

Feedback on the Canadian Agency for Drugs and Technologies in Health- Ageing in Place Health Technology Review Guidance

July 23, 2024

Introduction

On behalf of AdvantAge Ontario, we are writing to share feedback on the proposed guidance to inform decision making to support ageing in place in Canada, which is offered by the Health Technology Expert Review Panel (HTERP) led by the Canadian Agency for Drugs and Technologies in Health (CADTH).

For more than 100 years, AdvantAge Ontario has been the voice of not-for-profit seniors' care in the province, representing more than 500 providers of long-term care, seniors' housing, and community service agencies, including 98 per cent of all municipal long-term care homes and 83 per cent of all not-for-profit long-term care homes. We also represent 143 seniors housing providers.

Our members serve seniors across the aging continuum, which includes not only long-term care but independent rental units, supportive housing, life lease housing, retirement homes and other creative affordable housing options.

We are the only association representing the full continuum of seniors' care in Ontario and appreciate the opportunity to help inform guidance on this important topic that we have been long advocating for.

We are pleased to see that HTERP has been leading work to appraise strategies aimed to support ageing in place beyond health sectors across all jurisdictions in Canada. We support HTERP's position on this issue – that there is a significant opportunity to expand the continuum of care for seniors, which is currently quite limited in Ontario.

We appreciate that the statements in the report acknowledge the varying health, and social needs of seniors especially those who require culturally appropriate services and may fall under low/ moderate income statuses. Our commentary aims to highlight the need to expand innovative and affordable housing options for seniors including not for profit seniors' supportive housing and campuses of care. Below are our responses to the provided discussion questions:

AdvantAge Ontario Comments

1. Are the draft recommendations presented in a clear manner (i.e., wording)? If not, how can the wording of the recommendations be improved for clarity?

The Association acknowledges that the draft recommendations are presented in a clear manner, providing clarity in alignment with the positions that there should be equity in access to culturally appropriate, safe, and sustainable care to support dignity in living in a place that aligns with one's values, preferences, and priorities.

While there are lots of excellent statements shared which support the goal to inform ageing in place strategies, we would like to add some additional considerations incorporated from the perspective of not-for-profit providers of seniors housing, who play a crucial role in the continuum of care for seniors.

As noted in the report, there is a rising demand among seniors who prefer to age in their communities, however barriers in availability and accessibility limit these opportunities. While we appreciate the report acknowledging these challenges, we believe there is a missing piece here- affordability for innovative options related to the “missing middle” – the population of seniors whose needs are not appropriate for them to age in place in long term care or retirement homes.

As we have long advocated, there are many different innovative options developed by not-for-profit providers who are deeply rooted in the cultural, religious and geographic communities they serve.

Not-for-profit providers have led the development of seniors' supportive housing and campuses of care. Seniors' supportive housing refers to a combination of housing and assisted living supports that enables seniors to live as independently as possible in their community and that provide suitable and flexible services that address needs as they may change over time. What distinguishes this from retirement housing is that rents are affordable and often geared to income.

Campuses of care are innovative models that are getting renewed attention for their potential to offer a range of supports and services in one location for seniors as their needs change. Campuses also help address accessibility challenges in rural and remote areas where transportation is limited.

Unfortunately there is no seniors' supportive housing strategy and funding both federally and within the province of Ontario- to help expand the much-needed supply for this crucial sector and provide access to sustainable funding in order to build and operate these programs.

There is also a lack of adequate knowledge on how seniors can navigate available affordable housing assistance to age in their communities. Because of this, providers are often sent applicants that are not suitable for their services and are left with limited capacity to address diverse needs.

We therefore appreciate the statements regarding the need to streamline data collection and the coordination of continuity of care such as through technology and communication. We support the sharing of a centralized list of all government led senior services and believe this list could be

instrumental for seniors and their caregivers to learn about the different options available and help navigate complex systems.

However, there is also an opportunity to leverage information on available seniors supportive housing supports through this list as information is not currently available in Ontario and is very challenging to navigate as the delivery of services falls under various ministries.

Furthermore, we believe that the recommendations that note the need for data collection to assess population needs, levels of housing stock, and potential harms for the lack of availability of services is necessary to understand current landscapes and identify solutions.

While the recommendations acknowledge the inequities that disproportionately affect members of equity-deserving groups, it is important to also include those living in northern and rural areas who continue to experience a multitude of barriers in access. These barriers range from access to transportation, housing, health services, staffing resources and much more. One of the biggest problems with finding staff in the north is the lack of attainable housing options.

The ageing population in rural and northern is rapidly growing, while having a long history of under served needs which is often overlooked in strategies. To ensure all equity deserving members are captured in these recommendations, it is important for there to be a section on supporting the ageing in place needs of seniors living in northern and rural areas.

2. Will the draft recommendations be helpful to those making policy or clinical practice decisions?

The draft recommendations are well explained, and we are supportive of their content. However, as mentioned above, there should be the additions of innovative forms of seniors housing such as supportive housing and campuses of care, that could be recommended to spur policy makers throughout the country to consider the full potential of the continuum of care for seniors.

Furthermore, while we are supportive of strategies that support home modifications to enable accessibility opportunities for ageing in place, we believe careful considerations need to be for seniors who may experience specific barriers to participate in the mentioned programs. Perhaps there could be more guidance on how supports can be in place for seniors who cannot afford or may live in locations where availability of resources (such as northern and rural areas) is a challenge.

3. Has all the relevant evidence in the science report been taken into account in regard to these recommendations? If not, please explain why, citing evidence to support your position.

The Association appreciates the comprehensive work undertaken to develop the evidence in the science report, which seems to be highlighted prominently in the guidance document and informs the draft recommendations.

Many other studies demonstrate that appropriate housing has a significant impact on the capacity that seniors have to retain a sense of self-determination, independence and dignity.

Seniors supportive housing plays an important role in the overall system as it provides viable options for previously independent seniors whose need for assistance have increased over time.

It also provides certain relief from the sustained demand for LTC by providing suitable housing and support alternatives that can help defer hospital admissions.

Additionally, according to the 2020 City of Toronto Report for Action: Plan to Create Supportive Housing Opportunities, the average cost per day of supporting a senior in assisted living is \$63, which is significantly less than the more than \$200 per day cost for supporting a senior in long-term care. The challenge is that after years of underfunding, many existing operators are considering closing their programs down. Support is needed to ensure they stay open while also creating new units.

Given there is a growing number of seniors occupying acute care settings that do not require it, this model is important as it provides an additional option to support ageing in place.

4. Please provide any additional comments you may have about this report.

There is a growing demographic of middle to low-income seniors who need extra supports to function independently, which could delay their admission into long-term care or remove that need entirely. Decision makers have a tremendous opportunity to take advantage of the potential not for profit housing stock that exists across all jurisdictions and advance it further for diverse seniors whose needs are getting more complex.

In addition to that, there could be greater focus on addressing physical accessibility challenges within the context of seniors housing such as ensuring there are more wheelchair friendly rental housing units.

Decision makers both nationally and provincially need to embrace innovative services- led by not-for-profit providers who are involved with their communities and are competent to serve them with attentive care- with significant investment, to prevent placement into long term care.

Conclusion

The Association appreciates the opportunity to provide feedback on the Health Technology Expert Review Panel's proposed guidance statements to support ageing in place across jurisdictions in Canada.

While we are supportive of many of the guidance statements, we believe there are elements that could advance focus on the need to expand affordable and attainable innovative housing options for seniors across the entire continuum of care.

We hope that our feedback will be taken into consideration, and we look forward to working with the Health Technology Expert Review Panel on this important initiative.