June 10, 2015

Dear [Redacted]

Re: Your request for access to information under Part II of the Access to Information and Protection of Privacy Act [Our File #HCS/034/2015]

On May 7, 2015, the Department of Health and Community Services (the Department) received your request for access to the following records:

“All briefing records/information notes & materials and materials/discussion papers and/or reports in conjunction with the privatization of long term care, including Private-Public Partnerships that are being explored for long term care - “materials” has been further defined as “briefing notes, emails, letters and consultant reports”. The timeframe for the request is 2014 and 2015.”

On May 20, 2015, the request was further refined to the following:

“On April 28, 2015, the Department of Health and Community Services announced a plan for expansion of Long-Term Care beds which included Private-Public Partnerships. Based on this announcement, I’m seeking final and/or latest revision of documents such as briefing notes, information notes, decision notes, consultant reports, memorandums, and/or discussion papers relating to the rationale behind the decision to privatize long term care. Emails and/or final correspondence providing further rationale of this decision would be appreciated. The timeframe is from September 2014 to February 2015”.

On May 27, 2015, your request was once again refined to the following:

“On April 28, 2015, the Department of Health and Community Services announced a plan for expansion of Long-Term Care beds which included Private-Public Partnerships. Based on this announcement, I’m seeking final and/or latest revision of documents such as briefing notes, information notes, decision notes, consultant reports, memorandums, and/or discussion papers relating to the rationale behind the decision to privatize long term care. The timeframe is from September 2014 to February 2015”.

The Department has reviewed your request in the context of the Access to Information and Protection of Privacy Act (the Act) and is pleased to inform you that access to these records has been granted, in part. In accordance with your request for a copy of the records, the appropriate copies have been enclosed.
Please be advised that access to the remaining records has been refused in accordance with the following exceptions to disclosure, as specified in the Act:

s.18 Cabinet confidences

s.18(1)(a) "cabinet record" means
(iii) a memorandum, the purpose of which is to present proposals or recommendations to the Cabinet,
(viii) a record created during the process of developing or preparing a submission for the Cabinet,
(ix) that portion of a record which contains information about the contents of a record within a class of information referred to in subparagraphs (i) to (viii)

s.18(2) The head of a public body shall refuse to disclose to an applicant a Cabinet record, including
(a) an official Cabinet record.

Pages 80-192 have been fully redacted and therefore removed under the above noted section of the Act.

s.20 Policy, advice or recommendations

s.20(1) the head of a public body may refuse to disclose to an applicant information that would reveal
(a) advice, proposals, recommendations, analyses or policy options developed by or for a public body or minister;
(c) consultations or deliberations involving officers or employees of a public body, a minister or the staff of a minister.

The following pages have been fully redacted and therefore removed under the above noted section of the Act:

- Pages 4, 10-11, 15, 19-26, 28-29, 43-44, 48, 52-55, 58-59, 61, 68-69, 73, 76-77 and 79.

Section 43 of the Act provides that you may ask the Information and Privacy Commissioner to review this refusal of access or you may appeal the refusal to the Supreme Court Trial Division. A request to the Commissioner shall be made in writing within 60 days of the date of this letter or within a longer period that may be allowed by the Information and Privacy Commissioner.

Records that are refused on the basis of section 21 (legal advice) or section 18(2)(a) (official cabinet record), you must appeal directly to the Supreme Court Trial Division within 30 days after you receive the decision of the public body, pursuant to section 60. You may also contact the Office of the Information and Privacy Commissioner who may decide to initiate an appeal pursuant to subsection 60(1.1).
The address and contact information of the Information and Privacy Commissioner is as follows:

Office of the Information and Privacy Commissioner  
2 Canada Drive  
P. O. Box 13004, Stn. A  
St. John's, NL. A1B 3V8  

Telephone: (709) 729-6309  
Facsimile: (709) 729-6500  

In the event that you choose to appeal to the Trial Division, you must do so within 30 days of the date of this letter. Section 60 of the Act sets out the process to be followed when filing such an appeal.

Please be advised that this letter will be published following a 72 hour period after it is sent electronically to you or five business days in the case where records are mailed to you. It is the goal to have the letter posted to the Office of Public Engagement's website within one business day following the applicable period of time. Please note that requests for personal information will not be posted online.

If you have any further questions, please feel free to contact the ATIPP Coordinator, Kim Anstey-Stockwood at 729-7776 or by email kimanstey@gov.nl.ca.

Sincerely,

BRUCE COOPER  
Deputy Minister

/kas  
/Encl.  
ATIPP/0322/002/005
Long Term Care
Bed Planning Project

October 8, 2014
Issues

• Aging population*:  
  – Provincially, the 75+ population projected to increase 77%  
    (from 11,895 to 21,083 over next 12 years)  
  – “Baby boomer” population driving demand  

• Alternate Level of Care (ALC)^:  
  – approximately 20% acute care beds occupied by ALC clients  
  – approximately 50% of ALC clients waiting LTC placement

* Economic Research Analysis Division Finance  
^ Average provincial data (RHAs)
Response

• Close to Home”: LTC & CSS Strategy
  • initiatives to decrease demand for LTC beds by enhancing community support
  • commitment to “ensure adequate supply of LTC beds”

s.18(1)(a)(ix), s.18(2)(a)
Data Sources

• Regional Statistics (Teledata and RHA)
• Literature Review
• Jurisdictional Scan
• Population and Bed Projections (ERA, DoF)
• Financial Analysis (Project Analysis, DoF)
• Stakeholder consultation (RHA)
LTC capacity

NL
- 2818 beds in 41 facilities
- 282 individuals waiting placement (Aug. 2014)

St. John’s area
- 1201 beds (includes 30 new beds opened at SJ LTC)
- 121 individuals waiting placement (EH) (Aug. 2014)
## LTC Homes St. John’s

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<thead>
<tr>
<th>Ownership type</th>
<th>Number of beds</th>
<th>Percentage of total</th>
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</thead>
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<td>Female residents</td>
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<td>Level 1&amp;2</td>
<td>5.5%</td>
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A review of residents on Wanderguard units revealed that 79 of 218 individuals met the criteria for placement in Protective Community Residences.
LTC Bed Projection Study

- Economic Research Analysis Division, Finance

- Data sets used to inform the model:
  - Population projections (Finance)
  - Demographic data NL LTC residents (RAI MDS and paper based)
  - Resident Care Facilities (RCF) survey (Statistics Canada)
Wait times

- While some provinces report on wait times few have established targets for LTC placement
  
  - AB: % people placed within 30 days of assessment (Targets set based on historical trend data)
  
  - SK: no target on placement, no more than 3.5% acute care beds can be occupied by individuals waiting for LTC placement
  
  - PE: established a bed ratio (102 beds per 1000 people 75+ years)
  
  - ON and NS no targets
Wait list

- How to determine an acceptable wait list?

- Methodology used for determining the number of beds for the new LTC facility in Corner Brook included consideration of the capacity of the system to manage ALC clients

- A review of number ALC (city hospitals) waiting LTC showed:
  - May 2013 (28 people)
  - January 2014 (34 people)
  - September 2014 (47 people)

- On average 36 individuals in ALC waiting for LTC placement
Wait list

- Acceptable waitlist for St. John’s area:
  - Average monthly number waiting – average number waiting in ALC
  - \(= 76 - 36 = 40\); 40 = average number waiting in community
Literature Review

- LTC services are provided by a mix of providers private (for-profit, non-profit), public (municipal or provincial government), assisted living facilities.

- Systematic reviews (Hillmer et al. 2005, Comondore et al. 2009) reported some studies showed a trend toward higher quality of care in public and non-profit compared to for-profit homes. Many studies-no difference detected.

- Other publications linked staffing levels to quality of care noting decreased staffing in the for-profit sector.
Jurisdictional Scan

• Provided questionnaire to all provinces and territories

• Received completed questionnaires from 6 provinces
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• All provinces in Canada engage the private sector for LTC services (private LTC beds ~ 2.5% NL to 60% ON, others 25%-40%).

• All provinces have legislation, Acts or Regulations outlining requirements, performance monitoring, accountabilities and funding models.
Selected Best Practices

- Activity Based Funding (AB and ON)
  - Funding is provided based on health care needs of client- informed by RAI MDS 2.0 data

- Envelop Funding (ON and NS)
  - Per diem funding provided for nursing care, food, programming (this must be returned to Ministry if not used (protected envelop NS)
  - Per diem funding provided for housekeeping, dietary services- operator can retain surplus as profit (unprotected envelop)
## Number and Location of LTC beds in St. John’s

<table>
<thead>
<tr>
<th>Site</th>
<th>Location</th>
<th># of Beds</th>
<th>Protective Care Beds</th>
<th>Wanderguard #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Waterford Hospital</td>
<td>St. John's</td>
<td>50</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dr. Walter Templeman</td>
<td>Bell Island</td>
<td>15</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Agnes Pratt</td>
<td>St. John's</td>
<td>134</td>
<td>26</td>
<td>28</td>
</tr>
<tr>
<td>Glenbrook Lodge</td>
<td>St. John's</td>
<td>104</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Masonic Park</td>
<td>St. John's</td>
<td>40</td>
<td></td>
<td></td>
</tr>
<tr>
<td>St. John’s LTC home*</td>
<td>St. John's</td>
<td>405</td>
<td>24</td>
<td>83</td>
</tr>
<tr>
<td>Saint Luke's</td>
<td>St. John's</td>
<td>117</td>
<td></td>
<td>31</td>
</tr>
<tr>
<td>St. Patrick's</td>
<td>St. John's</td>
<td>210</td>
<td></td>
<td>76</td>
</tr>
<tr>
<td>Veteran's Pavilion</td>
<td>St. John's</td>
<td>56</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chancellor Park</td>
<td>St. John's</td>
<td>70</td>
<td>27</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>1201</strong></td>
<td><strong>77</strong></td>
<td><strong>218</strong></td>
</tr>
</tbody>
</table>

* Includes beds open as of Sept. 2014, additional 30 beds open Fall 2014
Back up slides

Number of individuals waiting LTC placement in Eastern Health region
Back up slides

Jan. 2014

<table>
<thead>
<tr>
<th>Level of care</th>
<th>EH</th>
<th>CH</th>
<th>WH</th>
<th>LGH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1</td>
<td>33</td>
<td>2</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Level 2</td>
<td>58</td>
<td>12</td>
<td>25</td>
<td>0</td>
</tr>
<tr>
<td>Level 3</td>
<td>1,472</td>
<td>491</td>
<td>396</td>
<td>113</td>
</tr>
<tr>
<td>Level 4</td>
<td>85</td>
<td>2</td>
<td>8</td>
<td>2</td>
</tr>
</tbody>
</table>
Back up slides

LTC Resident Length of Stay
3-Year Moving Average
# Regional Bed Ratios

<table>
<thead>
<tr>
<th></th>
<th>NL (30 beds at SJ LTC)</th>
<th>LGH</th>
<th>WH</th>
<th>CH</th>
<th>EH (30 beds at SJ LTC)</th>
<th>EH (60 beds at SJ LTC)</th>
<th>EH (60 beds SJ LTC and 50 CP)</th>
</tr>
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<tbody>
<tr>
<td><strong>Population 2014</strong></td>
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<td>317,091</td>
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<tr>
<td>pop&gt;75 years</td>
<td>35,055</td>
<td>1629</td>
<td>6334</td>
<td>7964</td>
<td>19128</td>
<td>19128</td>
<td>19128</td>
</tr>
<tr>
<td>number of LTC beds</td>
<td>2818</td>
<td>117</td>
<td>474</td>
<td>519</td>
<td>1708</td>
<td>1738</td>
<td>1788</td>
</tr>
<tr>
<td># of LTC beds/ 1000 pop</td>
<td>5.4</td>
<td>3.1</td>
<td>6.1</td>
<td>5.6</td>
<td>5.4</td>
<td>5.5</td>
<td>5.6</td>
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<tr>
<td># of LTC beds/ 1000 pop &gt;75</td>
<td>80</td>
<td>72</td>
<td>75</td>
<td>65</td>
<td>89</td>
<td>91</td>
<td>93</td>
</tr>
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Long Term Care
Bed Planning Project

October 30, 2014
Issues

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  – Provincially, the 75+ population projected to increase 77% (from 11,895 to 21,083 over next 12 years)
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s.18(1)(a)(ix), s.18(1)(2)(a)
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s.20(1)(a), s.20(1)(c)
Wait times

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Wait list

- Acceptable waitlist for St. John’s area:
  - Average monthly number waiting – average number waiting in ALC
  - $76 - 36 = 40$; $40 =$ average number waiting in community

s.20(1)(a), s.20(1)(c)
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Long Term Care
Bed Projections
Central Health

December 16, 2014
LTC Bed Projection Study

- Economic Research Analysis Division, Finance

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  - Resident Care Facilities (RCF) survey (Statistics Canada)
Wait list

• Acceptable waitlist for Central Health area:
  – Average monthly number waiting – average number waiting in ALC
  – \[ 94 - 56 = 38 \]; 38 = average number waiting in community

s.20(1)(a), s.20(1)(c)
Long Term Care Bed Planning Project

January 15, 2015
Issues

• Aging population*:  
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Response

- “Close to Home”: LTC & CSS Strategy
  - initiatives to decrease demand for LTC beds by enhancing community support
    - commitment to “ensure adequate supply of LTC beds”
      - Implementation of assessment tools
      - LTC bed projection modeling (number and type)
      - Assessment options to meet projected LTC demand (public vs. private)
Data Sources

- Regional Statistics (Teledata and RHA)
- Literature Review
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## LTC capacity

As of November 2014:

<table>
<thead>
<tr>
<th>RHA</th>
<th>Number of LTC beds</th>
<th>Number of individuals waiting LTC placement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eastern</td>
<td>1708</td>
<td>115</td>
</tr>
<tr>
<td>Central</td>
<td>519</td>
<td>96</td>
</tr>
<tr>
<td>Western</td>
<td>474</td>
<td>68</td>
</tr>
<tr>
<td>Labrador/Grenfell</td>
<td>117</td>
<td>24</td>
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<tr>
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<td>303</td>
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<td>3.1</td>
<td>6.1</td>
<td>5.6</td>
<td>5.4</td>
</tr>
<tr>
<td># of LTC beds/ 1000 pop &gt;75</td>
<td>80</td>
<td>72</td>
<td>75</td>
<td>65</td>
<td>89</td>
</tr>
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