroom condominium. The CCAC has recommended that Mrs. Jensen be moved to a nursing home. However, her daughter has promised that she will not send her parents to a nursing home. Mrs. Jensen has had a recent stroke and is diabetic. She can transfer on her own but can only walk short distances as her balance is poor and she is at risk for falls. In addition, she has stage 2 ulcers on her heel that makes walking difficult. For longer distances, she uses a wheelchair. Mrs. Jensen's husband is alert and aware, but he is physically frail. She, therefore, requires a caregiver to provide assistance with bathing, meal preparation, household chores and to take her to appointments. She needs a nurse to regularly monitor and chart her medicine use, blood sugar readings and clean her heel ulcer and change her bandages. An occupational therapist referral is needed to provide recommendations for safety equipment (safety bars, raised toilet seat, lighting, removing clutter or loose rugs).

Care Plan

› In-home Meal Preparation: 2 hours daily
› Private Caregiver: 8 hours daily to assist with bathing, dressing, toileting, transferring and provide caregiver relief
› Private RN: 4 times weekly, 30 minutes each, to monitor insulin use and chart; to check that medicines are taken accurately; and to monitor and change dressing on heel ulcer
› Laundry: 2 hours every other week
› House Cleaning: 1.5 hours weekly
› Occupational Therapist: to provide initial assessment for home safety and to make recommendations. Two visits including 1 hr initial and 45 minutes follow up after equipment has been installed.

<table>
<thead>
<tr>
<th>Services Required</th>
<th>Covered by Government*</th>
<th>Services Required To Be Paid by Client</th>
<th>Range of Cost per Unit</th>
<th>Monthly Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-home Meal Preparation</td>
<td>14 hrs/wk</td>
<td>14 hrs/wk</td>
<td>$20.77/hr</td>
<td>$1,163.12</td>
</tr>
<tr>
<td>Personal Care: Dressing/Bathing</td>
<td>56 hrs/wk</td>
<td>20 hrs/wk</td>
<td>$21.13/hr</td>
<td>$3,042.72</td>
</tr>
<tr>
<td>Skilled Nursing</td>
<td>2 hrs/wk</td>
<td>1 hr/wk</td>
<td>$29.45 – $69.00/hr</td>
<td>$117.80 – $276.00</td>
</tr>
<tr>
<td>Laundry/House Cleaning</td>
<td>2.5 hrs/wk</td>
<td>0</td>
<td>$19.93/hr</td>
<td>$199.30</td>
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<tr>
<td><strong>TOTAL per Month</strong></td>
<td></td>
<td></td>
<td><strong>$4,522.94 – $4,681.14</strong></td>
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</tr>
</tbody>
</table>

* The hours of care allotted by the CCAC mentioned above are an estimate only. Actual hours allotted by the CCAC may be more or less depending on a formal care assessment and regional availability.

In addition, there will be expenses for two visits of an occupational therapist including a 1 hr initial assessment and 45 min follow up after equipment has been installed. The two visits will cost $172.04

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