

The Structure of Long-Term Care in NL

Objective

To describe the institutions and community services provided for aging and chronically disabled people in NL.

Practice Points

- Care for the elderly can be provided at home, in personal care homes (PCHs), or in long-term care facilities (LTCFs).
- The Government of NL subsidizes 85% of residents of PCHs. The PCH rate is \$2,395/person/month, and the average subsidy is \$1,200.

The average cost for a LTCF bed is \$10,200/person/month. This sector is publically funded up to a certain income level.

Data

- These were obtained from the CIHI and the Department of Health and Community Services.

Results

Table 1. Funding Provided in the Provincial Budget for LTC, 2018/19

LTCFs	\$477 million
PCHs	\$75 million
Home Support/Home Care	\$285 million
Special Assistance	\$10 million
Total	\$847 million

- NL spends 28% of its health budget on LTC.
- The spending category "Other institutions", defined by the Canadian Institute for Health Information (CIHI), includes LTCFs, PCHs and addiction centres. NL spends 70% more per capita in this area compared to the Canadian average. Total spending is \$389 million for LTCFs and \$75 million in PCHs.

Table 2. Agencies, Beds, and Clients of LTC Services by Region, 2021

Type of Care	Region			
	EH	CH	WH	LGH
Home Care				
Agencies	25	10	13	2
>100 clients	10	4	4	0
Clients	4,267	1,195	1,121	67
PCHs				
Institutions	43	26	16	4
Beds	2,293	1,517	862	135
Clients	1,643	1,115	625	120
Occupancy %	72	74	73	89
LTCFs				
Institutions	17	12	8	4
Beds	1,688 [#]	548 [#]	553	148

[#] Plus three palliative and five respite beds in EH, and five palliative and five respite beds in CH. In CH, there are 140 new LTCF beds not included; 20 in Botwood, 60 in Grand Falls-Windsor, and 60 in Gander.

The Number of LTCF beds include protective care residence beds (24 in EH, 12 in CH and 40 in WH)

EH=Eastern Health; CH=Central Health; WH=Western Health; LGH=Labrador-Grenfell Health

- There are many private agencies responsible for home care, a minority of whom care for >100 clients each.
- On the basis that long-term institutional care should be provided as close to home as possible, there are 89 PCHs and 41 LTCFs in the province.
- Occupancy of PCHs is low on the island of Newfoundland.

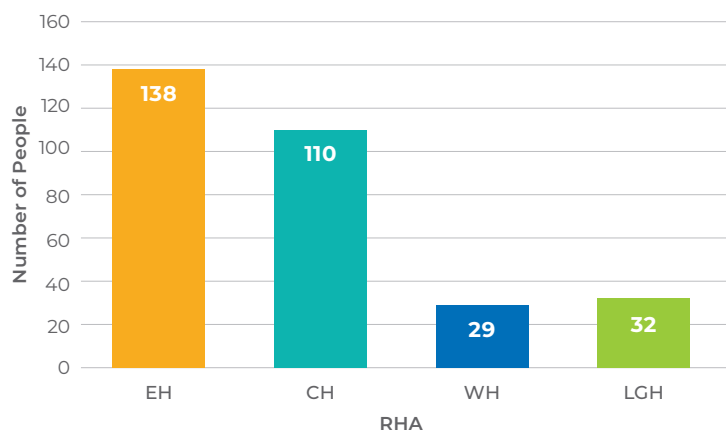


Figure 1. The Number of People Awaiting LTCF Placement on 31 Mar 2021

- On 31 Mar 2021, there were 309 people awaiting placement.
- There were high rates of people waiting for LTCF placement in CH and LGH. The rates were 2.1/1,000 seniors in EH, 4.4 in CH, 1.4 in WH, and 5.3 in LGH.
- This big wait list in CH should be mitigated by the 140 new LTCF beds being built there.

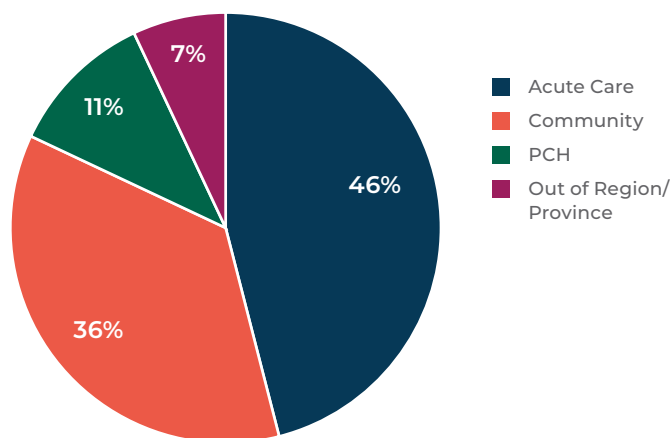


Figure 2. The Location of LTCF Clients Awaiting Placement on 31 Mar 2021 (N=309)

- 142 (46%) clients were awaiting placement while in an acute care hospital.

Conclusions

1. NL spends 28% of its health budget on LTC. Per capita population, this is substantially higher than the national average.
2. Home care agencies are multiple and generally provide care to a relatively small number of clients.
3. Occupancy of PCHs on the island is <75%. There is a high rate of PCH beds in CH. However, this has not solved the high wait list for LTCFs in CH, which should be mitigated by the 140 new LTCF beds being built.
4. The large number of clients in acute care hospitals awaiting placement to a LTCF contributes in a large way to alternate level of care (ALC) length of stay. Furthermore, current models of care for patients in ALC beds are not conducive to improving their health.