



Ontario Long Term Care Clinicians 2021 Pre-Budget Submission

OLTCC is a not-for-profit volunteer organization representing clinicians practicing in Long Term Care (LTC). Our members include physicians, nurse practitioners, pharmacists and other professional health care providers. All members of our Board are actively working in LTC.

The OLTCC Vision is all Ontarians in LTC receive excellent care. Our Mission is carried out through education and advocacy.

LTC is a home and often a person's last home. Compression of morbidity and greater access to home care results in greater acuity for LTC residents. Additionally, there has been increasing complexity in the health care needs of residents moving into LTC, with a significant presentation of dementia and some residents being much younger and otherwise healthy.

OLTCC supports the Government to improve the quality of life and care of residents in LTC homes. This is best achieved through leaders with experience, knowledge and familiarity with the regulations, legislation, structure and function of LTC/RH and community partners.

Recommendations:

1. OLTCC recommends the creation of a Chief Medical Officer for Long Term Care (CMO of LTC) to demonstrate real and tangible action in providing much needed oversight and direction to the LTC sector, and to inform, collaborate and coordinate with other health care system sectors and partners, i.e. hospital and public health. The CMO Of LTC would:

- Draw on best practices from around the world, not just in times of COVID but for sector improvements and direction.
- Develop and establish standards of care.
- Inform LTC building design and infrastructure.
- Advise with regard to Government inspections.
- Assist the sector in a crisis of any kind, not just a pandemic.

Additionally, there should be CMO's of LTC in each of the five Ontario Health regions to:

- Ensure direction and guidance is reaching each home and that standards are being met.
- Determine the makeup of interdisciplinary teams based on the number and types of health care and allied health care professionals in a region.
- Ensure homes have access to the expertise needed to support resident care – both in person and virtually.

2. Funding to address staffing shortages, provide essential training for the specialized care required, and sufficient time must be allowed to properly care for each resident.

3. Training in palliative care for all LTC staff is essential. A focus on palliative care by all staff will ensure quality of life care for residents and support for family caregivers.

4. Funding should focus on quality of care and quality of life indicators, rather than expected outcomes in frail elderly. Funding should reflect non-procedural realities of current resident care (e.g. dementia care). Employment and contract models for physicians should reflect the care, consultation, oversight and leadership required, and should include Advance Care Planning with residents and their families to avoid unnecessary, unwanted and costly medical interventions.

5. LTC education should be made possible for nursing and medical schools, and in Family Medicine post-graduate training programs. The OLTCC Medical Director Course should be mandatory upon engagement as a Medical Director.