



News Release

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Lack of Pandemic Preparedness and Poor Infection Control Practices in Long-Term Care Contributed to COVID-19 Impacts: Auditor General

(TORONTO) No requirement to prepare for a pandemic, coupled with long-standing, unaddressed weaknesses in infection control and prevention in Ontario's long-term-care homes contributed to the tragic impacts of COVID-19 on long-term care residents, concluded Auditor General Bonnie Lysyk in her special report on COVID-19 Readiness and Response in Long-Term Care.

“Despite very specific observations and recommendations on preparing for future SARS-like outbreaks by our Office and others, actions taken over the years have been insufficient to ensure that we would be better prepared as a province – and Ontario's long-term care homes were among the first to be impacted,” Lysyk said following the release of the report today. “Unfortunately, neither the Ministry of Long-Term Care, nor the long-term-care sector was sufficiently positioned, prepared or equipped to respond to the issues created by the pandemic in an expedient and effective way.”

The audit found that long-term-care homes were ill-prepared to prevent or minimize COVID-19 outbreaks due to chronic staffing shortages and inconsistent practices in infection prevention and control prior to COVID-19. As well, many residents were in rooms with three or four occupants, in homes which had not yet been required to redevelop to the one- to two-occupant standards set by the province in 1999. The audit found that homes with more than two residents sharing rooms tended to experience more severe outbreaks.

The audit, which has 16 recommendations, also notes that the long-term-care sector is largely disconnected from other institutions in the health-care sector. The report notes that many homes were not able to draw on the staffing and infection prevention and control expertise of hospitals and public health units when they needed it most.

“In recent months, a number of government commitments have been made to improve long-term care and this, along with continued attention to our recommendations, would go a long way toward ensuring seniors living in Ontario's long-term-care homes are accorded the well-deserved dignity, safety and comfort that is clearly envisioned in the *Long-Term Care Homes Act, 2007*,” said Lysyk.

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Visit www.auditor.on.ca to read the report.

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Background and Other Findings:

Pandemic Readiness and Response in Long-Term Care looks at the provincial and long-term care sector responses to COVID-19 from when the virus was first detected in Ontario in January 2020 to December 31, 2020. This chapter is one in a series undertaken by our Office on the province's response to the Coronavirus Disease 2019 (COVID-19). Chapters 1 to 3 were released in November 2020.

- Long-term-care homes were not required to prepare for a pandemic as part of their emergency planning. Regulation 79/10 provides a list of emergencies they must prepare for, but a pandemic is not included on this list.
- Infection prevention and control (IPAC) measures were not consistently practised, understood or inspected in long-term-care homes even prior to the COVID-19 pandemic. Expertise in this area resides with hospitals and public health units, but given the structure of Ontario's healthcare system, and lack of agreements with these institutions, many homes could not benefit from their expertise in infectious disease outbreaks in the initial wave of the pandemic.
- Direction from the Chief Medical Officer of Health to contain the spread of COVID-19 in long-term-care homes was often unclear in the first wave of the pandemic, and initially left to long-term care home management to decide what actions to take, such as rules for resident trips outside the homes, and for staff who worked at multiple locations.
- Restricting family caregivers from visiting homes and assisting with the care of their loved ones eliminated a valuable source of care providers, which contributed to a decline in residents' mental and physical health.
- A lack of space prevented homes from isolating residents with COVID-19 effectively, but the Ministry provided no guidance for off-site alternatives.
- The transfer of patients designated as alternate level of care (ALC) from hospitals to long-term-care homes contributed to crowding in homes; some were already at 98% capacity.
- The Ministry decided in 2018 to discontinue proactive comprehensive inspections solely to address a growing backlog of complaints and critical incident reports.
- While non-compliance by homes with the *Long-Term Care Homes Act, 2007* and its regulation remains an issue, including non-compliance with infection prevention requirements, the Ministry has chosen not to implement fines or penalties.
- The Ministry did not conduct on-site inspections of homes for two months during the COVID-19 pandemic because concerns about inspector safety were raised.