

**Subject: Long-Term Care Person-Centred Care Update**

**File Number: ACS2024-CSS-GEN-009**

**Report to Community Services Committee on 24 September 2024**

**and Council 2 October 2024**

**Submitted on September 13, 2024 by Clara Freire, General Manager, Community and Social Services**

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**Ward: Citywide**

**Objet : Le point sur les soins axés sur la personne dans les foyers de soins de longue durée**

**Numéro de dossier : ACS2024-CSS-GEN-009**

**Rapport présenté au Comité des services communautaires**

**Rapport soumis le 24 septembre 2024**

**et au Conseil le 2 octobre 2024**

**Soumis le 2024-09-13 par Clara Freire, Directrice générale, Services sociaux et communautaires**

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**Quartier : À l'échelle de la ville**

**REPORT RECOMMENDATION(S)**

**That the Community Services Committee recommend that Council receive the Long-Term Care Person-Centred Care approach update for information.**

## **RECOMMANDATION(S) DU RAPPORT**

**Que le Comité des services communautaires recommande au Conseil de prendre acte du point sur l'approche des soins axés sur la personne dans les foyers de soins de longue durée à titre d'information.**

## **EXECUTIVE SUMMARY**

This report provides an update on the development and implementation of a customized person-centred care approach in the City of Ottawa's four long-term care homes.

In 2021, Community and Protective Services Committee and Council approved Long-Term Care Services (LTCS) five-year [Strategic Plan](#). The Plan included a recommendation for LTCS to design and implement a customized approach to provide person-centred care and services for the 717 residents living in the four long-term care homes operated by the City of Ottawa.

Traditional models of care are typically clinical, institutional, and task-oriented in nature. They focus on clinical processes, with schedules and routines that are determined by staff. By contrast, person-centred (PCC) models of care shift decision-making closer to residents, focusing on relationships, home-like environments, and bringing choice, autonomy and purpose to the lives of residents.

Over the past decade, the City of Ottawa homes have begun implementing more person-centred focused programming, including training staff in innovative dementia care techniques and implementing various enriching programs for residents. Since Council's decision in 2021, LTCS has taken the opportunity to build on the initiatives already in place to develop a robust approach and a plan to effect culture change.

The City of Ottawa long-term care homes are partnering through engagement with residents, families and staff to "transform" the homes and implement a new philosophy of care, which is focused on the needs of residents, their families and staff.

The customized approach was developed in-house, and it incorporates input from residents, their loved ones and staff, using a collaborative design methodology. The approach integrates person-centred care design principles and includes training and processes to support the culture change.

The approach was initially piloted on two neighbourhoods (units) at two different long-term care homes. It is currently being implemented across the four homes using a phased approach.

Earlier in 2024, researchers at uOttawa completed a comprehensive evaluation of the project pilot, which highlights that the City's investment in PCC in the long-term care homes is positively impacting the quality of life for residents and enhancing the workplace culture for staff.

The lives of staff and residents are being enriched by the City's commitment to changing how care is provided in long-term care.

## **RÉSUMÉ**

Dans le présent rapport, on fait le point sur l'instauration d'une approche personnalisée de soins axés sur la personne dans les quatre foyers de soins de longue durée (FSLD) de la Ville d'Ottawa.

En 2021, le Comité des services communautaires et de protection et le Conseil ont approuvé le [Plan stratégique quinquennal pour les soins de longue durée](#), qui recommandait entre autres aux Services des soins de longue durée d'adopter une approche personnalisée de soins et services axés sur la personne pour les 717 résidentes et résidents des quatre FSLD exploités par la Ville d'Ottawa.

Les modèles de soins traditionnels sont généralement cliniques, institutionnels et orientés sur les tâches. Ils misent avant tout sur les processus cliniques, et c'est le personnel qui détermine les horaires et routines. En revanche, les modèles de soins axés sur la personne placent les résidentes et résidents au cœur des décisions, privilégiant les relations et les environnements apparentés à un chez-soi, et redonnant aux bénéficiaires une autonomie, un pouvoir de choisir et un sens à leur vie.

Dans la dernière décennie, les foyers de la Ville ont commencé à adopter des programmes plus axés sur la personne, notamment de la formation sur les techniques novatrices de soin des personnes atteintes de démence pour le personnel et des programmes d'enrichissement pour les résidentes et résidents. Depuis la décision prise par le Conseil en 2021, les Services des soins de longue durée ont tiré parti des initiatives en place pour proposer une approche rigoureuse et un plan de changement de culture.

Les équipes des FSLD de la Ville, en partenariat avec les résidentes et résidents, les familles et le personnel, veulent « transformer » les foyers et adopter une nouvelle philosophie de soins axée sur les besoins de ces groupes.

Une approche personnalisée a été établie à l'interne, en tenant compte des commentaires des résidentes et résidents, de leurs proches et du personnel, selon une

méthode collaborative. Cette approche intègre les principes de soins axés sur la personne et prévoit de la formation et un changement de culture.

L'approche, d'abord testée dans deux quartiers (unités) de deux FSLD, est maintenant en vigueur dans les quatre foyers.

Plus tôt cette année, une équipe de recherche de l'Université d'Ottawa a réalisé une évaluation globale du projet pilote. Elle a conclu que l'investissement municipal dans les soins axés sur la personne a des retombées positives sur la qualité de vie des résidentes et résidents des FSLD et sur la culture du travail.

Par son engagement à changer la façon dont les soins sont prodigués dans les FSLD, la Ville contribue à enrichir la vie du personnel et des résidentes et résidents.

## **BACKGROUND**

In February 2021, a [Councillor's report](#) was brought forward to the Community and Protective Services Committee, that directed staff to present to Committee and Council a plan regarding transformative culture change in the City-operated long-term care homes, to implement innovative models of care such as The Butterfly Model by Q2 2021.

Timelines were adjusted through an [amending motion](#) due to the COVID-19 pandemic. In October 2021, the [Long-Term Care Strategic Plan](#) was approved and carried by the Community and Protective Services Committee. This report provided a summary of the stakeholder engagement process that informed the proposed strategic priorities for Long-Term Care Services.

Through that report, Council:

- Approved Long-Term Care's five-year strategic direction and renewed mission, vision, values and strategic priorities;
- Directed the Director of Long-Term Care to include \$100,000 in the 2022 Long-Term Care budget for the development of a customized person-centred care model; and
- Directed the Director of Long-Term Care to report back to Committee and Council on the implementation plan and approach.

A brief update on the implementation plan was provided to Council via a memo in May 2024 ([Community and Social Services Spring Update 2024](#)).

## **DISCUSSION**

### **Strategic Background and Rationale**

The City of Ottawa operates four long-term care homes that are collectively home to 717 residents. Residents are entering long-term care homes with advanced dementia or significant physical and cognitive decline. Consequently, many require twenty-four-hour care and support to manage their complex health needs and ensure their safety and well-being. Within the City's long-term care homes, resident populations and care needs are diverse:

- 70 per cent of residents have dementia;
- 69 per cent use wheelchairs;
- 38 per cent require assistance at mealtime;
- 9 per cent speak a language other than English or French as their first language; and
- 85 is the average age, with resident ages varying from 25 to 108 years.

While the City of Ottawa homes provide excellent care and services to long-term care residents, the Long-Term Care strategic planning session that took place in 2021 highlighted areas for improvement in meeting individual resident needs. This was in line with similar results across the long-term care sector, which had begun to make progress towards improving resident experiences.

### **Movement to Improve Resident Experience in the Long-Term Care Sector**

As a whole, the long-term care (LTC) sector is recognizing the need to transform care; to shift to a person-centred approach that prioritizes the resident experience, offering individualized care, designed in consultation with residents and their loved ones, as fundamental to improving long-term care services.

While this approach may be referred to as person-centred, relationship-focused or emotion-based care, the intent is the same: to move the standard for care in long-term care homes from an institutional, task-based model of care to a personalized, relationship-focused model. It focuses on following the rhythm of each individual's daily life, bringing increased meaning, autonomy and quality of life for long-term care residents. This philosophy of care shifts decision making closer to residents, allowing them more choice in their daily activities of life. In addition to benefitting the residents, a

person-centred approach has the added value of creating a more positive and engaging work environment for staff. Across the sector, person-centred principles and language are increasingly present in legislation, standards, and best practices.

### **Provincial Funding Commitment**

The importance of increased staffing ratios is a common factor in successful person-centred care models in long-term care homes. Appropriate staffing levels are a key element of building in the flexibility that allows long-term care homes to appropriately respond to resident choices and rhythm.

Prior to the provincial government's commitment to additional funding for staff, meeting the staffing ratios required in person-centred care models necessitated a significant financial investment for long-term care homes.

However, over the last four years, the provincial government has followed through on the commitment to provide increased funding for long-term care home operators to move to an average of four hours of direct care per resident per day by March 2025. With the additional funding provided by the provincial government in the last few years, LTCS has transitioned to a service delivery model that meets the four hours of care target in advance of the March 2025 date.

It is important to note that while current levels of provincial funding for direct care positions, such as nurses and personal support workers (PSW), are appropriate for current resident care needs, there are still potential gaps in other areas, such as the recreational and social components of well-being. Additionally, there are other staffing elements to be considered for a person-centred approach to be successful. These would include consistent scheduling to meet the new service delivery model and the associated supervisory support structure. The transition to a person-centred approach to care includes supports for staff to plan and lead the implementation, change management, person-centred care champions to reinforce and model PCC principles, and administrative support to ensure practices and procedures have a person-centred care focus.

In addition, there may be costs unrelated to staffing that are incurred as the implementation of the approach progresses. These may include costs to carry out environmental changes to create a more home-like environment, training costs, supplies to support programming, and new technologies to promote person-centred care interventions.

As LTCS moves toward implementing a person-centred care approach, the increased provincial staffing investment numbers will help to offset the cost associated with implementing person-centred care. At the same time, LTCS will explore opportunities to leverage other provincial funding sources to support the implementation of the approach.

### **Long-Term Care Strategic Planning**

In 2021, LTCS embarked on a series of strategic planning sessions to refresh the mission, vision, values and strategic priorities. Stakeholder engagement and consultation during this process highlighted the importance of prioritizing a person-centred approach. The key themes that emerged from stakeholder consultation include the need for consistent and increased staffing, relationship building, resident autonomy, improved organizational support and staff retention, and the creation of home-like environments.

One of the strategic goals identified during the strategic planning sessions is Enriching Residents' Lives, which speaks to the focus on strategies to support individual residents to lead fulfilling lives. In addition, many of the strategic objectives identified by LTC during the strategic planning process are linked to the need for a transformative culture change based in providing person-centred care and services. These include:

- Changing the LTC culture to be person-centred;
- Increasing resident choices;
- Embracing family and essential caregiver roles;
- Expanding competency in equity, diversity, inclusion, anti-racism and cultural competency;
- Aligning staffing structure to the PCC model and ensuring appropriate supervision and support for staff;
- Improving productivity and service responsiveness to residents;
- Building high performing teams;
- Building partnerships with organizations with shared values;

- Investing in technology that reinforces client-centred care and quality improvement; and
- Improving communications to residents, families and staff.

### **Person-Centred Care Model Review**

There are a variety of established Person-Centred Care models available. As part of the review of dementia care options, the LTC leadership team, with support from Clubine Consulting, reviewed and evaluated several models on the basis of resident outcomes, staff education, culture change, leadership philosophy, physical environment, and available resources and support, including French resources.

### **Customized approach**

Following the review of available models, which shared several commonalities, the team determined that a customized, client-centric approach was preferred to an off-the-shelf model, such as the Butterfly model (Meaningful Care Matters), for the City of Ottawa long-term care homes.

This approach would include a commitment to stakeholder consultation and opportunities for residents, caregivers, staff and other stakeholders to participate in developing the specific elements and interventions of the approach. In addition, a customized approach would allow best practices from several models to be applied, and the uniqueness and diversity of each home to be respected, with flexible design and implementation elements.

In recent years, Toronto's Seniors Services and Long-Term Care adopted a similar approach by designing their own customized person-centred approach to care that responds to the specific needs of Toronto's municipal LTC homes. Their custom model of care is being implemented in a phased, multi-year plan. To date, it has been implemented in three of their ten homes. The internal evaluation of the pilot phase was favourable, showing positive impacts on resident quality of life, the quality of care and staff satisfaction.

### **Long-Term Care Services' Journey to Person-Centred Care**

In 2021, following approval from Community and Protective Services Committee and City Council, the City's Long-Term Care Services committed to develop a flexible, tailored person-centred care approach to resident care.



The customized approach needed to reflect stakeholder priorities and include the development of the training curriculum and materials for staff, residents, families, volunteers and caregivers and include a train-the-trainer model to build in-house expertise in coaching and training to support the transformation in service delivery. Finally, the approach would incorporate the best practices from several established models of care and contain an evaluation framework designed in consultation with sector leaders and researchers from the uOttawa LIFE Research Institute.

City Council approved an initial \$100,000 for the development of the approach and evaluation framework for 2022, and \$500,000 was added to the 2024 Long-Term Care base budget in order to sustain the project moving forward.

### **Development of Customized Approach**

In 2022, the customized person-centred care approach was developed internally by the Person-Centred Care Project Lead through stakeholder consultations. This included the Champlain Regional Family Council, who participated in the development of a logic model to support homes in their transformational journey to person-centred care, and the Long-Term Care Community of Practice.

The City of Ottawa LTC customized approach incorporates the design principles established during the strategic planning process. The design principles, summarized below, reflect the extensive stakeholder feedback, and serve as the foundation of the City's customized, flexible, co-designed person-centred care strategy:

- **Meaningful:** Foster strong relationships and align activities and work to resident and staff strengths.
- **Flexible:** Support residents to live by their own schedules and accept reasonable risks and prioritize resident needs over procedures.
- **Home-like Environment:** Provide home-like spaces, outdoor access, and communal areas for families, and match like-minded residents.
- **Culture Change:** Ensure everyone understands and supports the vision, provide training, encourage participation, celebrate success, and make lasting changes.
- **Inclusion:** Accept residents for who they are, support staff authenticity, promote sensitivity training and anti-discriminatory practices.

- **Continuous Improvement:** Deliver excellent care, encourage feedback for improvement, measure outcomes and use evidence-based decision-making.
- **Continuity:** Maintain consistent care teams, avoid moving residents, and implement the approach across the organization.
- **Resourcing:** Ensure affordable upfront investment, aligned funding, manageable implementation resources, sustainable ongoing costs, and achievable physical design requirements.

In addition, the approach drew from a wealth of research into person-centred care design.

Over 1,100 staff members in LTCS also benefit from a person-centred approach. During stakeholder consultation, staff expressed a desire for a meaningful work experience, consistent staffing, and opportunities to enhance care and build relationships. The custom approach integrates the person-centred care design principles and puts an emphasis on building self-directed, autonomous teams. This approach fosters teamwork, innovative problem-solving and the development of leadership skills. It also instills a greater sense of ownership and pride in one's work, leading to increased staff empowerment. Additionally, the approach includes training, processes to support culture change, and a co-design methodology.

### **Person-Centred Care Pilot Implementation**

The person-centred care approach began its pilot phase in May 2023. In advance of this, a Person-Centred Care Steering committee was established to provide oversight of the person-centred care approach within LTCS. The committee, which includes a resident, family members, staff, management, and sector representatives, meets quarterly to provide updates and recommendations to support the successful implementation of the PCC approach in the homes.

The approach was piloted on one neighbourhood at both the Garry J. Armstrong (GJA) and Peter D. Clark (PDC) Homes, as chosen by the Steering Committee. Specific interventions took place on the third floor (Bradford House) of GJA, a secure area for 30 residents with mid- to advanced-stage dementia or mental illness, and in the open Elm House at PDC, which accommodates 42 residents with varying stages of dementia.

In advance of the pilot launch, neighbourhood staff completed a two-day custom person-centred care training. Managers participated in a half-day overview session, which included modules on leadership and culture change theory. Each pilot

neighbourhood had a Person-Centred Care Champion to support staff and families in advancing person-centred initiatives.

Project Advisory Committees (PACs) were established at each pilot home to provide guidance and feedback on the selection and implementation of PCC interventions at the home level. These committees meet monthly and include residents, staff members, managers and family representatives to allow for varied perspectives.

Progress updates on the project were regularly communicated to residents, family members, and staff through newsletters, information sessions and emails. To aid the transition to person-centred care, an adapted version of the training was also provided to families at the two pilot homes.

## **Interventions**

LTCS is committed to a co-design approach, meaning that interventions are prioritized based on input from residents, staff and family members. So, while some interventions such as the Getting to Know Me Form, which is intended to facilitate conversation with the residents, are being implemented across all homes, others are home-specific. Each home is at a different phase of their journey toward person-centred care. Some of the interventions implemented include:

- **Getting to Know Me Form:** These forms were designed by PAC members to build familiarity with residents and facilitate conversation and relationship building. It helps the care team see each resident as a unique individual with a rich history. The forms are posted outside resident rooms and contain high-level information, such as a personal introduction to the resident, including preferred names/nicknames, people who are important to them, hobbies, past work, favourite music and television shows, and how they enjoy spending their time. This information can also help the care team know what works best to provide safe, personalized care.
- **Updated Kardex (Resident care information sheet):** A Kardex is a multi-page text-based document that details resident care needs. The team has created a solution that replaces the content with an easy-to-read one-page visual version, with icons. The updated Kardex allows staff to view important resident care needs at a glance, which has been especially helpful for casual staff who are less familiar with residents. As the Kardex contains private care information, it is kept inside resident rooms.

- **Waking naturally:** In most long-term care environments, day-to-day activities are typically dictated by the schedules of the staff. This often results in residents being woken up in the morning according to mealtime routines. However, the 'waking naturally' intervention ensures that residents wishing to wake up following their own natural sleep patterns are supported in doing so, under the supervision of staff.
- **Dining experience:** Stakeholders expressed a desire to improve the resident dining experience. The project team performed mealtime audits on the pilot neighbourhoods using the Centres for Learning, Research & Innovation (CLRI) Choice+ Mealtime Practices and Dining Room Checklists which focus on nurturing relationships and creating comfortable dining environments. The goal is to create a pleasurable, enjoyable dining experience through limiting noise and unnecessary disruptions, adding music and ensuring that residents have opportunities to engage socially.
- **Home-like environment:** The physical environment is a key component of the resident and family experience. Home-like features create a sense of comfort and familiarity for residents and can encourage socialization and meaningful connections. The project team is committed to making enhancements to make the homes more 'home-like,' both inside and out, and have made initial progress in some shared common spaces through painting, mural applications to disguise utilitarian spaces and purchasing new furniture and equipment. Staff are also baking bread with residents and enjoying home-like activities.
- **Adding flexibility to Personal Support Worker (PSW) role:** Rather than focusing solely on providing personal care and services to residents, PSWs are supported to spend more time engaging in meaningful resident interactions, such as taking walks outdoors, participating in enjoyable activities, or just spending quiet time together. Not only does this enrich resident quality of life, it has the added benefit of creating a more fulfilling work experience for staff.

Additional interventions were also implemented over the pilot phase period and were selected based on the needs of the individuals in the homes and prioritized as part of the co-design process.

## Supports in Place

- **Staff Training:** As part of the onboarding process, new LTCS staff members receive person-centred care overview training. Meanwhile, all staff on the person-centred care neighbourhoods and managers complete a more in-depth customized training. High-level training has also been offered to families at the two pilot homes.
- **Person-Centred Care Champion role:** As part of PCC research, the Champion role was identified as a crucial component in promoting and sustaining a culture that prioritizes person-centred practices. The role, which consists of internal staff, including both Registered Practical Nurses and Personal Support Workers who exemplify person-centred behaviours, was implemented in January 2023 through an expression of interest and interview process. The Champion role is designed to be supportive, aiming to advance interventions through observation, feedback, coaching, collaborative decision-making and teamwork. As part of the role, Champions work with residents, families and staff to reinforce the key person-centred care principles of choice, respect, dignity, and autonomy, fostering relationships and meaningful activities. To support the success of the role, Champions received training on coaching, change management and conflict resolution. Additionally, there is an established community of practice team from across the homes that meet regularly to share knowledge and learn from each other.

## Pilot Evaluation | Key findings

LTCS partnered with researchers from the uOttawa LIFE Research Institute to develop a comprehensive evaluation framework to measure outcomes. The researchers assisted with pre-implementation benchmarking (including focus groups, interviews and surveys), and post-implementation data-gathering on the pilot neighbourhoods, following the conclusion of the pilot in December 2023. A comprehensive report, measuring the impact of the initial implementation, was completed in May 2024. Some of the key findings from the pilot evaluation include:

- **Resident Quality of Life:** Overall, residents appreciate the shift to person-centred care and feel well-cared for by staff. Residents have increased overall satisfaction and quality of life in terms of socialization, meals and safety. Respondents also noted that changes in the physical environment of the homes

have had a positive, 'calming', impact. And as one resident stated: "Person-centred care is working. I am an early riser, and I am accommodated".

- **Family Engagement:** Family members, caregivers and friends welcome the person-centred care interventions and indicate that the changes have been positive for their loved ones. Families also highlight that communication between families and staff has improved.
- **Staff Satisfaction:** Initially, there were concerns that transitioning to person-centred care (PCC) would increase staff workload. However, staff report they benefit from the person-centred model and state that it has improved their work experience. Despite being busy throughout the day, staff members feel less rushed, are more relaxed, and prefer working on the PCC intervention neighbourhoods when possible.

### **Opportunities for Improvement**

While the evaluation indicates that the person-centred care approach is having a positive impact on residents, families and staff on the pilot neighbourhoods, it did highlight opportunities to improve.

- **Intervention documentation:** Future interventions should be well-documented in terms of resources, timelines and expected outcomes before and during implementation. This documentation will help track and attribute outcomes to the interventions and provide important information on efficiency and value-for-money for scalability. It is recommended to develop intervention-specific plans and theories of change based on observed outcomes.
- **Role of PCC Champion:** Future interventions should maintain the role of PCC champions to help staff learn and adapt to PCC. Champions should provide training and mentoring, particularly for staff working on different neighbourhoods or with new residents, and for the orientation of new employees on the principles of PCC.
- **Training for Family Members:** Family members expressed satisfaction with the changes resulting from PCC interventions. They also showed interest in learning more about PCC and how to care for loved ones with dementia.

The evaluation shows that the person-centred care project is making a difference. LTCS sees opportunities to further its culture change movement, positioning the City

long-term care homes as a positive choice for individuals, where they can live and thrive in a positive environment that attracts and retains caring staff. An essential component of this work involves examining the organizational structure of LTCS to enhance staff support, ensure staffing consistency on neighbourhoods, and improve performance oversight. This has been identified as a priority in LTCS's strategic planning.

Staffing consistency facilitates relationship-building, familiarity and autonomous teams. The implementation on the pilot neighbourhoods identified challenges with staffing consistency due to unplanned absences and the need to backfill with fully trained personnel, reflecting sector-wide staffing issues. LTCS is addressing this by accelerating PCC staff training for all roles across all homes. However, while training is crucial, there are challenges related to backfilling for training cover-off.

### **Project Expansion**

In January 2024, the project expanded to include one additional neighbourhood at the Peter D. Clark and Garry J. Armstrong homes and launched on one neighbourhood at both the Carleton Lodge and Centre d'accueil Champlain homes, totalling six neighbourhoods. All four City homes have a Project Advisory Committee, comprised of residents, family and staff members, in place. LTCS future planning includes expanding the PCC model of care across all neighbourhoods in the four homes.

### **Ongoing Evaluation**

Following an extensive review of various tools to measure quality of life in a long-term care setting, LTCS has implemented an evaluation tool focused on quality of life. This survey gathers information from residents (or their proxies) and assesses dimensions such as physical health, emotional well-being, social engagement and overall quality of life. The results provide valuable insights to inform decision making and planning within the person-centred care initiative.

LTCS will conduct the surveys regularly across all four homes to assess progress in areas where implementation has occurred and provide benchmarking data for areas that are yet to implement changes. Post-survey focus groups will be held to gather more thorough, detailed insights on opportunities for improvements.

Long-Term Care Services is committed to continuing with the implementation of the person-centred care approach with the goal of enriching resident and staff lives everyday by providing excellent clinical and person-centred care.

## **FINANCIAL IMPLICATIONS**

There are no financial implications associated with the report. The expansion of the Person-Centred Care approach planned for 2025 will be funded within the existing operating budget.

Additional operating costs related to the implementation of the Person-Centred Care approach will be presented to Council for approval in fall 2025 and included in the 2026 City Budget process.

## **LEGAL IMPLICATIONS**

There are no legal impediments to implementing the recommendation outlined in this report. The City will continue to work to ensure that changes are made in accordance with applicable legislation.

## **CONSULTATION**

Following the initial consultation with LTC residents and their loved ones, LTC Services will continue to consult with stakeholders as the Person-Centred Approach implementation progresses.

## **ACCESSIBILITY IMPACTS**

Through its Accessibility Policy, the City of Ottawa is committed to providing equal treatment to people with disabilities and older adults with respect to the use and benefit of City services, programs, goods and facilities in a manner that respects their dignity and that is equitable in relation to the broader public.

Ottawa Long-Term Care Services provides care and services for long-term care residents through the legislative framework that includes the Integrated Accessibility Standards Regulation, 191/11 of the Accessibility for Ontarians with Disabilities Act, 2005, as well as the Fixing Long-Term Care Act, 2021 and Ontario Regulation 246/22. All recommendations contained in this report will support and enhance accessible service provision and improve mental and physical health and well-being outcomes to all residents in the City's long-term care homes.



## **INDIGENOUS, GENDER AND EQUITY IMPLICATIONS**

The long-term care strategic direction prioritizes meeting the physical, psychological, social, spiritual, and cultural needs of all long-term care residents, in line with the *Fixing Long-Term Care Act, 2021*.

The implementation of the person-centred care approach, with its focus on shifting decision-making closer to the resident and enhancing opportunities for residents to make meaningful choices that affect their daily lives, will bring increased meaning, autonomy and purpose for all long-term care residents.

## **TERM OF COUNCIL PRIORITIES**

This recommendation is in line with the 2023-2026 Term of Council Priority for a city that has affordable housing and is more liveable for all.

## **SUPPORTING DOCUMENTATION**

Document 1: Person-Centred Care Steering Committee Membership

## **DISPOSITION**

Once Committee and Council receive this report, staff will undertake the next steps of the Person-Centred Care Approach implementation. Community and Social Services staff will also implement any direction received as part of consideration of this report.