McKenna, Neil

From:

anne.dawson@hrsdc-rhdcc.gc.ca

Sent:

Sunday, April 19, 2020 12:53 PM

To:

Stickney, Matt; Chin, Ben

Cc: Subject:

ophelia.john@hrsdc-rhdcc.gc.ca FW: LTC and Seniors Living Update

Attachments:

CAPES_Presentation_re_Gov_t_Assistance.PPTX

Hi Matt and Ben,

Hope you are both well.

I meant to copy you on the below email to keep you up to date on long term care. I think there may be a coordination role we can assist with here.

Please see below.

Don't hesitate to let me know if you have any questions or want to discuss further.

Best,

Anne

Anne Dawson

Chief of Staff, Office of the Minister of Seniors

Employment and Social Development Canada | Government of Canada

Office: 819-654-1579

Chef de cabinet, Cabinet de la ministre des Aînés Emploi et Développement social Canada | Gouvernement du Canada

Bureau: 819-654-1579

From: Dawson, Anne AE [NC] Sent: April 19, 2020 12:31 PM

To: 'sabina.saini@canada.ca' <sabina.saini@canada.ca>; 'Church, Leslie (SPAC/PSPC)' <leslie.church@canada.ca>

Cc: Muccilli, Stephanie S [NC] <stephanie.muccilli@hrsdc-rhdcc.gc.ca>; 'kathryn.nowers@canada.ca'

<kathryn.nowers@canada.ca>; Gerasimov, Boyan (SPAC/PSPC) <boyan.gerasimov@canada.ca>; Ophelia John

(ophelia.john@hrsdc-rhdcc.gc.ca) < ophelia.john@hrsdc-rhdcc.gc.ca>

Subject: LTC and Seniors Living Update

Hi Sabina and Leslie,

Hope you are both having a good Sunday, despite the grey skies.

Please find attached a deck from the Canadian Association to Protect and Equip Seniors Living (CAPES), the organization that represents 40 per cent of Canada's seniors living sector. (You may already have received this from CAPES).

CAPES represents 26 mostly big players across the country (Sienna, Revera, Chartwell), but includes some small independent seniors home operators. They believe they have a plan to address the issues of PPE and facility space, although they are requesting federal government assistance on both fronts.

Melody Lo and Michelle Roth, who are heading up this conglomerate, have requested our assistance in bringing together CAPES and the provinces to see if they could work together to make their proposal work. The thrust of their

proposal is two fold: to open up space in their many retirement homes across Canada to take in long-term care residents that need to be isolated in long-term care homes but they do not have the space to do so properly (they do not think hotels would work); and to serve as an online hub to coordinate and track all orders of PPE for seniors living across Canada.

The big players in this conglomerate are voluntarily ordering 35 per cent more than they need as a reserve to help the smaller independent operators and they propose to provide this PPE to them at cost or lower.

CAPES has had a difficult time getting the ear of the provinces on this proposal and would like the federal government to assist and bring CAPES and the provinces to the table to discuss. They would like the hospitals surge fund, which was set up by the provinces (at least Ontario) at the beginning of the pandemic, to be diverted to this initiative.

Our Seniors team would be pleased to work with you to coordinate this.

On another related matter, the Deputy PM asked Minister Schulte to work closely with Ontario Min of Long Term Care Marrilee Fullerton and BC Minister of Health Adrian Dix to determine what they need and where we can assist. Specifically, she asked the Minister to reach out to Min Fullerton to discuss Ontario's needs and to ask Min Dix to share any documents he has on best practices given BC's success to date in flattening the curve.

Minister Schulte spoke with Min Dix a few weeks ago when she was doing outreach to all her PT counterparts, at which time he indicated the strong relationship he has with Min Hajdu so your bossses may already be in these discussions at your respective PT tables. Please advise on any updates you may have had at your PT tables on this and let me know if you have any concerns.

And finally, I have attached the contents of an email Min Schulte received from Kirsty Duncan. She raises several issues that are already being discussed internally and with your PT counterparts and Min Schulte is keeping in close touch with Kirsty but some of the points may be better addressed at your ends. Please let me know any information we might pass on to Kirsty in response to these concerns.

Thank you. Best, Anne

Dear Chrystia and Deb,

Good evening.

Following Deb's call bringing health, PSPC, Labour, DPMO together (I hope I included everyone?), I was asked to put some ideas together.

I think if you are going to move forward on some/all, it will need a coordinated group of Ministers working together on a regular basis to address the crisis in LTC (as I think has been done on procurement?).

Quebec has asked for help.

Will Ontario ask for similar help, will they ask for help on some parts, or are there opportunities to work in partnership in some areas?

Hope this provides a starting place for some discussion?

Kirsty

LTC

(Retirement, Seniors, LTC Residences)

PPE

- 1. Ontario and Quebec are in crisis.
- have there been discussions with Premiers/Ministers to assess LTC needs?
- what are the P/T PPE requirements for LTCs, by item and amount of stock?
- will Ontario make the same request as Quebec for Canadian Forces support, and if so, are we able to respond?
- 2. We need to understand what is actually available in terms of newly acquired federal stock.
- what was delivered to Canada, and when?
- what was delivered to Ps and Ts, and was it usable?
- what percentage of P and T deliveries was for LTCs?
- 3. We need to understand what is actually available in the national stockpile (NESS).
- how many masks and other necessary PPE items are in the national stockpile, and are they useable (i.e. not past due date)?
- 4. To meet urgent P and T demand, is there stock from the national stockpile (NESS) that could go directly to P and Ts for LTC, and, if so, when?

Testing

- 1. Every staff member currently working in an LTC has to be tested, and tested on a regular basis.
- 2. Every LTC resident, every LTC admission, and any LTC transfer in, out and return, needs to be tested.
- 3. We need to understand who is infected and who is not, stop infected workers from working and effectively isolate infected residents.
- 4. Can PHAC, provincial bodies or IPAC put up testing infrastructure at every LTC?

Infection Control

1. Could IPAC send infection control experts to each affected LTC residence to determine what is needed to stop the spread in that particular residence?

Reduce Crowding/Increase Social Distancing in LTCs

- 1. Identify all available hotels (from our federal stockpile) that could start accepting healthy residents immediately.
- 2. After residents have been tested and found to be negative for COVID, could those who are mobile, those who are not at risk of fracture, and those who do not have dementia/wandering risk be relocated safely to a stockpile hotel?
- if so, what healthcare workers would be needed to support them?
- 3. Those who test positive for COVID and require medical attention must receive it.

Increase LTC Staff

- 1. If we can assure frontline workers that they have commensurate remuneration, the necessary PPE and access to testing, they might actually feel safe enough to come to work.
- 2. The following could be done today: the Provinces could ask each LTC about the required complement of staff by category, and the details of any staff shortages by category.
- 3. Each Province could establish a centralized website/service to fill missing positions. If this is done, could we help to support?
- 4. Is day care an issue, as I am hearing? If so, are there channels for support?
- 5. The Michener Institute at UHN is working on a quick orientation programme for helping in LTCs that "should be live in a matter of days". More details to come (in the meantime, please do not disclose).

Anne Dawson

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Canadian Association to Protect and Equip Seniors Living (CAPES)

Request for Governmental Assistance

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Genesis of CAPES

The COVID-19 pandemic brought to light the struggles of the systemically under-resourced sector that serves our most vulnerable populations.

In early April, Melody Lo of RFA Capital, through her work with Dr. Joseph Wong and the Yee Hong Centre for Geriatric Care (a not-for-profit LTC group) quickly identified the immediate dangers of the sector's limited access to PPE (Personal Protective Equipment).

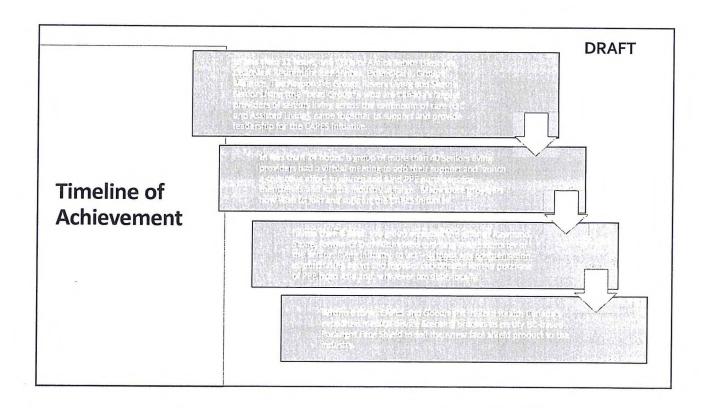
She asked Michelle Roth of Goodmans LLP to deploy the firm's Aging & Healthcare platform, SenbridGe by Goodmans, to help launch a volunteer-based PPE initiative.

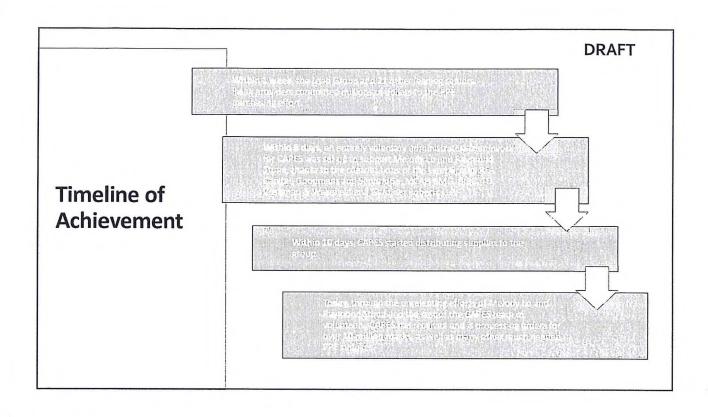
The purpose of the initiative, now called CAPES (Canadian Association to Protect and Equip Seniors Living), was to enable industry leaders to obtain much needed supplies not only for their residents and staff, but also for the numerous communities of smaller seniors living operators who have even more limited resources and access to PPE.

What was the response?

We experienced an **immediate and shared recognition** that the entire industry was suffering from a major PPE shortage in the face of the demands of dealing with COVID-19.

We all knew that the COVID-19 outbreak situation in Canada could not be effectively addressed in the near term (or permanently) without adequate and prompt help for the seniors care sector and that it was up to the industry to take whatever actions it could to protect as many of their seniors and caregivers as possible.





DRAFT One of the founding objectives of the CAPES initiative was to ensure that smaller operators had access to PPE. Accordingly, the CAPES collective agreed to fund a 35% increase in each order to create a reserve inventory of millions of PPE items available to smaller operators. Smaller operators (even if they could access PPE) cannot tap into the benefits of Helping volume pricing, The CAPES 35% reserve initiative provides an avenue for smaller operators to purchase supplies at cost. **Smaller** The distribution of this 35% reserve PPE is being coordinated through industry associations across Canada, including BC Senior Living Association, BC Care **Operators** Providers Association, Safe Care BC, Ontario Long Term Care Association, Ontario Retirement Communities Association, Advantage Ontario and Regroupement Quebecois Des Residences Pour Aines. This week CAPES received a very generous donation of PPE items from Point Click Care, a large technology and software supplier to the sector, all of which will be made available to the smaller operators.

New Online Supply Hub

Thanks to the ongoing volunteer efforts of Goodmans, SenbridGe and ShipFusion, CAPES is rolling out an online supply hub for the reserve PPE inventory, which will be exclusive to smaller LTC and Retirement Home operators and open up broader and more streamlined access to the PPE supplies.

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About SenbridGe by Goodmans

SenbridGe by Goodmans (www.senbridge.ca) is a networking and advisory platform focusing on seniors living, healthcare and aging in Canada.

Having earned the trust and confidence of the key industry stakeholders over multiple decades of experience, SenbridGe is uniquely positioned to provide industry leadership and facilitate collaboration across all aspects of the Canadian seniors housing and aging sector.

SenbridGe also has platforms to delivery sector-wide support for diversity & inclusion, growth and mentorship for aspiring leaders and charitable and other outreach programs.



SenbridGe conferences and networking initiatives bring together senior leaders from a wide range of industry participants to build relationships, partnerships, and industry knowledge.

Participating organizations include:

- All of the major senior housing owners and operators in Canada (including Quebec) encompassing long-term care, assisted living and seniors apartments.
- Canadian pension plans and infrastructure funds, global seniors housing REITs and other investors in the Canadian industry.
- · Home health care providers.
- · All of the major Canadian banks, CMHC and other lenders.
- Technology companies and other innovators in the healthcare sector.
- Feasibility/Valuation advisors, Brokerages, Accounting and Law Firms.



SenbridGe Constituency

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The seniors living industry in Canada is close knit and unlike many other industries, able to put competitive concerns aside to quickly assemble and execute united strategies.

SenbridGe supports this collaborative landscape and its extensive network provides:

- Unparalleled access to senior leaders in all aspects of the Canadian senior housing and aging sector.
- The ability to quickly enumerate common goals among industry participants across the country.
- The capability to act as a hub for industry led initiatives, including recent efforts targeted at destigmatizing aging in Canada and CAPES.



SenbridGe Platform

Growth and Capabilities of CAPES

CAPES was deployed using the SenbridGe communications and collaboration platform and its reach includes the top 20 seniors living operators.

Our platform for sharing information is agile and for example, gave us quick first-hand knowledge from the operators when their shipments were seized.

The breadth of our expertise and skillset allowed us to quickly implement a way to help the entire sector.

The regular and open exchange of knowledge provided new and varied options for supply so that we could minimize the risks of using the same suppliers.

Our supply hub function now encourages and enables large-scale donations, such as the millions of masks donated by *PointClickCare*.

We are learning from this experience to better the Canadian seniors living sector for future crises.

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Reach of SenbridGe and CAPES

The CAPES collective that SenbridGe and CAPES are directly working with represents approximately 40% of the Canadian seniors living sector.

When we factor in the smaller operators, who sometimes contact us directly, but are mainly accessed through the various industry associations, the reach is closer to 60-65% of the total industry (and growing).

*See Slides 14 - 15, prepared by Cushman & Wakefield

Industry Continuum of Care:

Community Services	Life Leases	Seniors Apartments	Independent Supportive Living	Assisted Living	Memory Care	Long Term Care	Palliative Care	
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Constituency is Diverse

Our constituency is diverse. Our members comprise:

- · Publicly traded organizations.
- Organizations owned by Canadian pension plans and infrastructure funds.
- Homes that receive various types of public funding (eg. LTC in Ontario, supportive living in Alberta and assisted living and residential care in BC).
- · Homes that are private pay.
- The above groups include both for-profit and not-for-profit organizations.

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Strong Leadership

The Lead Group's management teams have decades of sector experience and unfailing dedication to their residents.

Management and boards of these lead organizations include many prominent individuals, such as:

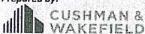
- · Michael Harris, Chartwell Retirement Residences
- · William Davis, Revera Inc.
- · Hazel McCallion, Revera Inc.
- · Dino Chiesa, Sienna Senior Living
- · Alan D. Torrie, Extendicare

Across all Canadian Provinces

Seniors **Housing &** Long-Term **Care Home** System Capacity

Across all Canadian Provinces

Prepared by:



The following table summarizes the estimated national inventory of retirement home (primarily independent & assisted living and memory care) units and long-term care home beds, by province:

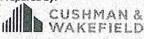
Provece	Population Age 75	Total System (A+B)		Retirement Home (A)		Long-TermCare Horre (B)			Spaces per 1,000 Age 75+		
		Number of Residences	Tate Spaces	Number of Residences	Total Spaces	Notes	Humber of Residences	Total Spaces	Hotes	Retirement	Loug-Term Care
Canada				Della Carre Agen	Augusta, mark mar					SHOW SHOULD SEE	CARPO NO REL
British Cotumbia	:16 727	680	59 963	388	21,779	[1]	294	27,284	21	79	
Abela	236 900	333	29 574	127	14.243	111	176	15,423	F	50	ě
Sastectewan	£1 180	336	15414	133	7.590	(1)	153	9,324	[4]	91	10
Mantepa	92,300	123	14236	51	5.050	01	132	9,735	73	55	10
Ontario	1,110.561	1.357	140 550	731	82.633	m	626	78.247	51	55	7
Quénec	696, 320	2115	176 520	1259	123,563	iii I	257	53 326	71	177	· ·
New Brunswox	54 617	131	9516	83	3,740	iii	66	4 776	21	53	7
flora Scota	79.771	174	9.290	33 31	1,505	(1)	136	7 004	31	20	9
Prince Edward Stand	11 931	50	2540	31	1,305	(1)	19	1,235	[10]	109	10
figation dand and Labrador	29 201	107	6705	-:9	3,931	(1)	38	2,905	[11]	98	7
Total SystemCapacity	2.822,025	5,417	464,908	2.918	255.295		2.499	209,613	. 4	va .	7

- The Charact lump and Housing Colombian (CAMC). Sender Housing Report (2019)
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The following table summarizes the number of retirement and long-term care home spaces managed by the operators who are affiliated with CAPES and other provincial seniors living and care home associations:

CAPES and **Affiliate Organizations**

Prepared by:



Organization Total Industry System Capacity 5417 464 908 Lead Organizations CAPES .* 1,282 177 063 38% Other SenbridGe participants (2) Sub-Total 10 639 187,702 40% Affiliated Provincial Associations (2.14) BC Care Providers Association (BCCPA) 12 000 16,325 3% 4% BC Senior Living Association (BCSLA)
Alberta Seniors Communities & Housing Association (ASCHA)
Seniors Housing Society of Alberta (SHSA)
Advantage Ontario (AO)
Omario Long-Term Care Association (OLTCA) 9% 2% 40.000 8 000 44 000 995 12% 13% 55 000 Ontario Referement Communities Association (ORCA)
Regroupement Quebecois Des Residences Pour Aines (RQRA)
Sub-Total 60 000 88,000 323,325

- CAPES is primarily comprised of organizations that are SenbridGe participants
 Operators who are SenbridGe participants but who are not included in the initial CAPES group noted above
 Estimated number of residential spaces operated by the membership of the Affiliated Provincial Associations
- The Lead Organizations and Affiliated Provincial Associations datasets are not mutually exclusive.

 Many of the operators who form part of the Lead Organizations segment, also maintain membership in the Affiliated Provincial Associations

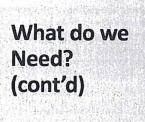
What do we Need?

We believe that our reach can help governments streamline their communications and support to the industry, as well as developing a much needed direct portal for seniors living leaders to provide a better understanding of the COVID-19 related needs and risks (as well as ongoing concerns) to government.

The entire sector remains under-resourced and under-represented and CAPES operates on an entirely informal voluntary framework. **We need help!**

- The biggest challenge right now for our suppliers is to get through the
 "red tape" and obtain authorization to manufacture for export out of
 China. We need governmental help to locate people on the ground with
 the right contacts and understanding of the process to help our suppliers
 get the approval they need to get to Shanghai, and from there to expedite
 air shipments as soon as possible to Canada.
- Through our relationships, we have found some manufacturers who are able to produce 3 million masks a day, but we have not done business with them in the past and would like to have the product tested and verified to Canadian standards before putting down 50% deposits for large orders. We therefore need a team with the expertise to verify and test the product for us.

DRAFT



- Given the increase costs for the supplies, we need the federal government to extend the program of providing aircraft to ship the PPE safely to Canada with adequate security to escort the products from the manufacturer onto the plane to ensure nothing is seized or hijacked.
- We also need access to decision makers at the provincial level who can, like the federal government contacts we have been fortunate to establish, act quickly to deploy resources. This includes:
 - Providing immediate access to PPE from supplies now being stored by the provincial governments for hospital use (especially isolation gowns) for LTC and the rest of the seniors living sector.
 - Arranging preferred and regular access to Canadian PPE manufacturers (especially for isolation gowns) who can give priority to seniors living operators locally.
 - Obtaining and deploying testing kits to the sector through our platform so that we can ensure the right groups are getting them efficiently and in sufficient quantities.

