

January 17, 2018

JAN 2 3 2018

FOYER POUR PERSONNES ÂGÉES

HOME FOR THE AGED

APPARTEMENTS

APARTMENTS

- Villa du Loisir
- · Villa des Pignons
- · Domaine Leclair
- Villa Joie de Vivre

LOGEMENT À PERPÉTUITÉ

LEASE FOR LIFE

• Terrasse d'Or

ATTENTION: Honourable Eric Hoskins

Minister of Health and Long-Term Care

Ministry of Health and Long-Term Care

Floor, Henhurn Block

10th Floor, Hepburn Block 80 Grosvenor Street Toronto ON M7A 2C4

Honourable Eric Hoskins:

We would like to bring to your attention a significant matter that has been difficult for our Home to manage for quite some time and which requires Ministry of Health and Long-Term Care (MOHLTC) leadership and a change to the Regulation under the Long-Term Care Homes Act, 2007.

As a result of our 2017 RQI, we received an order relating to the use of Agency staff. More specifically, we were found to be non-compliant with section 8(3) that states "Every licensee of a long-term care home shall ensure at least one registered nurse who is both an employee of the licensee and a member of the regular nursing staff of the Home is on duty and present in the Home at all times, except as provided for in the regulation 2007 c.8, 5.8 (3)".

Our Home does not dispute the Inspector's findings in this matter. When no RN was available, we relied on agency staff so that an RN was available to provide care for residents with complex needs and unstable conditions. We firmly believe that we had no choice but to bring in agency staff because not having an RN on site would have posed a far greater risk to our residents; and this is the position of the Board in this matter. Our contingency plan states "if there is no staff available, Agency staff will be requested; if Agency staff was replacing a RN on evenings, nights or weekends, a member of the regular Home staff will be assigned "Standby" to assist new RN in trouble shooting."

The Regulation that governs long term care homes fails to provide us with any viable option to meet the requirement for 24 / 7 RN nursing. While it includes some narrow exceptions to the general rule, the use of agency staff is not available for our home, being a home with 160 long stay beds and 2 short stay beds. In addition to the lack of flexibility afforded to us by way of the LTCHA and its Regulation, we note that our bed complements and funding does not afford this Home the ability to schedule two (2) RN's on every shifts, seven (7) days a week.

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Furthermore, because of the difficulty we face in hiring and retaining part-time RN's, some critical situations may occur as follows:

- Full-time RN's being sick for an extended period of time
- 2 RN's are off at the same time for whatever reason (as was the case in the month of December at our Home)
- During outbreaks, where RN's are ill and availability of RN's is strained community-wide.

During the period of November 15th to January 4th, we had no choice but to use Agency RN's to fill 16 shifts (mostly night shifts) as all efforts to use an employee of the Home have been exhausted.

It is generally recognized that there is a serious shortage of health care workers including RNs and, if left unchecked, we will not have the workforce required to meet the future care needs of residents. This is particularly the case in rural areas like ours where we have struggled with shortages for some time and already face significant challenges recruiting RNs.

The recruitment of RNs is a particularly significant for our Home, yet we were unable to achieve compliance with the 24/7 RN nursing rule for reasons outside of our control. We were fortunate to recruit one (1) permanent part-time that will start in March 2018 and three (3) casual RN's (however, we caution that casual RN's work in hospitals and other LTC Homes and are not always available to fill scheduled shifts).

If solutions are not implemented, the ability to meet resident health goals will be jeopardized. We must be afforded with additional flexibility to ensure we are able to bring in RNs, even if from an agency, in situations where there is no RN available from our nursing staff. This is also what our residents with complex care needs require. Of note, all Agency RN's that come to our Home receive the same orientation and ongoing training as our regular staff. Also, many of the Agency RN's work more shifts than our regular casuals who are considered to be part of the regular staff of the Home.

The MOHLTC needs to amend the governing legislation and its regulation so that in an emergency situation, homes be allowed to use Agency RN's or, as an alternative, it must consider enhancing the role of RPN's. Without a change to allow the use of agency RNs, our home (and other homes) will continue to be non-compliant despite bringing in the required nursing expertise to match resident care needs.

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We ask the Minister to review our situation. We also encourage you to continue to work with AdvantAge Ontario who has recommended this as a priority for law reform.

We thank you for your consideration and look forward to discussing this further.

Sincerely

AU CHÂTEAU HOME FOR THE AGED

Léo Malette

Chairman of the Board

cc: Local Health Integrated Network, Attention: Jeremy Stevenson, CEO 555 Oak Street East, North Bay ON P1B 6E3

cc: Ministry of Health & Long-Term Care, Long-Term Care Inspections Branch Attention: Brad Robinson, Manager 159 Cedar Street, Suite 403, Sudbury ON P3E 6A5

cc: Ministry of Health & Long-Term Care, Long-Term Care Inspections Branch Attention: Karen Simpson, Director 1075 Bay Street, 11th Floor, Toronto ON M5S 2B1

cc: AdvantAgeOntario
Attention: Bob Morton, CEO (interim); Kathryn Pilkington, Director of
Professional Services and Health Policy
7050 Weston Road, Suite 700, Woodbridge ON L4L 8G7

cc: The Corporation of the Municipality of West Nipissing Attention: Joanne Savage, Mayor 225 Holditch Street, Suite 101, Sturgeon Falls ON P2B 1T1