



**Family Council Network 4 Advocacy**

*Committed to Improving the lives of Ontario residents in*

# Long Term Care

## **FCN4 Advocacy Team**

### **Focus (Collaboration + Sharing + Advocacy):**

Exchanging ... “promising / best practices”

Sharing ... .... achievements, issues

Discussing ..... how to be effective advocates

Learning ..... about common issues

### **FCN4 Achievements 2024-2025**

1. Hosted two Regional Meetings (58 meetings since inception, 13 remotely with a wide variety of speakers)
2. Published three newsletters
3. Advocacy Activities:
  - Collaborated with Family Council Networks in Ottawa and Northern Ontario to meet with two Ministers of LTC to ensure the ministry hears the voice of families and establish continued meeting opportunities.
  - Continuously monitors media for issues and progress in care and access
  - Collaborates with organizations and groups with shared values to promote change in LTC. (Concerned Friends, AdvantAge,.....)
4. Webpage continuously updated with resources and information
5. Team Members – 6 current
  - Robert Gadsby Chair of FCN4
  - Carol Dueck – Chair Advocacy Team
  - Tom Carrothers – Founder and Treasurer
  - Peter Gnish – Webmaster
  - Janet Volkes
  - Rosemary Crisp
  - Susanne Langdon

### **Focus of Advocacy for 2025-2026**

Developed post federal and provincial elections 2025 with the following goals:

- To seek **transparency** for clarity and ease of access to information from Ministry of LTC to families and public
- To promote **family understanding** of the factors that challenge the operation of LTC homes providing daily care for residents.
- To develop **effective messages** to influence ministry changes to funding and policies.
- To promote **Person-Centred Care**.
- To submit **reports or proposals** to government for key issues.
- To monitor **progress** of the Ontario Provincial Government's published focus for Long Term Care (LTC) for 2025-2026:
  - The plan to improve care for long-term care residents is built on four pillars: staffing and care; quality and enforcement; building modern, safe and comfortable homes; and connecting seniors with faster, more convenient access to the services they need.

### **Provincial :**

5. **Staffing Challenges:** recruitment and retention, funding that provides a living wage, reduction on agency usage and elimination of the for profit agencies, scheduling practices that provide a balance of work / home life with reduction in overtime and sick time, funding that supports sustainable education, support for all disciplines to work to full capacity of scope of practice.
6. **Care Provision:** ensure that all LTC homes in Ontario are using appropriate funding to achieve the mandated standard of 4 hours of care as needed for residents. Determine if four hours of care continues to accurately reflect the increased dependency and care needs of residents currently living in LTC.
7. **Capacity:** Assess the impact on the growing wait list for admission to LTC as the ministry approves the building of new and upgraded facilities and older homes relinquishes licenses due to cost to renovate to meet standards. Advocate for new building standards to promote "small" home environments. Continue to advocate to ensure spousal co-living and choice of home near family members.
8. **Person-Centered Care** (emotion-based care, resident directed care): Support and fund innovative care models as standard of care.
9. **Quality and Authority:** Ensure that families have input to inspection process that support a learning environment and focuses on consistent improvement with equity in all penalty assessments and operators continued

licensure is related to performance. Creation of interdisciplinary Quality Council with input from the family voice.

## **Federal:**

### **1. National Standards for Long-Term Care**

While long-term care is largely under provincial jurisdiction, we believe the federal government's role is critical in committing to and enforcing the [national long-term care standards](#). These standards were developed by The Standards Council of Canada (SCC), Health Standards Organization (HSO), and the Canadian Standards Association (CSA Group) in consultation with health care professionals and families to enable consistent and high-quality care across all provinces. We would like to see these standards become mandatory and not simply guidelines. Additionally, federal funding tied to these standards would help promote equity and prevent disparities in care.

### **2. Workforce Shortages in Long-Term Care**

There is a dire need for increased federal investment in training programs, recruitment initiatives, and retention strategies to address the chronic staffing shortages that undermine care quality. Working conditions, wages, and staff-to-resident ratios must be bolstered through collaborative federal and provincial efforts. The federal government must be supportive of any provincial measures to decrease the use of costly and inconsistent agency staff. Facilitating Reciprocity for health care workers would promote consistency of care across Canada.

### **3. Support for Informal Caregivers**

Families continue to bear significant emotional, physical, and financial burdens while providing informal care to loved ones. We urge federal policymakers to enhance financial supports and programs for caregivers, including tax credits and leave provisions.

### **4. Addressing Health Inequities**

The COVID-19 pandemic has magnified systemic inequities in health care, particularly in long-term care settings. Federal leadership is essential in addressing these disparities, especially for vulnerable populations such as Indigenous elders, racialized communities, and those with disabilities. Promoting transparency in collaboration in all levels of government would promote equitable health care services nationally.

### **5. Enhancing Pandemic Preparedness**

We endorse clear federal protocols and resources to ensure long-term care homes are adequately equipped for future health crises, including access to personal protective equipment, infection control measures, and emergency staffing strategies.

## **6. Uphold the Canada Health Act.**

Support standards of care and the role of the Chief Medical and Nursing Officers to ensure equity in LTC. Promote sustainability of care standards by increasing the percentage of transfer payments as outlined in Canada Health Care Act with expectation of homes responsible to disclose use of funds.