

Revisiting Long-term Care Support Housing Needs in the Algoma District

Algoma, Cochrane, Manitoulin, Sudbury District Health Council

April 2004

Key findings:

- Evidence exists to support the Algoma LTC Committee's past recommendations including the enhancement and expansion of SH in designated apartment locations in SSM (downtown core and Chapple St.) and Elliot Lake (Warsaw and Washington Sts.).
- Of the current programs, the OFRA's Kotitalo for the frail elderly continues to experience a considerable budgetary shortfall to meet the SH needs for current residents.
- In comparison to the provincial experience and based on the demands for LTC beds, ongoing ALC numbers at SAH, and a reported premature placement of some individuals to LTC facilities, SSM stands out as the community most in need for SH.
- Considered were the SH needs in smaller communities in the district.
- Medication administration is considered to be essential to the well being of SH clients. If individuals with mild to moderate dementia are to receive SH services, the Ministry must change its policies to permit the availability and funding of on-site nursing staff to dispense medications. It is acknowledged that failure to cope and unnecessary hospitalization are often linked to medication errors among the elderly.

Estimated SH Shortfalls based on Three Benchmark Models:

- Pyramid model: 1,204 SH spaces
- Boldy and Heumann: 231 SH spaces
- BC Government: 133 SH spaces

Recommendations:

- That the MOHLTC provide appropriate funding for current SH services/programs before consideration is given to funding new SH programs.
 - That, as funding becomes available and where evidence exists, the MOHLTC expand its funding of SH services in Algoma District with a preference that funding be directed to the highest SH needs and as per program mandates.
 - That MOHLTC revise its current SH policies to permit and fund on-site nursing staff.
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