Court File No.

ONTARIO SUPERIOR COURT OF JUSTICE

BETWEEN:

ONTARIO HEALTH COALITION AND ADVOCACY CENTRE FOR THE ELDERLY

Applicants

- and -

HIS MAJESTY THE KING IN RIGHT OF ONTARIO AS REPRESENTED BY THE ATTORNEY GENERAL OF ONTARIO, THE MINISTER OF HEALTH, and THE MINISTER OF LONG-TERM CARE

Respondents

AFFIDAVIT OF DR. SAMIR SINHA (Sworn March 21, 2023)

I, Samir Sinha, of the City of Toronto, in the Province of Ontario, MAKE OATH AND SAY as follows:

1. Since 2010 I have served as the Director of Geriatrics at Sinai Health System and the University Health Network in Toronto and a Professor of Medicine at the University of Toronto and the Director of Health Policy Research at Toronto Metropolitan University's National Institute on Ageing. I am also a Professor of Medicine, Family and Community Medicine and Health Policy, Management and Evaluation at the University of Toronto and an Adjunct Professor of Medicine at the Johns Hopkins University School of Medicine.

2. Among my other current appointments, are the following:

2010 - Director of Geriatrics; Sinai Health System and the University Health Network, Toronto, Canada

2014 - Peter and Shelagh Godsoe Chair in Geriatrics, Mount Sinai Hospital, Toronto, Canada (2014 -)

2016- Director of Health Policy Research, National Institute on Ageing, Ryerson University, Toronto, Canada

2012- Provincial Expert Lead of Ontario's Seniors Strategy Ministries of Seniors Affairs and Accessibility, Health and Long-Term Care Government of Ontario, Toronto, Canada

2021- Professor of Medicine Department of Medicine, University of Toronto, Toronto, Canada

2021- Professor of Family and Community Medicine (Adjunct) Department of Family and Community Medicine, University of Toronto, Canada

2021- Professor of Health Policy, Management and Evaluation (Adjunct), Institute of Health Policy, Management and Evaluation, University of Toronto, Canada

2020- Professor of Management (Adjunct) Ted Rogers School of Management, Toronto Metropolitan University

2011- Assistant Professor of Medicine (Adjunct), John Hopkins University School of Medicine Baltimore, USA

2021- Chair, Technical Committee, HSO National Long-Term Care Services Standards Health Standards Organization, Ottawa, Canada

2021 - Member, National Seniors Council Government of Canada, Ottawa, Canada

2021 - Member, CIHR Institute on Aging Advisory Board, Canadian Institute for Health Research, Ottawa, Canada

2016- Member, Toronto Metropolitan University Board of Governors Toronto Metropolitan University, Toronto, Canada

2018- Member, Ministerial Advisory Board on Dementia Ministry of Health, Government of Canada, Ottawa, Canada

2022-2023 Member, Modernizing Alberta's Primary Health Care System (MAPS) MAPS International Expert Panel Ministry of Health, Government of Alberta, Edmonton, Canada 2014- Chair, Ontario Telemedicine Network (OTN) - Ontario Geriatrics Learning Centre Steering Committee

2014- Fellow, InterRAI Research Network + Member, Network for Excellence in Acute Care

2016- Faculty, Geriatric Education and Research Institute, (Adjunct) Geriatric Education and Research Institute, Singapore

2022- Canadian Ambassador for Healthcare Denmark Healthcare Denmark, Copenhagen, Denmark

2014- Senior Fellow (Associate) Massey College, University of Toronto, Toronto, Canada

2014 - Co-Chair, City of Toronto Seniors Strategy Accountability Table City of Toronto, Canada

2014 - Member, American Red Cross Scientific Advisory Council American Red Cross, Washington DC, United States

2016- Member, CABHI Innovation Advisory Council Centre for Aging and Brain Health Innovation, Baycrest Health Sciences, Toronto, Canada

2020- Member, COVID-19 Testing Strategy Panel Government of Ontario, Toronto, Canada

2016- Member, National Medical Advisory Council Bayshore Healthcare, Mississauga, Canada

2014- Member, Advisory Board Closing the Gap Healthcare Group, Toronto, Canada

2013- Honorary Medical Advisor, Carefirst Seniors & Community Services Association, Toronto, Canada

2008- Research Affiliate, Oxford Institute of Ageing, University of Oxford, United Kingdom

A copy of my curriculum vitae is attached as Exhibit "A" hereto.

3. I have been retained in this proceeding by the Ontario Health Coalition and the Advocacy

Centre for the Elderly to address the following issues:

a. What is the process for designating certain hospital patients as needing an alternative level of care (ALC), and what are the clinical characteristics and service needs of this patient cohort, and in particular, those waiting in hospital for admission to a long-term care (LTC) home?

b. What is the capacity of the health care system, from home-based to institutional care, to meet the needs of this ALC-designated patient cohort?

c. What are the effects and likely impacts of Bill 7 and how these may affect the health and well-being of ALC-designated patients, and their ability to access the health services and the ongoing home-based to institutional care they require?

d. What measures would you consider available to meet the health care needs of this patient cohort, and what effects would such initiatives have on the capacity of hospitals to better meet the needs of the communities they serve?

PART I - ALC PATIENTS

A. ALC-designated Patients and the ALC Designation Process

4. The practice of designating patients as requiring an alternate level of care ("ALC") is one that predates Bill 7 by several decades. The Canadian Institute for Health Information or CIHI developed their own *Definitions and Guidelines to Support ALC Designation in Acute Inpatient* $Care^{1}$ document in 2016 primarily to promote "the consistent use of [the] ALC designation [to

¹ Canadian Institute for Health Information, *Definitions and Guidelines to Support ALC Designation in Acute Inpatient Care* (Ottawa: CIHI, 2016), available online: https://www.cihi.ca/sites/default/files/document/acuteinpatientalc-definitionsandguidelines en.pdf.

facilitate] measurement of the access gap from one care setting to another." In 2017, Cancer Care Ontario published its own "Reference Manual"² noting that "A standardized ALC definition is an important step in capturing high-quality, near real-time data on all patients waiting in acute and post-acute hospitals for alternate levels of care." However, in my experience the term is applied in different ways to reflect hospital management priorities at a regional or local level. It is not, therefore, a term that is being used with precision or one used consistently by physicians or other clinicians or non-clinicians that are authorized to make such a designation, even in a hospital setting and especially within and between different regions.

5. Rather, ALC is principally an administrative term rather than a diagnosis, and it is typically used to indicate that a person is no longer in need of the care that a particular hospital unit or setting was designed to specifically provide. For example, a patient that is admitted to an acute care hospital for a hip fracture, a stroke or a heart condition may be designated as an ALC patient when the acute care required to manage that condition is completed and the patient either requires further hospital care but in a different hospital unit or setting, or requires a transfer back to their own home or to an LTC home to meet their ongoing care needs. This can cause issues in the management of ALC patients because:

- a. in my experience, it is not uncommon to see patients prematurely or incorrectly designated as ALC patients when active acute issues still require the services and care of the environment they are in.
- b. in other cases where the patient's condition changes and they once again require acute level hospital care it is not uncommon for their designation to be left unchanged,

² https://ext.cancercare.on.ca/ext/databook/db2021/documents/Appendix/ALC_Reference_Manual_v2.pdf

which could even further complicate their need for a more intense level of care. This is contrary to CIHI's 2016 definitions and guidelines document, cited above, which indicates that an ALC designation should end "on the date and at the time the individual's care needs change such that the ALC designation no longer applies. Similarly under Cancer Care Ontario definition, "The ALC wait period starts at the time of designation and ends at the time of discharge/transfer to a discharge destination (or when the patient's needs or condition changes and the designation of ALC no longer applies)."³

6. The lack of precision and consistency in the designation, de-designation, and redesignation of ALC patients is, in part, a reflection of the different contexts in which the designation is made and the particular assessments of the clinicians and non-clinicians involved. However, it equally reflects the fact that until the implementation of Bill 7, an ALC designation would not trigger any automatic legal consequences for a patient. It was also not a term that was necessary to initiate the planning process for discharging a patient from a hospital, as this could be undertaken in appropriate circumstances at any time and is often something ideally discussed with patients starting soon after they are admitted to any inpatient care setting.⁴

7. In my practice, my colleagues and I are called at least once a week, when covering the inpatient geriatric medicine consult service, to provide advice with respect of patients who in my opinion have been improperly or prematurely designated as ALC patients: this can be for several reasons. First, there are patients with various co-morbidities unrelated to the acute care they

³ Ibid.

⁴ There is no standardized approach amongst hospitals in Ontario in terms of how discharge planning occurs. Some hospitals have roles called discharge planners. One of my hospitals, Mount Sinai Hospital, for example, doesn't have the role titled "discharge planner", but we have social workers, for example, who are involved in discharge planning. Other hospitals, like St. Mike's, have distinct roles called discharge planners, which I understand to be distinct from the social worker role we have at Mount Sinai Hospital.

received which have remained unaddressed, in some cases because they went unrecognized. Second, the patient's condition may have changed since they were first designated as ALC patients and they once again need acute care or even palliative care. We are often consulted by colleagues who need advice on what to do with acutely ill patients who have already been designated as ALC patients.

8. In addition, pressures that have been building on the capacity of hospitals to meet the care needs of those they serve are leading to ALC designations being made earlier and earlier during the hospital stay of many patients to facilitate their earlier discharge from hospital. This pressure on hospital capacity manifests itself in two ways.

9. First, we see it in the manner in which hospitals manage the flow of patients. There is a keen pressure on everyone to find available hospital beds, and managing this pressure involves identifying people ready or becoming ready for discharge, and for the latter accurately determining their estimated day of discharge (EDD). As part of this process, hospitals will estimate how many acute care days or ALC days they must accommodate as part of their planning processes and benchmark themselves with regional and provincial counterparts on the number of ALC patients and days they have. In some cases, this overall planning and pressure to effectively manage patient flow, especially when staffing resources are particularly limited, can lead to patients being prematurely identified as ALC before they have stabilized or their overall prognosis or discharge disposition is clearly understood.

10. Second, as a further consequence, this practice can in fact negatively impact patient flow to other settings, as receiving sites are increasingly demanding more information and updates,

often over several days, in order to determine whether the patient is truly appropriate for the care their setting can actually provide. In fact, it is not uncommon for receiving institutions to send patients back to the discharging institution because it was clear on or very soon after their arrival that they still had active issues that required the care and services of the discharging institution. It is also increasingly common to see receiving institutions require that discharging institutions provide them with 'take back' letters or policies, guaranteeing that they will re-admit the patient if the receiving institution is unable to provide the care they need.

B. ALC Patient Cohorts

11. In Ontario there are a number of ALC patient cohorts. ALC patients may be waiting for further care in other hospital units or settings for services such as inpatient rehabilitation, complex continuing care, mental health or palliative care, supportive living environments such as non-profit supportive housing settings retirement homes, their own homes with governmentfunded or private home care supports, or long-term care homes.

12. However, when ALC patient numbers are discussed, the statistics are generally divided into two groups, the first being those who require LTC home admissions, and the second being all of the rest. For the non-long-term care home group, most of these patients transition for that further care within days or weeks. According to data published by the government, these patients represent approximately 60% of the total ALC patient cohort. Ontario Health publishes provincial ALC Performance Summaries every month. A copy of the summary for January 2023, is attached as **Exhibit "B"** hereto.

13. The other 40% are ALC patients waiting for admission to an LTC home, one of several they are entitled to choose. Because of the long waiting lists for many LTC homes in Ontario, they may wait for months or even longer to transition to such homes. Bill 7 applies only to this sub-cohort of ALC patients (referred to here as "ALC-LTC" patients). For example, no action has been taken to provide better access to rehabilitation or complex continuing care beds.

14. According to the provincial ALC summaries for January 2023, there were 682 ALC-LTC patients in acute care beds and another 730 ALC-LTC patients in post-acute care beds. Post-acute care beds are principally developed and resourced to provide rehabilitative and complex continuing care. Overall, there are approximately 23,000 hospital beds of all types in the Province of Ontario.

15. It is also again worth noting that a patient may at times find themselves ALC to different destinations at different times along their inpatient care journey, for example, following completion of their acute care treatment in an acute care setting they may be waiting for care in a post-acute care bed such as a rehabilitation setting, and again after receiving care in a post-acute care bed setting they may be designated as ALC to a LTC home setting.

C. The Health Status of ALC Patients

16. To properly understand the treatment plan and experience in the health system of ALC patients, it is important to appreciate their often complex health status.

17. The vast majority of people who are designated as ALC patients are older persons. According the Ontario Health Performance Summary, of the 3,425 patients designated ALC waiting in acute care beds as of Jan 31, 2023, 65% were 75 years of age or older (31% were 75-84 years old; 34% were 85+ years old). Moreover the graphs provided by the Summary, indicate that more than 80% of the ALC patients waiting in acute care beds are 65 years or older. Of the 1,315 patients designated ALC waiting in post-acute care beds as of Jan 31, 2023, 68% were 65 years of age and older (32% were 0-64 years old: 68% were 65 years and older).⁵

18. The other issue that tends to characterize this population is their need for more highly specialized forms of LTC or complex continuing care, because, for instance, they have multiple chronic conditions and specific ongoing medical care needs that require access to specially trained care staff. ALC patients are also more likely to be living with dementia and may have very specific care needs that do not fit well into typical post-hospital care paradigms. Many such ALC patients can get 'stuck' in the hospital, because it is difficult to find an LTC or other setting that can meet their needs and to which they can properly be discharged.

19. Some ALC-designated patients who entered the hospital for acute treatment, having been able to previously live in the community may experience further functional deterioration during their hospital stay, because their ongoing care needs were not adequately met. These often frail and older adults have ongoing basic care needs that need to be appropriately met regardless of where they are, yet often once these patients are designated as ALC patients, they are placed in a specific lower resourced setting and receive less clinical oversight. These patients are also at an increased risk that something bad might happen to them, especially given the high rate of recidivism typically experienced amongst older patients discharged from hospitals within 30 days after an index-hospital admission. As a consequence, a person who entered the hospital

⁵ Exhibit "B", p. 8.

from the community may subsequently no longer remain an appropriate candidate for rehabilitation or to return home, but instead are become designated or re-designated as ALC to LTC patients.

20. More rarely, there are patients who are designated as ALC patients who, with ongoing care, support and time, could become well enough that a LTC home would likely no longer be the most appropriate ongoing care option for them. For these patients, returning home with increased home supports can be a viable and appropriate step, but is sometimes no longer pursued as its easier to have them simply continue waiting for a LTC bed to open up.

21. The cognitive capacity of most ALC patients defines the dynamics of the process for discharging them from hospital or admitting them to a LTC home. When patients are designated as ALC to LTC patients, if there are questions about their capacity to consent to being admitted to a LTC home, an evaluation of their capacity will be performed, usually by the Home and Community Care Support Services (HCCSS) Care Co-ordinator. Approximately two-thirds of those who enter a LTC home in Ontario are living with a diagnosis of dementia, while close to ninety per cent are living with some form of cognitive impairment. While these diagnoses in and of themselves do not mean that a person lacks the capacity to make LTC placement decision, a large portion of those applying for LTC placements in Ontario do lack the capacity to make LTC placement decisions. When the person has been found to be incapable of making a placement decision, one must identify the highest ranking SDM, which is usually either the attorney for personal care or a family member. Usually the HCCSS Care Co-ordinator will identify the SDM, as it is their job to obtain consent for admission. We will work with the SDM and the HCCSS Care Co-ordinator in making the best possible recommendations regarding their care options,

including LTC placements which might be appropriate to the person's ongoing and unique care needs. If no other SDM can be identified, the Public Guardian and Trustee must be contacted as the decision-maker of last resort, which may increase the time required to make a decision. SDMs of incapable persons are critical in facilitating ongoing care decisions, and the need to ensure they are willing, supported and capable to make informed decisions is integral to facilitating the placement process ALC to LTC patients.

22. A recent patient that I treated illustrates the challenges of managing older patients with complex needs. This patient was admitted to the general surgery service, but I believe was living with an underlying previously undiagnosed dementia which made them particularly vulnerable for developing an acute confusional state known as delirium, which did in fact occur. After a week or so of being in hospital, the patient was found to be having significant mobility issues from being significantly deconditioned. This means that because of prolonged bed rest related to their acute illness and associated delirium they became functionally weaker than their baseline of being able to walk independently around their own home. Their underlying gastrointestinal issue meant that the only way they could receive nutrition for the coming few months was by using a method called total parental nutrition (TPN). TPN gives a person liquid nutrition (such as protein, carbohydrates, and fats) through a tube (catheter) that is inserted into a vein, thereby placing nutrients needed for growth and tissue repair directly into the blood, bypassing the digestive tract completely. After a week or two of receiving TPN in hospital, they no were longer delirious and, in my view, would benefit from a course of inpatient rehabilitation so they could rebuild their strength and functional independence so that their family could take them home and provide their ongoing care with some additional publicly funded home care supports

23. However, there were no inpatient rehabilitation settings in Toronto that could actually accommodate patients requiring TPN. There is no principled reason that TPN could not be provided in a hospital rehabilitation setting in Toronto, as TPN does not interfere with a person's ability to receive rehabilitative care and we provide it in both acute care hospital settings as well as in people's home via publicly-funded home care services in Ontario. This was a patient who had two specific care needs: to receive TPN and for rehabilitation at the level of intensity that could only be currently provided in a hospital setting in Toronto, as the level of rehabilitative care required could not be provided with the available levels of publicly-funded home rehabilitative care. We could not send this patient home because the family could not handle meeting the care needs of their loved one who could no longer walk around the house or participate more actively in their care. As a result, admission to LTC became the only possible outcome for this patient, who should have otherwise been offered rehabilitation, had our health care system been organized to better accommodate the growing and reasonable complex needs of older patients. I should emphasize that I have not infrequently encountered a case like this.

24. This case is an example of patients with various co-morbidities that require care, which would improve their overall quality of life and even allow their return home. In many cases, this care is available in the health care system but is not accessible to certain patients with complex needs. Such patients may therefore by default be considered and eventually listed as ALC patients and directed to LTC homes. These are also examples of the ongoing disconnect between diagnosis and the ALC designation.

25. Unfortunately many of the LTC homes to which ALC patients may be admitted are also poorly equipped to deal with their complex continuing care needs than were the hospitals that

discharged them. Hospitals typically have better staffing levels, more and better paid staff with the right mix of skills and experience to manage complex needs, and better access to specialist advice and care.

PART II - THE IMPACTS OF BILL 7

A. Consent and Personal Health Information

26. To my knowledge, Bill 7 represents the first time in a non-emergency situation, that some form of consent is no longer required for a patient's health information to be shared as part of providing healthcare to that patient.

27. In my opinion, consent is sacrosanct in the physician-patient relationship, and this includes the right to choose treatment but also to decide what information the patient wishes to share with their own healthcare professional and have them share with other healthcare professionals. One reason why consent is so important is because it is fundamental to building a trusting relationship between patients and their physicians or other healthcare professionals. Without it, the patient may neither trust my advice nor permit me to share their information with other persons required to consult on or better inform them about their care.

28. Under Bill 7, we are now saying to patients that, in the absence of any medical emergency, we no longer require their consent or their active participation in the process of discharging them from the hospital to a LTC home where they are likely to spend the rest of their lives. Consent and trust are fundamental to making such obviously important decisions by our most vulnerable patients who often have complex and inter-related health and social care issues. This approach is a sea change that fundamentally threatens the physician-patient relationship, by

effectively removing the patient's right to consent to determine where they will receive their future care.

29. Bill 7 further deprives ALC patients of their right to privacy when removing the right to consent to the sharing of their personal health information. Some personal health information about a patient may seem inconsequential, such as how often the patient should be bathed or what mobility issues they may have, but dispensing with a person's right to consent to share their personal health information can quickly extend into much more sensitive areas, such as those concerning a person's prior issues of abuse, a history of trauma, or a significant mental health issue. There are many reasons why people want control over what personal health information can be shared with others.

30. Patients may also worry that sharing certain information might prejudice and negatively affect their care, further stigmatize them, or put them in an unsafe situation. A significant number of people have unfortunately had terrible experiences in our healthcare system because of deeply engrained issues of racism, ageism, ableism or other prejudices that can really complicate their ability to receive appropriate and safe care. In fact, patients are often very clear with me about what they might want me to write in their medical records, because they know such notations can follow them, and if incorrect, can be very difficult to correct. For example, I have had patients tell me about a note or comment about them in the record that they feel is untrue or prejudicial, and about their long journey to try to correct their health care record, particularly when they have had poor health care experiences that are now impacting their future ability to get the care they need.

31. When I discuss care options with patients, and as noted I try to build a trusting relationship with them, I typically ask them for their consent to share certain information, giving them an opportunity to negotiate with me about what they are comfortable sharing and with whom. That allows them to put parameters around the disclosure of information they feel comfortable and safe sharing including issues that might be very intimate and that might actually influence their future ability to receive care in a way that matters to them. Obtaining consent is important because it gives a patient and or their substitute decision-maker the ability to understand what information might be shared, why it is being shared, with whom, and that what and how it's being shared will not unnecessarily prejudice the care they will receive in the future.

32. When a person accepts to receive care in a certain setting, they essentially are permitting everyone working in the 'circle of care' to access and share information that enables all members of the team to care for that individual. However, Bill 7 allows such information to be shared with at least one and potentially many individuals or teams operating outside the hospital environment and of which the patient may have no knowledge or relationship. For example, an HCCSS placement Care Co-ordinator looking to place an ALC individual in a LTC home in Northern Ontario can share a patient's personal health information with any number of LTC homes or other external care providers within a 150km radius. Bill 7 sets no limits on how many and what types of external care providers could potentially receive a particular patient's personal health information without their consent. This too can seriously undermine the trust that affected patients and SDMs have in their healthcare providers and in the healthcare system.

33. In my opinion, the risk of losing their right to consent to the sharing of their personal health information may actually deter some people from seeking care in hospitals if they are aware that by doing so they may ultimately lose their right to consent to future care decisions like where they may ultimately reside. I also believe this erosion of such a fundamental right will also result in additional and collateral damage for patients who can no longer trust the healthcare professionals on whom they rely to have their best interests single-mindedly at heart.

34. I am similarly concerned about the effect of the coercive threat of a \$400 daily fee if a patient refuses to be physically moved to a LTC home that they did not choose. Patients who are placed in LTC homes after a hospitalization tend to be more economically and socially frail than other individuals. Those with greater means or access to social supports are more often able to return to their own homes because of the availability of unpaid help of family or friends, or the means to purchase private home care and community-based supports, or care in in a more favourable care settings. One third of those currently living in Ontario's LTC Homes cannot even afford to pay the basic co-payment rate of \$63.73/day⁶, requiring a rate reduction from that amount. The prospect of, for most people. of being charged \$400 a day (approximately \$12,000 per month) should they refuse to consent to a proposed placement option is not tenable for most people.

35. In my view the threat of being billed \$400 a day to a patient who refuses an unwanted LTC placement is another form of "structural coercion" imposed by Bill 7 on ALC patients, their SDMs, and families that is neither ethical nor appropriate.

⁶ As of October 1, 2022. https://www.ontario.ca/page/paying-long-term-care

B. The Path to LTC

36. During the pandemic, the Province authorized hospitalized ALC to LTC patients to be designated as 'crisis placements' to facilitate the movement of hospitalized ALC to LTC patients to LTC homes more quickly and 'liberate' hospital beds. Unfortunately, this measure had unfortunate and collateral impacts on the traditional paths for getting access to a LTC home.

37. Because of concerns that hospitals would be overwhelmed by COVID-19 patients, in March 2020 the Government proclaimed regulations mandating that hospital patients waiting for LTC homes could also be put on the crisis list for placement.⁷ Prior to this, a crisis designation which places people in one of the highest levels of priority for LTC placement, was generally used for persons waiting in the community who required immediate admission to a LTC home. Those in hospital settings were not allowed to be placed in the crisis category except in exceptional circumstances as they were already in a setting that could ensure 24 hour supervised care. In 2020, ALC to LTC patients were not only eligible to be put in the crisis category for placement, but further, preference was given to hospital patients within the crisis category over those in the community with the same crisis designation. This meant that community crisis placements now took much longer to complete, and the risk that a person would end up having to come into a hospital because their crisis was not resolved quickly became much greater. Ultimately, this has meant that given the dearth of LTC home beds, the best way to gain the a timely admission to a LTC home is for someone in crisis circumstances to go to an emergency department and hope they get admitted to the hospital and be crisis placed from there. Leaving aside that more home and community care supports might have allowed them to continue to live

⁷ O. Reg. 83/20.

at home and in the community, this obviously did nothing to alleviate the burden on hospital beds, but rather transformed hospitals into the most viable route to be placed into a LTC home setting in Ontario.

C. A "Home is not a Home"

38. Underlying the fact that many ALC patients do not simply want to be admitted to any LTC home with a vacant bed is the fact that there is a large disparity in quality among Ontario's LTC homes.

39. Many patients who arrive at a hospital with an acute issue and are eventually designated as ALC to LTC were already awaiting a LTC placement in the community, before their admission. When their acute issue has resolved, but they cannot be returned home even with enhanced family or home and community care supports, a hospital social worker or discharge coordinator begins the process of working with the ALC patient to facilitate their placement into an LTC home, in association with HCCSS Care Co-ordinators. On an LTC home application, patients or their SDMs are allowed to select up to 5 LTC homes, unless they are crisis when they can choose as many homes as they want. There is no requirement for them to choose more than one home, and that home could be any home that they felt met their needs, including ones with a long wait list. This might be particularly true where the patient would prefer to be placed in non-profit or ethnocultural homes that tend to have much longer waitlists. Accordingly, before Bill 7, patients and SDMs would be encouraged to choose as many LTC homes as permitted to expedite their transition to a LTC home setting.

40. Before Bill 7, this process would often occur with considered dialogue and negotiation. Typically, the patient and the patient's family, who may or may not be serving as a SDM, is told why an LTC home would be a more suitable environment in which to receive ongoing care; that all LTC homes are required to meet the same standards of care regardless of home ownership type (i.e. for-profit and non-profit), location or size; that they all provide a more home-like environment and social and recreational services and that these services are not typically provided in hospital settings.

41. In fact, it is well-recognized that there is a great difference in the level and quality of care provided in Ontario LTC homes, and our recent experience during the pandemic clearly bore this out. Prior to the pandemic, the government abandoned the practice of carrying out annual, unannounced resident quality inspections for every LTC home in Ontario. Accreditation remained a voluntary process, and the majority of LTC homes in Ontario were struggling to both recruit and retain care staff.

42. To put this in context, for various reasons Ontario residents have a high level of confidence in their publicly-funded hospitals and are not usually concerned when they are moved from one to another to receive further acute, rehabilitative or complex continuing care. 100% of Ontario hospitals accredit themselves against Canadian standards through Accreditation Canada and demonstrate their ability to adhere to its standards. This provides a consistent and comparable way to maintain care quality and consistency in line with public expectations.

43. However, there are several reasons why the same consistency expected of hospitals is not seen across Ontario LTC homes. Presenting to ALC patients or their SDMs that Ontario LTC homes are all essentially providing a similar level of quality care is, at best, misleading.

44. To begin with, while all LTC homes are regulated under the same legislation, their records of regulatory compliance shows that some homes consistently have much poorer performance. Attached as Exhibits C(i) and (ii) hereto are reports of Concerned Friends concerning the regulatory performance of Ontario LTC homes, the group is a registered charity incorporated in 1982 and is a voluntary comprised of Ontarians concerned about the poor quality of LTC. In 1982 they were incorporated as a registered charity in Ontario and remain funded solely by supporter donations. For example, CIHI has reported significant rates of inappropriate antipsychotic use in Ontario's LTC homes.⁸ Indeed, there is no basis for claiming that all of Ontario's LTC homes are meeting a similar level of quality because, in 2018, the Ontario government stopped requiring that every LTC home had an Resident Quality Inspections (RQI) annually. Since then, the number of such inspections have dwindled, with only seven RQIs across all 626 Ontario LTC homes in 2019, and zero in 2020.⁹ In November 2020-21, Ministry of Long-Term Care implemented a new proactive inspection system. While an analysis of this new system is too early, it is not clear if this new system is helping to achieve more consistent levels of quality care across Ontario LTC homes.

45. While all LTC homes across Ontario receive approximately equal levels of funding, many municipal homes and certain not-for-profit homes provide significant additional funding to

⁸ CIHI 2020-21: https://yourhealthsystem.cihi.ca/hsp/inbrief?lang=en#!/indicators/008/potentially-inappropriate-use-of-antipsychotics-in-long-term-care/;mapC1;mapLevel2;/

⁹ Covid-19 Preparedenss and Management: Special Report on Pandemic Readiness and Response in Long-Term Care, Office of the Auditor General of Ontario, April 2021, at page 24 Figure 13.

support the enhanced delivery of care in their environments. However, most LTC homes are underfunded and far from meeting the standard of being able to provide four hours of direct care per day that is considered necessary to ensure proper care for residents.¹⁰ Currently, LTC homes are funded to provide only 3 hours and 15 minutes of direct care per day per resident on average across the province, with the target of funding to a 4 hour standard to be met by March 31 2025. In order to achieve this level of care, the province has stated that an additional 35,000 frontline workers will be needed to staff Ontario LTC homes, notwithstanding the serious current challenge of staffing homes even to a much lower standard.

46. When it comes to accreditation, LTC homes are not comparable to hospitals. Only 85% of Ontario LTC homes participate in accreditation programs, while 15% are not accredited at all. Furthermore, the majority of LTC homes in Ontario that receive accreditation do so against an American LTC standard, by the Commission on Accreditation of Rehabilitation Facilities (CARF), instead of using the more rigorous Accreditation Canada standard, against which Ontario hospitals, 100% of Quebec LTC homes and 68% of all Canadian LTC homes accredit themselves. The vast majority of Ontario not-for-profit homes, which tend to provide more hours of direct care per resident per day and achieve higher quality levels of care, accredit themselves against the Accreditation Canada LTC standard, whereas the majority of the Ontario for-profit homes accredit themselves against the CARF Standard, which is a lower cost process and which is arguably a much easier standard to be accredited against as a LTC home.

¹⁰ Hsu, Amy T et al. "Staffing in Ontario's Long-Term Care Homes: Differences by Profit Status and Chain Ownership" (2016) 35:2 *Canadian Journal on Aging* 175.

47. Contrary to the Ministry of Long-Term Care's implied claim that all Ontario LTC homes are providing a similar standard of care, in my experience this is not the case, and the public is well aware of this fact. That understanding is reflected in the fact that two-thirds of the nearly 40,000 individuals on LTC home waitlists are waiting for a placement in the one-third of Ontario homes, the majority of which are owned by non-profit organizations. Many of these non-profit homes are often focused on providing care that is responsive to the needs of members of specific ethno cultural communities. This makes sense as there is good evidence that care in these homes is often better for residents, and especially when language-concordant care can be provided as well.

48. By either explicitly or implicitly claiming that a 'home is a home,' when this is clearly not the case in Ontario, ALC to LTC patients or their SDMs are only further deprived of their right to provide informed consent by potentially keeping critical information from them about the quality of care they can expect to obtain in a particular LTC home they are being pressured to apply for and ultimately be transferred to.

D. Care Outcomes

49. Another concern with Bill 7 is the ongoing lack of transparency about how the Bill is actually being implemented. For example, the Ontario Minister of Long-Term Care was recently quoted in the Toronto Star (November 21, 2022)¹¹as saying that, since they enacted Bill 7, 2,400 patients had been moved from hospitals into LTC homes across Ontario. The Ministry of Long-Term Care however, has not disclosed how many of these patients have been placed using any of

¹¹ https://www.thestar.com/politics/provincial/2022/11/21/2400-elderly-patients-had-rights-violated-in-moves-fromontario-hospitals-critics-charge.html

the new mechanisms available through Bill 7 or how many patients have been charged \$400 per day under the Bill for refusing such placements. Further, neither the Ministry of Long-Term Care nor HCCSS has indicated how many ALC patients have had their personal health information shared without their consent.

50. It is difficult to know if the flow of ALC to LTC patients from hospitals into LTC homes has improved because of Bill 7. This is particularly true because as noted, at approximately the same time as Bill 7 was implemented, Ontario LTC homes were being asked to make isolation beds – previously required to be held by LTC homes for COVID-19 patients – available as regular LTC home beds, while also once again requiring homes to maintain a 97% occupancy level to receive full funding.

51. Thus, it remains unanswered what role if any Bill 7 has played in increasing LTC placements from hospitals, and there is little if any transparency concerning how the new powers it allows hospitals to exercise are actually being used.

52. There are various reasons why people choose certain LTC homes that they wish to be admitted to. Often these are homes close to family and friends, that meet specific ethno-cultural needs or care needs, or because the home has a particularly good reputation. For example, someone might choose two homes in Oakville and three homes in Toronto. Why? Because a son lives close to two good ones in Oakville, and a daughter lives close to three good ones in Toronto, while other homes across these two areas would not be convenient or meet their particular needs. There are many who also have a preference for living in a publicly owned or not-for-profit owned home, because these homes have a better record of delivering both higher levels and quality of care.

53. I believe these choices are rational and well-informed decisions made by the older persons themselves or by their SDMs. These individuals generally put a great deal of thought into their choices when considering where the ALC patient will live and likely spend the rest of their lives. Where an ALC patient is persuaded or coerced into applying for, or accepting an admission offer to a home they may never heard of or that they deliberately chose not to apply to, it will rarely be as well-suited to their particular needs. If individuals are placed into LTC home's whose location makes support from their families and community more difficult or even impossible, the consequences will in many instances be dire for that person's overall health and well-being.

54. In contrast, the LTC home where ALC patients are likely to be placed 'involuntarily', through the mechanisms under Bill 7, are likely to be those primarily with poorer track records because the LTC homes with better records are those most often chosen by would-be residents, and accordingly have the longest wait lists and the greatest competition for their available beds. In my opinion, under the process set out in Bill 7, people are going to more likely end up in LTC homes with shorter lists and more bed vacancies, due to staffing or quality of care challenges, and reputational issues.

55. From my knowledge of working with ALC patients, I expect that under financial duress or other pressure most will agree to accept a bed offer to a home they would otherwise not wish to be placed in. They may be terrified by the prospect of having to pay a \$400 a day charge if they refuse, which is far more than the maximum co-payment they can be charged prior to a bed offer being made for them to move to a LTC home. This fee is called the chronic care copayment, which is currently \$63.73 per day. They may also agree to participate in the process to select a home other than one they would willingly choose, in order to preserve at least some control over the placement process and how their personal health information will be shared. Often in placement discussions, assurances are made that they will simply be waiting in such a home until a space becomes available in a home they prefer - often without being told that the likelihood of such a transition is next to impossible because the current placement process ensure that beds that become available in their preferred home will always go first to people in crisis whether in hospital or the community. Assurances are also made by HCCSS placement Coordinators and hospital discharge planners that all LTC homes provide quality care that will meet their needs, based on the word of the LTC home - but often without the placement co-ordinators or hospital discharge planners having a truly clear appreciation for what care actually looks like in most of these settings that they may have never visited. In any event, most applicants will reluctantly agree to a placement with the assurance that it would at most be 'temporary'. Neither of these assurances is accurate in the way they are often framed to patients, their SDMs and their families. In reality, most if not all ALT to LTC patients who are placed into LTC homes using the full force of Bill 7 will likely spend their last days in a home they agreed to be placed in under duress, or simply acquiesced to be placed in, in order to avoid the \$400 daily charge had they refused.

56. Thus while the Ontario Minister of Long-Term Care repeatedly emphasize the 'temporary' nature of these unwanted placements, Bill 7's Field Guidance (attached as **Exhibit** "**D**" hereto) makes clear that an ALC patient who is persuaded, induced or coerced into applying

for a home they do not wish to be admitted to will lose their crisis designation priority for placement once they are admitted into the home. This is because, once they acquiesce to the Bill 7 process under duress, they will likely be told to put the LTC home they are agreeing to be placed into on their list of selected homes and, in doing so, will lose their designation priority. Given the competition for such beds by those who will have maintained higher placement priority designations, and the often limited life expectancy of these ALC patients - as the average person currently being placed into an Ontario LTC home has a life expectancy of 18 months - it is very likely that these patients will live their last days in a home they were pressured and mislead into agreeing to be placed into. If they do not agree to put the home on their list of selected homes and instead the placement co-ordinator applies to and consents to the bed offer on the person's behalf, and they acquiesce to the admission to avoid the \$400 daily charge, they are not in a much better position. While they will remain on the crisis list for all the homes they have chosen, they will not be a high priority for placement within that category, as hospital and community patients on the crisis list will take preference. Therefore the likelihood of their being transferred to a preferred home is slightly higher, but still unlikely.

57. Finally, I do not accept that it is necessary to coerce or deceive hospitalized ALC patients, or their SDMs and families when choosing a LTC home. I am aware that given the good reasons such patients choose a LTC home, they may reasonably resist efforts to have them choose or accept a LTC home that does not comport with their choices of the place to spend the rest of their days in. Under the existing system, when a patient may not have selected their 5 maximum potential choices of LTC homes, or where there may be a good LTC home option that staff, such as discharge planners or myself, feel they may have overlooked, we will spend the time to help the ALC patient understand their options. Often staff will explain how long that

person may have to wait for specific homes, why another option with a shorter wait list may be suitable, the benefits that a LTC home can provide, and the risks to their health and well-being if they stay in hospital for an unnecessarily extended period of time. In my practice, I have been brought in to help hospital teams, the patient, their SDM and families navigate through making these choices and to figure out what the best care options would be for the patient. But I have personally never encountered an ALC patient or an SDM who simply stubbornly refuses to accept the advice their team, or their placement co-ordinator or discharge planners offers.

E. Ageism and Ableism

58. What I find most problematic about this legislation is that it embodies the inherent biases of both ageism and ableism. It represents a fundamental disregard for the population that is typically the ALC to LTC home cohort: generally older, physically and cognitively disabled, and lower income. It treats these individuals as being less worthy than other members of our society.

59. There is clearly a double standard operating here in terms of how we fundamentally fail to respect the rights or meet the needs of older persons, as compared with how we treat other patients in the healthcare system. The fact that most ALC to LTC patients are quickly approaching the end of their lives does not justify characterizing them, whether explicitly or otherwise, as "bed-blockers" or depersonalizing them as a faceless group who are the reason why our hospital system is struggling. The implication of Bill 7 is that it allows us to further inappropriately characterize ALC patients are being selfish and hijacking the system by taking a bed that really should belong to somebody with more important needs.

60. The large majority of ALC patients are older persons, they are persons who are often suffering from dementia and close to the end of their lives. They are people who, due to their health conditions, often cannot actually raise their own voice and therefore engage public sympathy. This is why ultimately this is an easy population to target and strip of the rights everyone else is entitled to, because the rights of ALC patients seem to not matter as much, and they are almost seen and treated by our society increasingly as "useless eaters".

61. I find it deeply disturbing when we start actively treating ALC patients as a problematic group and use formal legislation – rushed through without any hearings – to help 'manage' this problem more expeditiously. By increasingly classifying ALC patients as being less worthy than others in our society, we are essentially whittling away their rights little by little by little, so that we can ultimately regard them as being dispensable. I am increasingly finding myself repeatedly asking the question: "What's a life worth?"

62. So a very unfortunate narrative has further arisen to gloss over what I see as fundamental violations of people's human rights by justifying these deprivations as being for the ultimate benefit of the overall healthcare system and our society. If we accede to this narrative, what we are fundamentally saying is simply that some human lives are not worth as much as others.

PART III - ALTERNATIVES

63. The first question to consider in seeking to address the issues of providing proper care for ALC patients is whether we have right-sized our health care system, because if we had the appropriate amounts of the other forms of care in place, we would have solved the vast majority of a self-inflicted ALC crisis. 64. I have already addressed some of the organizational issues that frustrate efforts to provide ALC patients with the rehabilitation that would allow them to return home, by putting up unnecessary barriers to their receiving proper care. These failures in part account for the fact that, according to the Canadian Institute of Health Information (CIHI), approximately one in nine of the patients placed in our LTC homes need not be there.¹² Other countries, such as Denmark, show how it is possible to not only improve the quality of LTC, but also ensure the timely transition of patients from hospital to other settings.¹³

65. In my opinion, providing more robust home care and other community-based support services could divert far more ALC patients to better care options for them than LTC homes, including palliative care and home care. However, these reforms are simply more difficult to do right now than putting an ALC patient on an LTC home waitlist, which is too often simply the default option and the easiest thing for a hospital based discharge planner and HCCSS Care Coordinator to do.

66. For example, previous Ontario governments invested in ALC Home First initiatives that provided as much as 90 hours of home care each week per recipient after an acute hospital stay. With this much care a week, some ALC patients could often go home and be stabilized in the community and no longer require an LTC home placement. While this policy seemed to be back on the agenda more recently as the High Intensity Support Services (HISS) program, it too was suspended on March 31, 2022 when its funding ran out. The Ministry of Health has said it plans to renew this program and the more intensive supports it could provide for people to remain at

¹² Could include 1/9 estimate

¹³ "Frailty and Ageing: Canadian challenges and lessons learned in Denmark"; https://www.cfn-nce.ca/wp-content/uploads/2018/10/2018-10-05_CFN-Denmark-Delegation-Paper_Longwoods-Healthcare-Quarterly.pdf

home or return to their own homes after a hospitalization. However, the suspension of the \$100M a year initiative that provided more intensive home care supports for those who needed it was likely one of the factors leading to current ALC issues, which in turn provided the rationale for Bill 7. I believe the more effective response would be to renew and expand a program that was being well-received by my patients and others at risk of requiring an LTC home placement.

67. Indeed, the ongoing lack of reliable and predictable funding for the provision of home and community care has created enough uncertainty to discourage families from taking on the responsibilities of providing more care at home. Similarly, physicians, social workers, hospital discharge planners, and likely HCCSS Care Co-ordinators are reluctant to recommend a program that is unreliable. The other consequence of the government's 'here-today-gone-tomorrow' approach is that it undermines efforts to build a stable home care workforce, resulting in home care services often remaining too unreliable to consistently and properly meet the long-term care needs of individuals.

68. The other factor that discourages home care from being a considered a good post hospital care option is the difficulty someone at home may face in ever being admitted into a LTC home. For reasons I have previously noted, many of my HCCSS Care Co-ordinator colleagues often now say that crisis placements from the community are becoming a figment of our imaginations, because while you used to be able to get a community crisis placement organized in short order for those that were failing to be able to be cared for in their own homes, now these requests are being trumped by hospital crisis placements that have taken priority since 2020. Now, my best advice to my patients and their families in crisis is to pack their bags, go to the hospital and start a crisis placement from there. When the Minister of Long-Term Care boasts that they've had

2,400 people move from hospital into LTC settings since Bill 7 was passed a few months ago, I believe the majority of those were hospital crisis placements in respect of which enacting the additional provisions of Bill 7 played no role other than to further distress ALC patients and their families.

69. The greatest need, in my view, is to actually make more appropriate and stable investments in our home and community care system. This would allow sufficient amounts of care to be provided so that people have a credible alternative to being admitted to an LTC home. I believe that many hospital discharge planners and social workers have been distressed by living with the reality for over a decade where people are going home and not getting the amount and reliability of care in the community they need. I hear regularly from my hospital colleagues that home care supports were not delivered as they and their patients and families expected they would be, and that is why the patient came back into hospital. This is why social workers, discharge planners and physicians like me are increasingly having their doubts in terms of what the home and community care sector can even do or provide, and therefore creating a greater likelihood that they will simply propose or agree that the best thing for a patient would be is to apply to a LTC home. However, again, if we simply resourced and supported the provision of home and community care properly in Ontario and we actually spent the time to think through what could best serve our patients and the taxpayers at the same time - we could help get ourselves out of the place we have now found ourselves in and hopefully never return to this place ever again.

70. I acknowledge my duty as an independent expert to provide assistance to the court with opinion evidence that is fair, objective, non-partisan and within my areas of expertise. First and

foremost, I understand that my role and duty is to assist the court to reach a just resolution of the issues in this proceeding. I acknowledge that this duty prevails over any obligation owed by me to the party that engaged me. I have signed an attached Form 53.

AFFIRMED BEFORE ME by Dr. Samir Sinha of the City of Toronto, in the Province of Ontario on this 21 day of March 21, 2023 in accordance with O. Reg. 431/20 Administering Oath or Declaration Remotely.

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DR. SAMIR SINHA

Commissioner for taking affidavits

Amanda Marie O'Brien, a Commissioner etc. Province of Ontario, for Goldblatt Partners LLP, Barristers & Solicitors Expires November 15, 2024

Court File No.

ONTARIO SUPERIOR COURT OF JUSTICE

BETWEEN:

ONTARIO HEALTH COALITION AND ADVOCACY CENTRE FOR THE ELDERLY

Applicants

- and -

HIS MAJESTY THE KING IN RIGHT OF ONTARIO AS REPRESENTED BY THE ATTORNEY GENERAL OF ONTARIO, THE MINISTER OF HEALTH, and THE MINISTER OF LONG-TERM CARE

Respondents

ACKNOWLEDGMENT OF EXPERT'S DUTY

1. My name is Dr. Samir Sinha. I live in the city of Toronto, in the Province of Ontario.

2. I have been engaged by or on behalf of the Lawyers for the Applicants to provide evidence in relation to the above-noted court proceeding.

3. I acknowledge that it is my duty to provide evidence in relation to this proceeding as follows:

- a. to provide opinion evidence that is fair, objective and non-partisan;
- b. to provide opinion evidence that is related only to matters that are within my area of expertise; and
- c. to provide such additional assistance as the court may reasonably require, to determine a matter in issue.

4. I acknowledge that the duty referred to above prevails over any obligation which I may owe to any party by whom or on whose behalf I am engaged.

March 21, 2023

DR. SAMIR SINHA

This is **Exhibit "A"** referred to in the Affidavit of **Dr. Samir Sinha**, sworn this 21 day of March, 2023, in accordance with O. Reg 431/20, Administering Oath or Declaration Remotely.

A Commissioner for taking Affidavits etc.(*or as may be*) (pursuant to O. Reg 431/20)

Amanda Marie O'Brien, a Commissioner etc. Province of Ontario, for Goldblatt Partners LLP, Barristers & Solicitors Expires November 15, 2024

SAMIR K. SINHA MD, DPhil, FRCPC, AGSF

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CURRENT APPOINTMENTS

2010-	Director of Geriatrics Sinai Health System and the University Health Network, Toronto, Canada
2014-	Peter and Shelagh Godsoe Chair in Geriatrics Mount Sinai Hospital, Toronto, Canada
2016-	Director of Health Policy Research National Institute on Ageing, Ryerson University, Toronto, Canada
2012-	Provincial Expert Lead of Ontario's Seniors Strategy Ministries of Seniors Affairs and Accessibility, Health and Long-Term Care Government of Ontario, Toronto, Canada
2021-	Professor of Medicine Department of Medicine, University of Toronto, Toronto, Canada
2021-	Professor of Family and Community Medicine (Adjunct) Department of Family and Community Medicine, University of Toronto, Canada
2021-	Professor of Health Policy, Management and Evaluation (Adjunct) Institute of Health Policy, Management and Evaluation, University of Toronto, Canada
2020-	Professor of Management (Adjunct) Ted Rogers School of Management, Toronto Metropolitan University
2011-	Assistant Professor of Medicine (Adjunct) John Hopkins University School of Medicine Baltimore, USA
2021-	Chair, Technical Committee, HSO National Long-Term Care Services Standards Health Standards Organization, Ottawa, Canada
2021 -	Member, National Seniors Council Government of Canada, Ottawa, Canada
2021 -	Member, CIHR Institute on Aging Advisory Board Canadian Institute for Health Research, Ottawa, Canada
2016-	Member, Toronto Metropolitan University Board of Governors Toronto Metropolitan University, Toronto, Canada
2018-	Member, Ministerial Advisory Board on Dementia Ministry of Health, Government of Canada, Ottawa, Canada
2022-2023	Member, Modernizing Alberta's Primary Health Care System (MAPS) MAPS International Expert Panel Ministry of Health, Government of Alberta, Edmonton, Canada

2014-	Chair, Ontario Telemedicine Network (OTN) - Ontario Geriatrics Learning Centre Steering Committee
2014-	Fellow, InterRAI Research Network + Member, Network for Excellence in Acute Care
2016-	Faculty, Geriatric Education and Research Institute, (Adjunct) Geriatric Education and Research Institute, Singapore
2022-	Canadian Ambassador for Healthcare Denmark Healthcare Denmark, Copenhagen, Denmark
2014-	Senior Fellow (Associate) Massey College, University of Toronto, Toronto, Canada
2014 -	Co-Chair, City of Toronto Seniors Strategy Accountability Table City of Toronto, Canada
2014 -	Member, American Red Cross Scientific Advisory Council American Red Cross, Washington DC, United States
2016-	Member, CABHI Innovation Advisory Council Centre for Aging and Brain Health Innovation, Baycrest Health Sciences, Toronto, Canada
2020-	Member, COVID-19 Testing Strategy Panel Government of Ontario, Toronto, Canada
2020-	Member, TELUS Medical Advisory Board Telus, Calgary, Canada
2016-	Member, National Medical Advisory Council Bayshore Healthcare, Mississauga, Canada
2014-	Member, Advisory Board Closing the Gap Healthcare Group, Toronto, Canada
2013-	Honorary Medical Advisor Carefirst Seniors & Community Services Association, Toronto, Canada
2008-	Research Affiliate Oxford Institute of Ageing, University of Oxford, United Kingdom
PREVIOUS S	ELECTED APPOINTMENTS
2016-2021	Associate Professor of Medicine Department of Medicine, University of Toronto, Toronto, Canada
2016-2021	Associate Professor of Family and Community Medicine (Adjunct) Department of Family and Community Medicine, University of Toronto, Canada
2016-2021	Associate Professor of Health Policy, Management and Evaluation
	(Adjunct) Institute of Health Policy, Management and Evaluation, University of Toronto, Canada
2018-2022	Physician Clinical Lead (Seniors) Ontario Health (Toronto Region), Toronto, Canada
2020-2023	Chair, National Long-Term Care Services Standard Technical Committee Health Standards Organization, Ottawa, Canada

2018-2019	Member, LHIN Home and Community Care Experience Survey Expert Panel Health Quality Ontario, Toronto, Canada
2017-2018	Member, CCA Expert Panel on Medical Assistance in Dying Canadian Council of Academies, Ottawa, Canada
2017-2018	Member, Toronto Central LHIN Home and Community Expert Panel Toronto Central LHIN, Toronto, Canada
2017-2020	Member, National Initiative for the Care of the Elderly (NICE) Network Centres of Excellence, Board of Directors Toronto, Canada
2017	Visiting Professor of Geriatric Medicine University of California San Francisco (UCSF) Division of Geriatric Medicine, San Fransisco, California
2016-2017	Co-Faculty Lead, Canadian Foundation for Healthcare Improvement (CFHI) Acute Care for Elders (ACE) Collaborative
2015-2017	Chief Clinical Officer, Circle of Care Toronto, Ontario, Canada
2014-2021	Co-Chair, Ontario Community Paramedicine Secretariat Steering Committee Toronto, Canada
2013-2016	Assistant Professor of Health Policy, Management and Evaluation (Adjunct) Institute of Health Policy, Management and Evaluation, University of Toronto, Canada
2015	MOHLTC Expert Group on Home and Community Care Member Ontario Ministry of Health and Long-Term Care, Toronto, Canada
2012-2016	Assistant Professor of Family and Community Medicine (Adjunct) Department of Family and Community Medicine, University of Toronto, Canada
2012-2014	Associate Fellow, InterRAI Research Network
2011	MOHLTC ALC Action Team Member Ontario Ministry of Health and Long-Term Care, Toronto, Canada
2010-2016	Assistant Professor of Medicine Department of Medicine, University of Toronto, Toronto, Canada
2011- 2016	Member and Chair, Health Professions Advisory Committee (HPAC) Toronto Central Local Health Integration Network (LHIN), Toronto, Canada
2011-2016	Medical Advisor Toronto Central Community Care Access Centre (CCAC), Toronto, Canada
2010-2011	Action Canada Fellow
2010	Visiting Professor of Geriatric Medicine Peking Union Medical College Hospital, Beijing, China
2009-2010	Attending Physician – Medical House Staff Practice Johns Hopkins Medical Institutions, Baltimore, USA
2009	Chief Geriatrics Fellow Johns Hopkins University School of Medicine, Baltimore, USA

- 2008-2010 Erickson Fellow in Clinical Geriatrics, Education and Leadership Johns Hopkins University School of Medicine. Baltimore, USA
- 2005-2008Resident Physician in Internal Medicine
University of Toronto Hospitals, Toronto, Canada
- 2003-2005 Junior Dean Hertford College, University of Oxford, United Kingdom

EDUCATION AND TRAINING

- 2009-2010 Business of Medicine Certificate
 Johns Hopkins University Carey School of Business, Baltimore, USA
 2009-2010 Faculty Development Program in Teaching Skills
- Johns Hopkins University School of Medicine, Baltimore, USA
- 2008-2009 Faculty Development Program in Curriculum Development Johns Hopkins University School of Medicine, Baltimore, USA
- **2009-2010** Erickson Fellow in Clinical Geriatrics, Education and Leadership Johns Hopkins University School of Medicine, Baltimore, USA
- 2005-2008 Postgraduate Internal Medicine Residency University of Toronto Hospitals, Toronto, Canada
- 2002-2008 Doctor of Philosophy (D.Phil) in Sociology Oxford Institute of Ageing, Department of Sociology, University of Oxford, United Kingdom
- 2001-2002 MSc in Economic and Social History (Medical History) Faculty of Modern History, University of Oxford, United Kingdom
- **1998-2002 Doctor of Medicine (MD)**

 Faculty of Medicine, University of Western Ontario, London, Ontario, Canada
- **1998-2000Bachelor of Science (Medical Research)**Faculty of Medicine, University of Manitoba, Winnipeg, Manitoba, Canada
- **1995-1998 Bachelor of Science (Life Sciences) Degree**

 Faculty of Arts and Sciences, Queen's University, Kingston, Ontario, Canada
- **1983-1995Manitoba Secondary Schools Diploma**St. John's-Ravenscourt School, Winnipeg, Manitoba, Canada

EDUCATION AND TRAINING CERTIFICATIONS

- 2017 Fellow, American Geriatrics Society (AGSF)
- 2010 American Board of Internal Medicine (Geriatric Medicine)
- 2010 Fellow, Royal College of Physicians of Canada (Geriatric Medicine)
- 2009 American Board of Internal Medicine (Internal Medicine)
- 2009 Fellow, Royal College of Physicians of Canada (Internal Medicine)
- 2008 Licentiate of the Medical Council of Canada

AWARDS, DISTINCTIONS AND SCHOLARSHIPS

2023	University of Toronto MD Program 2021-2022 Teaching Excellence Award
2023	Toronto Post Magazine – Listed as one of Toronto's Top Doctors for 2023
2022	Medical Post Trailblazer Media Engagement Award (Runner-Up)
2022	University of Toronto Institute of Health Policy, Management and Evaluation Louise Lemieux-Charles Health System Leadership Award
2022	Western Universty Schulich School of Medicine & Dentistry Alumni of Distinction Community Service Award
2022	Ontario Medical Association – Geriatric Medicine Section Service Award
2022	Toronto Post Magazine – Listed as one of Toronto's Top Doctors for 2022
2021	Medical Post Magazine Power List – Canada's 30 Most Important Doctors – Ranked #3
2020	William Goldie Prize and Travel Award for Quality and Innovation Contributions
2020	UHN/SHS Department of Medicine Citizenship Award
2020	2020 University of Toronto Virtual Research Day Dr. Sim Fai Liu Memorial Award for Scholarly Excellence in Geriatric Medicine (2nd Place) – Sabrina Fitzgerald Medical Student
2020	2020 National Geriatrics Interest Group (NGIG) J.L. Student Research Award – Sabrina Fitzgerald Medical Student
2020	Home Instead International's Senior Advocate Award for Changing the Face of Aging
2019	UHN/SHS Department of Medicine Citizenship Award
2019	American Geriatrics Society Award for Highest Rated Abstract in Health Services & Policy Research
2018	Health Quality Transformation Abstract of Distinction Award
2018	H. Garfield Visiting Lecturer at Queen's University
2017	Fellow, American Geriatrics Society (AGSF)
2017	Western University's Be Extraordinary Campaign Representative
2017	The Senator David A. Croll Memorial Wellness Lecturer
2017	UCSF Division of Geriatrics, Visiting Professorship
2017	The Optimyz 100 – Canada's Top Health Influencers
2016	Indo-Canada Chamber of Commerce Male Professional of the Year Award

2016	American Geriatrics Society Award for Best Overall Paper
2016	American Geriatrics Society Award for Best Models of Care Poster
2015	Medical Post 2015 Power List – Canada's 50 Most Important Doctors
2015	Council of Agencies Serving South Asians Seniors Well Being Equity Award
2015	Accreditation Canada Leading Practice Award
2015	The Change Foundation 20 Faces of Change Award
2014	Maclean's Magazine 2014 Power List – The 50 Most Important People in Canada
2014	Michener Institute Honorary Diploma
2014	Canadian Medical Association Award for Young Leaders
2014	Canadian Association of Occupational Therapists Citation Award
2014	Queen's University Dr. Duncan G. Sinclair Lecturer
2014	3M Health Care Quality Team Award for Program or Processes in an Acute Care Hospital Environment
2014	American Geriatrics Society Award for Best International Poster
2014	Desi News Grant's Desi Community Achiever Award
2014	Toronto Life - Toronto's 30 Best Doctors: Geriatric Care
2013	Minister's Medal Honouring Excellence in Health Quality and Safety
2013	University of Toronto Magazine – Top 10 Professors Under 40
2013	CERNER Canada Advancing Clinical Excellence (ACE) Award
2013	The Saroj Lal Annual Alzheimer Society Lecturer
2013	Canadian Medical Association Canada's Doctors Innovating for Patients Campaign Representative
2013	Toronto Star People to Watch in 2013
2013	University of Toronto Faculty of Medicine Alumni Dean's Rising Star Award
2012	University of Western Ontario Schulich School of Medicine and Dentistry Young Alumni Award
2012	American Geriatrics Society Award for Best Paper in Geriatrics Education
2010	Action Canada Fellowship
	This highly competitive Government of Canada/Private Industry Fellowship Program aims to develop leadership and policy development skills for Canadians in the early stages of their career.

2008	Dr. Sim Fai Liu Memorial Award
	Awarded to a post-graduate resident physician at the University of Toronto who has demonstrated outstanding promise in the field of geriatrics.
2003	Sir Duncan J. Watson Award
	Awarded to a post-graduate student at New College, Oxford to help support and fund promising on- going doctoral research activities in any field of studies related to the Humanities.
2002	J. B. Campbell Memorial Scholarship in Medicine
	Awarded to a student at the University of Western Ontario who has shown outstanding proficiency in Medicine and Clinical Medicine in the final year of the program.
2002	Dr. Charles E. Frosst Scholarship and Medal
	Awarded at the end of the University of Western Ontario Medical School's Clinical Training Course to the student deemed to show the most promise in the area of therapeutics.
2001	Rhodes Scholarship
	Awarded to provide fees and maintenance to study at Oxford University for three years.
2000	Polly and George Sheps Award
	Awarded annually to a medical student producing the best research in Community Medicine at the University of Manitoba.
1999	Dr. Jack Wilt Memorial Scholarship
	Awarded annually to a B.Sc. (Med) Student at the University of Manitoba who has shown outstanding promise in research during the first summer of the program.
1995	UWO Medical School Rowntree Prize for the History of Medicine Queen's University - John Brooks Community Foundation Entrance Scholarship
	Awarded to a student entering Queen's who has demonstrated outstanding achievement in both academics and community service.
1995	St. John's-Ravenscourt Alumni University Scholarship
	One of two scholarships awarded annually upon selection by the SJR Alumni Association to a graduate who has demonstrated excellence in all aspects of school life.
1995	Manitoba Premier's Volunteer Service Award
	This award is the highest honour granted in Manitoba to recognize the efforts and dedication of outstanding volunteers. I became the youngest Manitoban to receive that award.
1995	Canadian Association of Principals Leadership Award
CURRENTL	Y FUNDED RESEARCH GRANTS
2023-2024	Establishing Optimal Medical Care Provider Commitment in Canadian Long-Term Care Homes

Canadian Institute of Health Research (CIHR) Competition: CIHR Catalyst Grant - Policy Research for Health System Transformation March 1, 2023 – February 28, 2024 \$149,879

Stall NM, Costa A, Savage R, Quail P, Blanchard C, Kaplan D, Levin L, Peck S, Robert B, **Sinha SK (Principal Knowledge User),** Brown K, Collins R, Dash D, Feldman S, Hillmer M, Jones A, Katz P, McCarthy L, Moser A, Quinn K, Reppas-Rindlisbacher C, Rochon PA, Siu H, Tanuseputro P, Tripp D, Urbach D.

2023-2024 The Implementation and Evaluation of a Novel Geriatric Police Curriculum for Toronto Police Services

Employment and Social Development Canada; Competition: New Horizons for Seniors Program

March 30, 2023 - March 29, 2024 \$25,000

Kokorelias KM, Sinha SK (Co-Principal Investigator)

2022-2023 Sinai Health/RTOERO Healthy Ageing 101 Education Series Employment and Social Development Canada; Competition: New Horizons for Seniors Program

March 28, 2022 – March 27, 2023 \$25,000

Sinha SK (Principal Investigator)

2022-2023 Resiliency On The Job as A Home Care Nurse: Experiences of Registered Practical Nurses to Inform Recruitment, Retaining and Revitalizing This Workforce

SSHRC Partnership Engage Grant, Registered Practical Nurses Association of Ontario. March 1, 2022 - February 28, 2023 \$25,000

Connelly DM, Garnett A, Giosa J, Guitar N, Smith-Carrier T, Pearson DM, McNeil H, Calver J, Snobelen N, **Sinha SK (Collaborator),** Martin D.

2021-2023 An Individual COVID-19 Visit Risk Assessment Tool

Public Health Agency of Canada (PHAC) May 1, 2021-March 31, 2023 \$696,502

Sinha SK (Principal Investigator)

2021-2025 Caring Over the Lifecycle: the Roles of Families and Welfare States Today and Into the Future Canadian Institute of Health Research (CIHR)

February 1, 2021 - January 31, 2025 \$180,555

Wolfson MC, Sinha SK (Collaborator), Flood C

2020-2023 Implementation Science Teams: Finding the Right Balance: Implementing Family Presence Policies in Ontario Long-Term Care Homes

Canadian Institute of Health Research (CIHR) Nov 1, 2020 - Oct 31,2023 \$150,000

Sinha SK (Nominated Principal Applicant), Stall, NM. (Trainee PA), Cohen T. (Principal Knowledge User), Ovenden S. (Principal Knowledge User), Hillmer M. (PA and Principal Knowledge User), Ivers N. (PA), Naglie G. (Co-A), Feldman S. (Co-A), Johnstone J. (Co-A), Collins R.(Principal Knowledge User), Lender D. (Principal Knowledge User), Peck S (Principal Knowledge User), Cooper N. (Principal Knowledge User), Levin L. (Principal Knowledge User), Mills S.(Family Care Giver), Greenspon D. (LTC Resident), Rochon P. (PA), Coupal A. (Collaborator)

2020-2022 To Serve and Protect: Advancing Police Knowledge with a Seniors Led Curriculum

Employment and Social Development Canada; Competition: New Horizons for Seniors Program

March 2020-March 2022 \$25,000

Sinha SK. (Principal Investigator), Austen A,, N Foster.

2020-2025 Resident-to-Resident Abuse in Long-Term Care: Reporting for Change

Canadian Institute of Health Research (CIHR) Sept 2020-Aug 2025 \$1,396,126

McDonald, L (PA) Mirza, R, Laura Tamblyn-Watts, Dr. Peter Whitehouse, Dr. Mark Lachs, Dr. Karl Pillermer, **SK Sinha (Collaborator)**

COMPLETED FUNDED RESEARCH GRANTS

2020-2021 Development of Machine Learning Models to Characterize Homebound Status in Older Adults in Canada

Canadian Institutes of Health Research (CIHR) March 2020-February 2021 \$60,000

Khan, S., Iaboni, A., Bethell, J., McGilton, K., SK Sinha (Co-Investigator)

2018-2021 Evaluation of an Older Adult-Continuing Care Aide Dyad Exercise Program within Home Care Networks Canadian Institutes of Health Research (CIHR) April 2018-March 2021 \$485,775

Johnson, S, Candow, D. Chilibeck, P., Johnson, E., Jones G., **Sinha, S. (Co-Investigator)**, Thabane, L

2017-2019 Developing a Community Paramedicine at Home myCarePlan (myCP) app for frequent users of emergency services: Empowering clients in using appropriate healthcare resources.

Canadian Institutes of Health Research (CIHR) Catalyst Grant September 2017-August 2019, \$199,494

Agarwal, G., Angeles, R., Costa, A., Howard, M., Leyenaar, M., Mangin, D., Price, D., Sinha, S. (Co-Investigator), Thabane, L.

2017-2021 LEARNING WISDOM Phase 2 Scale - Supporting the creation of a LEARNing INteGrated health system to mobilize context adapted knowledge with a Wiki platform to Improve transitions of frail Seniors from hospitals & emergency Departments to the

community

Canadian Institutes of Health Research (CIHR) April 2017-March 2021, \$1,468,800

Paré, D. Co-applicant : Brousseau, A., Buckeridge, D., Couturier, Y., Dallaire, C, Denis, J., Dumont, S., Émond, M., Fleet, R., Hardy, M., LeBlanc, A., Légaré, F., Melady, D., Rhainds, M., Roy, D., **Sinha, S. (Co-Investigator)**, Sirois, M., Verma, J., Witteman, H., Chouinard, J., Drouin, V., Girouard, C., Gomez, D., McGinn, C., Poiré, M., Rivard, J., Savard, A., Vaillancourt, H., van de Belt, T.

2017-2019 Evaluating a Proactive Collaborative Model of Community Care using Paramedics to Support High-Risk Elders in Toronto

MSH-UHN AMO Innovation Fund. New Horizons for Seniors. April 2017- March 2019 \$94,570

Culleton, S., Foster, N., Roffey, M., Sinha, S. (Co-Principle Investigator), Thurston, A.

2016- 2019 The DIVERT-CARE (Collaboration Action Research & Evaluation) Study: A Multi-provincial Pragmatic Trial of Cardio-Respiratory

Management in Home Care

Canadian Institutes of Health Research July 2016-June 2019, \$688,051

Costa, A, Agarwal, G.; Bell, C; Boscart V; Bronskill, S; Hebert, P; Heckman, G; Hirdes, J; Lee, L; Mckelvie, R; Mitchell, L; **Sinha, S (Co-Investigator),**

2018 The Invisible Epidemic: A Spotlight on the Opioid Crisis Among Seniors

Canadian Institutes of Health Research (CIHR) Catalyst Grant March 2018-September 2018, \$59,999

McDonald, L., Shnall, A., Klinger, C., Mirza, R., Sinha, S. (Co-Investigator).

2017 Identifying and Understanding the Health and Social Care Needs of Older Adults with Multiple Chronic Conditions and their

Caregivers: A Scoping Review

Canadian Institutes of Health Research SPOR PIHCI Network – Knowledge Synthesis Grants

January 2017-December 2017, \$50,000

McGilton, K., Puts, M., Bergman, H., Andrew, M., Morgan, D, Vedel, I., Ayal, A., Dube, V., Marshall, E., Ploeg, J., Walker, J., Wodchis, W, McElhaney, J, Sampali, T, McKay, S., Bell, D., **Sinha, S. (Co-Investigator)**, Fernie, G., McNeil, D., Grimes, S., Beaudet, L., Hale, L, Bruce, L. Keatings, M., Parrot E., Stephens D, Wylie, D

2014-2017 The City of Toronto Independence at Home Community Paramedicine Demonstration Project

Ontario Ministry of Health and Long-Term Care, Implementation Branch, Community Paramedicine Demonstration Projects Program Nov 2014– March 2017, \$674,600

Klich J. Nowaczynski M, Sinha S (Co-Principal Investigator)

2016-2017 Older Persons Education and Navigation Strategy

Government of Ontario - Ontario Seniors Secretariat Seniors Community Grants Program June 2016, \$8,000

N Foster., Gade, S Lucki, C., Sinha S (Co-Principle Investigator),

2014-2015 The Independence at Home Project

Ontario Ministry of Health and Long-Term Care, Primary Care Branch, Medically Complex Patients Demonstration Projects Program Mar 2014– March 2015, \$153,700

Sinha S (Co-Principle Investigator) Nowaczynski M, Klich J.

2013-2015 Evaluating the Effectiveness of an Integrated Home-Based Primary, Speciality and Community Care (IHBPSCC) Model For Frail and Housebound Older Adults

MSH-UHN AMO Innovation Fund June 2013 – May 2015, \$200,000

Sinha S (Co-Principle Investigator) Bell C, Nowaczynski M, Akhtar S, Pham T, T Smith-Carrier.

Creating a Sustainable System of Care for Older People with Complex Needs: Learning from International Experience

Canadian Institutes of Health Research May 2013 – April 2015, \$132,425

Sinha S (Co-Principle Investigator), Anderson G.

2013-2015 Shining a Light on End-of-Life Care in Canada: Investigating Barriers, Testing Interventions, and Disseminating Integrated Solutions for Patients, Families and Healthcare Professionals

University of Toronto – Department of Medicine Feb 2013 – Jan 2015, \$187,790

Fowler R, Dev S, Berry S, Downar J, Gandhi S, La Delfa I, Laupacis A, Myers J, Ross H, Rubenfeld G, Scales D, **Sinha S (Co-Principle Investigator)**, Stukel T, Zimmermann C.

2012-2015 Elder-Friendly Emergency Department Services: Evaluation of Changes and Development of an Assessment Tool

Fonds de la recherché en santé (FRQS) May 2012 – April 2015, \$270,000

McCusker J, Ciampi A, Cossette S, Ducharme F, Vadeboncoeur A, Veillette N, Vu M, **Sinha S** (Collaborator)

2011-2012 Bridging Care for Frail Older Adults: A Study of Innovative Methods Providing Integrated Home-based Primary Care in Toronto

BRIDGES Fund, Ontario Ministry of Health and Long Term Care April 2011 – March 2013, \$395,000

Sinha S (Co-Principal Investigator), Nowaczynski M, Akhtar S, Pham T.

An Innovative Curriculum in Geriatric Emergency Medicine (GEM): Development Assessment and Dissemination

AHSC UHN/MSH AFP Innovation Fund, Ontario Ministry of Health and Long Term Care April 2011 – March 2013, \$95,000

D Melady, Perelman S, Lee S, Sinha S (Co-Investigator), Beduz M.

2011-2012 Implementation and Evaluation of an Early Mobilization Strategy for Older Patients

AHSC UHN/MSH AFP Innovation Fund, Ontario Ministry of Health and Long Term Care April 2011 – March 2012, \$98,860

Sinha S (**UHN/MSH Site Principal Investigator**), Liu B (Multi-Site Principal Investigator), Straus S, Zorzitto M, Ramsden R, Skanes C, Izukawa T, Naglie G, Brown-Farrell D.

Determining Physical Activity Levels in the Geriatric

Rehabilitation Population

AHSC TRI AFP Innovation Fund, Ontario Ministry of Health and Long Term Care April 2011 – March 2012, \$30,000

Bayley M, McIlroy WE, Mansfield A, Innes EL, Keren R, **Sinha S (Co-Investigator),** Wong J.

CURRICULUM DEVELOPMENT ACHIEVEMENTS

2008-

Maryland General Hospital - ACE Unit Rotation JHUSOM Geriatrics Fellows, Baltimore, USA Conceptualized and implemented rotation and wrote curriculum according to ACGME Guidelines. After a trial year as an elective rotation – the rotation has now become a mandatory requirement.

Geriatrics Curriculum for Internal Medicine Residents

Washington Hospital Center IM Residents, Washington, DC Conceptualized and implemented longitudinal geriatrics training curriculum that encompasses a onemonth mandatory Geriatrics rotation. Detailed Curriculum was written according to ACGME Guidelines with complementary ongoing Assessment and Evaluation Tools.

2008 Geriatrics Curriculum for Emergency Medicine Residents

University of Toronto Emergency Medicine Residents, Toronto, ON Serve as a Curriculum Development Advisor to Dr. Don Melady at Mount Sinai Hospital in Toronto in developing content and choosing the best education methods to convey core concepts.

INVITED PRESENTATIONS AND TALKS

2023

Government of Manitoba Seniors Strategy Lecture Series

Winnipeg, Manitoba, February 24, 2023 - 1 Hour Invited Speaker "Knowledge Sharing – Homecare Modernization"

Government of Manitoba Seniors Strategy Lecture Series

Winnipeg, Manitoba February 21, 2023 - 1 Hour Invited Speaker "Denmark Approach to Seniors Support and Services"

Government of Manitoba Seniors Strategy Lecture Series

Winnipeg, Manitoba, February 21, 2023 - 1 Hour Invited Speaker "Cross-cutting Health and Mental Health Initiatives"

Center for Innovation Webinar

Rochester, New York, February 16, 2023 - 1 Hour Invited Speaker "Enabling Small LTC Homes in Canada. Its Time"

Healthcare Exccelence Canada (HEC) Reimagining LTC Webinar

Toronto, ON, January 24, 2023 – 1 Hour Invited Speaker "Introducing the New National Long-Term Care Services Standard"

Alberta Continuing Care Innovation Forum

Edmonton, Alberta, January 18, 2023 - 1 Hour Keynote Speaker "Enabling a Promising Future for Continuing Care in Alberta"

Newfoundland Seniors Care Symposium

St. Johns, Newfoundland, January 12, 2023 – 1 Hour Invited Speaker"Delivering Better Patient, Provider and System Outocmes through an Advanced Care for Elders (ACE) Strategy"

2022

NORC Innovation Centre Webinar

Toronto, ON, December 12, 2022 – 1.5 Hour Invited Speaker "NORCs and Ageing in the Right Place: A Dialogue"

UT PGME MD Global Health Education Program

Toronto, ON, November 30, 2022 – 1.5 Hour Invited Speaker "Delivering Better Patient, Provider and System Outcomes through an Advanced Care for Elders (ACE) Strategy"

North York General Hospital Board Presentation

Toronto, ON, November 29, 2022 - 1 Hour Invited Speaker "Re-Imagining the Provision of Long-Term Care at NYGH"

AdvantAge Ontario Seniors' Housing Forum

Toronto, ON, November 22, 2022 – 1 Hour Invited Speaker 'Alternative Housing Options and Innovations for Older Adults with Diverse Needs"

UWPAT Annual Dinner

Toronto, ON, November 8, 2022– 1 Hour Keynote Speaker 'A Place for ALL of Us: Coming of Age in A Post-Pandemic Society'

International Federation on Ageing Webinar

Toronto, ON, November 1, 2022 – 1 Hour Invited Speaker 'Why This Flu Season is Different & What We Need to Do About It.'

University of Toronto at Scarborough: The Great Age:Sustainability in Aging Societies Conference

Toronto, ON, October 24, 2022 - 1.5 Hours Keynote Speaker "Successfully Navigating Toronto's Coming of Age. Can We Do It?"

National Institute on Ageing Webinar

Toronto, Ontario October 20, 2022 – 1 Hour Invited Speaker "Reflecting on and Preparing for the 2022-2023 Respiratory Season: Influenza, Pneumonia & COVID-19"

CIMHVR Conference

Halifax, NS, October 19, 2022 – 1 Hour Keynote Speaker "Addressing the Coming of Age and its Related Complexities Amongst Canada's Veterans"

CITF Seminar Series: Research Results & Implications

Toronto, ON, October 18, 2022 - 1.5 Hours Invited Speaker 'COVID-19 and Older Canadians: Where are We Now?'

Alberta Association of Gerontology Webinar

Edmonton, Alberta, ON October 13, 2022 - 1.5 Hours Invited Speaker "Enabling a Promising Future for Continuing Care in Alberta"

RTOERO Health Conference

Toronto, Ontario October 11, 2022 – 1 Hour Invited Speaker "Practical Technologies to Enable Ageing in Place"

OPTIONS XI for The Control of Influenza Conference

Belfast, UK September 26 - 29 2022 - Invited Speaker "Understanding Influenza Vaccination Uptake During The Covid-19 Pandemic In Canada"

Victorian Order of Nurses Board Retreat

Ottawa, ON September 23, 2022 - 1.5 Hours Invited Speaker "Enabling VON's Future as A Leading Canadian Provider of Long-Term Care"

Alberta Continuing Care Association IQ Conference

Red Deer, Alberta, September 14, 2022 - 1.5 Hours Invited Speaker "Enabling a Promising Future for Continuing Care in Alberta"

Toronto Metropolitan University Master of Health Administration (Community Care) 2022 Inaugural Class

Toronto, ON September 8, 2022 - 1.5 Hours Invited Speaker "Enabling the Future of Long-Term Care in Canada"

Sinai Sessions: Healthy Ageing and Geriatrics

Toronto, ON 12 July, 2022 - 1.5 Hours Invited Speaker "ACEing the Care of Older Canadians and Enabling Healthy Ageing"

Therapeutic Recreation Ontario Virtual Conference

Toronto, Ontario June 15, 2022 – 1.5 Hour Keynote Speaker "Addressing the Growing Epidemic of Loneliness and Isolation in Older Adults"

National Institute on Ageing Webinar

Toronto, Ontario June 13, 2022 – 1 Hour Invited Speaker "The Overlooked Issue of Shingles Infections in Older Canadians & How to Address It!"

Family Councils Ontario Summer 2022 Virtual Confernce

Toronto, Ontario June 13, 2022 – 1 Hour Invited Speaker "Enabling the Future of Long-Term Care"

SFU Gerontology Research Centre Friesen Virtual Conference

Vancouver, British Columbia May 24, 2022 – 1 Hour Invited Speak "Safer and Better: Revisioning LTC and Assisted Living in Canada"

Ontario Primary Care Collaborative Webinar

Toronto, Ontario May 19, 2022 – 1.5 Hour Invited Speaker "Practical Technologies to Enable Ageing in Place"

Saskatchewan Seniors Mechanism Conference on Home Supports: From Need to Reality

Saskatoon, Saskatchewan, May 18, 2022 – 1 Hour Invited Speaker "Enabling the Future of Long-Term Care in Canada"

Ontario Association of the Councils on Aging Annual General Meeting

Toronto, Ontario May 18, 2022 – 1 Hour Keynote Speak "Enabling the Future of Long-Term Care in Canada with new National LTC Standards"

Canada School of Public Service Executive Leadership

Development Program (ELDP) for Assistant Deputy Ministers

Ottawa, Ontario May 5, 2022 – 1.5 Hours Invited Speaker "Impacts of an Aging Population"

Dementia Learning Summit

Kitchener, Ontario May 4, 2022 – 1 Hour "A Systems-level Discussion on Canada's Capacity for Dementia Care"

United Way of British Columbia Provincial Summit on Aging

Vancouver, British Columbia April 27-28, 2022 – 2 Hours Keynote Speaker "Rethinking the Care of Older Canadians in Light of COVID-19"

The Walrus Talks

Toronto, Ontario, April 22, 2022 1.5 Hour "Pharmacare: Rethinking the current state of prescription drug coverage in Canada"

Providence Health West Coast Conference on Ageing

Vancouver, British Columbia, April 1, 2022 – 2 Hours Keynote Speak "Enabling the Future of Long-Term Care in Canada with new National LTC Standards"

3rd Annual Canadian Geriatric Oncology Conference

Ottawa, Ontario March 4, 2022 – 1 Hour "Geriatricizing Care for Older Adults with Cancer: How Should it Be Done to Deliver Better Patient and System Outcomes"

Healthcare Excellence Canada

Toronto, Ontario February 15, 2022 – 1 Hour "Delivering Better Patient, Provider and System Outcomes through an Advanced Care for Elders (ACE) Strategy"

Sinai Health/UHN Healthy Ageing 101 Seminar Series

Toronto, Ontario January 25, 2022 – 1 Hour "Navigating a New year of Evolving Health and Wellness Considerations in Light of this Never Ending Pandemic"

Ontario Medical Association Seminar Series

Toronto, Ontario January 24, 2022 – 1 Hour "Enabling the Future of Long-Term Care in Canada"

Canada School of Public Service

Ottawa, Ontario January 12, 2022 – 1 Hour "Understanding Aging in Place: Improving Quality of Life Through Innovation"

2021

Canadian Association of Occupational Therapists Conference

Toronto, Ontario Nov 25, 2021 – 1 Hour "ACEing Age Old Issues in the Care of Older Canadians"

Wellington-Altus Private Wealth

Toronto, Ontario Nov 18, 2021 – 1 Hour "A Fireside Chat on Enabling Ageing-in-Place"

Sinai Health/UHN - Healthy Ageing 101 Webinar

Toronto, Ontario Nov 16, 2021- 1 Hour "Practical Technologies That Can Enable Ageing in Place"

15th International Federation on Ageing Global Conference

Symposium

Niagara Falls, Ontario Nov 11, 2021 – 1.5 Hours "Creating a Canadian Decade of Healthy Ageing"

15th International Federation on Ageing Global Conference MasterClass on Frailty and Long-Term Care

Niagara Falls, Ontario Nov 9, 2021 – 1 Hour "Developing National LTC Standards for Canada"

Canadian Association on Gerontology Virtual Conference

Symposium

Toronto, Ontario Oct 23, 2021 - 1.5 Hours "Finding the Right Balance: Balancing Safety Considerations with the Rights of Residents to Engage with Their Families"

Canada School of Public Service Session on Ageing

Toronto, Ontario Oct 21, 2021 – 1.5 Hours "The Economics and Health of an Aging Population"

Ryerson University Generous Futures Seminar Series

Toronto, Ontario Oct 19, 2021 – 1 Hour "Generous Futures: Addressing Ageism"

Empire Club of Canada

Toronto, Ontario Oct 18, 2021 - 1 Hour "Ageing at Home: Is it An Affordable Option?"

International Continenece Society Annual Meeting

Melbourne, Australia Oct 17, 2021 – 1.5 Hours "We Don't Ask, They Don't Tell: Addressing Incontinence in Canada"

Global Coalition on Aging Round Table

Toronto, Ontario Oct 14, 2021 – 1.5 Hours "Tip of the Iceberg: Vaccinating Canadian Caregivers Against Influenza Round Table"

Canadian Centre for Healthcare Facilities Webinar

Abbotsford, British Columbia Oct 7, 2021 – .50 "Developing New National Long-Term Care Standards in Canada"

RTO/ERO Foundation Webinar

Toronto, Ontario Oct 5, 2021 – 1 hour "Addressing the Growing Epidemic of Loneliness and Isolation in Older Adults"

3rd Canadian HIV and Aging Symposium

Toronto, Ontario Oct 4, 2021 – 1 Hour "How A National Seniors Strategy Can Enable Ageing well with HIV"

AGEWell AgeTech Innovation Week Webinar

Toronto, Ontario Sept 30, 2021 - 1 Hour "Transforming Long-Term Care"

WeRPN Virtual Stakeholder Forum on Promoting Organizational Resilience in Long-Term Care

Toronto, Ontario Sept 29, 2021 - .50 Hours "Developing New National Long-Term Care Standards in Canada"

Nishnawbe Aski Nation – Health Transformation Virtual

Engagement on Long-Term Care

Toronto, Ontario Sept 28, 2021 - 1 Hour "Enabling the Future of Long-Term Care in NAN Communities"

Alzheimer's Society/Community Development Halton -

Gertrude Cetinski Lectureship for 2021

Halton, Ontario Sept 23, 2021 - 1.5 hours "Enabling Ageing Well in Canada"

United Way of British Columbia Core Canada Webinar Series

British Columbia, Sept 23, 2021 – 1 hour "Closing the Gaps: Advancing Emergency Preparedness, Response and Recovery for Older Adults in Canada"

Sinai Health/University Health Network

Healthy Ageing 101 Webinar

Toronto, Ontario Sept 21, 2021 - 1 hours "Navigating New Health and Wellness Considerations for Older Persons in Light of this Never Ending Pandemic"

University of Toronto Medical School

Toronto, Ontario Sept 20, 2021 - .50 Hours "Year 1 lecture on Healthcare Structure and Governance"

Icelandic Annual Health Congress

Reykjavik, Iceland August 20, 2021 – 1 hour "Delivering Better Patient, Provider and System Outcomes through an Advanced Care for Elders (ACE) Strategy"

Icelandic Ministry of Health Master Class on Integrating Care

Reykjavik, Iceland August 19, 2021 – 1 hour "Delivering Better Patient, Provider and System Outcomes through an Advanced Care for Elders (ACE) Strategy"

Landspitali University Hospital Executive Meeting

Reykjavik, Iceland August 19, 2021 – 1 hour "Delivering Better Patient, Provider and System Outcomes through an Advanced Care for Elders (ACE) Strategy"

Healthcare Excellence Canada & HSO LTC Webinar

Toronto, Ontario August 16, 2021 – 1 Hour "Webinar Series: Next Steps in COVID-19 Response in LTC"

Ontario Medical Association Virtual Media Briefing

Toronto, Ontario July 14, 2021 - 1 hour "OMA Media Briefing on Seniors and Long-Term Care"

The Empire Club Webinar

Toronto, Ontario July 8, 2021- 1.5 Hours "The Future of Elder Care in Canada Event"

Dalhousie University MacEachen Institute for Public Policy and Governance Virtual Event on the Future of Long-Term Care in Canada

Toronto, Ontario July 6, 2021 1.5 Hours "Long-Term Care and the Canada Health Act: The Unfinished Chapter?"

The Rounds Webinar

Toronto, Ontario June 29, 2021 – 1 Hour "Practical Technologies that Can Enable Ageing-in-Place"

Ryerson UniversityLIFE Institute/The Chang School of Continuing

Education: Medical Monday's Webinar

Toronto, Ontario June 28, 2021 – 1 hour "Living Longer, Living Well: Expert Advice to Enable Healthy Aging"

NIA Spotlight on Healthy Ageing Webinar

Toronto, Ontario June 28, 2021 – 1 Hour 'Even 4 Hours a Day won't cut it – Why Transforming Long-Term Care Needs to Start with empathy"

Sinai Health System/University Health Network Geriatrics

Institute

Toronto, Ontario June 24, 2021 – 1 Hour "Geriatrics Institute Education Day – Back to the Future"

Canadian Institutes of Health Research - LTC + Implementation Science Teams Mid-Point Knowledge Sharing Event

Toronto, Ontario June 9, 2021 - 1.5 Hours "Policy Directions: LTC Standards"

National Institute on Ageing/RBC Panel Webinar

Toronto, Ontario June 8, 2021 - 1 Hour "Diversity and Aging: Honouring our Identities"

Canadian Association of Retired Teachers Virtual Annual Conference

Toronto, Ontario June 3, 2021 - 1 Hour "Why A National Seniors Strategy Can Enable Ageing in Place"

Institute of Health Services and Policy Research Canadian Association for Health Services and Policy Research (CAHSPR)

Virtual Conference

Toronto, Ontario May 21, 2021 - 1 Hour "Strengthening Pandemic Preparedness in Long-Term Care"

Canada-UK Virtual Colloquium on Federalism/Devolution

Toronto, Ontario May 15-16, 2021 – 1 hour "How Older Canadians have Fared During the COVID-19 Pandemic"

Institute for Research on Public Policy (IRPP) Webinar

Montreal, Canada May 13, 2021 - 1 Hour "A Road to Long-Term Care Reform in Canada"

Council of Agencies Serving South Asians Webinar

Toronto, Ontario May 12, 2021 - 1 Hour "CASSA's South Asian Heritage Month 2021 Panel Event"

PRI-Med Canada 18th Annual Virtual CME Conference

Toronto, Ontario May 7, 2021 – 1 Hour "A Practical Approach to Managing the Care of Older Adults in the Extremes of Complexity"

Conference for Advanced Life Underwriting (CALU) Virtual Annual

Conference

Ottawa, Ontario May 4, 2021 – 1 Hour "Rethinking the Care of Older Canadians in Light of COVID-19"

University of Manitoba

Winnipeg, Manitoba April 13, 2021 – 1 Hour "Rhodes Scholarship Information Session Webinar"

Toronto Public Health, Ontario Health, Toronto Paramedic Services, University Health Network Webinar

Toronto, Ontario April 8, 2021 – 1 Hour "Homebound Vaccination Approach City of Toronto Webinar #2"

Toronto Public Health, Ontario Health, Toronto Paramedic Services, University Health Network Webinar

Toronto, Ontario April 6, 2021 – 1 Hour "Homebound Vaccination Approach City of Toronto Webinar #1"

University of TorontoDalla Lana School of Public Health Boehm Lecture on Public Health Webinar

Toronto, Ontario March 22 - 2.5 Hours "Reimagining Aging and Restoring Trust in the Wake of COVID-19"

McMaster University - Wilson Leadership Series Webinar

Hamilton, Ontario Mar 12, 2021 – 1 Hour "Navigating A Rapidly Evolving Long Term Care Policy Landscape in Light of COVID-19"

South Asian Health Network Webinar

Toronto, Ontario Mar 9, 2021 – 1 Hour "Vaccine Town Hall"

Councillor Matlow's Online Community COVID-19 Panel Discussion

Toronto, Ontario Mar 8, 2021 - 2 Hours

SXSW 2021 Webinar

Houston, Texas Feb 26, 2021 - 30 Minutes "To A Century and Beyond"

Rainbow Table - Webinar

Toronto, Ontario Feb 24, 2021 – 30 Minutes "COVID-19 and Older Adults"

Kingsway Islington Probus Club Webinar

Toronto, Ontario Feb 22, 2021 - 1 Hour "Myths and Realities of Ageing and How to Live to 100!!"

Pfizer Canada COVID-19 Vaccine CME Webinar

Toronto, Ontario Feb 9 & Feb 16, 2021 - 1 Hour "New Horizons in the Global Pandemic"

Sinai Health/University Health Network Healthy Ageing 101 Webinar

Toronto, Ontario Feb 16, 2021 - 1 Hour "How Older Adults can get a perfect night's sleep"

The Pearson Centre for Progressive Policy Webinar

Ottawa, Ontario Feb 11, 2021 - 1 Hour "Should Seniors Care be in the Budget?"

Bethany Care Society Virtual Board Retreat

Calgary, Alberta Feb 5, 2021 – 1 Hour "Rethinking the Continuum of Care for Older Albertans in Light of COVID-19"

World Dementia Council Care Virtual Workshop

London, United Kingdom Feb 5, 2021 1.5 Hours "Caring for Canadian Caregivers"

APPTA Community of Practice Webinar

Halifax, Nova Scotia Feb 4, 2021 1 Hour "Navigating A Rapidly Evolving Long Term Care Policy Landscape in Light of COVID-19"

Health Accord for Newfoundland & Labrador Webinar

Newfoundland and Labrador – Feb 4, 2021 – 1 Hour "Building a Better Healthcare System for an Ageing Island"

LTC COVID Webinar

United Kingdom Feb 1, 2021 1.5 Hours "LTC Covid Webinar: International guidelines and emerging practices for safe visiting at care homes during COVID-19"

Canadian Centre for Healthcare Facilities Webinar

Abbotsford, British Columbia Jan 26, 2021 – 1 Hour "Closing the Gaps: Advancing Emergency Preparedness, Response and Recovery for Older Canadians in LTC + Community Settings"

University Of Saskatchewan – Health Policy Webinar

Saskatoon, Saskatchewan Jan 19, 2021 – 1 Hour "Rethinking Long-Term Care in Light of COVID-19"

CIHR Best Brains Exchange on Regulation of the Ontario

Retirement Homes Sector Webinar Toronto, Ontario Jan 19, 2021 – 2 Hours "Rethinking the Continuum of Care for Older Ontarians in Light of COVID-19"

Ontario College of Family Physicians 2021 Family Medicine Summit Webinar

Toronto, Ontario Jan 30 – Feb 27, 2021 – 1 Hour "AGEism and Elder Abuse: How to Identify It and Tackle it Within Primary Care"

2020

Massey Grand Rounds

Toronto Ontario Dec 16, 2020 – 1 Hour "The impact of COVID on the elder patient population"

Correctional Services Canada Health Services Sector Webinar

Ottawa, Ontario Dec 8, 2020 – 1 hour "Insights from a Geriatrician on How We Can Better Serve Older Persons in Custody"

City of Toronto Seniors Advocate's Online Forum

Toronto, Ontario Nov 30, 2020 - 1 hour "Toronto's Seniors Advocate's Public Forum on the Challenges and Opportunities for LTC During (and After) COVID-19"

First Policy Response Webinar

Toronto, Ontario Nov 23, 2020 - 1 hour "COVID-19 and the Future of Long-Term Care"

C.D. Howe Institute's Health Policy Council Meeting

Toronto, Ontario Nov 18, 2020 - 1 hour "COVID-19 mortality in long term care homes and in the senior population"

National Institute on Ageing Webinar Town Hall

Toronto, Ontario Nov 13, 2020 - 1 hour "Ask the experts! Staying Healthy, Staying Safe: Why We Need to Take the Flu Seriously During the COVID-19 Pandemic"

International Federation on Ageing Hearing Policy Forum

Toronto, Ontario Nov 10, 2020 – .50 hour "Transforming Hearing Policy for Older Adults"

Canadian Red Cross – Survival 2020 Virtual Conference

Toronto, Ontario Oct 7, 2020 - 1 hour

"Closing the Gaps: Advancing Emergency Preparedness, Response and Recovery for Older Adults in Canada"

Canadian Employee Benefits Virtual Conference (53rd annual)

Toronto, Ontario Sept 29, 2020 – 1 hour "All About Costs—Managing Long-Term Care"

McMaster University – SHIFT 2020 Conference

Toronto, Ontario Sept 24, 2020 1.5 hours "Future of Caregiving for The Socrates Project"

Canadian Consortium on Neurodegeneration in Aging (CCNA) Virtual Annual Conference

Montreal, Quebec Sept 23, 2020 - 1 hour "Annual Meeting Panel: COVID 19: The game changing impact on caregivers and persons with Dementia"

BC Care Providers Association Virtual Annual Conference

Toronto, Ontario Sept 21, 2020 – 1 hour "Seniors Care and the COVID-19 Pandemic: How the International Community Has Responded"

Conference for Advanced Life Underwriting (CALU) Virtual Annual Conference

The Future of Long-Term Care in Canada: Time to Act! Toronto, Ontario Sept 16, 2020 – 1 hour "Rethinking the Care of Older Canadians in Light of COVID-19"

Queen's International Institute on Social Policy Virtual Annual

Conference

Toronto Ontario Sept 2, 2020 – 1 Hour "Rethinking social protection and the care economy"

Canadian Foundation for Healthcare Improvement/Canadian Patient Safety Institute Webinar

Ottawa, Ontario – August 10, 2020 - 1 hour Next Steps in COVID-19 Response in Long-Term Care

Canadian Foundation for Healthcare Improvement/Canadian

Patient Safety Institute Webinar Ottawa, Ontario - July 27, 2020 - 1 hour "Launch of the CFHI Re-Imagining Long-Term Care Report"

NIA-Ismaili Community LTC Virtual Roundtable

Toronto, Ontario July 17, 2020 – 1 hour "Rethinking the care of Older Canadians in Light of COVID-19"

Forthlane Fridays Webinar

Toronto, Ontario, July 10, 2020 – 1 hour "Eldercare: Planning, Caring and Living Well"

Sinai Health System/University Health Network Geriatrics Insitute

Toronto, Ontario – June 25, 2020 - 1 Hour "COVID-19 Special Geriatrics Institute Education Day"

Taddle Creek Family Health Team Virtual Teaching Rounds

Webinar: Toronto, Ontario – June 23, 2020 – 2 Hours "Geriatric Pearls for the Non-Geriatrician: Practical Tips You Can Use in Caring for your Oldest Patients"

Bespoken Bureau – Digi Debates

Webinar: Toronto, Ontario, June 18, 2020 – 1 hour "COVID-19 Vaccine Debate"

Johnson Shoyama Graduate School of Public Policy Webinar

Regina, Saskatchewan, June 18, 2020 – 1.5 hrs Seniors' Care in an Era of COVID-19

Canadian Network for the Prevention of Elder Abuse Webinar

Webinar: Toronto, Ontario, June 15, 2020 – 1.5 hrs "15th Anniversary - Word Elder Abuse Awareness Day"

Waltons Trust Board

Toronto Ontario – June 11, 2020 1 hour "Understanding Our Opportunities to Advance a National AGEnda"

Central Okanagan Div of Family Practice CME

Penticton, British Columbia, June 4, 2020 - 1 Hour "COVID-19 and Older Adults: What LTC and Community Clinicians Need to Know"

ACCA Exclusive Membership Webinar

Edmonton, Ontario, June 3, 2020 – 1 Hour "What Should the Future Hold?"

South Okanagan Div of Family Practice CME Webinar

Kelowna, British Columbia, June 3, 2020 - 1 hour Virtual Long-Term Care Summit - South Okanagan Div of Family Practice CME "COVID-19 and Older Adults: What LTC and Community Clinicians Need to Know"

House of Commons – HUMA Committee

Ottawa, Ontario May 25, 2020 - 2 hours "The House of Commons HUMA Parliamentary Committee on the Government's Response to COVID-19"

The Empire Club Webinar

Toronto, Ontario Canada May 21, 2020 – 1 hour "Being Older in 2020: The Modern Joys and Risks of Aging"

Canadian Federation of Nurses Unions

Ottawa, Ontario, Canada May 13, 2020 - .15 "Canada Beyond Covid-19: Looking Back to Move Forward"

National Alzheimer's and Dementia Resource Center

Toronto, Ontario Canada May 13, 2020 – 1 Hour "Supporting Older Adults in Emergencies: Preparedness, Response, and Recovery,"

International Society for Quality in Health Care

Dublin, Ireland - May 1, 2020 - 0.50 Hrs. "The Impact of COVID-19 on Older Populations and their Carers Webinar"

SXSW Conference 2020

Austin, Texas, USA March 13, 2020 - 1 Hour "Are we building an Age-Friendly World"

University of Toronto Pharmacotherapy in Older Adults Lecture

Toronto, Ontario, Canada – March 6, 2020 – 1 Hour "Geriatric Pearls for the Non-Geriatrician: Practical Tips You Can Use in Caring for your Oldest Patients"

University of Toronto School of Medicine Year 2 Lecture

Toronto, Ontario, Canada – March 4, 2020 - 45 Minutes "On Becoming a Geriatrician, Health Strategist and Effective Advocate for Change"

Advantage Ontario/OLTCA/ORCA Forum

Toronto, Ontario, Canada – February 28, 2020 – 1 Hour "COV-ID 19 Planning Webinar"

UT DFCM Social, Political and Scientific Issues in Family Medicine

Seminar

Toronto, Ontario, Canada – February 26, 2020 – 1,5 Hour "ACEing Age Old Issues in the Care of Older Adults"

York Club Dinner Speaker Series

Toronto, Ontario, Canada – February 25, 2020 – 1 Hour "Myths and Realities of Ageing and How to Live to 100!!"

Ontario Lung Association Better Breathing Conference

Toronto, Ontario, Canada – January 25, 2020 – 1 Hour "The Underappreciated Burden Of Influenza And Pneumonia Amongst Canada's Older Populations... And What We Can Do About It!"

Aurora Sinai Medical Centre Medical Grand Rounds

Milwaukee, Wisconsin, USA - January 24, 2020 - 1 Hour "Closing the Gaps: What Health Professionals Should Know About Optimizing Emergency and Disaster Preparedness and Responses for Older Adults"

2019

CIHR/CHSPRA Health System Impact Fellowship National Retreat

Toronto, Ontario, Canada - November 27, 2019 - 1.5 Hours "Change Management in Complex Systems"

University of Toronto Family Medicine Core Day

Toronto, Ontario, Canada - November 27, 2019 - 1 Hour "A Practical Approach to Managing Mental Health Issues in Older Adults"

National ACE Conference

Milwaukee, Wisconsin - November 8, 2019 - 1 Hour "Acute Care for Elders (ACE): Lessons Learned from the Canadian Perspective"

RGP of Toronto Webinar

Toronto, Ontario, Canada – November 5, 2019 – 1 Hour "InterRAI Home Care Assessments: How to Make the Most of the Them in Your Clinical Decision Makina"

AdvantAge Ontario Webinar

Toronto, Ontario, Canada – October 28, 2019 – 1 Hour "Enabling the Future Provision of Long-Term Care in Canada"

Cheng Kung National Medical Centre FACES ACE Workshop

Tainan, Taiwan – October 25, 2019 – 1 Hour "Delivering Improved Patient and System Outcomes for Hospitalized Older Adults through an Acute Care for Elders (ACE) Strategy"

2019 International Association of Geriatrics and Gerontology – Asia/Oceana Meeting Acute Care for Elders (ACE) Workshop

Taipei, Taiwan – October 23, 2019 – 1 Hour "Delivering Improved Patient and System Outcomes for Hospitalized Older Adults through an Acute Care for Elders (ACE) Strategy"

Global Health Forum in Taiwan

Taipei, Taiwan – October 21, 2019 – 1 Hour "Delivering Improved Patient and System Outcomes for Hospitalized Older Adults through an Acute Care for Elders (ACE) Strategy"

Making the Connection Conference

Summerside, PEI – October 17, 2019 – 1 Hour "Enabling the Future of Long-Term Care in Canada"

C. D. Howe Event

Toronto, Ontario, Canada – October 8, 2019 – 1 Hour "Aging, Long-Term Care and Income Security"

Ontario Chamber of Commerce: Ageing Population Summit

Toronto, Ontario, Canada – October 1, 2019 – 1 Hour "A National Seniors Strategy. Where We Stand, Where We Need to Go!"

Alzheimer Society Durham Region

Ajax, Ontario, Canada – September 24, 2019 – 1 Hour "Dementia: Moving Towards a Cure"

2019 Global Ageing Network Conference

Toronto, Ontario, Canada – September 19, 2019 – 1 Hour "Aged Care for the Future: Optimizing Models of Care"

Alberta Association of Gerontology Lecture

Edmonton – September 11, 2019 – 1 Hour "A National Seniors Strategy. Where We Stand, Where We Need to Go!"

18th Annual University of Alberta Division of Geriatric Medicine Dr. Gerald Zetter Memorial Lecture

Edmonton, Alberta – September 10, 2019

"ACEing Age Old Issues in the Care of Older Canadians"

CMA Health Summit

Toronto, Ontario, Canada – September 10, 2019 – 1.5 Hours "Connecting Systems of Care and Support"

Ontario Association of Resident's Council Webinar

Toronto, Ontario, Canada – July 15, 2019 – 1 Hour "Cohesive Living in Long-Term Care: Support Your Peers"

Canadian Physiotherapy Association Annual Meeting

Charlottetown, PEI – June 27, 2019 – 1 Hour "ACEing Age Old Issues in the Care of Older Canadians"

National Health Group Master Class on Integrating Care

Singapore – June 20, 2019 – 1 Hour "ACEing Age Old Issues in the Care of Older Canadians"

SingHealth Master Class on Integrating Care

Singapore – June 16, 2019 – 1 Hour "ACEing Age Old Issues in the Care of Older Canadians"

National Health Group Master Class on Care Assessment

Singapore – June 16, 2019 – 1 Hour "Enabling Care Assessment in Canada with the Use of InterRAI Assessments"

Annual NICE Knowledge Exchange

Toronto, Ontario, Canada – May 30, 2019 – 1 Hour "Canada's First National Dementia Strategy: What You Need to Know"

International Federation on Ageing Panel Discussion

Toronto, Ontario, Canada – May 28, 2019 – 1 Hour "Discussion Dispelling Myths Surrounding the Vision Health of Older People"

Ageing and Public Health at the Speech-Language & Audiology Canada Annual Meeting

Montreal, Quebec, Canada – May 11 – 45 Minutes "How Can We Work Together to Improve Hearing Care and Build Accessible Communities to Help Canadians Age Well?"

2019 Pri-Med Conference

Toronto, Ontario, Canada – May 9, 2019 – 1 Hour "A Practical Approach to Managing the Care of Older Adults in the Extremes of Complexity"

YMCA GTA Alumni Association

Toronto, Ontario, Canada – May 9, 2019 - 30 Minutes "10 Myths and Realities About Ageing and HOW TO LIVE TO 100!"

AdvantAge Ontario 2019 Annual Convention

Toronto, Ontario, Canada – May 8, 2019 – 1 Hour "Preparing for the Future of Seniors' Care: Evidence and Options"

The Toronto Council on Ageing

Toronto, Ontario, Canada – May 7, 2019 – 1 Hour "Toronto's Coming of Age and its Seniors Strategy"

International Federation on Ageing – Adult Vaccinations Webinar

Toronto, Ontario, Canada – April 30, 2019 – 1 Hour "Barriers to Vaccination in At-Risk Groups"

Sherbrook GEM Conference

Sherbrook, Quebec, Canada – April 12, 2019 – 1 Hour "La Gériatrie, L'Affaire de Tous!"

Canadian Bar Association – Health Law Summit

Winnipeg, Manitoba, Canada – April 11, 2019 - 1 Hour "Age Discrimination and Health Care"

Canadian Academy of Sport and Exercise Medicine

Ottawa, Ontario, Canada – April 6, 2019 – 30 Minutes "The Health Benefits of Staying Active in Old Age"

Rotary Dial Council

Toronto, Ontario, Canada – April 2, 2019 – 2 Hours "Advancing a National Seniors Strategy"

2019 Massey Grand Round Symposium

Toronto, Ontario, Canada – March 20, 2019 – 20 Minutes "How Could a National Seniors Strategy Support Healthy AGEing?"

Healthy Innovation and Public Policy Conference

Saskatoon, Saskatchewan, Canada – March 13, 2019 – – 30 Minutes "ACEing Age Old Issues in the Care of Older Canadians"

University of Toronto School of Medicine Year 2 Lecture

Toronto, Ontario, Canada – March 6, 2019 - 35 Minutes "On Becoming a Geriatrician, Health Strategist and Effective Advocate for Change"

University of Toronto Pharmacotherapy in Older Adults Lecture

Toronto, Ontario, Canada – March 3, 2019 – 1 Hour "Geriatric Pearls for the Non-Geriatrician: Practical Tips You Can Use in Caring for your Oldest Patients"

Canadian Federation of Medical Students (CFMS) Day of Action

Ottawa, Ontario, Canada – February 3, 2019 – 45 Minutes "Lessons Learned in Advocating Effectively for Seniors"

HomeEquity Bank Annual Sales Conference

Toronto, Ontario, Canada – January 30, 2019 – 45 Minutes "The Dynamics and Implications of Our Ageing Population"

University of Ottawa Healthcare Symposium

Ottawa, Ontario, Canada – January 26, 2019 – 1 Hour "The Uncomfortable TRUTH About Ageing in Canada, and a DARE to Address it"

Southlake Regional Health Centre Leadership Retreat

Newmarket, Ontario, Canada – January 22, 2019 – 30 Minutes "ACEing Age Old Issues in the Care of Older Canadians"

2018

Toronto Rehab Blakely Health Innovation Series

Toronto, Ontario, Canada – December 7, 2018 – 30 Minutes "Why Canada Needs to Better for Care for its Caregivers"

Lung Association of Ontario Breathing Policy Forum

Toronto, Ontario, Canada – November 27, 2018 – 2 Hours "The Underappreciated Burden Of Influenza Amongst Canada's Older Population..and What We Can Do About It"

Niagara Health System Board Retreat

St. Catherines, Ontario, Canada – November 22, 2018 – 1 Day "ACEing Age Old Issues in the Care of Older Canadians"

Commonwealth Fund International Symposium

Washington, DC, United States – November 16, 2018 – 1 Hour "ACEing Age Old Issues in the Care of Older Canadians"

Commonwealth Fund International Symposium

Washington, DC, United States – November 16, 2018 – 1 Hour "Transforming the Health Care System for Patients with Complex Health and Social Care Needs"

ASR Trust Board Retreat

Toronto, Ontario, Canada – November 15, 2018 – 1 Hour "ACEing Age Old Issues in the Care of Older Canadians"

Sing for Your Life Foundation Special Lecture

Kelowna, BC, Canada – November 8-9, 2018 – 2 Days "Age with Confidence: What You Need to Know to Add More Life to Your Years Ahead"

Older Adult Centre's Association of Ontario

Toronto, Ontario, Canada – October 30 – 1 Hour "Unlocking the Potential of SALCs in Promoting Healthy Ageing"

Singapore Health and Biomedical Congress

Singapore – October 26, 2018 – 1 Hour "Using a Population Health Approach to Advance the Needs of an Ageing Population"

Singapore Health and Biomedical Congress

Singapore – October 25, 2018 – 1 Hour "ACEing Age Old Issues in the Care of Older Canadians"

National Healthcare Group Master Class on Integrating Care

Singapore – October 23, 2018 – 1 Hour "ACEing Age Old Issues in the Care of Older Canadians"

Agency for Integrated Care and Ministry of Health Master Class

Singapore– October 22, 2018 – 1 Hour "Enabling Care Assessment in Canada with the use of InterRAI Assessments"

Canadian Association of Geriatric Psychiatry

Halifax, Nova Scotia, Canada – October 13, 2018 – 1 Hour "Better Together: How Integrated Models of Geriatric Medicine and Psychiatry Can Deliver Superior Results"

The Organization for Economic Co-Operation and Development (OECD) Lausanne V Dialogue

Lausanne, Geneva, Switzerland – October 10, 2018 – 30 Minutes "Transforming Health Systems to Change the Course of Alzheimer's Disease"

34th H. Garfield Visiting Lectureship at Queen's University

Kingston, Ontario, Canada – October 3, 2018 – 1 Day "On Becoming a Geriatrician, Health Strategist and Effective Advocate for Change"

Regional Geriatric Program of Toronto Webinar

Toronto, Ontario, Canada – September 28 – 1 Hour "Toronto Central LHIN Seniors and Dementia Plans with Dr. Samir Sinha"

Toronto Public Health Elder Abuse Prevention Forum

Toronto, Ontario, Canada – September 28, 2018 – 30 Mins "Why Does AGEism Remain An Acceptable Form of Discrimination?"

Nurse Practitioners Association of Ontario (NPAO) Conference

Toronto, Ontario, Canada – September 22, 2018 – 1 Hour "The Underappreciated Burden of Influenza Amongst Canada's Older Population...And What NPs Can Do About It!"

University of Toronto School of Medicine

Toronto, Ontario, Canada – September 20, 2018 – 1 Hour "Structure, Function & Governance of the Canadian Health Care System"

Canadian Frailty Network (CFN) National Conference

Toronto, Ontario, Canada – September 20, 2018 – 45 Minutes "We Can't Address What We Don't Measure Consistently: Building Consensus on Frailty in Canada"

St. Joseph's Seniors Health Update

Toronto, Ontario, Canada – September 13, 2018 – 1 Hour "Advancing our Agenda from Around the Corner to Across Canada"

International Federation on Ageing

Toronto, Ontario, Canada – August 7, 2018 – 1 Day "Master Class on Delivering Elder-Friendly Care"

NHS Acute Frailty Network; Frailty First Conference

London, England, United Kingdom – June 28, 2018 – 1 Hour "ACEing Age Old Issues in the Care of Older Canadians...Lessons Learned from Canada's ACE Collaborative"

Georgian Bay Research and Innovation Day

Collingwood, Ontario, Canada – June 20, 2018 – 30 Minutes "ACEing Age Old Issues in the Care of Older Canadians..."

C.D. Howe Institute Roundtable Discussion

Toronto, Ontario, Canada – June 12, 2018 – 1.5 Hours "Preparing for an Aging Population: Is Ontario's Healthcare System Ready?"

National Health Care Leadership Conference

St. John's Newfoundland, Canada – June 5, 2018 – 1.5 Hours "The Journey from Innovation to Sustained Improvement and Change"

National Health Care Leadership Conference

St. John's Newfoundland, Canada – June 4, 2018 – 1.5 Hours "The International Acute Care for Elders (ACE) Collaborative for Improving the Care of Hospitalized Older Adults"

Thunder Bay Regional Health Sciences Centre Leadership Team

Thunder Bay, Ontario, Canada – May 31, 2018 – 1.5 Hours "ACEing the Care of Older Canadians"

Cardiovascular and Stroke Summit

Thunder Bay, Ontario, Canada – May 31, 2018 – 1 Hour "How Acute Care for Elders (ACE) Care Principles Can Support Excellent Cardiovascular and Stroke Care"

Commonwealth Fund Webinar Series

May 17, 2018 - 1 Hour "Access to Health Care for Older Canadians"

Canadian interRAI Conference

Calgary, Alberta, Canada – May 15, 2018 – 1 Hour "interRAI's New Suite of Instruments for Acute Care Hospitals"

New Brunswick Association of Nursing Homes AGM

Fredericton, New Brunswick, Canada – May 10, 2018 – 1 Hour "Where Does the Nursing Home Sector Fit Within Ontario's New Action Plan for Seniors"

National Initiative for the Care of the Elderly Annual Conference

Toronto, Ontario, Canada – April 30, 2018 – 20 Minutes "A National Seniors Strategy. Where We Stand, Where We Need to Go!"

SYMCOR Annual Leadership Retreat

Toronto, Ontario, Canada – April 24, 2018 – 1 Hour "The Dynamics and Implications of our Aging Population"

IHPME Health Policy Rounds Lecture

Toronto, Ontario, Canada – April 24, 2018 – 1.5 hours "Turning Policy into Practice and Practice into Policy – One Clinician's Journey..."

Canadian Geriatrics Society 2018 Meeting Workshop

Montreal, Quebec, Canada – April 21, 2018– 1 Hour "Twitter to Tenure, Blogging to Bold Action: Social Media for Education and Advocacy in Geriatrics"

FDC Foundation Annual General Meeting

Toronto, Ontario, Canada – April 20, 2018– 1 Hour "On Becoming a Geriatrician, Health Strategist and Effective Shit Disturber..."

GNAO 2018 Conference

Niagara Falls, Ontario, Canada – April 13, 2018– 1 Hour "How ACEing Eldercare Starts With Nurses..."

ORCA/OLTCA Together We Care 2018 Conference

Toronto, Ontario, Canada – April 10, 2018– 1 Hour "Where Does the Retirement Home Sector Fit Within Ontario's New Action Plan for Seniors?"

Cancer Care Ontario (CCO) Integrated Care Event

Toronto, Ontario, Canada – March 22, 2018 – 1 Hour "ACEing the Care of Older Adults Across the Continuum"

RGP of Eastern Ontario Geriatric Refresher Day

Ottawa, Ontario, Canada – March 21, 2018 – 1 Hour "Ontario's New Action Plan for Seniors: How Does this help us Advance our AGEnda!"

RGP of Eastern Ontario Geriatric Refresher Day Workshop

Ottawa, Ontario, Canada – March 21, 2018 – 1 Hour "Managing the Thorny Issues of Living at Risk with Our Patients and their Families"

St. Kitts and Nevis Medical and Dental Association Meeting

St. Kitts and Nevis – March 15, 2018– 1 Hour "A Practical Approach to the Comprehensive Geriatric Assessment (CGA) for the Non Geriatrician..."

JNF General Hospital Seniors Health Update

St. Kitts and Nevis – March 14, 2018– 1 Hour "Geriatric Pearls for the Non-Geriatrician: Practical Tips You Can Use in Caring for your Oldest Patients"

Ageing Well in St. Kitts and Nevis: A Public Education

Event to Support Healthy Ageing St. Kitts and Nevis – March 14, 2018– 1 Hour "Myths And Realities About Ageing And How To Live To 100!"

CFN Frailty Common Data Elements Meeting

Miami, Florida, USA – March 4, 2018– 1 Hour "Development of A Standard Set of Outcomes for Older Persons"

University of Toronto, CUBE x PrO Healthcare Policy Talk

Toronto, Ontario, Canada – February 12, 2018– 2 Hour "Policy Challenges and Opportunities in an Ageing Canada"

2018 Global Conference on Integrated Care

Singapore – February 3, 2018– 1 Hour "ACEing Age Old Issues in the Care of Older Canadians"

2018 Global Conference on Integrated Care

Singapore – February 3, 2018– 1 Hour "Effectively Integrating Primary and Specialty Care for Homebound Elders"

2018 Global Conference on Integrated Care

Singapore – February 2, 2018– 1 Hour "Enabling Care Assessment in Canada with the Use of InterRAI Assessments"

Geriatric Education and Research Institute

Singapore – February 1, 2018– 1 Hour "System & Policy Challenges and Opportunities in an Ageing Canada"

2017

CIHR Best Brains Exchange on Care for Elderly Persons in Rural Canada

Ottawa, Ontario, Canada – November 28, 2017– 1 Hour "Care Innovations for Older Persons Across Rural Canada"

York Region Age Friendly Complete Communities Workshop

King, Ontario, Canada – November 27, 2017– 0.5 Hour "Overview of New Ontario Action Plan for Seniors: Aging with Confidence"

US Network for Regional Healthcare Improvement (NRHI) Webinar

Online, Ontario, Canada – November 21, 2017– 1.5 Hour "Engaging Physicians in Providing High-Value Care"

East Midlands Research on Ageing Network

Nottingham, United Kingdom – November 16, 2017– 1 Hour "ACEing Age Old Issues in the Care of Older Canadians"

Burgundy Asset Management

Toronto, Ontario, Canada – November 9, 2017 – 2 Hour "The Ageing Client: A Medical Perspective"

Queen's School of Policy Studies Annual Policy Forum

Kingston, Ontario, Canada – November 4, 2017– 1 Hour "Perspectives on Ageing and Frailty Panel Discussion"

University Health Network Senior Leadership Team

Toronto, Ontario, Canada – November 1, 2017– 1 Hour "The InterRAI Hospital Systems: an Overview"

Senator David A. Croll Memorial Wellness Lecture

Toronto, Ontario, Canada – November 1, 2017– 1 Hour "Toronto, Ontario and Canada's Coming of Age"

Canadian Home Care Association Toronto Home Care Summit

Toronto, Ontario, Canada – October 31, 2017 – 0.5 Hour "How Do We Achieve the Delivery of Integrated Home Care in Ontario?"

Itoigawa General Hospital

Itoigawa City, Japan – October 25, 2017 – 1 Hour "ACEing Age Old Issues in the Care of Older Canadians"

Nanto City Hospital

Nanto City, Japan – October 24, 2017 – 1 Hour "ACEing Age Old Issues in the Care of Older Canadians"

Toyama University Hospital

Toyama, Japan – October 23, 2017 – 0.5 Hour "Geriatric Medicine in Canada and Toronto"

Toyama University Hospital

Toyama, Japan – October 20, 2017 – 1 Hour "ACEing Age Old Issues in the Care of Older Canadians"

McMaster Community Paramedicine National Strategy Meeting

Hamilton, Ontario, Canada – October 17, 2017– 0.5 Hour "Thinking Strategically About Community Paramedicine in Canada"

Rotary Club Toronto

Toronto, Ontario, Canada – September 29, 2017 – 0.5 Hour On Developing a Seniors Strategy for Toronto, Ontario and Canada

Ontario Accessibility Innovation Showcase

Toronto, Ontario, Canada – September 26, 2017 – 0.5 Hour "The Potential Promise, Pitfalls and Peril of Mobile Technologies in Enabling Care for Our Ageing Population"

St. Joseph's Health Centre, Senior's Health Update

Toronto, Ontario, Canada – September 13, 2017– 1 Hour "A Practical Approach to Addressing "Failure to Thrive" Issues"

IAGG World Congress of Gerontology and Geriatrics Conference

San Francisco, California, USA – July 27, 2017– 0.5 Hour "ACEing Age Old Issues in the Care of Older Canadians"

IAGG World Congress of Gerontology and Geriatrics Conference

San Francisco, California, USA – July 27, 2017– 0.5 Hour "Measuring the Impact of the Geriatric Emergency Management (GEM)Nursing Role in the Emergency Department Setting"

IAGG World Congress of Gerontology and Geriatrics Conference

San Francisco, California, USA – July 27, 2017– 0.5 Hour "Acute Care Hospitalizations and Place of Death among Homebound Older Adults Receiving Homebased Primary Care

IAGG World Congress of Gerontology and Geriatrics Conference

San Francisco, California, USA – July 25, 2017– 1 Hour "Using the InterRAI System to Support Right Care, in the Right Place at the Right Time"

IAGG World Congress of Gerontology and Geriatrics Conference

San Francisco, California, USA – July 23, 2017– 1 Hour "Establishing the Effectiveness of the Independence at Home Community Paramedicine Model"

Ontario PC Policy Advisory Council (PAC) on Seniors and Long-

Term Care

Toronto, Ontario, Canada – July 6, 2017– 2 Hour "Key Policy Considerations on Seniors and Long-Term Care in Ontario"

Rehab Care Alliance of Ontario

Toronto, Ontario, Canada – July 5, 2017 – 1 Hour

"Thinking Strategically About Assess and Restore in Ontario. Lessons Learned from the CP Experience"

Blue Water Health AGM

Sarina, Ontario, Canada – June 22, 2017– 1 Hour "Meeting Our 21st Century Opportunity in Careing for an Ageing Population"

2017 SHS/UHN Geriatrics Institute

Toronto, Ontario, Canada – June 22, 2017– 40 Minutes "Mirror, Mirror on the Wall, Who's the Safest of them All? Managing Living at Risk..."

York Region Connecting Caregivers Workshop

"Caring for Caregivers: developing Strategies to Support Caregivers" King City, Ontario, Canada – June 21, 2017– 1 Hour

City of Toronto – 5 GTA LHINs' Meeting

Toronto, Ontario, Canada – June 20, 2017 – 1 Hour "Thinking Strategically About Community Paramedicine in the GTA"

York Region Connecting Caregivers Workshop

King City, Ontario, Canada – June 21, 2017– 1 Hour "Caring for Caregivers: developing Strategies to Support Caregivers"

Waypoint AGM

Midland, Ontario, Canada – June 2, 2017– 1 Hour "Meeting Our 21st Century Opportunity in Careing for an Ageing Population"

BC Care Providers Association Annual Conference

Whistler, British Columbia, Canada – May 22, 2017– 1 Hour "Plenary on Excellence. The Path Forward: Achieving Excellence and Highlighting Best Practices in End-of-Life and Residential Care"

University of Toronto Chancellor's Presentation on Ageing Well

Ottawa, Ontario, Canada – May 24, 2017– 1 Hour "Aceing Age Old Issues in the Care of Older Canadians

University of Toronto DFCM Social, Political and Scientific Issues Seminar

Toronto, Ontario, Canada – May 17, 2017– 2 Hours "Does Canada Need a National Seniors Strategy"

Ryerson University DiverseCity on Board Event

Toronto, Ontario, Canada – May 15, 2017 – 1 Hour "Advancing Diverse and Inclusive Leadership in Healthcare"

Pri-Med 2017 Conference

Toronto, Ontario, Canada – May 11, 2017– 1 Hour "A Practical Approach to Addressing "Failure to Thrive" Issues in Primary Care"

Long Term Care Association of Manitoba Conference

Winnipeg Manitoba, Canada – May 09, 2017– 1 Hour "Aceing Age Old Issues in the Care of Older Canadians"

University of California San Francisco Medical Grand Rounds

San Francisco, California, United States – April 26, 2017 – 1 Hour "ACEing Age Old Issues in the Care of Older Canadians"

University of Toronto Seniors Outreach Club

Toronto, Ontario, Canada – April 24, 2017 – 1 Hour "On Becoming a Geriatrician, Health Strategist and Effective Shit Disturber"

2017 Canadian Frailty Network Conference

Toronto, Ontario, Canada – April 23, 2017 – 1 Hour

"Towards spreading elder-friendly Care: Engaging Teams and Patients in Quality Improvement"

CGS NGIG Student Day Keynote Presentation

Toronto, Ontario, Canada – April 22, 2017 – 1 Hour "On Becoming a Geriatrician, Health Strategist and Effective Shit Disturber"

2017 Canadian Geriatrics Society Annual Scientific Meeting

Toronto, Ontario, Canada – April 20, 2017 – 1 Hour "Political advocacy Workshop for Residents and Trainees"

Community Paramedicine Update for LHIN CEOs

Toronto, Ontario, Canada – April 20, 2017 – 1 Hour "Developing Community Paramedicine Models & Meeting MOHLTC Proposed Deliverables"

Saskatchewan Older Adults Conference

Saskatoon, Saskatchewan, Canada – April 7, 2017 – 1 Hour "The Value an Interprofessional Approach Can Bring to Age Old Issues"

Saskatchewan Older Adults Conference

Saskatoon, Saskatchewan, Canada – April 7, 2017 – 1 Hour "A Practical Approach to the Comprehensive Geriatric Assessment (CGA) for the Non-Geriatrician..."

Queen's SRT 50th Anniversary Speaker Series

Kingston, Ontario, Canada – March 31, 2017 – 1 Hour "The Potential Promise, Pitfalls & Peril of Mobile Technologies in Enabling Care for Our Ageing Population..."

University of Salzburg Business School MBA Session

Toronto, Ontario, Canada – March 31, 2017 – 3 Hours "Canada's Coming of Age and ACEing Age Old Issues in the Care of Older Canadians"

University of Toronto School of Pharmacy 352 Lecture

Toronto, Canada – March 29, 2017 – 1 Hour "Geriatric Pearls for the Non-Geriatrician: Practical Tips You Can Use in Caring for your Oldest Patients"

Ontario Securities Commission

Toronto, Canada – March 27, 2017 – 30 Minutes "The Ageing Client: A Medical Perspective"

Oshawa Senior Citizen Centres' Speaker Series!

Oshawa, Canada – February 11, 2017 – 1 Hour "Myths and Realities About Ageing and How to Live to 100!"

Queensland Australia/New Zealand Society of Geriatric Medicine

Brisbane, Australia – February 21, 2017 – 45 Mins "ACEing Age Old Issues in the Care of Older Canadians"

Global Acute Care Excellence (ACE) Forum

Brisbane, Australia – February 20, 2017 – 0.5 Hour "ACEing Age Old Issues in the Care of Older Canadians"

Sinai Health System Foundation Staff Meeting

Toronto, Ontario, Canada – February 13, 2017 – 0.5 Hour "ACEing Age Old Issues in the Care of Older Canadians"

Ageing Well: A Public Education Day to Support Health Ageing

Toronto, Canada – February 11, 2017 – 45 Mins "An Overall Approach to Living Longer, Living Well"

OECD Policy Forum on the Future of Health

Paris, France – January 16, 2017 – 1 Hour "Caring for People with Complex Needs"

2016

Baycrest Geriatric Medicine Rounds

Toronto, Canada – December 1, 2016 – 0.5 Hour "Does Canada Need another National Senior's Strategy"?

NIA Re-Think Ageing Conference

Toronto, Canada – November 24, 2016 – 45 Mins "A National Seniors Strategy: What Does this Mean and How Could We Get There?"

23rd Annual Hong Kong Association of Gerontology Meeting

Hong Kong, China – November 19, 2016 – 0.5 Hour "ACEing Age Old Issues in the Care of Older Canadians"

2nd Annual Rhodes Healthcare Forum

Oxford, England– November 12, 2016 – 1 Hour "On Becoming a Geriatrician, Health Strategist and Effective Shit Disturber"

14th Annual Indian Ageing Congress

New Delhi, India– November 10, 2016 – 0.5 hour "How Screening and Prevention of Incontinence is Core to Any Strategy for Ageing Well"

14th Annual Indian Ageing Congress

New Delhi, India– November 10, 2016 – 90 minutes "A Panel Discussion on Geriatric Care Across Continents"

14th Annual Indian Ageing Congress

New Delhi, India– November 9, 2016 – 0.5 hour "ACEing Age Old Issues in Acute Care of Older Canadians"

Singapore Agency for Integrated Care (AIC) InterRai Home Care Workshop

Singapore – November 2, 2016 – 90 minutes "How Can Evidence-Informed Decision Making Impact Future Direction of Home Care"

Singapore Agency for Integrated Care (AIC) InterRai Home Care Workshop

Singapore, – November 2, 2016 – 90 minutes "Using the InterRAI System to Support the Right Care, in the Right Place at the Right Time"

Ryerson University Winston Isaac Lecture in Healthcare Services

Toronto, Canada – October 27, 2016 – 0.5 hour "On Becoming a Geriatrician, Health Strategist and Effective Advocate for Change"

Ontario Senior Liberals Commission

Niagara Falls, Canada – October 22, 2016 – 0.5 hour "The Opportunity to Benefit from Canada's Coming of Age"

Health Quality Ontario – Health Quality Transformation 2016

Toronto, Canada – October 20, 2016 – 0.5 hour "Establishing the Effectiveness of the Independence at Home Community, Paramedicine Model in Delivering Improved Patient and Systems Outcomes for Frail Older Adults"

Ontario Securities Commission Seniors Expert Advisory Committee

Toronto, Canada – October 17, 2016 – 0.5 hour "Lessons Learned on Developing Provincial and National Strategies"

Ontario Hospital Association Senior Friendly Care: Action & Beyon Conference

Toronto, Canada – October 5, 2016 – 0.5 hour "Making Senior Friendly Care A National and International Priority"

Catholic Health Association of Ontario 2016 Annual Meeting

Toronto, Canada – September 29, 2016 – 0.5 hour "ACEIng an Age Old Issue in the Care of Older Ontarians and Canadians"

St. Joseph's Senior's Health Update

Toronto, Canada – September 14, 2016 – 1 hour "Ontario and Canada's Coming of Age"

Alberta Continuing Care Association IQ Conference

Alberta, Canada – September 15, 2016 – 0.5 hour "Rethinking Traditional Models of Care for Older Adults "

Pfizer Prevnar 13 Advisory Board Meeting

Montreal, Canada – July 26, 2016 – 0.5 hour "Do We Need to Rethink How We Care for Older Canadians"

Alzheimer Society of Canada BrainXchange Webinar

Toronto, Canada – June 16, 2016 – 0.5 hour "When Dementia and Abuse Issues Collide: Untangling a Wicked Combination"

Neighbourhood Pharmacy Expo 2016

Toronto, Canada – June 15, 2016 – 0.5 hour "Age-Friendly Communities that Support Active Ageing: Pipe Dreams or Possibilities?"

IRPP-CRNCC Working Lunch

Toronto, Canada – June 14, 2016 – 1 hour "Expanding Long-Term Care in the Community: Can it be Done?"

Ryerson University 50+ Festival

Toronto, Canada – June 1, 2016 – 1 hour "Living Longer, Living Well – Rethinking the Issues of Aging"

BC Care Providers Association Annual Conference

Whistler, Canada – May 31, 2016 – 1 hour "Is There a Doctor in the Home? Dealing with HHR Issues in BC's Continuing Care Sector"

Longwoods Breakfast with the Chiefs

Toronto, Canada – May 26, 2016 – 1 hour "Toronto's Coming of Age"

Eglington St. George's United Church Embracing Aging Speakers Series

Toronto, Canada – May 15, 2016 – 1 hour "Toronto's Coming of Age"

Canadian Frailty Network National Forum

Toronto, Canada – May 13, 2016 – 1 hour "A Formula for ACEing Elder Care Across Canada and Beyond"

University of Toronto Interprofessional Seniors Outreach Program

Toronto, Canada – May 3, 2016 – 1 hour "A Career in Geriatrics"

Global Forum on Incontinence

Berlin, Germany – April 19, 2016 – 1 hour "Living Longer, Living Well: The Importance of Screening and Prevention"

University Health Network Artists' Health Centre Artists Health Conference

Toronto, Canada – April 18, 2016 – 1 hour "Keynote Address: Artistic & Medical"

Ryerson University Caring for Caregiver Symposium

Toronto, Canada – April 14, 2016 – 1 hour "Caring for Caregivers: Developing Strategies to Support Caregivers: How Ready Are We?"

InterRAI World Congress

Toronto, Canada – April 14, 2016 – 1 hour "Assessing Needs of Older Adults across the Hospital Continuum: Introducing the interRAI Suite of Hospital Assessment"

InterRAI World Congress

Toronto, Canada – April 12, 2016 – 1 hour "Plenary: interRAI's Approach to Improving Care of the Frail Elderly in Hospitals"

Bridgepoint Series on Complexity

Toronto, Canada – April 7, 2016 – 1 hour "Frailty, Vulnerability and Complexity"

Ontario Teachers' Federation 2016 Pension Forum

Toronto, Canada – April 7, 2016 – 1 hour "Canada's Coming of Age: How ready is Canada to Meet the Needs of Its Ageing Population?"

CMHA Waterloo Wellington Dufferin Passport Day

Waterloo, Canada – March 24, 2016 – 1 hour "The Intersection of Dementia and Diversity"

Alzheimer Society Saskatchewan Heads Up for Healthier Brains Forum

Saskatoon, Canada – March 15, 2016 – 1 hour "Myths and Realities about Ageing and How to Live to 100"

Ontario Securities Commission Lunch and Learn

Toronto, Canada – March 14, 2016 – 1 hour "Ontario and Canada's Coming of Age: How Ready Are We?"

McMaster University Research in Healthcare Conference

Hamilton, Canada – March 12, 2016 – 1 hour "ACEing and Age Old Issue in the Care of Older Patients"

Regional Municipality of York Connecting with Caregiver Workshop

Toronto, Canada – March 10, 2016 – 1 hour "Caring for Caregivers: Developing Strategies to Support Caregivers. How Ready Are We to Meet the Needs of our Aging Population?"

University of Western Ontario Schulich Medicine and Dentistry Journal Club Luncheon

London, Canada – March 8, 2016 – 1 hour "Rethinking Traditional Models of Acute Care for Older Adults"

University of Western Ontario Schulich Medicine and Dentistry Geriatric Medicine Rounds

London, Canada – March 8, 2016 – 1 hour "Ontario and Canada's Coming of Age"

Southwestern Ontario Regional Geriatric Program Senior Friendly

Hospital Networking Day

London, Canada – March 8, 2016 – 1 hour "How Elder Friendly Hospitals & Assess and Restore Frameworks can Support Ageing in Place"

York Region Seniors Advisory Task Force

Toronto, Canada - February 24, 2016 - 1 hour "York's Coming of Age: How Ready Are We to Meet the Needs of Our Aging Populations?"

Health Analytics – Health System Use Summit

Toronto, Canada - February 10, 2016 - 1 hour "Editorial RoundTable: Dispelling Myths/Sifting Through the Hype"

TEDx Talks Queens University

Kingston, Canada – February 7, 2016 – 1 hour "Rethinking Traditional Models of Acute Care for Older Adults"

Yvan Baker MPP/CARP Health Town Hall

Toronto, Canada – February 4, 2016 – 1 hour "Panel Discussion: Healthcare in Canada"

Home Equity Bank Corporate Conference

Toronto, Canada – February 4, 2016 – 1 hour "Building Age-Friendly Communities: Pipe Dreams or Possibilities"

Pfizer Vaccines Year Beginning Meeting

Quebec City, Canada – February 2, 2016 – 1 hour "Canada's Coming of Age"

Commonwealth Fund Meeting on High Cost/High Needs Patient

London, UK – January 22, 2016 – 1 hour "Emerging US/Canadian Models to Address High Cost/High Needs Patients"

Oxford Institute of Population Ageing

London, UK - January 19, 2016 - 1 hour "Ontario and Canada's Coming of Age"

2015

Beijing International InterRAI Workshop

Beijing, China – December 5, 2015 – 1 hour "Using the InterRAI System to Support the Right Care, in the Right Place at the Right Time..."

Community Police Consultative Conference 2015

Toronto, Ontario – November 28, 2015 – 1 hour "Ontario Seniors' Strategy"

ESC LHIN 3rd Rehabilitative Care Forum

Chatham, Ontario – November 27, 2015 – 1 hour "Envisioning an Assess and Restore Framework to Support Aging in Place"

Gardiner Roberts LLP Toolbox Seminar

Toronto, Ontario – November 25, 2015 – 1 hour "The Aging Client – A Medical Perspective"

Children's Mental Health Ontario Conference

Toronto, Ontario – November 23, 2015 – 1 hour "Lessons Learned – Optimizing the Translation of Policy to Practice: A CMHO Member Session"

Ryerson University Centre for Labour Management Relations Pensions 2023

Toronto, Ontario – November 20, 2015 – 1 hour "How Ready is Canada to Meet the Needs of Its Ageing Population"

OANHSS Capacity Planning Summit

Toronto, Ontario – November 18, 2015 – 1 hour "Healthcare Sector Perspective"

Mount Sinai Hospital Geriatrics Ageing 101 Lunch and Learn

Toronto, Ontario – November 17, 2015 – 1 hour "Living Longer, Living Well – Update on Ontario's Seniors Strategy"

Family Medicine Forum 2015

Toronto, Ontario – November 14, 2015 – 1 hour "The Modern Canadian House Call: Understanding the Evolving Role of House Calls, from Policy to Practice"

College of Licensed Practical Nurses of Alberta Think Tank

Edmonton, Alberta – November 10, 2015 – 1 hour "Hospital of Tomorrow"

Canada Future Directions in IBD Conference

Toronto, Ontario – November 7, 2015 – 1 hour "Workshop – Special Populations in IBD: IBD in the Elderly"

Tsao Foundation Professional Symposium

Singapore, Singapore – October 24, 2015 – 1 hour "Building a Better Healthcare System for an Ageing Island"

Agency for Integrated Care (AIC) Singapore Briefing

Singapore, Singapore – October 22, 2015 – 1 hour "How Can Evidence-Informed Decision Making Impact the Future Direction of Home Care?"

Agency for Integrated Care (AIC) Singapore Briefing

Singapore, Singapore – October 21, 2015 – 1 hour "Using the InterRAI Suite to Support the Right Care, in the Right Place at the Right Time..."

Singapore Care of the Elderly Foundation (CEF) Meeting

Singapore, Singapore – October 21, 2015 – 1 hour "How Can Evidence-Informed Decision Making Impact the Future Direction of Home Care?"

Tsao Foundation Professional Symposium

Singapore, Singapore – October 20, 2015 – 1 hour "Rethinking Traditional Models of Primary Care for Older Adults"

Health PEI Annual Conference

Summerside, PEI – October 16, 2015 – 1 hour "Building a Better Health Care System for an Ageing Island"

Health PEI Annual Conference

Summerside, PEI – October 16, 2015 – 1 hour "Tips to Master More Effective Communication with Patients and Caregivers"

Health Quality Ontario Health Quality Transformation Conference

Toronto, Ontario – October 14, 2015 – 1 hour "Panel: The Way Forward: Transforming Quality in Home and Community Care"

World Health Organization Global Forum on Innovation for Ageing

Populations

Kobe, Japan – October 7, 2015 – 1 hour "Panel: Technology Assessment for Impact"

National Association of Federal Retirees Board of Directors' Meeting

Ottawa, Ontario – October 3, 2015 – 1 hour "Canada's Coming of Age - A National Seniors Strategy: What Does This Mean and How Could We Get There?"

National Forum on Patient Experience

Toronto, Ontario – October 1, 2015 – 1 hour "An Ontario Geriatrician's Perspective on Continuity of Care"

Nurse Practitioners' Association of Ontario Annual Conference

Toronto, Ontario – September 25, 2015 – 1 hour "Opening Keynote Panel: Changing Healthcare Landscape in Ontario"

University of Colorado Medical Grand Rounds

Denver, Colorado, US – September 23, 2015 – 1 hour "Rethinking Traditional Models of Acute Care for Older Adults"

Ontario Retirement Communities Association Summer Conference

Niagara-on-the-Lake, Ontario – September 18, 2015 – 1 hour "Round Table: What Could An Ontario Model Look Like"

West Health ED to Home Advisory Council Meeting

Washington, DC, US – August 26, 2015 – 1 hour "Elder-Friendly ED to Home Initiatives: From Evidence to Outcomes"

Canadian Medical Association Annual Meeting

Halifax, Nova Scotia – August 23, 2015 – 1 hour "Workshop: Physician's Role in a National Seniors Strategy"

Region of Peel – Seniors Connection Conference

Brampton, Ontario – August 21, 2015 – 1 hour "Peel's Coming of Age - How Ready Are We to Meet the Needs of Our Aging Population"

Roche Speakers Series

Toronto, Ontario – August 14, 2015 – 1 hour "Canada's Coming of Age – How Ready Are We to Meet the Needs of Our Aging Population"

Health Quality Ontario New Zealand International Learning Experience Masterclass

Toronto, Ontario – June 23, 2015 – 1 hour "Ontario's Seniors Strategy: Implications and Opportunities"

City of Toronto Seniors Wellness Symposium

Toronto, Ontario – June 16, 2015 – 1 hour "Delivering Person Centred Care for Older Adults"

Canadian Working Group on HIV and Rehabilitation Annual Forum

Toronto, Ontario – June 15, 2015 – 1 hour "Episodic Caregiving Panel – Policy and Practice Perspective"

National Dementia Care Conference

Toronto, Ontario – June 12, 2015 – 1 hour "Dementia Care: Moving from Strategy to Implementation"

OHCA-CHCA Home Care Evidence Forum

Toronto, Ontario – June 11, 2015 – 1 hour "How Can Evidence-Informed Decision Making Impact the Future Direction of Home Care?"

WoodGreen Community Services Ontario Seniors Month Workshop

Toronto, Ontario – June 8, 2015 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Canadian Psychological Association 2015 Convention

Ottawa, Ontario – June 6, 2015 – 1 hour "Canada's Coming of Age: How Should We Meet the Needs of Our Ageing Population"

TVN National Forum 2015

Toronto, Ontario – June 5, 2015 – 1 hour "Rethinking Traditional Models of Acute Care for Older Adults"

The Commonwealth Fund/ Ontario MOHLTC Meeting

Washington, DC, USA – June 3, 2015 – 1 hour "Lessons Learned from the ACE Strategy to Inform Health System Transformation"

Canadian Institute of Underwriters Annual General Meeting

Toronto, Ontario – June 1, 2015 – 1 hour "Canada's Coming of Age: How Ready Are We to Meet the Needs of Our Aging Population?"

OsteoCircuit Exercise Prescription, Physical Activity and Aging Conference

Toronto, Ontario – May 30, 2015 – 1 hour "Age-Friendly Communities: Pipe Dreams or Possibilities?"

Ontario Association of Community Care Access Centres Achieving Excellence Together 2015 Conference

Toronto, Ontario – May 28, 2015 – 1 hour "Panel: Caregiver Engagement"

British Columbia Care Providers Association Conference

Whistler, British Columbia – May 25, 2015 – 1 hour "Plenary: Innovation Paradigm: Delivering Excellence and Sustainability in Continuing Care"

Sigma Theta Tau International Honor Society of Nursing Lambda Pi Chapter Celebration

Toronto, Ontario – May 14, 2015 – 1 hour "Considerations for New Nurses"

Ryerson City Building Institute Bridging Divides

Toronto, Ontario – May 13, 2015 – 1 hour "Access to Services"

Health Care Innovation Working Group Dementia and Caregiving Webinar

Toronto, Ontario – May 12, 2015 – 1 hour "Why Access to a Diagnosis and the Right Care is Paramount with Dementia"

Niagara Health System Medicine Grand Rounds

St. Catherine, Ontario – May 7, 2015 – 1 hour "Rethinking Traditional Models of Acute Care for Older Adults"

Commonwealth Fund Harkness Canadian Health Policy Briefing Tour

Toronto, Ontario – May 5, 2015 – 1 hour "Mount Sinai's ACE Strategy: A Local Solution to Better Support Older, Frail and Complex Patients"

SHS/UHN Medical Grand Rounds

Toronto, Ontario – April 29, 2015 – 1 hour "Addressing Our Coming of Age"

Society of General Internal Medicine Special Symposium

Toronto, Ontario – April 24, 2015 – 1 hour "Understanding Our Different Roles and Communicating across the Continuum"

Society of General Internal Medicine Special Symposium

Toronto, Ontario – April 24, 2015 – 1 hour "Understanding Our Different Roles and Communicating across the Continuum"

Canton de Vaud Continuity of Care Symposium

Lausanne, Switzerland – April 20, 2015 – 1 hour

"Ontario's Seniors Strategy: Implications and Opportunities"

Action Canada 10th Anniversary Symposium

Ottawa, Ontario – April 17, 2015 – 1 hour "Dialogue – Our Flag: 50 Years!"

Canadian Medical Association Taming of the Queue Conference

Ottawa, Ontario – April 17, 2015 – 1 hour "Coffee Table Panel: Achieving Timely, Appropriate Care for the Elderly: How Do We Make It Happen?"

University of Texas Health Science Centre Grand Rounds

Houston, Texas, USA – April 15, 2015 – 1 hour "Rethinking Traditional Models of Acute Care for Older Adults"

Ontario Medical Student Association Leadership Summit

Toronto, Ontario – April 11, 2015 – 1 hour "Fireside Chat – Career Path for a Geriatrician"

Pickering College Leader-in-Residence

Toronto, Ontario – April 9, 2015 – 6 hours "Overview on Ageing and a Career as a Geriatrician"

Ontario and Canada Research Chairs Symposium

Toronto, Ontario – April 2, 2015 – 1 hour "Arm-Chair Discussions on Aging"

OLTCA Together We Care Annual Convention

Toronto, Ontario – March 30, 2015 – 1 hour "TD Leadership Panel: Wants, Needs, Demands: Seniors of 2035"

Canadian Alternate Level of Care Conference West

Vancouver, British Columbia – March 27, 2015 – 1 hour "Advancing the Care Older Canadians to Better Prevent and Manage ALC Issues"

2015 Mid-West HealthLinks Health Fair

Toronto, Ontario – March 25, 2015 – 1 hour "3 Things You Can Do to Stay Healthy and Independent"

Canadian Hip Fracture Management Conference

Toronto, Ontario – March 24, 2015 – 1 hour "Developing and Sustaining an Effective Orthogeriatrics Service"

Mount Sinai and University Health Network Hospitals Healthy

Ageing 101 Lunch and Learn Series Toronto, Ontario – March 17, 2015 – 1 hour "The Future of Health Ageing: Myths and Realities about Ageing and How to Live to 100"

Students Against Alzhemier's University of Toronto Rising Tide Conference on Alzheimer's Disease

Toronto, Ontario – March 16, 2015 – 1 hour "Building a Dementia Strategy for Ontario"

University of Toronto Scarborough Aging Film Night

Toronto, Ontario – March 12, 2015 – 1 hour "Panel Discussion on Film 'You're Looking at Me Like I Live Here and I Don't'"

Icelandic Ministry of Health Meeting

Reykjavik, Iceland – March 6, 2015 – 1 hour "Ontario's Seniors Strategy: Implications and Opportunities"

Icelandic Geriatrics Society Meeting

Reykjavik, Iceland – March 5, 2015 – 1 hour "Rethinking Traditional Models of Acute Care for Older Adults"

Icelandic Geriatrics Society Meeting

Reykjavik, Iceland – March 5, 2015 – 1 hour "The Elder-Friendly Emergency Department: From Evidence to Outcomes "

MSH/Ryerson Life Institute Healthy Ageing Education Series

Toronto, Ontario – February 28, 2015 – 1 hour "Toronto's Coming of Age: How Ready is Our City to Meet the Needs of Ageing Torontonians"

Canadian Institutes of Health Research Policy Rounds

Toronto, Ontario – February 26, 2015 – 1 hour "Caring for Unpaid Caregivers: Developing an Ontario Caregivers Strategy"

Longwoods Ways and Means: Health Links Conference

Toronto, Ontario – February 26, 2015 – 1 hour "Health Links as Enablers in the Care of Older Ontarians"

North Shore Tribal Council First Nation Community Support Services

Sudbury, Ontario – January 30, 2015 – 1 hour "Ontario's Seniors Strategy: An Update with a Focus on Progress for Aboriginal Seniors"

York University Later Life Learning Group Dimensions of Aging Course

Toronto, Ontario – January 16, 2015 – 1 hour "Canada's Coming of Age: How Ready Are We to Meet the Needs of Our Aging Population?"

2014

Ontario College of Family Physicians Annual Scientific Assembly

Toronto, Ontario – November 29, 2014 – 1 hour "Ontario's Seniors Strategy: Implications and Opportunities for Primary Care Providers"

The Commonwealth Fund International Symposium on Health Care Policy

Washington, USA – November 20, 2014 – 1 hour "Caring for High Need/High Cost Patients - Mount Sinai's ACE Strategy: A Local Solution to Better Support Older, Frail and Complex Patients"

Toronto East General Hospital Quality Rounds

Toronto, Ontario – November 19, 2014 – 1 hour "Rethinking Traditional Models of Acute Care for Older Adults with a Health Equity Lens."

Family Medicine Forum

Quebec City, Quebec – November 15, 2014 – 1 hour "Optimizing Community Care and Integration for Patients With the Highest Needs."

MSH/UHN Geriatrics Update

Toronto, Ontario – November 1, 2014 – 1 hour "Complex Case Conference with a Geriatrician"

MSH/UHN Geriatrics Update

Toronto, Ontario – October 31, 2014 – 1 hour "How to Break the Diagnosis of Dementia and Develop a Practical Plan of Care"

MSH/UHN Geriatrics Update

Toronto, Ontario – October 31, 2014 – 1 hour "The Ins and Outs of Advanced Care Planning"

Brockville Professionals Symposium

Brockville, Ontario – October 30, 2014 – 1 hour "Age Friendly Communities that Support Active Ageing: Pipe Dreams or Possibilities?"

Registered Nurse Association of Ontario International Affairs and Best Practice Guidelines

Toronto, Ontario – October 27, 2014 – 1 hour "In the Know with RNAO Webinar: Preventing and Addressing Abuse and Neglect of Older Adults"

Centre for Studies in Aging and Health Geriatrics 20/20

Conference

Kingston, Ontario – October 24, 2014 – 1 hour "Why We Need to Rethink Our Traditional Approaches to Caring for Older Adults"

PEI Annual Making the Connection Conference

Summerside, PEI – October 16, 2014 – 1 hour "Rethinking Care for Older Adults Across the Continuum"

PEI Annual Making the Connection Conference

Summerside, PEI – October 16, 2014 – 1 hour "Myths and Realities About Ageing and How to Live to 100"

Best Brain Exchange Halifax

Halifax, Nova Scotia – October 14, 2014 – 1 hour "Building a Dementia Strategy for Nova Scotia"

Queen's University Dr. Duncan G. Sinclair Lectureship in Health Services and Policy Research

Kingston, Ontario – October 8, 2014 – 1 hour "Canada's Coming of Age: How Ready Are We to Meet the Needs of Our Aging Population?"

Perley Rideau Board of Directors Workshop

Ottawa, Ontario – October 4, 2014 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go...."

RPNAO Annual Conference

Toronto, Ontario – September 26, 2014 – 1 hour "Ontario's Seniors Strategy: Where We Stand, Where We Need to Go and How RPNs Can Get Us There?"

Child and Parent Resource Institute InterRAI Workshop

London, Ontario – September 26, 2014 – 1 hour "Using the InterRAI Suite to Support the Right Care, in the Right Place at the Right Time...."

Simcoe Muskoka Integrated Fall Strategy Conference

Orillia, Ontario – September 23, 2014 – 1 hour "What's Up with Falls?"

RTO/ERO Foundation Board Meeting

Toronto, Ontario – September 22, 2014 – 1 hour "Leading Geriatrics: How Mount Sinai is Transforming Hospital Care for Older Adults"

Ontario Society of Occupational Therapists Annual Conference

Toronto, Ontario – September 20, 2014 – 1 hour "What Roles Should OTs Play in Advancing the Care of Older Ontarians"

UHN International Denmark Delegation Visit

Toronto, Ontario – September 19, 2014 – 1 hour "MSH/UHN Geriatrics Overview"

The Common Wealth Fund International Experts Working Group Meeting on High Need/High Cost Patients

London, UK – September 12, 2014 – 1 hour

"International Models That Seem to Work: Common Attributes and Challenges"

Johns Hopkins Hospital Annual Mosaic Lecture in Geriatric Medicine and Gerontology

Baltimore, USA– July 31, 2014 – 1 hour "The Intersection of Ageing and Diversity: Perspectives on Practicing Geriatrics in the World's Most Diverse City"

International Design & Health Academy pre-conference

symposium

Toronto, Ontario– July 9, 2014 – 1 hour "Provincial Policy Nexus: Who decides?"

Mount Sinai and University Health Network Hospitals Geriatrics Institute

Toronto, Ontario– June 26, 2014 – 1 hour "Putting the Ontario Senior's Strategy into Practice Here and Beyond...."

Circle of Care

Toronto, Ontario– June 23, 2014 – 1 hour "Caring for Unpaid Caregivers - Developing an Ontario Caregiviers' Strategy"

Community Care Durham Annual General Meeting

Oshawa, Ontario– June 20, 2014 – 1 hour "Living Longer, Living Well...."

TEDx Stouffville

Stouffville, Ontario– June 20, 2014 – 1 hour "Building Age-Friendly Communities: Pipe Dreams or Possibilities"

Ontario Hospital Association Senior Friendly Hospital Care Conference

Toronto, Ontario– June 12, 2014 – 1 hour "Ontario's Seniors' Strategy: A Year Later"

Ontario Hospital Association Senior Friendly Hospital Care Conference

Toronto, Ontario– June 12, 2014 – 1 hour "Panel Discussion on Assess and Restore Programs"

Toronto Central CCAC World Elder Abuse Awareness Day

Toronto, Ontario– June 12, 2014 – 1 hour "The Ontario Seniors Strategy and its call to Address Ageism and Elder Abuse"

McMaster University Care of the Elderly Conference

Hamilton, Ontario– June 11, 2014 – 1 hour "Living Longer, Living Well: Putting the Ontario Senior's Strategy into Practice"

University of Toronto Faculty of Medicine Open House

Toronto, Ontario– June 7, 2014 – 1 hour "Guide to a Career in Healthcare"

TC LHIN & CCAC HPAC

Toronto, Ontario– May 30, 2014 – 1 hour "Role of healthcare policy and funding in the implementation and expansion of task-oriented exercise programs"

Harkness Canadian Health Policy Briefing Tour

Toronto, Ontario– May 14, 2014 – 1 hour "National and Ontario Perspectives on Home and Community Care"

Canadian Association for Health Services and Policy Research Annual Conference

Toronto, Ontario– May 13, 2014 – 1 hour "Our Coming of Age: National and Ontario Perspectives"

Mount Sinai Hospital Health Equity Symposium

Toronto, Ontario– May 13, 2014 – 1 hour "Addressing Health Disparities for Older Ontarians"

Toronto Central CCAC Care Coordinators Advanced Care Planning

Day

Toronto, Ontario– May 9, 2014 – 1 hour "Why Advance Care Planning Should Be at the Heart of What We Do"

Region of Peel Council Meeting

Brampton, Ontario– May 8, 2014 – 1 hour "Age-Friendly Communities: Pipe Dreams or Possibilities?"

Ontario Base Hospital Group Meeting Community Paramedicine Panel

Toronto, Ontario– May 8, 2014 – 1 hour "Ontario Senior's Strategy and Community Paramedicine"

Grand River Hospital The Changing Face of Elder Care

Kitchener, Ontario– May 7, 2014 – 1 hour "Putting the Ontario Senior's Strategy Into Practice"

The Council on Aging of Ottawa Annual Spring Luncheon

Ottawa, Ontario– April 30, 2014 – 1 hour "Age-Friendly Communities: Pipe Dreams or Possibilities?"

Hospice Palliative Care Ontario Annual Conference

Toronto, Ontario– April 27, 2014 – 1 hour "Ontario's Seniors Strategy and its Call to Enhance Palliative Care"

University of Toronto Academy for Lifelong Learning Spring Talks Series

Toronto, Ontario– April 23, 2014 – 1 hour "Ontario's Seniors Strategy: Where We Stand and Where We Need to Go."

University of Saskatchewan Optimizing Health for Older Adults Conference

Saskatoon, Saskatchewan– April 11, 2014 – 1 hour "Could the Elderly Bankrupt Canada - Why We Need to Rethink Our Traditional Approaches to Caring for Older Adults"

Canadian Medical Association Committees Meeting

Ottawa, Ontario– April 7, 2014 – 1 hour "Providing Better Care for Older Canadians"

McMaster University Thinking Ahead Health Forum

Hamilton, Ontario– April 3, 2014 – 1 hour "Effective Care: Tips on Communicating with Patients to Enhance Care"

McMaster University Thinking Ahead Health Forum

Hamilton, Ontario– April 2, 2014 – 1 hour "Panel Discussion - Will Extended and Second Careers Become the Norm?"

United Way Ottawa Affordable Supportive Housing for Seniors Forum

Ottawa, Ontario- March 28, 2014 - 1 hour

"Age-Friendly Communities: Pipe Dreams or Possibilities"

Parks and Recreation Ontario Conference

Niagara Falls, Ontario– March 25, 2014 – 1 hour "Age-Friendly Communities: Pipe Dreams or Possibilities"

Waterloo Wellington LHIN Passport Day

Waterloo, Ontario– March 19, 2014 – 1 hour "The Role of interRAI assessments as an enabler of the Seniors Strategy and facilitator of integrated care"

Massey College Grand Rounds

Toronto, Ontario– March 18, 2014 – 1 hour "Address Health Disparities for Older Ontarians"

Local Aboriginal Health Committee

Sudbury, Ontario– March 11, 2014 – 1 hour "Living Longer, Living Well, Ontario's Seniors Strategy Report - An Update."

University Women's Club of North York General Meeting

Toronto, Ontario – February 24, 2014 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Mount Sinai Hospital Foundation Healthy Aging Series

Toronto, Ontario – February 20, 2014 – 1 hour "Myths and Realities of Ageing – And How to Live to 100"

CAHSPR, CFHI and CHLNET Healthcare Leadership Forum

Montreal, Quebec – February 14, 2014 – 1 hour "Clinical Leadership – The Challenge and Promise of the Next Generation"

Toronto Central LHIN Board of Directors Meeting

Toronto, Ontario – February 5, 2014 – 1 hour "What Does Health Equity Mean for Ontario's Seniors?"

Toronto Rehabilitation Institute Annual Professional Development Day for the Physiotherapists

Toronto, Ontario – February 4, 2014 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Ontario Hospital Association Diversity, Equity and Action Conference

Toronto, Ontario – January 28, 2014 – 1 hour "What Does Health Equity Mean for Ontario's Seniors?"

University of Toronto Conference on Aging Populations

Toronto, Ontario – January 18, 2014 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

HCLink Webinar Series – Why Diverse Leadership Matters in the Health Care Sector

Toronto, Ontario – January 14, 2014 – 1 hour "Diverse Leadership Survey Findings"

2013

WHO Global Forum on Innovation for Ageing Populations

Kobe, Japan – December 11, 2013 – 1 hour "Ageing: Policies and System Needs"

WHO Global Forum on Innovation for Ageing Populations

Kobe, Japan – December 10, 2013 – 1 hour "Canadian Health Care Policy and Home Care Medicine"

Ontario SIM-One Ontario Simulation Exposition

Toronto, Ontario – December 5, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

McGill Division of Geriatric Medicine Grand Rounds

Montreal, Quebec – December 3, 2013 – 1 hour "Rethinking Traditional Models of Acute Care for Older Adults: An Evidence-Based Approach that Could Save our Health Care System"

McGill University Health Centre Medical Grand Rounds

Montreal, Quebec – December 3, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go. And How This is Influencing a National Dialogue on Ageing"

Mississauga-Halton LHIN Board of Directors Retreat

Mississauga, Ontario – November 29, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go…"

Rural Ontario Institute

Sudbury, Ontario – November 28, 2013 – 1 hour "Highlights of Ontario's Seniors Strategy Living Longer, Living Well: Implications for Northern Ontario"

Midwest Toronto Health Link Health Fair

Toronto, Ontario – November 27, 2013 – 1.5 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Toronto Board of Trade Ontario's Seniors Strategy Event

Toronto, Ontario – November 26, 2013 – 15 minutes "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

OCSA Board of Directors Meeting

Toronto, Ontario – November 22, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go…"

CIHR Best Brains Exchange

Saint John, New Brunswick – November 16, 2013 – 1 hour "Evidence-based Approaches to Home and Community-Based Care: Addressing Impacts on Patient Health Outcomes and Caregivers"

Michener Institute Clinical Educator's Day

Toronto, Ontario – November 13, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go…"

Covenant Health Network of Excellence in Seniors' Health and Wellness Symposium

Edmonton, Alberta – November 5, 2013 – 1 hour "Integrating Care Meaningfully across the Continuum"

Covenant Health Network of Excellence in Seniors' Health and

Wellness Symposium

Edmonton, Alberta – November 5, 2013 – 1 hour "Can We Reduce Our Unhealthy Reliance on Institutional Care?"

Ontario Long Term Care Physicians and the Canadian Medical Directors Annual Joint Meeting

Toronto, Ontario – October 25, 2013 – 1 hour "Ontario's Senior Strategy and its Impact on the Medical Director"

CW LHIN Governance to Governance and Senior Leadership Forum

Caledon, Ontario – October 24, 2013 – 1 hour

"Seniors' Strategy in the Central West LHIN"

Nepean Rideau Osgood Community Resource Centre Seniors Awareness Event

Ottawa, Ontario – October 24, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Association of Family Health Teams of Ontario 2013 Leadership Conference

Toronto, Ontario – October 23, 2013 – 1 hour "Ontario's Seniors Strategy: Implications and Opportunities for Primary Care Providers"

Older Adult Centres' Association of Ontario Annual Conference

Mississauga, Ontario – October 22, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Personal Support Network of Ontario Annual PSW Conference

Markham, Ontario – October 22, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

McMaster University Geriatric Medicine Grand Rounds

Hamilton, Ontario – October 21, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Ontario 211 Inform Canada Conference

Niagara Falls, Ontario – October 21, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Health PEI Annual Making the Connection Conference

Summerside, Prince Edward Island – October 18, 2013 – 1 hour "Geriatric Pearls for the Non-Geriatrician: Practical Tips You Can Use in Caring for your Oldest Patients"

Nipissing EMS Symposium

North Bay, Ontario – October 17, 2013 – 1 hour "Ontario's Seniors Strategy and the Future Role of Paramedicine"

ONPEA East Regional Conference

Cornwall, Ontario – October 10, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

interRAI 2013 Canadian Conference

Ottawa, Ontario – October 10, 2013 – 1 hour "Envisioning the interRAI Suite as a Key Enabler for Ontario's Seniors Strategy"

interRAI 2013 Canadian Conference

Ottawa, Ontario – October 10, 2013 – 1 hour "How Data and interRAI can Impact Quality Improvement and Care"

GTA Rehab Care Alliance Frail Senior/Medically Complex Task

Group Toronto, Ontario – October 8, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Canadian Society of Internal Medicine Conference

Toronto, Ontario – October 3, 2013 – 1 hour "A Practical Approach for the General Internist"

CELHIN CSS CAP Forum

Oshawa, Ontario – October 2, 2013 – 1 hour "The Role of the interRAI Suite in Achieving the CSS Vision for Client Centered Care"

WoodGreen Community Services Senior Advisory Council Community Workshop

Toronto, Ontario – October 1, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

University of Toronto Academic Retiree Centre New Retiree

Reception

Toronto, Ontario – October 1, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Rexdale CHC Annual General Meeting

Etobicoke, Ontario – September 21, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

DeGroote Interprofessional Health Leadership Conference

Hamilton, Ontario – September 21, 2013 – 1 hour "Why New Thinking is Needed Around the Care of Older Adults"

Health Sciences North Seniors Summit

North Bay, Ontario – September 19, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

North East Geriatric Care Conference

North Bay, Ontario – September 19, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

UHN Geriatrics South East Delegation Visit

Toronto, Ontario – September 18, 2013 – 1 hour "MSH/UHN Geriatrics Overview"

Ryerson University Life Institute Fall Welcome Day

Toronto, Ontario – September 18, 2013 – 1 hour "Myths and Realities About Ageing and How to Live to 100"

Emerging Leader Forum

Toronto, Ontario – September 17, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Ontario Hospital Association Southwestern Ontario Conference

Stratford, Ontario – September 5, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Grand River CHC and Alzheimer Society of Brant Annual General Meeting

Brantford, Ontario – September 3, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

CIHI Policy Rounds

Toronto, Ontario – September 3, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

UHN/MSH Medical Grand Rounds

Toronto, Ontario – August 28, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Region of Peel Aging Population Steering Committee Meeting

Brampton, Ontario – August 22, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go…"

Canadian Association of Physicians of Indian Heritage Annual General Meeting

Winnipeg, Manitoba - August 3, 2013 - 1 hour

"Ageing in Place. What Does It Matter & Where Do We Need to Go?"

Mount Sinai Hospital – MBA Summer Students Session

Toronto, Ontario, Canada – July 24, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Mid Toronto West Health Link Senior's Advisory Group

Toronto, Ontario, Canada – July 17, 2013 – 30 Minute "Outreach to Seniors in the Mid Toronto West Health Link"

Peterborough Seniors Planning Table Seniors Summit

Peterborough, Ontario, Canada – June 27, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand, Where We Need to Go"

MSH Geriatrics Institute

Toronto, Ontario, Canada – June 27, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand, Where We Need to Go"

IAGG World Congress of Gerontology and Geriatrics

Seoul, Korea – June 24, 2013 – 1 hour "Back to the Future: Innovations in Home-Based Primary Care for Frail Elders"

OACCAC Knowledge and Inspiration 2013 Conference

Toronto, Ontario, Canada – June 20, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand, Where We Need to Go"

Toronto Central CCAC CIP Symposium

Toronto, Ontario, Canada – June 18, 2013 – 1 hour "ACEing Elder Care: Practical Tips for CIP Program CCAC Care Coordinators"

Alzheimer Society of Ottawa and Renfrew County AGM

Ottawa, Ontario, Canada – June 13, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand, Where We Need to Go"

Champlain CCAC AGM

Ottawa, Ontario, Canada – June 13, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand, Where We Need to Go"

Champlain LHIN Board Meeting

Ottawa, Ontario, Canada – June 13, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand, Where We Need to Go"

2013 Cerner Canada RUG Conference

Toronto, Ontario, Canada – June 11, 2013 – 1 hour "ACEing Elder Care with Innovative IT Tools"

Toronto Council on Aging Seniors Forum

Toronto, Ontario, Canada – June 10, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand, Where We Need to Go"

Stantec Architecture

Toronto, Ontario, Canada – June 7, 2013 – 45 Min "Elder Friendly Design"

Mississauga-Halton LHIN Governance to Governance Session

Oakville, Ontario, Canada – June 6, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand, Where We Need to Go"

AOHC Primary Health Care Conference 2013

Toronto, Ontario, Canada – June 6, 2013 – 1 hour "Pitch it to the Panel Discussion"

AOHC Primary Health Care Conference 2013

Toronto, Ontario, Canada – June 6, 2013 – 1 hour

"Exploring a Provincial Strategy for Aboriginal Seniors"

Guelph Wellington Seniors Association MY Healthcare Forum

Guelph, Ontario, Canada – June 4, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand, Where We Need to Go"

Ryerson University The Chang School 50+ Festival

Toronto, Ontario, Canada – May 31, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand, Where We Need to Go"

University of Toronto Stress-Free Degree Lecture Series

Toronto, Ontario, Canada – May 31, 2013 – 1 hour "Ontario's Seniors Strategy: Where We Stand, Where We Need to Go"

MEDEC 2013: MedTech Conference

Toronto, Ontario, Canada – May 30, 2013 – 1 hour "Shifting from Acute to Community Care"

OHA ER/ALC: Enhancing Quality Care Across the Health Continuum

Toronto, Ontario, Canada – May 28, 2013 – 1 hour "Ontario's Seniors Strategy"

Annual NICE Knowledge Exchange 2013

Toronto, Ontario, Canada – May 23, 2013 – 1 hour "Environments & Aging: Sharing Knowledge – Informing Practice"

Ministry of Health & Long Term Care Health Links Conference

Toronto, Ontario, Canada – May 15, 2013 – 30 Min "Levers of Change: What Services Do the 1-5% Need?"

McMaster Innovation Showcase

Hamilton, Ontario, Canada – May 10, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go…"

GNAO, PNEIG & RNAO Nursing Week Wine and Cheese

Thunder Bay, Ontario, Canada – May 9, 2013 – 1 Hour "Implementing the Ontario Seniors Strategy – A role for Nurses and Other Providers"

Northern Ontario School of Medicine Symposium

Thunder Bay, Ontario, Canada – May 9, 2013 – 1 Hour "With Respect to Old Age: Can We Do Better?"

ONPEA Thunder Bay Regional Conference

Thunder Bay, Ontario, Canada – May 9, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

CIHR Public Health Policy Summer Institute

Toronto, Ontario, Canada – May 8, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Ryerson University PhD Conference

Toronto, Ontario, Canada – May 8, 2013 – 1 Hour "New Thinking About Older Adults: Key Issues Facing Ontario's Seniors"

American Academy of Home Care Physicians Annual Conference

Dallas, Texas, US – May 2, 2013 – 20 Min "Canadian Health Care Policy and Home Care Medicine"

Annual Ontario Gerontology Association Conference

Toronto, Ontario, Canada – May 1, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

27th Annual Geriatric Medicine Refresher Day Workshop

London, Ontario, Canada – May 1, 2013 – 1 Hour

"Key Components and Strategies to Operationalize an Elder Friendly Hospital"

27th Annual Geriatric Medicine Refresher Day

London, Ontario, Canada – May 1, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Ontario Association of Non-Profit Homes and Services for Seniors

Toronto, Ontario, Canada – April 30, 2013 – 30 Min "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Retired Teachers of Ontario District Workshop

Toronto, Ontario, Canada – April 29, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Canadian Geriatrics Society Annual Conference

Toronto, Ontario, Canada – April 20, 2013 – 1 Hour "The Biology of Ageing: Geriatric Pearls and Practical Tips for the Medical Student that will Help You Care for Your Older Patients"

Canadian Geriatrics Society Annual Conference

Toronto, Ontario, Canada – April 19, 2013 – 1 Hour "Providing Better Care for Older Canadians"

Extendicare Assist Fundraising Gala

Toronto, Ontario, Canada – April 18, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

OHA North West Annual Conference

Thunder Bay, Ontario, Canada – April 18, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Community Development and Recreation Committee

Toronto, Ontario, Canada – April 17, 2013 – 1 Hour "The Toronto Seniors Strategy"

CBA Elder Law Conference

Toronto, Ontario, Canada – April 16, 2013 – 1 Hour "Health Care Consent and Advance Care Planning: A Geriatrician's Perspective"

Municipal Retirees Organization Ontario Membership Meeting

Toronto, Ontario, Canada – April 16, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go…"

University of Salzburg Business School MBA Session

Toronto, Ontario, Canada – April 16, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

University of Toronto Senior Alumni Canadian Perspective Lecture

Toronto, Ontario, Canada – April 15, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

OHA North East Annual Conference

North Bay, Ontario, Canada – April 11, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Rapid Response Nurse Learning Institute

Toronto, Ontario, Canada – April 10, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Transitions in Health Care Forum

Toronto, Ontario, Canada – April 9, 2013 – 1 Hour "What Does ACEing Elder Care in Hospitals Look Like?"

OHA Senior Friendly Hospital Care Conference

Toronto, Ontario, Canada – April 9, 2013 – 1 Hour "Early Mobilization and Falls Prevention: Reducing Tension Between Two Concepts Seemingly at Odds"

OLTCA Convention

Toronto, Ontario, Canada – April 9, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

OHA Senior Friendly Hospital Care Conference

Toronto, Ontario, Canada – April 8, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Southlake Regional Health Centre Geriatric Clinic Day

Newmarket, Ontario, Canada – April 6, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

University of Toronto Faculty of Medicine Rehabilitation Rounds

Toronto, Ontario, Canada – April 4, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Toronto Central CCAC Board Meeting

Toronto, Ontario, Canada – March 27, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

CMA Taming of the Queue Conference

Ottawa, Ontario, Canada – March 21, 2013 – 1 Hour "Ontario's Seniors Strategy: Where We Stand. Where We Need to Go..."

Mount Sinai Hospital Geriatrics Ageing 101 Lunch & Learn

Toronto, Ontario, Canada – March 19, 2013 – 1 Hour "Myths and Realities of Ageing – And How to Live to 100"

Ontario Primary Care Council Meeting

Toronto, Ontario, Canada – February 27, 2013 – 0.5 Hour "Living Longer, Living Well: Introducing Ontario's Seniors Strategy"

The Institute for Life Course and Aging

Toronto, Ontario, Canada – February 14, 2013 – 1 Hour "Living Longer, Living Well: Introducing Ontario's Seniors Strategy"

Ontario Long Term Care Association Applied Research Education Day

Toronto, Ontario, Canada – February 14, 2013 – 1 Hour "Living Longer, Living Well: Introducing Ontario's Seniors Strategy"

Registered Nurses' Association of Ontario Nursing Executive

Leadership Academy

Niagara-on-the Lake, Ontario, Canada – February 4, 2013 – 0.5 Hour "Living Longer, Living Well: Introducing Ontario's Seniors Strategy"

Change Foundation Board of Directors Meeting

Toronto, Ontario, Canada – January 28, 2013 – 0.5 Hour "Living Longer, Living Well: Introducing Ontario's Seniors Strategy"

City of Toronto – LHIN Leadership Table

Toronto, Ontario, Canada – January 24, 2013 – 0.5 Hour "Living Longer, Living Well: Introducing Ontario's Seniors Strategy"

Joint Provincial Nursing Committee Meeting

Toronto, Ontario, Canada – January 14, 2013 – 0.5 Hour "With Respect to Old Age: Can We Do Better?"

Mount Sinai Hospital Management Network Meeting

Toronto, Ontario, Canada – January 10, 2013 – 0.5 Hour "Living Longer, Living Well: Introducing Ontario's Seniors Strategy"

2012

Health System Performance Research Network Conference

Toronto, Ontario, Canada – December 10, 2012 – 0.5 Hour "Ontario's Seniors Strategy: The Missing Ingredient to Achieving Integrated Care for Older Persons?"

Mount Sinai Hospital Urgent & Critical Care COE Committee

Toronto, Ontario, Canada – December 05, 2012 – 0.5 Hour "Geriatrics Business Unit Performance Update"

MOHLTC ER/ALC Expert Panel Meeting

Toronto, Ontario, Canada – December 05, 2012 – 0.5 Hour "Update on Seniors Strategy"

Mount Sinai Hospital Foundation Board of Directors Meeting

Toronto, Ontario, Canada – November 29, 2012 – 0.5 Hour "Living Longer, Living Well: Developing a Seniors Strategy for Ontario"

Baycrest Centre for Geriatrics Medical Grand Rounds

Toronto, Ontario, Canada – November 15, 2012 – 1 Hour "From Elder Friendly Hospitals to Elder Friendly Communities"

Ontario Long Term Care Association Fall Symposium

Toronto, Ontario, Canada – November 13, 2012 – 1 Hour "With Respect to Old Age: Developing Seniors Strategy for Ontario and its Long-Term Care Sector"

CareWatch Annual General Meeting

Toronto, Ontario, Canada – November 09, 2012 – 1 Hour "With Respect to Old Age: Can We Do Better?"

Markham Stouffville Hospital Medical Grand Rounds

Toronto, Ontario, Canada – November 07, 2012 – 1 Hour "Why New Thinking is Needed in the Way We Care for the Elderly"

Health Achieve 2012

Toronto, Ontario, Canada – November 06, 2012 – 1 Hour "With Respect to Old Age: Developing a Seniors Strategy for Ontario and its Relevance to ED/ALC Issues"

HealthAchieve 2012

Toronto, Ontario, Canada – November 05, 2012 – 0.5 Hour "Integrated Home-based Primary Care"

Association of Municipalities of Ontario Fall Symposium

Collingwood, Ontario, Canada – October 25, 2012 – 1 Hour "With Respect to Old Age: Can We Do Better?"

Alzheimer Society of Ontario Fall Leadership Forum

Toronto, Ontario, Canada – October 20, 2012 – 1 Hour "With Respect to Old Age: Can We Do Better?

Inspire Burlington Speakers Series

Burlington, Ontario, Canada – October 17, 2012 – 1 Hour "With Respect to Old Age: Can We Do Better?"

Ontario Community Supports Association Annual Meeting

Toronto, Ontario, Canada – October 17, 2012 – 1 Hour "With Respect to Old Age: Can We Do Better?"

Health Prince Edward Island's Annual Conference

Summerside, Princess Edward Island, Canada – October 10, 2012 – 1 Hour "Care of the Elderly: Can We Do Better?"

Toronto Measuring Health Equity Symposium

Toronto, Ontario, Canada – October 4, 2012 – 1 Hour "What Does Health Equity Mean for Ontario's Seniors?"

Ontario Liberal Party Annual Conference

Ottawa, Ontario, Canada – September 29, 2012 – 1 Hour "The Right Care, When You Need It, Where You Want It: Strengthening Community Health Care"

Ontario Association of Paramedic Chiefs Annual Conference

Ottawa, Ontario, Canada – September 26, 2012 – 1 Hour "With Respect to Old Age: Developing Ontario's Seniors Care Strategy and the Potential Roles of Paramedicine"

Association of Jewish Seniors Breakfast Meeting

Toronto, Ontario, Canada – September 20, 2012 – 1 Hour "With Respect to Old Age: Developing Ontario's Seniors Care Strategy"

Kensington Health Retreat

Toronto, Ontario, Canada – September 13, 2012 – 1 Hour "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

Central East LHIN Site Visit

Lindsay, Ontario, Canada – September 10, 2012 – 30 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

South West LHIN Site Visit

London, Ontario, Canada – September 7, 2012 – 30 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

North East LHIN Site Visit

Saulte Ste Marie, Sudbury, Timmins, Ontario, Canada – September 5-6, 2012 – 30 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

Erie St. Clair LHIN Site Visit

Windsor, Ontario, Canada – September 4, 2012 – 30 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

Central West LHIN Site Visit

Brampton, Ontario, Canada – August 24, 2012 – 30 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

North West LHIN Site Visit

Thunder Bay, Ontario, Canada – August 23 2012 – 30 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

Champlain LHIN Site Visit

Ottawa, Ontario, Canada – August 21, 2012 – 30 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

South East LHIN Site Visit

Belleville, Ontario, Canada - August 20, 2012 - 30 Min

"With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

Waterloo Wellington LHIN Site Visit

Waterloo, Ontario, Canada – August 17, 2012 – 30 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

Hamilton Niagara Haldimand Brant LHIN Site Visit

Hamilton, Ontario, Canada – August 13 – 30 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

Mississauga Halton LHIN Site Visit

Mississauga, Ontario, Canada – August 02, 2012 – 30 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

North Simcoe Muskoka LHIN Site Visit

Orillia, Ontario, Canada – July 27, 2012 – 30 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

Central LHIN Site Visit

Toronto, Ontario, Canada – July 20, 2012 – 30 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

Toronto Central LHIN Site Visit

Toronto, Ontario, Canada – July 19, 2012 – 30 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

RGP Network Meeting

Toronto, Ontario, Canada – July 19, 2012 – 45 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

Mount Sinai Hospital Senior Management Team Meeting

Toronto, Ontario, Canada – July 17, 2012 – 20 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

LHIN CEOs Meeting

Toronto, Ontario, Canada – July 16, 2012 – 30 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

Mount Sinai Hospital Geriatrics Institute

Toronto, Ontario, Canada – June 28, 2012 – 30 Min "With Respect to Old Age: Can We Do Better?"

City of Toronto Seniors' Forum

Toronto, Ontario, Canada – June 28, 2012 – 15 Min "With Respect to Old Age: Can We Do Better?"

SPRINT Annual General Meeting

Toronto, Ontario, Canada – June 27, 2012 – 1 Hour "With Respect to Old Age: Can We Do Better?"

ONPEA Active Living Fair for Seniors

Toronto, Ontario, Canada – June 15, 2012 – 1 Hour "Care of the Elderly: Can We Do Better?"

Canadian Seniors Housing Symposium

Toronto, Ontario, Canada – June 12, 2012 – 20 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

Advocacy Centre for the Elderly Special Lecture

Toronto, Ontario, Canada – June 12, 2012 – 20 Min "Care of the Elderly: Can We Do Better?"

OHA ER/ALC Conference

Toronto, Ontario, Canada – June 07, 2012 – 30 Min "Building a Geriatrics Continuum: Where ACEing Elder Care Begins in the ED"

OHA ER/ALC Conference

Toronto, Ontario, Canada – June 07, 2012 – 30 Min "With Respect to Old Age: Introducing Ontario's Plan to Develop and Implement a Seniors Care Strategy"

Toronto Central Community Care Access Centre SEC Symposium

Toronto, Ontario, Canada – May 31, 2012 – 1 Hour Keynote "Geriatrics Pearls for the Non-Geriatrician: Whats Up with Falls "

Ontario Gerontology Association Annual Conference

Toronto, Ontario, Canada – April 26, 2012 – 1 Hour Closing Keynote "With Respect to Old Age: Why New Thinking is Needed in Ontario for Older Adults "

Association of Municipalities of Ontario Urban Symposium

Toronto, Ontario, Canada – April 20, 2012 – 1 Hour "With Respect to Old Age: Why New Thinking is Needed for Older Adults "

University of Toronto Faculty of Medicine Open House

Toronto, Ontario, Canada – April 14, 2012 – 30 Minute Keynote "Why New Thinking is Needed for Older Patients in Erie St. Clair"

Erie-St.Clair LHIN Home First Conference

Windsor, Ontario, Canada – April 13, 2012 – 30 Minute Keynote "Why New Thinking is Needed for Older Patients in Erie St. Clair "

OHA Senior Friendly Hospital Care Conference

Toronto, Ontario, Canada – April 2, 2012 – 1 Hour "Reframing the Care Continuum and Caring for Elders: A New Way of Doing Business "

RGP of Eastern Ontario Geriatrics Refresher Day

Ottawa, Ontario, Canada – Mar. 21, 2012 – 1 Hour Opening Keynote "Key Components and Strategies to Operationalize an Elder Friendly Hospital"

RGP of Eastern Ontario Geriatrics Refresher Day

Ottawa, Ontario, Canada – Mar. 21, 2012 – 1 Hour Opening Keynote "Why New Thinking is Needed in the Way We Care for the Elderly"

OAMRT Central Education Day

Toronto, Ontario, Canada – Mar. 10, 2012 – 1 Hour Opening Keynote "The Image of a New System for Older Adults "

Nuffield Trust Health Policy Summit 2012

London, England – Feb. 27th, 2012 – Mar. 1, 2012 - 30 Min "Canadian Innovations in Caring for Older Adults Across the Continuum of Care"

GTA Rehabilitation Network Best Practices Day 2012

Toronto, Ontario, Canada – Feb. 27, 2012 – 1 Hour Keynote "Why New Things is Needed for Older Adults Across the Rehabilitation Continuum of Care"

Baycrest Models of Care Forum

Toronto, Ontario, Canada – Dec. 15, 2011 – 1 Hour "House Calls: An Innovative Integrated Home-Based Primary/Specialty Care Model for Frail Elders"

LGBTQ 50+ Empowerment Conference

Toronto, Ontario, Canada – November 29, 2011 – 1 Hour "Addressing the Health Needs of Lesbian, Gay, Bisexual, Transgender and Queer Older Adults"

Chatham-Kent Health Alliance Grand Rounds

Chatham, Ontario, Canada – November 18, 2011 – 1 Hour "Why New Thinking is Needed in the Way We Care for the Elderly"

ONPEA/PSNO Annual Conference

Toronto, Ontario, Canada – November 16, 2011 – 1 Hour Keynote "New Thinking for Older Adults across the Continuum of Care"

Toronto Central LHIN - Board Meeting

Toronto, Ontario, Canada – September 28, 2011 – 30 Min "TC-LHIN Task Force on Primary Care for Home-Bound, High-Risk, and Frail Seniors Recommendations"

Champlain LHIN - Hospital Sector/CCAC CEO Meeting

Ottawa, Ontario, Canada – September 26, 2011 – 30 Min "Why New Thinking is Needed for Older Patients"

UHN/MSH Medical Imaging Symposium

Toronto, Ontario, Canada – September 22, 2011 – 30 Min Opening Keynote "The Image of a New System for Older Adults"

HOOPP Business Leaders in Healthcare Symposium Series

Toronto, Ontario, Canada – September 19, 2011 – 60 Min "Why the Elderly Could Bankrupt Canada"

MAAP Summer Symposium

Gimli, Manitoba, Canada – August 26, 2011 – 30 Min "New Thinking for Older Adults: Where We Are, Where We Are Going..."

Center for Medicare Services (CMS) Innovation Forum

Baltimore, Maryland, USA – August 18, 2011 – 1 Hr "Establishing a Geriatrics Continuum of Care at Mount Sinai: Where We Are, Where We Are Going..."

Ontario Hospital Association Conference

Toronto, Ontario, Canada – June 17, 2011 – 45 Min "Building a Geriatrics Continuum: Where ACEing Elder Care Begins in the ED"

Mount Sinai Hospital Geriatrics Institute

Toronto, Ontario, Canada – June 9, 2011 – 30 Min "Establishing a Geriatrics Continuum of Care at Mount Sinai: Where We Are, Where We Are Going"

Munich Re Insurance Conference

Toronto, Ontario, Canada – May 31, 2011 – 45 Min "Why the Elderly Could Bankrupt Canada"

Toronto Western Hospital City Wide APN/NP Clinical Conference

Toronto, Ontario, Canada – May 16, 2011 – 1 Hour "Geriatric Pearls for the Non-Geriatrician: Practical Tips that will help you care for your Older Patients"

University of Toronto Faculty of Nursing CASPP Conference

Toronto, Ontario, Canada – May 13, 2011 – 1 Hour "Why New Thinking is Needed for Older Patients..."

University of Manitoba Medical Grand Rounds

Winnipeg, Manitoba, Canada – April 12, 2011 – 1 Hour "Why New Thinking is Needed for Older Patients: An Evidence-Based Case for Reforming Hospital Care for Older Adults"

The Complex Care Forum

Toronto, Ontario, Canada – April 8, 2011 – 45 Min "How Demographic Imperatives will force the Redesign of Acute Care Service Delivery"

Health System Performance Research Network Forum

Toronto, Ontario, Canada – March 29, 2011 – 45 Min "Why New Thinking is Needed for Older Patients: How Demographic Imperatives will force the Redesign of Acute Care Service Delivery"

Virtual Ward Rounds

Toronto, Ontario, Canada – February 15, 2011 – 45 Min "A Practical and Evidence-Based Approach to Reduce Potentially Avoidable Hospitalizations of Nursing Home Residents"

2010

Lakeridge Health Medical Grand Rounds

Toronto, Ontario, Canada – November 16, 2010 – 1 Hour "Geriatric Pearls for the Non-Geriatrician: Practical Tips that will Help You Care for your Older Patients"

LTC Medical Directors Association of Canada National Meeting

Toronto, Canada – October 30, 2010 – 1 Hour "Practical and Evidence-Based Approaches to reduce Potentially Avoidable Hospitalizations of Nursing Home Residents"

Riyadh Military Hospital Senior Leadership Seminar

Toronto, Canada – October 4, 2010 – 30 Min "Leading Geriatrics: How Mount Sinai is Transforming Hospital Care for Older Adults"

Stantec Architecture's 'Thinking Aloud' Breakfast Series: Crafting the Elder-Responsive Hospital

Toronto, Canada – September 22, 2010 – 1 Hour "Rethinking the Traditional Model: An Evidence-Based Case for reforming Hospital Care for Older Adults"

Ontario Ministry of Health Roundtable on ED-ALC in Rehab/CCC

Toronto, Canada – June 18, 2010 – 30 Minutes "Rethinking the Traditional Model: An Evidence-Based Case for reforming Hospital Care for Older Adults"

American Geriatrics Society Annual Scientific Meeting

Orlando, Florida USA – May 14, 2010 – 20 Minutes "The Mobile Long Term Care Emergency Nursing Program: An Innovative model of care to reduce hospital transfers for long-term care residents"

American Geriatrics Society Annual Scientific Meeting

Orlando, Florida USA – May 15, 2010 – 20 Minutes "A Promising US-Chinese Academic Geriatrics Partnership"

Canadian Geriatrics Society Annual Scientific Meeting

Ottawa, Canada – April 17, 2010 – 15 Minutes "The Mobile Long Term Care Emergency Nursing Program: An Innovative model of care to reduce hospital transfers for long-term care residents"

Mount Sinai/University Health Network Medical Grand Rounds

Toronto, Canada – March 10, 2010 – 1 Hour

"Rethinking the Traditional Model: An evidence-based case for reforming hospital care for older adults"

2009

McGill University Division of Geriatrics Grand Rounds

Montreal, Canada – November 11, 2009 – 1 Hour "Rethinking the Traditional Model: An evidence-based case for reforming hospital care for older adults"

Maryland Medical Directors Association Annual Meeting

Columbia, Maryland USA – November 7, 2009 – 30 Minutes "The Mobile Long Term Care Emergency Nursing Program: An Innovative model of care to reduce hospital transfers for long-term care residents"

Johns Hopkins Medicine House Staff Rounds

Baltimore, USA – October 16, 2009 – 1 Hour "Multinational Comparisons of Health Systems Data - 15 Eye Openers for your Consideration"

Women's College Hospital Department of Medicine Retreat

Toronto, Canada – October 2, 2009 – 1 Hour "New Thinking for Older Adults: An evidence-based case for reforming how we care for older adults"

Mount Sinai Hospital/University Health Network Division of

General Internal Medicine Retreat

Toronto, Canada – September 18, 2009 – 1 Hour "Rethinking the Traditional Model: An evidence-based case for reforming hospital care for older adults"

Baltimore County – Department of Aging Public Lecture Series

Baltimore, USA – September 24, 2009 – 1 Hour "How to Get What You Deserve: Making the Most of your Visits to the Doctor and the Hospital"

American Society of Consultant Pharmacists Conference

Rocky Gap Resort, Maryland USA – August 9, 2009 – 1 Hour "Advance Care Planning: Empowering Patients, Empowering Professionals"

Johns Hopkins Health Services Orientation Lecture Series

Baltimore, USA – July 21, 2009 – 40 Minutes "Rethinking the Traditional Model: The case for reforming hospital care for Older Adults"

2008

St. Michael's Hospital Medical Grand Rounds

Toronto, Canada – May 24, 2008 – 1 Hour "With Respect to Old Age: An evidenced–based approach to the design of an Elder Friendly Hospital."

Sunnybrook Health Sciences Center Medical Grand Rounds

Toronto, Canada – February 27, 2008 – 1 Hour "With Respect to Old Age: An evidenced–based approach to the design of an Elder Friendly Hospital."

2007

UBC Division of Geriatric Medicine Grand Rounds

Vancouver, Canada – September 19, 2007– 1 Hour "With Respect to Old Age: An evidenced–based approach to the design of an Elder Friendly Hospital"

2006

Canadian Geriatrics Society Annual Meeting

Vancouver, Canada - April 19-22, 2006 - 15 Minutes

"The Osteoporosis Paradox: Awareness and Attitudes amongst Canadians towards Osteoporosis as determined from the 2005 Canadian Osteoporosis Awareness Survey

Sunnybrook Health Sciences Center Patient Safety Rounds

Toronto, Canada – January 19, 2006 - 30 Minutes"The Perils and Pitfalls of Pre-Printed Admission Orders: A Case Study from the Cardiology Ward at Sunnybrook"

SELECTED MEDIA APPEARANCES AND INTERVIEWS

2023

Hill Times

February 21, 2023 Experts behind new LTC Standards discuss path forward after feds say a law isn't in the works

CBC Radio

February 17, 2023 What's life like after 100?

CTV National News

February 16, 2023 Bruce Willis diagnosed with dementia

Chatelaine Mangazine

February 10, 2023 How A 78-Year-Old Renovated Her Home To Age In Place

CBC News PEI

February 10, 2023 P.E.I. government board says 3 long-term care homes still not meeting standards

iHeart Radio

February 6, 2023 Morning Show with Andrew Carter

Canada Talks Sirius XM 167

February 3, 2023 The importance of new national standards for long-term care homes

CJAD 800 AM

February 2, 2023 Will voluntary standards for long-term care homes change anything?

TVO - The Agenda

February 1, 2023 Finding Naturally Occurring Retirement Communities

Global News - A Litte More Conversation

February 1, 2023 Gord Sinclair on life after The Tragically Hip, his "reluctant" solo career and his upcoming sophomore album

Global News BC -

January 31, 2023 B.C. already moving on new long-term care standards, but ready to do more: Dix

The Globe and Mail

January 31, 2023 New national long-term care standards unveiled, but Ottawa not planning to make them mandatory

CBC Radio

January 31, 2023 Geriatrician reacts to new national standards for long-term care homes in Canada

Zoomer Radio

January 31, 2023 <u>New Canadian Long Term Care Standards</u>

580 News Talk Radio

January 31, 2023 VKS: New National Standards Released for Long-term care but there is no plan to make them mandatory

CKLW AM 800

January 31, 2023 New national long-term care service standard and the final results of its nationwide consultations

Global News

January 31, 2023 New national standards for long-term care homes unveiled

Omni TV

January 31, 2023 New voluntary LTC standards, released by experts

CBC Radio

January 31, 2023 Postal workers can play a vital role in helping senior citizens: report

CTV News

January 31, 2023 New national long-term care standards

CTV News

January 31, 2023 Time is of the essence to bring in and enforce new long-term care Standards: Authors

CBC News

January 31, 2023 <u>New voluntary standards released to help homes devastated by Covid-19 Pandemic</u>

CBC News

January 31, 2023 New voluntary standards released for long-term care homes devastated by the pandemic

CBC News January 30, 2023 <u>Till LTC do us part - Dr. Samir Sinha specializes in geriatrics at Mount Sinai Hospital</u>

CBC News Ottawa

January 30, 2023 After 73 years of marriage, this couple is forced to live apart

NewsTalk 1010

January 27, 2023 Can Canada Post workers be the answer for checking on lonely seniors?

CKNW NewsTalk 980

January 27, 2023 Should Canada enlist postal workers to check in on seniors?

CJOB 680

January 27, 2023 Mail Carriers could play a vital roll in giving seniors a bit of a mental boost

900 CHML

January 27, 2023 Should postal workers do check-ins on older Canadians?

Toronto Star

January 27, 2023 Can Canada Post workers be the answer for checking on lonely seniors?

Toronto Star

January 26, 2023 <u>It's the wild west out there': How the soaring cost of rent is hitting home for seniors</u>

C2C Journal

January 19, 2023 <u>A Kingdom of One: The Great Loneliness Pandemic and What (Not) to do About it</u>

CMAJ News

January 18, 2023 Could bringing the hospital home expand acute care capacity?

2022

Global News

December 29, 2022 Low uptake of the flu vaccine in Canada and how vaccination can help to protect against respiratory viruses

Global News

December 29, 2022 Doctors share their 2023 wishlist after a year of 'crisis' in Canada's ERs

ZOOMER Radio

December 22, 2022 Are you looking forward to aging in Canada?

CBC Ottawa

December 22, 2022 NIA's new survey exploring perspectives on growing older in Canada

CBC Ottawa

December 22, 2022 More than half of Canadians over the age of 50 are feeling positive about aging, according to a new national survey

900 CHML

December 29, 2022 Doctors share their 2023 wishlist after a year of 'crisis' in Canada's ERs

CBC Hamilton

December 22, 2022 Most older Canadians feel good about ageing

CBC Radio One

December 20, 2022 NIA's new survey exploring perspectives on growing older in Canada

City News

December 15, 2022 As hospitals struggle, where is Ontario's top doctor?

CBC The National

December 9, 2022 Alzheimer's didn't stop him from earning a university degree

Ottawa Citizen

December 9, 2022 As CHEO continues to struggle, Ottawa's adult hospitals brace for viral illness impact

Am800 - The Shift

December 07, 2022 Canadian attitudes and habits around vaccination

Toronto Star

December 06, 2022 Doctors say flu starting to hit adults as hospitalization rates of seniors climb

CTV News

December 1, 2022 Alzheimers drug breakthrough

CBC News

December 1, 2022 New promise in Alzheimer medications.

Elevate Eldercare

November 30, 2022 Building an 'unstoppable' coalition for change in LTC

CTV News

November 30, 2022 Alzheimer's Drug Break through

The Globe and Mail

November 30, 2022 Canada's health care systems must do more to protect at-risk people from the flu

CTV News

November 29, 2022 Flu shot uptake below targets, particularly for older adults amid 'multi-demic' of viruses: survey

Toronto Star

November 29, 2022 Flu vaccine uptake for Canadians 'stubbornly low,' older Canadians not meeting targets

CBC News

November 29, 2022 Ontario's Bill 7 makes seniors living at home a lower priority for long-term care, says caregiver

CBC News

November 28, 2022 Low flu shot rates among Alberta kids and seniors a worry as influenza rages on

The Globe and Mail

November 25, 2022 New Ontario law makes hospital admission the only route to securing a long-term care bed, advocates say

Global News

November 24, 2022 Health Canada reviews RSV vaccine candidate as cases spike across country

CTV News

November 24, 2022 Seniors at high risk for RSV, experts warn, as Health Canada reviews 60-plus vaccine

Toronto Star

November 24, 2022 COVID boosters seeing fewer arms despite respiratory viruses seeing more lungs

Maclean's

November 23, 2022 Pandemic's devastating effects on seniors help drive donations to long-term care

Global News

November 23, 2022 Flu shot: What we know about this year's vaccine and 'virulent' dominant strain.

Global News

November 23, 2022 RSV not just a kids problem, doctors warn as infections surge in Canada

City News

November 22, 2022 Flu vaccination rate concerning amid 'tripledemic' affecting the province: Toronto doctor

CBC News

November 21, 2022 Ontario could face Charter challenge over law forcing some elderly hospital patients into nursing homes

CTV News

November 20, 2022 Bill 7 Charter Challenge Launched

CBC News

November 20, 2022 Ontario hospital patients who refuse pre-arranged long-term care spot will now be charged \$400 a day

CBC News

November 17, 2022 Return of seasonal flu, RSV and other viruses could spell disaster for older Canadians, experts say

CBC News

November 17, 2022 Why a winter free of COVID restrictions may not be a relief for all

The Globe and Mail

November 11, 2022 Return of seasonal flu, RSV and other viruses could spell disaster for older Canadians, experts say

Toronto Star

November 4, 2022 <u>Are you going to die alone? Be a burden to your family? In New York they do aging better. Why is</u> <u>Ontario missing the obvious?</u>

The Record

November 3, 2022 Our elders 'do not need more of the same system we already have'

CBC News

November 2, 2022 Hundreds of Canadians are still dying of COVID-19 every week. Who are they?

On the Record

November 1, 2022 Ageless International Film Festival Hosts First In-Person Screenings

CBC Radio The Current

October 27, 2022 Robot companions can't replace vital need for human connection in long-term care: expert

Toronto Star

October 22, 2022 Canadians want to age in the right place. A new report details why so many are struggling

CBC News Calgary

October 25, 2022 COVID-19 outbreaks growing in Alberta care homes as transmission rises | CBC News

CBC Radio Metro Morning

October 20, 2022 Ontario quietly changes LTC rules; visitors no longer have to mask in resident rooms

RBC Wealth Management Newsletter

October 12, 2022 Incapacity: Do you know if family decides for you?

CBC News

October 6, 2022 Scarborough long-term care home battles COVID-19 outbreak with 46 residents testing positive

The Globe and Mail

October 3, 2022 Vulnerable, complex patients at risk under Ontario's new long-term care law, experts warn

CMAJ News

September 22, 2022 Have long-term care systems learned from early pandemic failures?

CBC News

September 17, 2022 White Coat Black Art with Dr. Brian Goldman: The cure for home care

CBC News September 17, 2022 As pressures mount on home care in Canada, experts look abroad for solutions

CBC News

September 14, 2022 Nearly a guarter of Winnipeg care home residents given antipsychotic drugs with no diagnosis

CBC News

September 14, 2022 More than 1 in 5 residents in long-term care given antipsychotics without a diagnosis, data shows

National Post

September 10, 2022 In your 90s, 'anything can take you': Why the Queen's cause of death may never be revealed

TVO The Agenda

September 9, 2022 Will Bill 7 Really Relieve Ontario's Health Care Crunch?

The Globe and Mail

August 31, 2022 Forcing seniors into long-term care is not the solution to the hospital crisis

SaultOnline

August 31, 2022 Systemic ageism, Ontario's Bill 7

The Globe and Mail

August 31, 2022 Ontario passes controversial long-term care bill

Global News

August 30, 2022 <u>'Frustrating' and 'devastating': The domino effect of family doctor, LTC shortages on ERs</u>

CBC News

August 30, 2022 Moving seniors from hospital to long term care faster

CTV News

August 26, 2022 Ontario releases health-care plan

CBC News

August 26, 2022 Can Ontario force hospital patients into long-term care homes? It's complicated

CBC News

August 25, 2022 Pressure mounts for more answers on Ford government's controversial long-term care bill

CTV News

August 24, 2022 Canada's population could increase to 57M by 2068, posing challenges for housing, health care

CBC News

August 23, 2022 Reaction to Ontario's promise to NOT move hospital patients to long-term care homes without their consent

Zoomer Radio August 22, 2022

How strong is Doug Ford's plan to fix the healthcare crisis?

CBC News

August 22, 2022 Son says long-term care changes could help father's situation

CBC News

August 20, 2022 Dr. Samir Sinha & Lorenda Reddekopp on Long-Term Care Bill

CBC News

August 19, 2022 Advocates, critics warn Ontario's planned changes to long-term care are a violation of patient rights

CBC Radio

August 18, 2022 Ontario has a plan to fix healthcare, does it go far enough?

The Globe and Mail

August 18, 2022 Ontario to boost private clinic surgeries, move elderly patients to long-term care to ease hospital strain

CTV News

August 18, 2022 LTC residents transferring to alternative homes

CJRU News

August 13, 2022 The NIA's Long-Term Care COVID Tracker pause, and the importance of reliable data

Toronto Star

August 9, 2022 They're watching their dying little girl go without the specialized home care she needs. Ontario's system, they say, is 'beyond broken'

The National Post

August 8, 2022 Why 80 is the new 60: 'It's the triumph of aging' — but not for everyone

The Globe and Mail

August 8, 2022 Quebec's nursing homes are betting big on the 'Green House' model of long-term care. Will it work, and could the rest of Canada follow?

Toronto Star

August 4, 2022 Feds silent on enforcement as national long-term care standards get final 'tweaks'

The Economist

August 4, 2022 Can rich countries care for the old without going bust?

CP24

August 4, 2022 Feds silent on enforcement as national long-term care standards about to be finalized

CBC News

August 1, 2022 How a mental health project from moratorium-era Newfoundland can inform senior care

Global News

July 31, 2022 Lack of public data leads to pause of innovative COVID-19 project

Zoomer Radio July 28, 2022

LTC COVID-19 tracker project being paused

CBC News

July 28, 2022 90 Ontario long-term care homes still without air conditioning amid heatwave

Toronto Star

July 28, 2022 Project tracking COVID-19 in Canadian long-term care paused due to lack of data

Saskatoon StarPhoenix

July 16, 2022 <u>It happens all the time': How Saskatchewan hospitals fail elderly patients</u>

CBC Toronto

July 15, 2022 New COVID outbreaks more than doubled in Ontario LTC homes since last weekly report

Ottawa Citizen

July 12, 2022 Sinha: Premier Ford, Ontarians don't want for-profit, long-term care

CBC News

July 8, 2022 Ontario's 7th wave of COVID-19 is already hitting long-term care homes

Everything Zoomer July 7, 2022

Ontario and Quebec Enter 7th Wave of COVID-19 With Omicron Subvariants Driving the Spike

Toronto Star

July 3, 2022 Omicron deadlier for Ontario seniors than previous two waves combined

Reader's Digest

June 24, 2022 The health benefits of a daily stroll

CBC Radio

June 22, 2022 <u>A whistleblower let management at a Winnipeg personal care home know about alleged abuse in</u> <u>February. But the WRHA didn't find out until four months later and NOT from the care home</u>

CBC Radio

June 22, 2022 Understanding social isolation and loneliness among older Canadians and how to address it

Global News

June 22, 2022 <u>'It's sickening': geriatrics expert on breach of trust in Winnipeg care home abuse case</u>

CityNews

June 22, 2022 Claims of abuse at Oakview Place care home detailed by family

CBC News

June 21, 2022 Winnipeg care home didn't report whistleblower's allegation 15 residents were abused: health authority

Toronto Star

June 14, 2022 <u>At this Toronto long-term-care home, a little extra money has paid off handsomely — with time, respect and attention for residents</u>

Toronto Metropolitan University

June 14, 2022 Increasing vaccination rates among older adults

CBC News

June 12, 2022 Family wasn't told of long-term care resident's death for almost a month

Toronto Star

May 18, 2022 Seniors in this rental tower are struggling to live independently — so help is moving in

Toronto Star

May 10, 2022 Ageing Well: Finally, boomers — and politicians — are paying attention

CBC Radio May 9, 2022 Lessons learned about long-term care from Denmark

The Boston Globe

May 6, 2022 'We don't want to restrict life': How to navigate COVID risk at an uncertain time

TVO The Agenda

May 5, 2022 Did politicians get the long-term care message?

CBC News

May 1, 2022 2021 census data reveals major shifts in Canada's demographics

CBC News

May 1, 2022 Why Canada should follow Denmark's lead on home care: CBC's Marketplace cheat sheet

Toronto Star April 27, 2022

Ageing Well: Finally, boomers - and politicians - are paying attention

Toronto Star

April 27, 2022 Over-85s are one of the fastest growing cohorts in Canada. How can cities become 'age-friendly'?

CBC News

April 27, 2022 <u>New census figures showing aging population pose future problems for Canada, experts warn</u>

The Globe and Mail

April 27, 2022 Atlantic provinces will have highest proportion of seniors over 85 by 2043, census shows

CBC News

April 27, 2022 Latest census reveals data on how quickly Canada's population is ageing

CTV News

April 27, 2022 Census data on age released

Global News Radio

April 27, 2022 Canada's ageing population and the impact

CBC News

April 27, 2022 Stuck in bed 23 hours a day: What's wrong with home care in Canada and how another country changed course

CBC News

April 27, 2022 Searching for home-care solutions in Denmark

CBC Radio April 27, 2022 <u>Could Denmark offer the solutions to Canada's elder care crisis?</u>

Global News

April 13, 2022 How can we support older Manitobans to thrive in their homes and communities?

CTV News

April 7, 2022 Ontario expands booster eligibility

The Globe and Mail

April 7, 2022 Five ways to reduce and evaluate risk in a potential 6th wave of COVID-19

Global News

April 6, 2022 No masks and 4th doses? Experts concerned about 'mixed' COVID-19 messaging

CBC Radio

April 5, 2022 The 4th doses of vaccines are coming

Global News

Mar 23, 2022 This online tool can help you assess your COVID-19 risk now that restrictions are lifting

CBC News

Mar 23, 2022 Evaluating your COVID-19 risk as mask mandates lift

CBC News

Mar 18, 2022 Inside the home care crisis: Exposing a broken system

Saltwire

Mar 15, 2022 Increasing lack of COVID-19 data 'disappointing,' geriatrics specialist says

CBC News

Mar 15, 2022 A closer look: second anniversary of the global COVID-19 pandemic

CBC Radio One

Mar 15, 2022 Dropping vaccine mandates in long-term care homes

The Globe and Mail

Mar 14, 2022 Many Ontario long-term care homes keeping vax mandates as province lifts policy

TVO

Mar 11, 2022 <u>Why culture matters in dementia care</u>

CBC Radio One (CBLA-FM2)

Mar 9, 2022 How can we increase the shingles vaccination rate of older adults?

CBC Radio One (CBCL)

Mar 9, 2022 Reducing barriers to getting the shingles vaccine

CBC Radio One (CBLA)

Mar 9, 2022 Making the shingles vaccine more accessible

Zoomer Radio

Mar 6, 2022 Defending Ukraine & shingles vaccine

The National Post

Mar 5, 2022 How a smartphone program is helping seniors to stay healthy and safe

The National Post

Mar 5, 2022 How a smartphone program is helping seniors to stay healthy and safe

AM 800 CKLW

Mar 3, 2022 Getting the shingles vaccine

NYT

Mar 2, 2022 Canadian TV team closes their eyes in Ringsted's elderly care

Sn.dk

Mar 1, 2022 Canadians in shock over Danish home care

Sudbury.com

Feb 27, 2022 New standard needed to recognize more rights of long-term care residents, geriatrician says

The National Post

Feb 24, 2022 The end is near — again: how to decide what's safe for you as COVID restrictions lift

The Globe and Mail

Feb 23, 2022 Going Out and Worried About Covid Safety? There's a Calculator for That

Calgary Herald

Feb 23, 2022 Corbella: Alberta government vows to increase health funding and better efficiencies

CBC News

Feb 19, 2022 <u>Proposed long-term care standards will improve residents' care, Alberta operator says</u>

680 CJOB

Feb 12, 2022 Timing is everything: Dr. Sinha on the lifting of restrictions

The Globe and Mail

Feb 11, 2022 Group releases draft standards for LTC building design, infection prevention

CBC News

Feb 11, 2022 Standards group calls for sweeping post-pandemic changes to how long-term care homes operate

Toronto Star

Feb 11, 2022 <u>Proposed rules for long-term-care homes aim to balance a good life for residents with infection</u> <u>control</u>

The Globe and Mail

Feb 8, 2022 Transmissibility of Omicron led to much higher death totals than past wave, research shows

CBC Radio One Feb 7. 2022

Loosening restrictions in long-term care homes

Zoomer Radio Toronto

Feb 6, 2022 Long term care standards & reparations for slavery

CHML

Feb 5, 2022 What should the future of long-term care look like?

CBC News Toronto

Feb 4, 2022 Dr. Samir Sinha and Lorenda Reddekopp

CBC Radio One

Feb 3, 2022 Long-term care homes getting outside help

The Globe and Mail

Feb 3, 2022 Ottawa and provinces are on a collision course over long-term care

Toronto Star Feb 2, 2022 <u>As Ontario reopens, many are not ready to 'learn to live with COVID'</u>

CBC The National

Feb 1, 2022 Latest loosening of restrictions a step toward living with COVID-19, officials say

Toronto Star

Jan 30, 2022 Is it time to change the definition of fully vaccinated?

CBC News BC

Jan 30, 2022 You're boosted and have recently recovered from Omicron. What's your risk of reinfection?

Toronto Star

Jan 30, 2022 Should 'fully vaccinated' in Ontario mean three doses?

CBC

Jan 30, 2022 You're boosted and have recently recovered from Omicron. What's your risk of reinfection?

Global News Hamilton

Jan 28, 2022 Ottawa braces for trucker protest, C-19 positive frontline workers being asked to return to work, new standards for LTC, Hamilton group behind boost for PCR tests, online could

Winnipeg Free Press

Jan 28, 2022 New national long-term care standards enter public eye

La Presse

Jan 28, 2022 A draft of new national standards is published

CTV News

Jan 28, 2022 CTV News Calgary at 5

Global News

Jan 28, 2022 About 40% of January 2022 COVID-19 deaths in B.C. tied to long-term care outbreaks

Toronto Star

Jan 28, 2022 How many lives have COVID vaccines saved? The number tells us a lot

Toronto Star

Jan 28, 2022 Today's coronavirus news: Ontario reports 3,535 in hospital, 607 in the ICU, today, and more than 1,000 deaths this month

National Post

Jan 28, 2022 Convoy rolls on toward Ottawa and driving on the moon: In The News for Jan. 28

CBC News

Jan 28, 2022 <u>Family of long-term care resident with COVID-19 were outside glass enclosure as she died.</u> <u>Now they urge change</u>

Toronto Star

Jan 28, 2022 Long-term care still struggles with rampant COVID-19 cases as Omicron wave levels off

The Globe and Mail

Jan 28, 2022 <u>COVID-19 outbreaks in long-term care facilities skyrocket, but deaths are a fraction of last</u> <u>year</u>

CBC Radio

Jan 28, 2022 The current for Jan. 28, 2022

iPolitics

Jan 27, 2022 Public review of national nursing-care standards begins

CBC News

Jan 27, 2022 CBC News Network with Suhana Meharchand

CBC Radio One CBYK

Jan 27, 2022

CTV News

Jan 27, 2022 <u>Making long-term care homes more 'home-like' among new national recommendations in wake of</u> <u>COVID-19</u>

Global News CJOB

Jan 27, 2022 The next steps in care: reviewing the report with Dr. Sinha

Sudbury.com Jan 27, 2022 <u>New standard needed to recognize more rights of long-term care residents, geriatrician says</u>

Toronto Star

Jan 27, 2022 Draft report on national long-term-care standards could shape Canadian legislation

Toronto Star

Jan 27, 2022 Draft long-term care standards could have prevented pandemic deaths: committee chair

Toronto Star

Jan 27, 2022 <u>Today's coronavirus news: Ontario reports 3,645 hospitalizations; province to ease restrictions on</u> restaurants, indoor gatherings

СВС

Jan 27, 2022 New post-pandemic standards for long-term care proposed to federal government

Global News

Jan 27, 2022 Canada's new national long-term care standards released. Here's what is different

CBC News Network

Jan 27, 2022 <u>Long-term care report: Panel releases draft national guidelines addressing issues raised in the</u> <u>pandemic</u>

Canadian Life Sciences Database

Jan 27, 2022 Canadian study reinforces need for hip fracture prevention strategies to help reduce future fracture risks and their associated costs

Blackburn News

Jan 26, 2022 Ontario Liberals release emergency plan for long-term care

CTV News

Jan 26, 2022 Depression levels increase the longer older adults are isolated but they are resilient, research shows

CP24

Jan 26, 2022 LTC outbreaks: Lack of care 'concerning'

Saltwire

Jan 26, 2022 Silence is not golden when it comes to unreported COVID outbreaks in long-term care

Toronto Star

Jan 26, 2022 Ontario's Omicron death toll on the rise and getting worse

CBC News Toronto

Jan 26, 2022 2,500 long-term care residents and 4,000 long-term care staff in Ontario have COVID-19

CBC Radio One

Jan 24, 2022

Saltwire

Jan 24, 2022 P.E.I. government no longer reporting data on long-term care outbreaks

CBC News Radio

Jan 24, 2022 60% of long term care homes in outbreak: What's the impact?

CP24

Jan 22, 2022 Ontario reports over 4,000 COVID-19 hospitalizations, 47 more deaths

Global News

Jan 20, 2022 Health IQ Coronavirus Q&A

CBC News Toronto

Jan 19, 2022 Ontario long-term care staff shortage due to COVID-19 outbreaks

The Globe and Mail Jan 18, 2022 How to know when it's time for seniors to stop driving

The Globe and Mail

Jan 14, 2022 Ontario cabinet minister Rod Phillips to resign, not run in next election

СВС

Jan 13, 2022 Staffing shortages key concern as Alberta's continuing care homes battle 5th wave

Toronto Star

Jan 13, 2022 Toronto budget proposal moves 'emotion-centred' care for seniors closer to reality

The Globe and Mail

Jan 12, 2022 National standards for long-term care must balance residents' safety, quality of life: expert

CTV News

Jan 11, 2022 Over 100 residents of an Ontario long-term care home no longer under strict lockdown

Toronto Star

Jan 10, 2022 <u>Their mother died in agony in a nursing home. Now they're demanding Ontario hire a long-term-care</u> <u>ombud</u>

Global News

Jan 9, 2022 4th COVID-19 vaccine dose: What's the science behind another booster?

Global News

Jan 9, 2022 COVID-19 booster shots: Here's what you should know about side effects

Toronto Star

Jan 8, 2022 <u>Their mother had identical fractures in both legs when she died. How did no one at her Oakville</u> <u>nursing home see or hear anything?</u>

The Globe and Mail

Jan 8, 2022 The global population is growing older, faster, than anyone expected. Canada must be ready

Winnipeg Free Press

Jan 7, 2022 Personal care homes in crisis

Everything Zoomer

Jan 7, 2022 <u>COVID-19 Tracker: Outbreaks Spike in Canadian Long-Term Care; Quebec Cannabis, Liquor</u> <u>Stores to Require Vaccination Proof</u>

CTV News

Jan 6, 2022 <u>'Like being in solitary confinement': Residents, families angry at return of strict lockdowns in</u> <u>long-term care</u>

Toronto Star

Jan 5, 2022 Omicron is only now hitting seniors. Here's why this may spell more trouble for Ontario hospitals

Winnipeg Free Press

Jan 3, 2022 New isolation rules for health-care workers in effect

2021

Global News

Dec 31, 2021 Smaller long-term care units one lesson of COVID-19 pandemic

CTV News

Dec 31, 2021 <u>'He's my family, he's my dad': Families of seniors in long-term care homes struggle with new</u> <u>restrictions</u>

The New York Times

Dec 30, 2021 Going Out and Worried About Covid Safety? There's a Calculator for That

Ottawa Citizen

Dec 27, 2021 Double jeopardy: Older women face 'gendered ageism' — and the pandemic underlined it

Toronto Star

Dec 23, 2021 <u>Given Omicron, just how risky are my holiday plans?</u> The Star runs readers' scenarios past the <u>experts</u>

Global News

Dec 23, 2021 Dr. Sinha on Omicron

Toronto Star

Dec 15, 2021 Why Ontario experts fear Omicron could cause another deadly wave in long-term care

CBC News Manitoba Dec 15, 2021 Calls for mandatory vaccines for Manitoba personal care home staff as Omicron threat looms

Global News

Dec 15, 2021 Older Canadians' vaccination

The Globe and Mail

Dec 14, 2021 How seniors can ensure they're getting the health care they deserve

The Kelly Cutrara Show

Dec 13, 2021 Tougher rules could be on the way for long-term care homes as COVID-19 cases rise

Global News

Dec 10, 2021 Dr. Samir Sinha speaks to new care homes study

CIHI

Dec 9, 2021 COVID-19's Impact on Health Care Systems

CIHI

Dec 9, 2021 Frailty among hospitalized seniors

Global News

Dec 7, 2021 Health Matters

Global News

Dec 6, 2021 Concerned about the Omicron variant and your holiday plans? Try the COVID-19 visit risk calculator to see how safe you'll be

CBC Radio

Dec 2, 2021 Getting a third dose of COVID-19 vaccine amid fears of Omicron variant

Sudbury News

Dec 2, 2021 Online COVID-19 risk calculator tool can help you stay safer from COVID-19 during the holiday season

Good Times Magazine

Dec 1, 2021 Get a better quality of sleep

CBC News Manitoba

Nov 26, 2021 Premier Stefanson says no to mandatory vaccinations for care home staff

Sage Magazine

Nov 26, 2021 Rebooting long-term care

CBC Radio

Nov 25, 2021 COVID-19 vaccine still best way to protect Manitoba seniors -- despite waning immunity

CBC Radio

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Investment Executive

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The Globe and Mail

Nov 16, 2021 Amid soaring prices, retired Canadians are staying in their homes: 'This is a wake-up call for all of us'

Toronto Star

Nov 15, 2021 Canada has officially reached a vaccination milestone. Our tracker outlines every dose delivered on what's been a long journey

Sault Online Nov 14, 2021 Peter Chow: No Monoclonal Antibodies in Sault Ontario – But We Have Fluvoxamine

CTV News Winnipeg

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The Globe and Mail

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CBC News Radio Canada

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CTV News Channel

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The Globe and Mail

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Toronto Star

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CBC News: The National

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CBC Radio One Oct 28, 2021 Ontario's new bill is meant to better protect long-term care residents

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Everything Zoomer

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CBC Radio

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QQ News

Oct 20, 2021 Who are the people who die of the virus after being fully vaccinated?

Orillia Matters Oct 20, 2021

Future of local long-term care to be discussed at Thursday forum

Global News

Oct 20, 2021 Some fully vaccinated people have died of COVID-19. What you need to know

Midland Today Oct 19, 2021 Our health examines future of local long-term care

CTV News National Oct 18, 2021 77 per cent of Canadians aged 55-69 worried about retirement finances: survey

CBC Radio Canada Oct 18, 2021 COVID-19: 12 dead in a care center in Burnaby

CBC News

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Toronto Star

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Toronto Star

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The Haliburton County Echo

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CBC News

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CFRA 580 News Talk Radio Ottawa

Sept 28, 2021 Dr. Samir Sinha and Dr. Vivian Stamatopoulos - Sept 28th

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Sept 27, 2021 Writer responds to critic - Letters - Castanet.net

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CBC News

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Toronto Star

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Canada has officially reached a vaccination milestone. Our tracker outlines every dose delivered on what's been a long journey

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The Philanthropist Journal

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Global News Radio 680 CJOB Winnipeg

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Ipolitics

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99.3 County FM in Prince Edward County

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Global News Health IQ

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Global News

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RUV News Agency

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Toronto Star

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Visir.is

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Global News National

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Western Standard

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CTV News London

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CTV News Channel

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Toronto Star

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New York Times

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Libertatea

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The Epoch Times

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Toronto Star

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CTV News Channel

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CBC News Manitoba

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Toronto Star

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CBC News

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Sudbury.com

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Global News 640 Toronto Radio

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CBC News Hamilton July 6, 2021 Residents Dies from COVID-19 at Burlington's Tansley Woods LTC Home

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Castanet

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CBC News

June 5, 2021 Warmer weather and outdoor gatherings

WeRPN

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Calgary Herald

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Toronto Star

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May 29, 2021 Are we reopening too fast or too slow?

CTV News Channel

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CBC Listen

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Toronto Star

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National Post

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Toronto Star

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The push to loosen visitor restrictions in LTC

Global News

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Global News May 18, 2021 Canada may see 4th COVID-19 wave if restrictions eased too guickly, experts warn

Toronto Star

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CTV News Channel May 12, 2021

Ask the doctor

CIHI Podcast

May 11, 2021 <u>Dr. Samir Sinha: Impact of COVID-19 on Long-Term Care in Canada</u>

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The Lawyers Daily

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CTV News Channel

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CBC News

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CBC News May 3, 2021 Long-term care minister dodges questions in 1st press conference since independent report

Toronto Star

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Toronto Star May 3, 2021 Ontario can't 'fix' long-term care. It needs to start over

Toronto Star

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CBC News Ottawa

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CBC Ottawa Morning

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iPolitics

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Toronto Star

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Toronto Star

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iPolitics

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The Coast

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CP24

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Global News

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Global News Radio – Charles Adler Tonight

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CTV News Channel

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Daily Hive News

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Zoomer Radio Apr 14, 2021 Ontario's older adults continue to be left behind in the vaccine rollout

Global News

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Toronto Star

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Toronto Star

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iPolitics

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Apr 7, 2021 Ontario updates definition of outbreak in long-term care homes

CBC Radio Common Good

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Toronto Star

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Ottawa Citizen

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The Telegram

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Toronto Star

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Toronto Star

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CTV News Channel – Power Play

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CBC News Channel

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Global News

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The Globe and Mail

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Toronto Star

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CBC News Channel

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Global News

Mar 29, 2021 Why does AstraZeneca vaccine guidance keep changing? Experts weigh in

CTV News Channel Mar 29, 2021

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The Globe and Mail

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The Globe and Mail

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CBC News Network

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Maclean's Magazine

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The Globe and Mail Mar 22, 2021 How B.C.'s early success in protecting vulnerable seniors evaporated in COVID-19 second wave

CTV News Channel

Mar 21, 2021 Ontario expanding vaccination efforts

Reader's Digest

Mar 20, 2021 How Cognitive Tests Strip Seniors of Their Rights

Global News

Mar 20, 2021 Which province is winning the COVID-19 vaccine rollout race? Experts weigh in

Toronto Star

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Toronto Star

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CBC News Network

Mar 17, 2021 After a year of pandemic separation, grandparents can't wait to hug their grandchildren again

CTV News Channel Mar 17, 2021 WHO recommends use of AstraZeneca vaccine

CBC Metro Morning

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Zoomer Radio - Fight Back with Libby Znaimer

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CP24

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CBC The National

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CP24

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CBC News Network

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The Wall Street Journal

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CTV News Channel

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CTV News Channel

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CBC The National

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Mar 9, 2021 Ontario rejected proposals to protect LTC residents, deeming them 'too expensive': documents

New York Times

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Huffington Post

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The Globe and Mail

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Calgary Herald Mar 6, 2021 <u>Corbella: Alberta takes big steps to improve long-term care, but is it enough?</u>

Global News

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Marilyn Denis Show

Mar 4, 2021 This is what you'll need to keep in mind when we're able to travel again.

TVO

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Calgary Herald

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The Globe and Mail

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Global News

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If AstraZeneca isn't widely recommended for seniors, who should get the vaccine?

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Toronto Star

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CP24

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CTV News Channel

Feb 26, 2021 Doctors, caregivers push for in-home COVID-19 vaccinations for housebound seniors

Waterloo Chronicle

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Zoomer Radio Feb 25, 2021

Vaccinating Ontarians over 80

Global News Radio - The Morning Show

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The Globe and Mail

Feb 24, 2021 Ontario won't launch COVID-19 vaccination booking system until March 15

CTV News Channel

Feb 24, 2021 Frustrating Timelines

Toronto Star

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CBC The National

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CBC News Network

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Global News

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The Tyee

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Global News

Feb 20, 2021 Many seniors struggle with loneliness. The pandemic has only made it worse

CBC News Network

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The 2020 Network - @Risk Podcast

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CTV News Channel

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CBC News Network

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CTV News Channel

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Toronto Star

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Toronto Star

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CTV News Channel

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CTV News Channel

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CP24

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Hill Times Research

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Global News

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Winnipeg Free Press

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Global News

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The Globe and Mail

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CBC News Network

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Edmonton Journal Feb 3, 2021

David Staples: If COVID doesn't get us, confinement syndrome and 'diseases of despair' just might

CBC Radio - Day 6

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Hill Times Research

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CTV News Channel

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CBC News Network

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CTV News Channel

Jan 26, 2021 Examining the long term care crisis

Toronto Star

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Global News Radio - The Morning Show

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Toronto Star

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Toronto Star

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Global News

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CTV News Channel

Jan 22, 2021 <u>Two mobile hospital units will be deployed to the Greater Toronto Area, Trudeau says</u>

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CTV News Channel

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CTV Your Morning

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CP24

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Toronto Star

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Toronto Star

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CBC Radio - Here and Now Toronto with Gill Deacon

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Toronto Star Jan 18, 2021 There should not be a dip on weekends': Ontario once again reports weekend vaccination slowdown

CBC News Network

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Toronto Star

Jan 16, 2021 <u>A shot of euphoria, a dose of regret: Some health-care professionals who got vaccinated before</u> <u>front-line workers have second thoughts</u>

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CBC News Network

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Uncommons Canadian Politics

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CTV News Channel

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Toronto Star

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Toronto Star Jan 11, 2021 Some Toronto hospitals criticized after staff far from the front lines get COVID-19 vaccine

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CP24

Jan 10, 2021 <u>Crisis in LTC system 'utterly avoidable</u>

CTV News Channel

Jan 10, 2021 Vaccinations begin at Scarborough long-term care home battling deadly COVID-19

CBC News

Jan 10, 2021 New recommendations released on curbing second COVID-19 wave in long-term care

Toronto Star

Jan 8, 2021 What Ontario can do to save seniors and LTCs

Toronto Star

Jan 8, 2021 It's boys in the sandbox fighting': Now stop the bickering and start fixing long-term care, advocates say

Toronto Star

Jan 8, 2021 <u>Staffing model the 'secret sauce' for Toronto's city-run long-term-care homes battling the second</u> <u>wave of COVID-19</u>

Toronto Star

Jan 7, 2021 Ensuring precious COVID-19 vaccines end up in arms — not the garbage

CBC The Current

Jan 7, 2021 COVID-19 outbreak at Tendercare Living Centre in Ontario

Toronto Star

Jan 7, 2021 COVID-19 vaccine tracker: tracing every dose of the coronavirus vaccine administered in Canada

CBC News Network Jan 7, 2021

This seniors' home in Windsor-Essex kept COVID-19 out, but doing so has come at a cost

CBC News Network

Jan 6, 2021 Employers can require healthcare workers to get COVID vaccine but union wary of mandatory shot

CBC Front Burner

Jan 6, 2021 How Ontario could have avoided the long-term care crisis

CBC News

Jan 5, 2021 He's 101, she's 92. But this couple at an Ontario seniors' home isn't a priority for the COVID-19 vaccine

Toronto Star

Jan 5, 2021 Ontario's COVID-19 vaccination rollout lags some big provinces but shows signs of ramping up

City News

Jan 5, 2021 LTC staff need better pay, support to ensure safety of residents: experts

Global News Radio 640 Toronto

Jan 5, 2021 staffing issues at Ontario's LTC homes

Lynda Steele Show

Jan 5, 2021 More criticism over Canada's vaccine rollout strategy

CBC The National

Jan 5, 2021 Should COVID-19 vaccines have gone to nursing home residents before staff?

Toronto Star

Jan 4, 2021 Doctors point to staffing issues as second wave of COVID-19 rips through Ontario's nursing homes

CBC News Jan 4, 2021 Doctors urge Ontario to pick up pace on COVID-19 vaccine rollout

CTV News Channel

Jan 4, 2021 Why can't we get it done?': Dr. Sinha on slow vaccine rates

The Amber Mac Show

Jan 4, 2021 NEGLECTING SENIORS: How Ontario is Failing Its Seniors in Long-Term Care During COVID-19

CBC News Network

Jan 4, 2021 MPP accuses province of neglect as long-term care home grapples with deadly COVID-19 outbreak

CBC The National

Jan 3, 2021 One-third of Ontario long-term care homes are dealing COVID-19 outbreaks

2020

The Wall Street Journal

Dec 31, 2020 Covid-19 Stalked Nursing Homes Around the World

Global News

Dec 30, 2020 Institute calls for visitor restrictions at long-term care homes to be relaxed

The Globe and Mail

Dec 30, 2020 Flu almost non-existent this year as coronavirus cases rise across Canada

Global Morning Show

Dec 28, 2020 <u>COVID deaths in Scarborough LTC-home climb, new COVID variant in Ontario, virtual restaurants &</u> <u>getting your finances in order for 2021</u>

Mornings with Simi

Dec 28, 2020 Visit restrictions and depression in long term care homes

Global News

Dec 27, 2020 Visit restrictions amid COVID-19 caused 'spike in depression' in long-term care homes

Huff Post Canada

Dec 25, 2020 Long-Term Care Is 'Dangerous.' What's Ontario's Plan For Alternatives?

The Globe and Mail

Dec 23, 2020 Alarm raised over outside care workers and coronavirus surge in retirement homes

Toronto Star

Dec 23, 2020 Delayed lockdown could result in 10,000 additional COVID-19 cases in Ontario

CBC News

Dec 22, 2020 Staffing issues, neglect found in past inspections at Windsor LTC home in COVID-19 outbreak

CBC Metro Morning

Dec 22, 2020 Ontario doctor calls Boxing Day lockdown 'half measures

Zoomer Radio

Dec 20, 2020 Dr. Samir Sinha on "My COVID-19 Visit Risk

Global News - Edmonton

Dec 18, 2020 Rapid testing at seniors facilities began Friday in Alberta

The Globe and Mail

Dec 15, 2020 Health officials warn of holiday spike in cases as more vaccine doses set to arrive

CanIndia News

Dec 14, 2020 2.2 million Canadian seniors on the GIS can get a free smartphone and subsidized rate plan from Telus

Ryerson Today

Dec 10, 2020 Tips to celebrate the holidays safely during COVID-19: Changing the goal post

Canada Talks Sirius XM

Dec 10, 2020 How COVID-19 responses across Canada have failed to protect those in long term care homes and if the pandemic has revealed the ageism in our society

Times Conlonist

Dec 8, 2020 Telus to provide free mobile phone, discounted cell service to low-income seniors

Stockhouse Press Release (mentioned)

Dec 8, 2020 Revera Inc. launches Expert Advisory Panel report on first wave of COVID-19

Toronto Star

Dec 8, 2020 Provinces on a collision course with Ottawa over national standards for long-term care

CBC News

Dec 6, 2020 COVID-19 second wave taking its toll on Ontario's nursing homes

Global News

Dec 5, 2020 What will Ontario's long-term care system look like post-pandemic?

The Globe and Mail

Dec 4, 2020 Long-term care industry waiting for advice on COVID-19 vaccine rollout

The Globe and Mail

Dec 4, 2020 Long-term care commission urges Ontario to improve inspections, enforcement

Global 640 News

Dec 2, 2020 How COVID-19 has changed the way families think about long-term care in Ontario

CTV News Saskatoon

Dec 1, 2020

I'll put on a Hazmat suit just to sit down and talk to her': Prince Albert man hopes long term care home COVID-19 restrictions eased by Christmas

CBC News the National

Dec 1, 2020 Special Edition - Confronting COVID-19 Virtual Townhall

CBC Listen - Cross Country Checkup

Nov 29, 2020 Ask Me Anything: Dr. Samir Sinha on long-term care

CTV News

Nov 27, 2020 <u>1855 New Covid-19 Cases in Ontario – Province reports a massive spike in infections, adds 20</u> <u>deaths</u>

CBC Metro Morning

Nov 27, 2020 MyCovidVisitRisk.com

Waterloo Chronicle

Nov 27, 2020 <u>Rapid tests are a game changer, Doug Ford says. Public Health Ontario's head of microbiology has</u> <u>a very different view</u>

QB Briefing

Nov 27, 2020 Government 'impeding' long-term care commission by delaying release of documents: commission spokesman

iPolitics

Nov 27, 2020 Ford asks Trudeau for details of vaccine types, quantities, and timing

Global Regina

Nov 26, 2020 Coronavirus: Isolation taking a toll on mental health of Sask. seniors, some experts say

The Federalist Nov 25, 2020 <u>A 90-Year-Old Woman Killed Herself To Avoid Another COVID-19 Lockdown. She's Not</u> Alone

Global News

Nov 25, 2020 Coronavirus: Isolation taking a toll on mental health of Sask. seniors, some experts say

TVO Steve Pakin

Nov 25, 2020 Fighting a Second Wave in Long-Term Care Homes

Royal College of Physicians and Surgeons of Canada

Nov 24, 2020 Health System – A Canadian Crisis: Fighting for eldercare reform

Global National

Nov 23, 2020 New self-assessment tool helps determine COVID-19 risk

Global News

Nov 23, 2020 How risky is going home for the holidays amid coronavirus? There's a tool for that

The Globe and Mail Alberta

Nov 22, 2020

Restaurants become focus of COVID-19 debate in Alberta as province faces increasing calls to lockdown?

La Presse

Nov 21, 2020 Aim for zero, really?

Global News National

Nov 20, 2020 The state of Canada's long-term care in the second wave

CTV News Channel

Nov 20, 2020 At home and abroad, examples of how seniors can stay safe from COVID-19 without isolation

CTV News Channel

Nov 19, 2020 Facing another retirement home lockdown, 90-year-old chooses medically assisted death

QP Briefing

Nov 19, 2020 Virtual long-term care @ home program' could help more Ontario seniors age in place: report

CTV News Channel

Nov 19, 2020 1210 New COVID-19 Cases in Ontario; The province is also adding 1,376 resolved cases

CBC News Calgary

Nov 18, 2020 Concerns grow as COVID-19 continues to take devastating toll on Alberta care homes

CBC Radio Ontario Morning

Nov 18, 2020 80% of the deaths in Ontario due to COVID-19 during the first wave were people living in long term care

Winnipeg Free Press

Nov 18, 2020 Lack of asymptomatic testing in Manitoba care homes questioned

Preconceived Podcast

Nov 17, 2020 Growing older shortcomings in western society

TELUS Talks podcast

Nov 17, 2020 Rethinking elder care in Canada

The Globe and Mail

Nov 17, 2020 Absence of standard protocols on COVID-19 testing leaves nursing homes vulnerable

CBC News

Nov 17, 2020 COVID Zero Strategy

CJRU The Scope at Ryerson

Nov 17, 2020 National Institute on Ageing weighs in on this year's flu season

iPolitics

Nov 16, 2020 Ontario's public health units are ill-equipped to store Pfizer's promising vaccine

CBC News

Nov 16, 2020 Fight against COVID-19 full of half measures, doctor says

CBC The Current

Nov 16, 2020 Is devastation of spring's first wave repeating itself in long-term care homes?

CBC Listen – Day 6 with Brent Bambury

Nov 14, 2020 COVID-19 outbreaks in long-term care home were foreseeable and preventable, says geriatrician

Q Briefing

Nov 13, 2020 Long-term care is 'our provincial shame': geriatrician teams up with nurses' association to call out Ontario's ageism

Toronto Star

Nov 13, 2020 More than 80% of people killed by COVID-19 have been seniors. How that's changing our vaccine research

CBC Investigates – Manitoba

Nov 13, 2020 Family seeking inquest into Maples personal care home death over concerns of malnourishment

CBC The National

Nov 13, 2020 New figures show the second wave could be hitting long-term care homes

Global News Radio

Nov 13, 2020 Keeping LTHC safe amid wave 2 of covid

Macleans

Nov 12, 2020 Strict COVID-19 protocols are leaving seniors lonely, depressed and wondering: Is it worth it?

CTV News Channel

Nov 12, 2020 Revera faces major outbreaks in multiple facilities in 4 cities

CTV News Winnipeg

Nov 11, 2020 COVID-19 in Maples Senior Care Home - Is Enough Being Done?

Toronto Life

Nov 11, 2020 Houses of horror

CBC News

Nov 11, 2020 National Remembrance Day Ceremony

CTV News Winnipeg

Nov 11, 2020 Critical of Care home Response

Global News Winnipeg

Nov 9, 2020 It's time for Manitoba to take those lessons that we learned the hard way in Ontario and other places, and apply them guickly to save more Manitobans from dying

Global News Radio – 680 CJOB

Nov 9, 2020 COVID-19 Outbreaks in Manitoba

CBC News – Manitoba

Nov 9, 2020 Maples care home not fully staffed during Friday crisis, despite claims it was, union says

The Globe and Mail

Nov 6, 2020 Alberta widens restrictions on social gatherings to curb COVID-19 spread

Orangeville News

Nov 5, 2020 Bruce Arthur: 'The single biggest mistake of the pandemic.' Ontario's sudden shift in pandemic strategy rattles medical community

The Toronto Star

Nov 3, 2020 <u>Pharmacies facing flu shot shortages the one year people are anxious to roll up their sleeves. Is this</u> <u>a missed opportunity?</u>

Global News Radio

Nov 2, 2020 Changes coming to Long Term Care Homes

CBC News - Calgary

Nov 2, 2020 Some families say isolation is worse than COVID for loved ones in long-term care homes

Simcoe News

Nov 2, 2020 <u>Pharmacies facing flu shot shortages the one year people are anxious to roll up their sleeves. Is this</u> <u>a missed opportunity?</u>

Huffpost

Nov 2, 2020 Merrilee Fullerton's Past Health-Care Views Spur Questions Amid Pandemic

CBC News

Oct 31, 2020 <u>Winnipeg health authority needs to step in at Parkview Place, as outbreak leads to 22 deaths:</u> <u>geriatric expert</u>

CBC News

Oct 30, 2020 Why experts aren't declaring victory yet despite fewer COVID-19 deaths so far in Ontario's 2nd wave

The Marilyn Denis Show

Oct 28, 2020 Why are older adults more vulnerable to COVID-19

CTV News Channel

Oct 28, 2020 Canada's top doctor releases pandemic report

CBC News

Oct 28, 2020 Woman who died of COVID-19 only separated from Parkview Place roommate by end tables between beds, son learns

Toronto Star

Oct 28, 2020 How low testing on the weekend may be making it harder to control Ontario's second wave?

The Globe and Mail

Oct 27, 2020 Grim milestone: Canada marks 10,000 COVID-19 deaths as country battles second wave

Toronto Star

Oct 27, 2020 Hospitals full as cases surge in province's 'hot spots': These 3 charts show where Ontario is right now in the COVID-19 battle

CBC News – White Coat, Black Art – The Dose

Oct 27, 2020 How to have a safe Halloween in the midst of COVID-19

Winnipeg Free Press

Oct 27, 2020 Pandemic highlights widespread societal ageism

Global News

Oct 23, 2020 Parkview Place needs province to take over care: Manitoba NDP, experts

Toronto Star

Oct 22, 2020 Bruce Arthur: Doug Ford's government is making it almost impossible to sue long-term-care homes. Good thing he's 'protecting' COVID victims' families

Toronto Star

Oct 22, 2020 <u>COVID-19 had a devastating effect on the quality of life of nursing home residents. We may never</u> <u>know how much because some homes hit pause on assessing it</u>

CBC Radio

Oct 21, 2020 Manitoba's health minister faces backlash for COVID-19 death in care homes

CBC News – Manitoba

Oct 21, 2020 Toronto doctors slam Manitoba's health minister for saying care home deaths are unavoidable

CTV National News

Oct 20, 2020 National News Oct 20, 2020 - Coronavirus Update

980 CFPL London Woodstock

Oct 19, 2020 COVID-19 has Canadians rethinking how they want to spend retirement: survey

CTV News Channel

Oct 19, 2020 COVID-19 Outbreak at 2 Toronto Hospitals

Toronto Star

October 16, 2020

COVID tests, lockdown stress and bread-making contests: Homes with three generations under one roof face added risks in the pandemic — but there are upsides

CBC Radio - The World at Six

October 15, 2020 https://www.cbc.ca/listen/live-radio/1-8-cbc-news-the-world-at-six

CBC News

Oct 14, 2020 The latest on the coronavirus outbreak for Oct. 14

CBC Radio – The Dose

Oct 14, 2020 As COVID-19 cases climb in long-term care homes, experts hope to avoid locking down residents

CTV News Channel Oct 14. 2020

National Institute On Ageing & Telus Health Survey

CBC News – Kitchener-Waterloo

Oct 13, 2020 New research finds thousands of long-stay home-care clients did not get flu shot in 2019

CTV News Channel

Oct 13, 2020 Ont. Records 1,553 cses over 2 days

CBC News

Oct 10, 2020 Ontario waited weeks to trigger restrictions while COVID-19 spread. Did changes come too late?

Western Alumni Gazette

Oct 10, 2020 A Canadian crisis - Fighting for eldercare reform

CBC News

Oct 10, 2020 Ontario reports 809 new COVID-19 cases as number of deaths tops 3,000

QP Briefing

Oct 8, 2020 The numbers are comparable': Minister compares long-term care COVID-19 deaths to a bad flu year

CBC News

Oct 3, 2020 Why a 2nd wave of COVID-19 is more dangerous than it looks

CBC News

Oct 1, 2020 Ontario home-care providers push for expanded services to fight pandemic

CBC - The Dose

Sept 29, 2020 What have we learned about COVID-19 to keep my elderly loved one safe in long-term care this time around?

Radio-Canada Documentary

Sept 25, 2020 <u>Enquête | Mourir dans l'angle mort</u>

Global News

Sept 19, 2020 Renewed fears of outbreaks in long-term care homes

CNN

Sept 13, 2020 Grandparents Day 2020: 5 tips for safe grandparent-grandchild visit

CBC News - London Sept 2, 2020 School's return raises worries about exposing seniors to COVID-19

Zoomer

Aug 21, 2020 Canada's Hidden Shame: How COVID-19 Exposed years of Systemic Neglect in Long-Term Care

Global News

Aug 20, 2020 Rally calls for easing of strict visitor rules at Nova Scotia long-term care homes

BNN Bloomberg (Syndicated in 7 other media outlets)

Aug 20, 2020 Immigration slowdown threatens economy: RBC

The Chronicle Hearald (Syndicated in 2 other media outlets)

Aug 19, 2020 Expert blasts N.S. for withholding COVID-19 long-term care data

Toronto Life Magazine (mentioned)

Aug 19, 2020 The post-pandemic future: How Covid got city builders thinking

Toronto Life Magazine

Aug 19, 2020 The post-pandemic future: We will stop warehousing older people in care homes

Yahoo News (Syndicated in 2 other media outlets) Aug 13, 2020 Ontario Families Fight For More Long-Term Care Visits Before 2nd Wave Hits

CBC News – The National

July 29, 2020 Ontario launches probe into COVID-19's impact on long-term care homes

The World

July 28, 2020 Isolation may be a greater risk than COVID-19 for residents of Canada's nursing homes

Niagara Falls Review

July 27, 2020 Bill loved to walk, but the COVID pandemic curbed his movement and his spirit

Canadaland Show

July 22, 2020 Pandemic #11 – It didn't Have to be be like this

CTV News

July 22, 2020 For-profit long-term care homes saw more COVID-19 deaths in Ontario, study finds

CBC News

July 22, 2020 More COVID-19 deaths at for-profit nursing homes in Ontario, study finds

Tricity News

July 22, 2020 Special report: Protecting seniors' homes from the pandemic's next wave

CTV News Channel

July 16, 2020 Ontario Investing in Long-Term Care Homes

The Star syndicated in 21 media outlets) July 15, 2020 Ontario OK's indoor visits to Long-term care home

Ryerson's National Institute on Ageing July 15, 2020 Pushes for Change in Care of Seniors

CBC News: The National

July 15, 2020 Fake Mask Exemption Cards

CBC News (Syndicated in 5 media outlets) July 11, 2020 It's time to let family caregivers back into Ontario nursing homes

CBC News: The National

July 8, 2020 Cooling off from a heat wave is complicated by pandemic

BBC UK – Health Check

July 8, 2020 Experts warn cancer deaths will rise because of the pandemic lockdown

CBC News (Syndicated in 8 media outlets) June 27, 2020 <u>Is it safe to play cards with friends? Your COVID-19 questions answered</u>

CBC News

June 25, 2020 Report underscores Canada's long-term care failures during pandemic

CBC News: The National

June 25, 2020 COVID-19 surges in the U.S

CTV News Channel

June 25, 2020 <u>Halifax Long-Term Plan</u>

CTV News Channel

June 25, 2020 Study on Long-Term Care Deaths" Proportion of Canadian LTC Covid-19 death double average of other nations

The Globe and Mail

June 25, 2020 81% of COVID-19 Deaths in Canada were in Long-Term Care - Nearly Double the OECD Average

Wall Street Journal

June 24, 2020 Coronavirus Lays Bare Poor Conditions in Canada's Nursing Homes

Global News Newsletter

June 22, 2020 Health IQ Coronavirus update

CTV News Channel

June 18, 2020 <u>Ontario Long-Term Care Visits Resumes, Province allows visitors at homes where there are no</u> <u>COVID-19 outbreaks</u>

The Canadian Press (Syndicated in 3 other press sites)

June 18, 2020 Families unable to see elderly loved ones struggle to navigate new rules and risks

CBC News: The National

June 16, 2020 Frustration surrounds visiting restrictions at Ontario nursing homes

Global News

June 12, 2020

Long-term care facilities to allow visits, but strict guidelines remain

CTV News Channel

June 12, 2020 Ontario to Allow visitors to care homes people must test negative for Covid-19 before being allowed in

Global News

June 9, 2020 Every province and territory has been struggling to provide good long-term care services

CTV News Channel

June 9, 2020 We've been so blessed': In-person long-term care visits resume in some provinces

RBC Wealth Management

June 8, 2020 COVID-19: How to empower older Canadians with personal and financial planning

Global News

June 7, 2020 Long-term care facilities are the only option for many. What happens when they fall short?

QP Briefing June 4, 2020 Virtual Long-Term care could allow more seniors to stay in their homes

The Sudbury Star (Syndicated in one other print)

June 3, 2020 Action needed now on long-term care

CTV News Channel – Atlantic News

June 3, 2020 It can't be for nothing': Daughter of Northwood resident wants answers after mother's COVID-19 death

CBC News - Politics

June 3, 2020 Conservative leadership candidates pitch fixes for long term care

The Chronicle Herald

June 2, 2020 Daughter wants answers for Northwood fatal outbreak

iPolitics

June 2, 2020 More than 1/3 of Ontario LTC facilities report increases in worsening pressure ulcers, chemical or physical restraint use

Global News – The West Block

May 31, 2020 <u>Episode 39, Season 9</u>

Global News

May 31, 2020 Canadians have 'deluded' themselves about state of long-term care: doctor

Global News

May 31, 2020 Every province and Territory has been struggling to provide good long-term care services: Dr. Samir Sinha

The Capital

May 30, 2020 The Avoidable Tradegy: How Canadian Public Health Failed to curb the carnage of COVID-19

The Canadian Press – (syndicated in 2 various media outlets) May 28, 2020 Advocates push Ottawa to fix long-term problems with long-term care

Policy Options Podcast

May 28, 2020 Confronting the crisis in long-term care

Sirius XM Radio - Canada Talks

May 27, 2020 Dr. Samir Sinha joins Arlene Bynon – Discuss Infestations, sedation, and neglect: Military Report

CTV Television- Your Morning

May 27, 2020 Report finds troubling conditions in Ontario long-term care homes

CFRA 580 - Ottawa May 27, 2020

Hour 4 Ottawa now Wed May 27, 2020

Global News Radio

May 27, 2020 Military Teams report horrible conditions on long term care homes

The Canadian Press – (syndicated in 2 various media outlets)

May 27, 2020 Advocates push Ottawa to fix long-term problems with long-term care

The Star (Syndicated in 21 media outlets) May 25, 2020 The Star published an investigation into long-term care in 2003. What's changed since then?

The Star - Federal Politics

May 27, 2020 COVID-19 exposed horrors in long-term care. What should Ottawa do next?

The Star - Our Windsor

May 27, 2020 City-run long-term care homes have seen fewer COVID-19 deaths. Are staff wages the reason?

CBC News

May 26, 2020 Geriatrician reacts to scathing military report on conditions in 5 Ontario Long-term are homes

CBC News

May 26, 2020 We got our mother out of Northwood. What's needed now is a public inquiry

The Canadian Press – InSauga (Syndicated in 1 other prints)

May 26, 2020 Heat wave forces cities, long-term care centres to rethink how to offer heat relief under COVID-19

Sick Boy Podcast

May 22, 2020 Failing our elders feel good Friday

iPolitics

May 20, 2020

Ontario Long Term care homes faced 3 times more respiratory infection outbreaks than retirement homes from 2014-19

The Record

May 18, 2020 Is it depression? Does dad need reminders to eat? Family seeks answers to father's 22-pound weight loss in retirement home

The Star – Our Windsor

May 18, 2020 Isolated and lonely, 'caged' seniors driven to despair – and defiance

CNN

May 15, 2020 Dear Grandma, read this before you visit the little ones

CTV Television - Your Morning

May 14, 2020 Ontario Announces power to take over Long-Term Care Homes

CTV News

May 13, 2020 Coronavirus: Facts vs Fears

Canada Talks Sirius XM 167

May 11, 2020 Canada having the highest proportion of deaths in long-term care settings among the 14 countries tracked

Toronto Sun (Syndicated in 67 media outlets) May 11, 2020 S.O.S. Save Our Seniors

CTV News

May 10, 2020 Home care during COVID-19

National Post

May 8, 2020 <u>After the flood: How the next wave (or waves) of COVID-19 will look in Canada</u>

Global News Radio

May 8, 2020 Dr. Samir Sinha on how we can improve our geriatric care

CBC Calgary

May 7, 2020 Calgary woman moves dad from long-term care home amid calls to stop the deaths

The Toronto Star (Syndicated in 18 other prints)

May 7, 2020 82% of Canada's COVID-19 deaths have been in long-term care, new data reveals

CTV News (Syndicated in 2 media outlets) May 7, 2020 Strang says virus had 'spread widely' throughout Northwood before it was recognized

CTV News

May 7, 2020 <u>Military Help in Long-Term Care Homes</u>

CTV News (Syndicated iin 2 media outlets) May 6, 2020 Where the tragedy really lies': The crisis in Canada's long-term care homes

The Toronto Star

May 6, 2020 The proportion of COVID-19 deaths in long-term care was measured in 14 countries. Canada had the worst record

The Guardian May 6, 2020 Grim COVID-19 numbers tell tragic story at Northwood

CTV Television- Your Morning

May 6, 2020 LTC Review

iPolitics

May 6, 2020 Ontario inches closer to allowing more doctor support at long-term care homes

Our Windsor

May 5, 2020 <u>As Quebec gives families more access to the dying, should Ontario follow?</u>

CBC News (Syndicated in 1 media outlet) May 5, 2020 Union calls for public inquiry, criminal investigations into COVID-19 deaths at long-term care homes

The Toronto Star(Syndicated in 15 media outlets)

May 5, 2020 They said there was no playbook for dealing with COVID-19 outbreak at nursing homes. There were several

The Toronto Star

May 5, 2020 What Happened with long-term care homes and what comes next?

Ottawa Citizen

May 5, 2020 Study paints grim picture of Canada's care-home mortality rates

The Globe and Mail

May 4, 2020 Nova Scotia struggles to contain coronavirus outbreak ravaging nursing home

Cape Breton Post (Syndicated in "The Guardian")

May 4, 2020 Second World War vet among COVID-19 cases at Northwood nursing home

CTV News Network

May 3, 2020 Healthcare Workers becoming fearful

Toronto Sun (Syndicated in 65 various media print) May 3, 2020

Seniors still hardest hit by COVID-19 pandemic

The Star - (Syndicated in 2 variours media outlets) May 2, 2020 Private nursing home owners under pressure as COVID-19 exposes flaws in system

The Chronicle Herald

May 1, 2020 N.S. government delayed implementing federal COVID-19 guidelines for long-term care homes

The 2020 Network

April 2020 Supporting Seniors through COVID-19

CBC Radio - The Current

April 30, 2020 Mental health of front-line workers

CBC The National

April 29, 2020 <u>A day with a geriatrician during the COVID-19 pandemic</u>

CTV News Network

April 29, 2020 CTV News Special - Drs Sinha and Shapiro Discuss COVID-19

The Toronto Star

April 29, 2020 <u>The trauma will change you forever. COVID-19 has exposed problems in long-term care. Will the</u> response fix it?

The Globe and Mail

April 28, 2020 Long-term care home staff, residents struggling with restrictive COVID-19 policies

CTV News

April 26, 2020 Ont. Frontline Workers Receive Raise

CBC News – Politics

April 25, 2020 Can this pandemic be the crisis that finally forces us to fix long-term care?

The Toronto Star

April 24, 2020 Intubate or give palliative care? ER doctors wish they knew what residents and families wanted

CBC News

April 23, 2020 From 'risk is low' to calling in the army: 2 months of Ontario's COVID-19 response in long-term care

The Toronto Star

April 22, 2020 <u>They're like tinder boxes': Study looks at protecting personal support worker in long-term care</u> <u>homes</u>

CTV News Network

April 22, 2020 Ontario Requests Help from Canadian Forces

Huffington Post

April 21, 2020 Canadians Share why they did or didn't remove a parent from a care homes

The Toronto Star

April 21, 2020 Fighting the 'other' pandemic: Curbing COVID-19 in care homes, shelters and jails

CBC News Windsor

April 21, 2020 CBC Windsor April 21 COVID-19 update: 4 more people have died

Global National News

April 20, 2020 Coronavirus outbreak: Was the COVID-19 crisis in Canada's care homes preventable?

CBC News Windsor

April 20, 2020 What it's like moving a loved one to a COVID-19 field hospital

The Medical Post

April 19, 2020 Long-term care becomes ground zero in the COVID-19 pandemic

Ottawa Matters

April 17, 2020 Ottawa researchers helping retirement, long-term care residents decide if they should leave during COVID-19

QP Briefing

April 17, 2020 How Ontario's plan to stop nursing home staff from spreading COVID-19 falls short of B.C.'s

The Toronto Star

April 16, 2020 It will take nearly a week to roll out Ontario's emergency order for curbing COVID-19 deaths in seniors homes. Doctors say that's risky

CBC News Network

April 16, 2020 Protecting seniors from COVID-19

The Agenda with Steven Paikin | TVO

April 16, 2020 Fighting COVID-19 in Long-Term Care

CFRA Ottawa Radio – Creative Review

April 16, 2020 Decision Aids

Global News Radio

April 15, 2020 Families face a decision on whether to take their loved ones out of long term care

QP Briefing

April 15, 2020 Ford vows to overhaul long-term care after the pandemic to fix 'cranks and holes' in the system

The Toronto Star

April 15, 2020 Everyone knew this could happen:' The deadly spread of COVID-19 through Canada's seniors' homes

The Toronto Star

April 14, 2020 We don't have a COVID-19 epidemic: deaths in long-term care show we have two

CBC The National

April 14, 2020 Long-term care homes ground zero for COVID-19

CBC News

April 14, 2020 Advocates wonder why long-term care COVID warnings were ignored

CTV News Network

April 14, 2020

25 Deaths at Toronto Nursing home - Eatonville Care

CBC News Network April 12, 2020

Coronavirus: What's happening in Canada and the world on Sunday

Global National News

April 12, 2020 Quebec coroner investigates Montreal care home deaths

Santis Health Podcast

April 11, 2020 Episode 3 - Dr. Samir Sinha on Seniors and COVID-19

CBC Radio - Cross Country Checkup

April 11, 2020 I've lived a good life': Some seniors say they'll refuse ventilator if they get COVID-19

CBC Radio - Cross Country Checkup

April 11, 2020 Cross Country Checkup - COVID-19 Q&A

CBC News - Calgary

April 9, 2020 Nurses allege lack of cleaning and isolation contributed to deadly COVID-19 outbreak at Calgary care home

CTV Television- Your Morning

April 9, 2020 Should you consider removing loved ones from nursing homes?

CTV News Network

April 9, 2020 What to consider before removing a loved one from long-term care

The National Post

April 8, 2020 Limit the number of nursing and retirement homes staff can work in, RNAO urges

Global National News

April 7, 2020 Coronavirus: Supporting seniors hardest hit by the COVID-19 pandemic

CBC Radio – Ontario Today

April 7, 2020 What is happening in Ontario's long-term care homes?

Global National News

April 7, 2020 What to know before removing loved ones from nursing homes amid COVID-19

Reader's Digest

April 7, 2020 Do these 4 things for your parents during the Coronavirus outbreak

The Toronto Star April 6. 2020

Families struggle with 'difficult decision' whether to remove loved ones from long-term care homes amid pandemic

CBC News Network

April 5, 2020 We've already lost a number of battles': Geriatrician on COVID-19

CTV News Network

April 5, 2020 <u>CORONAVIRUS</u> "Never felt this level of stress": Geriatric doctor on the virus' spread, treating <u>COVID-19</u>

CTV News Network

April 5, 2020 24 deaths tied to Ontario nursing home

CBC Radio – Fresh Air

April 4, 2020 COVID-19 related deaths in long-term care

Global News

April 4, 2020 Canada's nursing homes worry coronavirus outbreak will mean residents 'dying alone'

CBC News – White Coat, Black Art

April 4, 2020 How to help seniors get through the COVID-19 pandemic

The Globe and Mail

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ACTIVE PROFESSIONAL AFFILIATIONS

Fellow, American Geriatrics Society American College of Physicians American Medical Directors Association Canadian Geriatrics Society Canadian Medical Association Ontario Medical Association Fellow, Royal College of Physicians & Surgeons of Canada (Internal Medicine and Geriatrics)

SAMIR K. SINHA (FULL BIO)

Dr. Samir K. Sinha MD, DPhil, FRCPC, AGSF

Dr. Samir Sinha is a passionate and respected advocate for the needs of older adults. Dr. Sinha currently serves as the Director of Geriatrics of the Sinai Health System and the University Health Network in Toronto, the Peter and Shelagh Godsoe Chair in Geriatrics at Mount Sinai Hospital, and the Director of Health Policy Research at the National Institute on Ageing at Toronto Metropolitan University. He is also a Professor in the Departments of Medicine, Family and Community Medicine, and the Institute of Health Policy, Management and Evaluation at the University of Toronto and an Adjunct Professor of Medicine at the Johns Hopkins University School of Medicine.

A Rhodes Scholar, after completing his undergraduate medical studies at the University of Western Ontario, he obtained a Masters in Medical History and a Doctorate in Sociology at the University of Oxford's Institute of Ageing. He has pursued his postgraduate training in Internal Medicine at the University of Toronto and in Geriatrics at the Johns Hopkins University School of Medicine.

Dr. Sinha's breadth of international training and expertise in health policy and the delivery of services related to the care of the elderly have made him a highly regarded expert in the care of older adults. In 2012 he was appointed by the Government of Ontario to serve as the expert lead of Ontario's Seniors Strategy and he is now working on the development of a National Seniors Strategy. In 2014, Canada's Maclean's Magazine proclaimed him to be one of Canada's 50 most influential people and its most compelling voice for the elderly. In 2021, Canada's Medical Post Magazine proclaimed him to be Canada's 3rd most important doctor. In 2021, Dr. Sinha was appointed to serve as a member of the Government of Canada's new National Seniors Council, and also recently led the development of Canada's new National Long-Term Care Servces Standard.

Beyond Canada, Dr. Sinha is a Fellow of the American Geriatrics Society and a member of the American Red Cross Scientific Advisory Council. Dr. Sinha has further consulted and advised hospitals and health authorities in Britain, China, Iceland, Singapore, St. Kitts and Nevis, Taiwan and the United States on the implementation and administration of unique, integrated and innovative models of geriatric care that reduce disease burden, improve access and capacity and ultimately promote health.

SAMIR K. SINHA (SHORT BIO)



Dr. Samir K. Sinha MD, DPhil, FRCPC, AGSF

Dr. Samir Sinha is the Director of Geriatrics at Sinai Health System and the University Health Network in Toronto and a Professor of Medicine at the University of Toronto and the Director of Health Policy Research at Toronto Metropolitan University's National Institute on Ageing.

A Rhodes Scholar, Samir is a highly regarded clinician and international expert in the care of older adults. In 2021, he was appointed to serve as a member of the Government of Canada's National Seniors Council in 2021, and also recently led the development of Canada's new National Long-Term Care Services Standard.

This is **Exhibit "B"** referred to in the Affidavit of **Dr. Samir Sinha**, sworn this 21 day of March, 2023, in accordance with O. Reg 431/20, Administering Oath or Declaration Remotely.

A Commissioner for taking Affidavits etc.(*or as may be*) (pursuant to O. Reg 431/20)

Amanda Marie O'Brien, a Commissioner etc. Province of Ontario, for Goldblatt Partners LLP, Barristers & Solicitors Expires November 15, 2024

Alternate Level of Care

Provincial Monthly Alternate Level of Care Performance Summary

Provincial and Sub-Region Level

Jan 2023

Prepared by: Health System Performance and Support, Ontario Health

Notes:

1. Please refer to the ALC Rate Report Methodology document for details on the ALC Rate indicator presented in this report.

2. Please refer to the ALC_Data Quality Notes_202301 document for data quality notes pertaining to ALC information found in this report.

3. Wait times are not displayed when categories have no volume. Therefore, "NV" will be shown when presented in tabular form. In the graphical form, the lines are connected when the data is not NV for at least two consecutive months. Wait times are not displayed when categories have volume is below 10 cases. Therefore, "LV" will be shown when presented in tabular form. In the graphical form, the lines are connected when the data is not LV for at least two consecutive consecutive months.

4. If there is a tie in volume by discharge destination or specialized needs & supports, a random selection will be made when identifying the most frequent (i.e. "Top four") in the reporting month.

5. As of June 2015, TBD is no longer a valid discharge destination and is no longer shown in the report (exception: page 3). The number of open cases at the end of each month is equal to the sum of all discharge destination (including TBD). 6. NV: Not Applicable; NS: Not Required to Report; RI: Reporting Issue

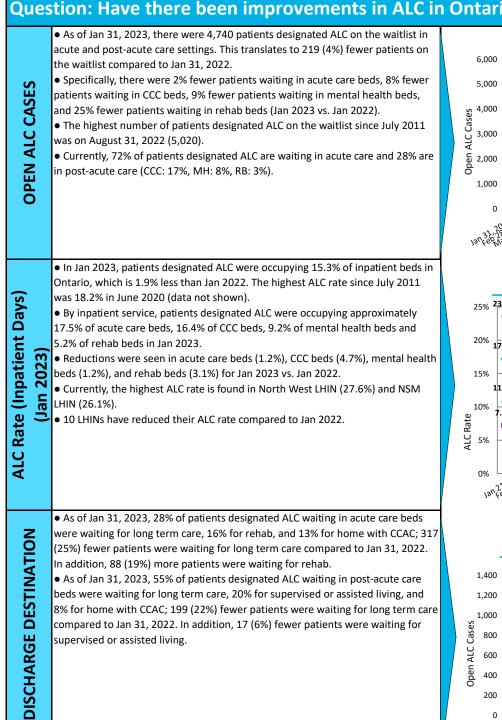
Interpretation Note: During the data stabilization period, patients designated ALC and transferred to Reactivated Care Centre (RCC) sites under Humber River Hospital, North York General Hospital, Southlake, Markham Stouffville, Mackenzie Health, Sunnybrook Hospital, St Joseph's Health Center Toronto, Trillium Health Partner, and William Osler Health System will be reported separately from regularly monthly performance reports. Therefore, the figures presented herein does not include the patient population designated ALC at RCC sites. During the data stabilization period, patients designated ALC and transferred to Alternate Health Facilities (AHFs) under Queensway Carleton Hospital, Peterborough Regional Health Centre are also excluded from the data and figures presented herein this report.



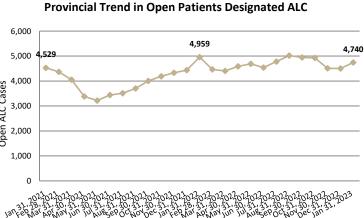
This data is provided by Ontario Health (OH) for capacity planning and performance management. The data is not to be distributed without express permission from OH. Please do not use this information, either alone or with other information to identify an individual. This includes attempting to decrypt information that is encrypted, attempting to identify an individual based on encrypted information and attempting to identify an individual based on prior knowledge.

Question: Have there been improvements in ALC in Ontario since last year?

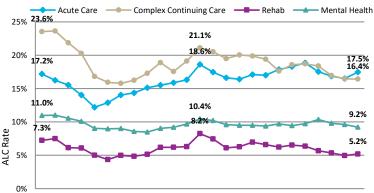
Access to Care

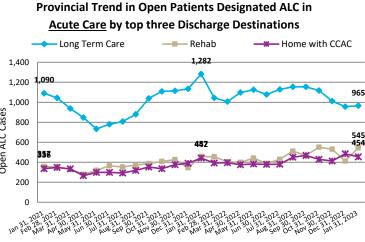


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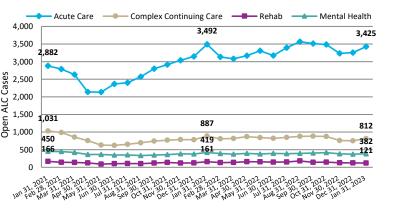


Provincial Trend in ALC Rate by Inpatient Service





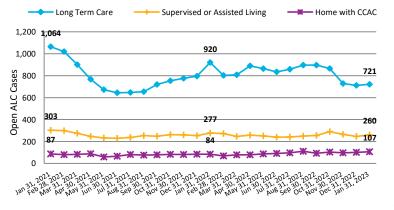
Provincial Trend in Open Patients Designated ALC by Inpatient Service



LHIN ALC Rate - Jan 2023 vs. Jan 2022

		Jan 20)22			Jan 20	23		
Province/Sub- Region	Total ALC Days	Contr. to Prov. ALC Rate (17.2%)	Total Inpatient Days	ALC Rate	Total ALC Days	Contr. to Prov. ALC Rate (15.3%)	Total Inpatient Days	ALC Rate	Change in ALC Rate
Province	151,112		879,887	17.2%	143,588		938,835	15.3%	-1.9%
Erie-St.Clair	4,653	0.5%	38,018	12.2%	4,021	0.4%	41,489	9.7%	-2.5%
South West	11,554	1.3%	68,771	16.8%	9,997	1.1%	72,757	13.7%	-3.1%
ww	8,794	1.0%	44,989	19.5%	8,808	0.9%	44,108	20.0%	0.4%
HNHB	15,388	1.7%	107,271	14.3%	15,410	1.6%	111,456	13.8%	-0.5%
Central West	2,437	0.3%	26,497	9.2%	3,133	0.3%	29,035	10.8%	1.6%
МН	5,479	0.6%	57,462	9.5%	6,905	0.7%	62,715	11.0%	1.5%
Toronto Central	21,152	2.4%	174,640	12.1%	18,460	2.0%	181,399	10.2%	-1.9%
Central	8,359	1.0%	61,976	13.5%	7,765	0.8%	69,376	11.2%	-2.3%
Central East	14,958	1.7%	73,093	20.5%	17,011	1.8%	83,035	20.5%	0.0%
South East	8,023	0.9%	38,408	20.9%	7,234	0.8%	42,958	16.8%	-4.0%
Champlain	20,478	2.3%	91,503	22.4%	18,454	2.0%	96,223	19.2%	-3.2%
NSM	8,625	1.0%	32,782	26.3%	8,797	0.9%	33,756	26.1%	-0.2%
North East	11,317	1.3%	38,566	29.3%	9,918	1.1%	42,691	23.2%	-6.1%
North West	9,895	1.1%	25,911	38.2%	7,675	0.8%	27,837	27.6%	-10.6%

Provincial Trend in Open Patients Designated ALC in Post-Acute Care by top three Discharge Destinations



Question: What are the current patients designated ALC waiting for?

Access to Care

As of Jan 31, 2023	LTC	Rehab	ссс	Home w/ CCAC	Home w/ Comm. Services	Home w/o Support	SAL	Conv. Care	МН	Palliative	Unknown	TBD
Cumulative Acute Care ALC Days	69,955	8,765	13,964	17,424	9,024	3,103	14,270	1,635	1,607	2,370	17,115	974
% Cum. Acute Care ALC Days	44%	5%	9%	11%	6%	2%	9%	1%	1%	1%	11%	0.6%
Cumulative Post-Acute Care ALC Days	99,561	477	5,772	6,225	7,400	891	100,766	242	41	579	20,198	1,354
% Cum. Post-Acute ALC Days	41%	0.2%	2%	3%	3%	0.4%	41%	0.1%	0.0%	0.2%	8%	0.6%

• As of Jan 31, 2023, there were 4,740 patients designated ALC on the waitlist. These patients have accumulated 403,712 ALC days. This translates to 53,020 fewer ALC days (12%) compared to Jan 31, 2022.

• Specifically, 160,206 (40%, 3,425 patients) ALC days were spent waiting in acute care and 243,506 (60%, 1,315 patients) ALC days were spent waiting in post-acute care.

• In acute care, 44% of total ALC days were spent waiting for long term care, 11% for home with CCAC and 11% for unknown.

• In post-acute care, 41% of total ALC days were spent waiting for supervised or assisted living, 41% for long term care and 8% for unknown.

• In Jan 2023, Toronto Central had contributed the highest % of provincial total ALC days (21%), followed by Champlain (16%) and Central East (11%).

• By LHIN, Toronto Central had the highest number of patients designated ALC on the waitlist, followed by Champlain. Comparing Jan 2023 vs. Jan 2022, there were 58 (25%) more patients on the waitlist for NSM, and 69 (22%) fewer patients on the waitlist for North West (data not shown).

Province/Sub-Region Snapshot: %Cumulative ALC Days of Open Patients Designated ALC by Discharge Destination - Jan 2023

		Open	Cases		% of Province/Sub-Region Cumulative ALC Days											
Province/Sub-Region	Volume (Jan 2023)	%Change (Jan 2023 vs. Jan 2022)	Cumulative ALC Days (Jan 2023)	% of Prov. Cumulative ALC Days	Long Term Care	Rehab	Complex Continuing Care	Home with CCAC	Home with Comm. Services	Home without Support	Supervised or Assisted Living	Convalesce nt Care	Mental Health	Palliative Care	Unknown	TBD
Province	4,740	-4%	403,712		42%	2%	5%	6%	4%	1%	28%	0.5%	0.4%	0.7%	9%	0.6%
Erie-St.Clair	139	-5%	5,030	1%	27%	2%	12%	3%	24%	2%	30%	0%	0%	0.8%	0.4%	0%
South West	358	-4%	19,102	5%	42%	2%	2%	3%	5%	0.6%	20%	0.7%	0.0%	0.9%	24%	0.9%
Waterloo Wellington	289	-3%	10,150	3%	28%	10%	3%	11%	5%	2%	23%	7%	3%	2%	6%	1%
HNHB	498	-7%	27,677	7%	38%	1%	10%	11%	3%	3%	26%	0.5%	4%	1%	2%	0.1%
Central West	102	19%	2,835	0.7%	1%	15%	15%	6%	60%	0%	3%	0%	0%	0%	0%	0.1%
Mississauga Halton	197	17%	9,085	2%	42%	4%	6%	35%	3%	0.9%	5%	0.6%	0%	0.3%	2%	0.1%
Toronto Central	664	-3%	85,264	21%	32%	3%	8%	3%	2%	0.3%	35%	0.1%	0.1%	0.1%	16%	0.1%
Central	230	-22%	9,943	2%	37%	6%	30%	2%	6%	5%	9%	0.2%	0.2%	1%	3%	1%
Central East	584	20%	45,560	11%	51%	3%	4%	4%	7%	0.4%	23%	0.6%	0.1%	1%	4%	2%
South East	248	-1%	21,839	5%	65%	3%	2%	1%	3%	0%	16%	0%	0%	0.2%	9%	2%
Champlain	588	-15%	63,297	16%	56%	1%	1%	3%	3%	0.3%	23%	0.2%	0%	0.3%	10%	0.3%
NSM	294	25%	28,286	7%	27%	2%	0.4%	3%	2%	3%	57%	1%	0.1%	1%	2%	0.7%
North East	306	-22%	34,588	9%	30%	0.5%	2%	9%	2%	1%	51%	0.2%	0.2%	1%	3%	0.4%
North West	243	-22%	41,056	10%	51%	1%	3%	10%	4%	0.3%	16%	0%	0%	1%	13%	0.2%

Cumulative ALC Days Contributor - Top 3 Discharge Destination (excl. TBD)

2nd

1st

3rd

 In Jan 2023, NSM LHIN (33.7%), North West LHIN (30.6%), and North East LHIN (29.6%) had the highest % of patients designated ALC occupying acute care beds.

• For post-acute care, North West LHIN (22.0%), Central East LHIN (17.9%), and Champlain LHIN (13.3%) had the highest % of beds being occupied.

• NSM had the highest % of acute care beds occupied by patients designated ALC (33.7%), followed by North West (30.6%).

• Central East had the highest % of CCC beds occupied by patients designated ALC (37.2%), followed by North West (30.0%).

• South East had the highest % of mental health beds occupied by patients designated ALC (15.6%), followed by NSM (14.2%).

• Waterloo Wellington had the highest % of rehab beds occupied by patients designated ALC (15.8%), followed by South East (10.1%).

ALC Rate by Acute and Post-Acute Care - Jan 2023

	ACUT (Province:	=	POST AC (Province:	
Rank	Sub-Region	ALC Rate	Sub-Region	ALC Rate
1	NSM	33.7%	North West	22.0%
2	North West	30.6%	Central East	17.9%
3	North East	29.6%	Champlain	13.3%
4	WW	24.6%	NSM	13.1%
5	Champlain	22.3%	South East	12.8%
6	Central East	21.8%	ww	10.7%
7	South East	18.8%	South West	10.6%
8	HNHB	15.7%	Erie-St.Clair	10.5%
9	South West	15.2%	North East	10.5%
10	Central West	12.8%	HNHB	10.5%
11	Central	12.2%	Toronto Centr	9.3%
12	МН	11.7%	МН	9.1%
13	Toronto Centra	11.0%	Central	4.8%
14	Erie-St.Clair	9.2%	Central West	2.0%

ALC Rate by	v Province/Sub-Reg	zion and Innatient	Service - Jan 2023
ALC NOLE D	y i i ovinice/ Jub-neg	sion and inpatient	Jervice - Jan 2023

				Post-A	cute	
Province/Sub-Regior	All	Acute	All Post- Acute	Complex Continuing Care	Mental Health	Rehab
Province	15.3%	17.5%	11.3%	16.4%	9.2%	5.2%
Erie-St.Clair	9.7%	9.2%	10.5%	21.6%	0.7%	4.0%
South West	13.7%	15.2%	10.6%	16.8%	8.5%	8.7%
Waterloo Wellington	20.0%	24.6%	10.7%	26.8%	5.0%	15.8%
HNHB	13.8%	15.7%	10.5%	15.6%	7.3%	2.5%
Central West	10.8%	12.8%	2.0%	3.9%	0.0%	2.9%
Mississauga Halton	11.0%	11.7%	9.1%	14.7%	8.1%	0.9%
Toronto Central	10.2%	11.0%	9.3%	10.5%	11.2%	5.2%
Central	11.2%	12.2%	4.8%	6.1%	5.2%	0.6%
Central East	20.5%	21.8%	17.9%	37.2%	11.7%	6.4%
South East	16.8%	18.8%	12.8%	11.6%	15.6%	10.1%
Champlain	19.2%	22.3%	13.3%	25.7%	6.8%	2.6%
NSM	26.1%	33.7%	13.1%	7.8%	14.2%	5.9%
North East	23.2%	29.6%	10.5%	8.4%	13.0%	7.9%
North West	27.6%	30.6%	22.0%	30.0%	10.4%	9.9%

As of Jan 31, 2023	LTC	Rehab	ссс	Home w/ CCAC	Home w/ Comm. Services	Home w/o Support	SAL	Conv. Care	МН	Palliative	Unknowr
6 of Acute Care Patients Designated ALC by Discharge Destination	28%	16%	10%	13%	7%	2%	11%	2%	0.6%	3%	7%
of Post-Acute Care Patients Designated ALC by ischarge Destination	55%	1%	0.5%	8%	4%	1%	20%	1%	0.1%	0.5%	8%
 As of Jan 31, 2023, there were 3,425 patients of beds. Of these patients, 28% were waiting for lohome with CCAC and 11% for supervised or assisted with CCAC and 11% for supervised or assisted function of Unknown. Currently, the longest median wait time is for lodays; 90th percentile wait time of 172 days). The for mental health (196 days), though only 1% are The current median wait time for other comm rehab, 12 days for home with CCAC and 14 days not shown). 	ng term care, 16 sted living. e care beds have ong term care (n e longest wait at e waiting for me on discharge des	% for rehab, 13% for a discharge destina nedian wait time of the 90th percentile ntal health. tinations is 6 days	or ation f 33 e is for	Volume of Open Pa by top four Discha Long Term Care Rehab Home with CCAC Supervised or Assisted Living	rge Destinations -		023 → All Acute C → Home with 350 30299 250 200 176 150 10%97 73 50 29 0 201 othors	pen Cases	by top four Dis	Rehab	ons
 As of Jan 31, 2023, there were 1,315 patients of care beds. Of these patients, 55% were waiting fassisted living, 8% for home with CCAC and 8% fer 8% of patients designated ALC waiting in post-destination of Unknown. Currently, the longest median wait time is for set. 	or long term car or unknown. acute care beds	e, 20% for supervis have a discharge	ed or	Volume of <u>Open</u> Patie by top four Discha	-			te Open Cases 🔶 🔶		Discharge Destina	
 wait time of 125 days; 90th percentile wait time 90th percentile is for complex continuing care (3 for complex continuing care. The current median wait time for other comm long term care, 18 days for home with CCAC and 	of 1,061 days). T 8,084 days), thou on discharge des	The longest wait at gh only 0% are wai tinations is 47 days	the ost-Acute	Supervised or Assisted Living Home with CCAC	260 (20%) 77 (8%)		1,200 1, 90038 (s 600 600 600 600 600 600 600 600 600 600				
					6 (8%)		400 361 20035			* * * * * * *	*****

Question: What are the current patients designated ALC waiting for? (Continued)

Home w/ CCAC Home w/ Comm. Home w/o As of Jan 31, 2023 DD: LTC Rehab CCC SAL Conv. Care MH Palliative Unknown Services Support DD = MADD 93% 96% 86% 81% 78% 71% 85% 90% 95% 96% 53% % of Acute Care Patients Designated ALC DD ≠ MADD 7% 4% 14% 19% 22% 29% 15% 10% 5% 4% 47% 96% 88% 68% 93% 100% DD = MADD 100% 70% 80% 89% 100% 41% % of Post-Acute Care Patients **Designated ALC** DD ≠ MADD 4% 12% 0% 32% 30% 20% 11% 7% 0% 0% 59%

• Of the 3,425 patients designated ALC waiting in acute care beds as of Jan 31, 2023, 86% were waiting for their most appropriate discharge destination (MADD).

• For the four most frequent discharge destinations that patients designated ALC were waiting for in acute care, 93% of patients waiting for long term care, 96% of patients waiting for rehab, 81% of patients waiting for home with CCAC and 85% of patients waiting for supervised or assisted living were appropriately placed (DD = MADD).

• The median wait time for patients designated ALC waiting in acute care who are appropriately placed is 14 days and 90th percentile wait time is 92 days. The median wait time for patients designated ALC waiting in acute care who are not appropriately placed is 17 days and 90th percentile wait time is 131 days.

• At the LHIN level, 55% - 96% of patients waiting in acute care are appropriately placed. North East, Mississauga Halton and South East (96%) have the highest proportion and Central West (55%) has the lowest proportion.

• For some patients designated ALC who are currently waiting for home with CCAC in acute care beds, it has been identified that their most appropriate discharge destination (MADD) is long term care. Of those 1153 patients designated ALC whose MADD is long term care, 52 (5%) of those patients are waiting for a discharge destination of home with CCAC (data not shown).

• Of the 1,315 patients designated ALC waiting in post-acute care beds as of Jan 31, 2023, 87% were waiting for their most appropriate discharge destination (MADD).

• For the four most frequent discharge destinations that patients designated ALC were waiting for in post-acute care, 96% of patients waiting for long term care, 89% of patients waiting for supervised or assisted living, 68% of patients waiting for home with CCAC and 41% of patients waiting for unknown were appropriately placed (DD = MADD).

• The median wait time for patients designated ALC waiting in post-acute care who are appropriately placed is 49 days and 90th percentile wait time is 483 days. The median wait time for patients designated ALC waiting in post-acute care who are not appropriately placed is 55 days and 90th percentile wait time is 519 days.

• At the LHIN level, 0% - 98% of patients waiting in post-acute care are appropriately placed. NSM (98%) has the highest proportion and Central West (0%) has the lowest proportion.

• For some patients designated ALC who are currently waiting for home with CCAC in post-acute care beds, it has been identified that their most appropriate discharge destination (MADD) is long term care. Of those 787 patients designated ALC whose MADD is long term care, 25 (3%) of those patients are waiting for a discharge destination of home with CCAC (data not shown).

Proportion of <u>Open</u> Patients Designated ALC in Acute Care by DD = MADD vs. DD ≠ MADD

DD = MADD DD ≠ MADD

0% 10% 20% 30% 40% 50% 60% 70% 80% 90%100%

1	Jan 31, 2021						
1	Feb 28, 2021	-					
	Mar 31, 2021	-					
	Apr 30, 2021	-					
	May 31, 2021	-					
		-					
	Jun 30, 2021	-					
	Jul 31, 2021	_					
	Aug 31, 2021				_		
	Sep 30, 2021						
	Oct 31, 2021	1					
	Nov 30, 2021	1					
	Dec 31, 2021	-					
	Jan 31, 2022	-					
	Feb 28, 2022	-					
	Mar 31, 2022	-					
		-					
	Apr 30, 2022	-					
	May 31, 2022	_	1				
	Jun 30, 2022	_					
	Jul 31, 2022						
	Aug 31, 2022						
	Sep 30, 2022	1					
	Oct 31, 2022	-					
	Nov 30, 2022	-					
	Dec 31, 2022	-					
		-					
	Jan 31, 2023	J _	1				1

Wait Time for <u>Open</u> Patients Designated ALC in Acute Care by DD = MADD vs. DD ≠ MADD - As of Jan 31, 2023

Province/Sub-Region		DD = MADD			DD ≠ MADD	
Province/Sub-Region	%	90th	Median	%	90th	Median
Province	86%	92	14	14%	131	17
Erie-St.Clair	74%	25	7	26%	39	11
South West	72%	49	10	28%	45	11
Waterloo Wellington	89%	64	11	11%	48	13
HNHB	75%	96	18	25%	167	22
Central West	55%	40	6	45%	137	13
Mississauga Halton	96%	67	15	4%	53	15
Toronto Central	93%	90	12	7%	77	18
Central	95%	89	11	5%	279	21
Central East	94%	75	14	6%	133	62
South East	96%	69	15	4%	302	13
Champlain	88%	106	19	12%	91	13
NSM	81%	112	20	19%	43	17
North East	96%	127	27	4%	197	6
North West	74%	313	27	26%	341	34

N/A: No patients designated ALC on the waitlist in acute care

Proportion of <u>Open</u> Patients Designated ALC in Post- Acute Care by DD = MADD vs. DD ≠ MADD

■ DD = MADD ■ DD \neq MADD

0% 10% 20% 30% 40% 50% 60% 70% 80% 90%100%

0	/0 IC	//0 20	J/0 J(//0 40	J/0 J(<i>)/0</i> U(//0 / (J/0 00	1/0 5	07010
	<u> </u>	<u> </u>		<u> </u>						+
Jan 31, 2021										1
Feb 28, 2021			1		1			1		1
Mar 31, 2021										
Apr 30, 2021			1					1		
May 31, 2021										
Jun 30, 2021										
Jul 31, 2021										-
Aug 31, 2021			1					1		-
Sep 30, 2021								-		
Oct 31, 2021										
Nov 30, 2021										
Dec 31, 2021										
Jan 31, 2022										
Feb 28, 2022			-		-			-		-
Mar 31, 2022 🗍					-			-		-
Apr 30, 2022										
May 31, 2022										-
Jun 30, 2022										
Jul 31, 2022										
Aug 31, 2022										
Sep 30, 2022										
Oct 31, 2022					1			1		
Nov 30, 2022										
Dec 31, 2022					I			I		1
Jan 31, 2023										1
3011 31, 2023	1					1				1

Wait Time for <u>Open</u> Patients Designated ALC in Post-Acute Care by DD = MADD vs. DD ≠ MADD - As of Jan 31, 2023

		DD = MADD			DD ≠ MADD	
Province/Sub-Region	%	90th	Median	%	90th	Median
Province	87%	483	49	13%	519	55
Erie-St.Clair	95%	102	12	5%	LV	LV
South West	92%	365	26	8%	573	47
Waterloo Wellington	88%	167	19	12%	71	13
HNHB	79%	247	46	21%	91	13
Central West	0%	NV	NV	100%	LV	LV
Mississauga Halton	92%	334	53	8%	LV	LV
Toronto Central	83%	585	57	17%	519	75
Central	92%	200	60	8%	LV	LV
Central East	97%	337	40	3%	427	13
South East	85%	386	49	15%	2,189	42
Champlain	73%	729	89	27%	623	97
NSM	98%	903	118	2%	LV	LV
North East	91%	1,041	56	9%	LV	LV
North West	92%	733	118	8%	LV	LV

DD = MADD vs. DD ≠ MADD - As of Jan 31, 2023 DD = MADD DD = MADD DD ≠ MADD % 90th Median % 90th M

NV: No patie	nts designated ALC on the	waitlist in post-acute care
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Access to Care

As of Jan 31, 2023	LTC	Rehab	ссс	Home w/ CCAC	Home w/ Comm. Services	Home w/o Support	SAL	Conv. Care	МН	Palliative	Unknown
6 of Acute Care Patients Designated ALC with SNS as Barrier by Discharge Destination	22%	15%	26%	23%	30%	16%	31%	20%	25%	17%	26%
of Post-Acute Care Patients Designated ALC with NS as a Barrier by Discharge Destination	29%	12%	50%	37%	51%	60%	59%	0%	0%	14%	38%
 Of the 3,425 patients waiting in acute care beds as of J: Specialized Needs and Supports (SNS), 30% reported SNS least one barrier (data not shown). By the top four discharge destinations, 22% of patients for long term care, 15% for rehab, 23% for home with CC living have reported at least one barrier. By the top four discharge destinations, the 90th percer designated ALC waiting in acute care beds with a barrier care (176 vs. 151), rehab (25 vs. 35), home with CCAC (72 (131 vs. 95) (data not shown). The median wait time for patients designated ALC wait discharge is 19 days, 15 days for ALC cases reporting neer reporting no SNS (data not shown). 	S as needs only designated ALC CAC and 31% for tile wait time (to discharge vs 1 vs. 66) and su ing in acute car	and 23% had reported C waiting in acute care of r supervised or assisted days) for patients c. needs only are: long t upervised or assisted liv re beds with a barrier to	erm Acute	Proportion of Open and top four D NO SNS REQUIRE	ischarge Destination	ions - As of Jan 31,	Xait Lime (Days)	Acute 0	Care by Specia		S as a Barrier
 Of the 1,315 patients waiting in post-acute care beds as Specialized Needs and Supports (SNS), 27% reported SNS least one barrier (data not shown). By the top four discharge destinations, 29% of patients beds for long term care, 59% for supervised or assisted lift for unknown have reported at least one barrier. By the top four discharge destinations, the 90th percert designated ALC waiting in post-acute care beds with a batterm care (428 vs. 481), supervised or assisted living (1,4 and unknown (524 vs. 685) (data not shown). The median wait time for patients designated ALC wait to discharge is 88 days, 50 days for ALC cases reporting memory of the shown). 	5 as needs only designated ALC ving, 37% for h ntile wait time (nrrier to dischar 89 vs. 515), hou ing in post-acut	and 37% had reported C waiting in post-acute some with CCAC and 38 days) for patients rge vs. needs only are: I me with CCAC (132 vs. te care beds with a barr	at care % Post-Acu 137)	Proportion of Ope by SNS and top for NO SNS REQUI NO % 90% 90% 29% 70% 60% 32% 40% 30% 20% 39%	ur Discharge Desti	Anations - As of Jan	31, 2023	Post-Acut No SNS Required	e Care by Spe	Open Patients De cialized Needs & S leed Only SNS	Supports as a Barrier 825 825 825 825 825 825 825 825 825 825

Long Term Care Supervised or Home with CCAC Unknown

Assisted Living

0% +

6

s of Jan 31, 2023	No Barrier	Bariatric	Behavioural	Development	Dialysis	Equip/Struct	Feeding	Infection	Mech. Vent	Meds/Labs	Mental Health	Neuro	Respiratory	Social	Woun
of Acute Care Patients Designated ALC ith SNS as a Barrier	77%	0.4%	5%	0.3%	0.4%	3%	0.5%	3%	0.1%	2%	2%	3%	0.8%	14%	0.8%
of Post-Acute Care Patients Designated LC with SNS as a Barrier	63%	0.5%	8%	2%	0.4%	3%	0.6%	1%	0.2%	1%	8%	4%	0.4%	24%	0.59
 Of the 3,425 patients waiting in acute care to Specialized Needs and Supports (SNS) as a barrie ontrol/isolation (3%) and neurological (3%) r Currently, the longest median wait time is for barrier (median wait time of 172 days; 90th p The median wait time for common SNS as a 15 days for infection control/isolation and 27 shown). 	rrier. ier were social (14% requirements. or patients with a de ercentile wait time barrier is 19 days fo	5), behavioural evelopment re of 389 days) (c or social, 27 da	(5%), infection quirement as a data not shown ays for behaviou). Jral, Acute Care I Co		en Patients De Barriers to Dise 118 (33 108 (3%	charge - As 85 (5%) %)		23	l Acute Open Cases fection Control/Iso	in Acute	Care by top - Social - Neurological	for <u>Open</u> Patie o four Barriers	to Discharg	e
 Of the 1,315 patients waiting in post-acute of specialized Needs and Supports (SNS) as a bare The most frequently reported SNS as a barri health (8%) and neurological (4%) requirement 	rrier. ier were social (24%			volui		Patients Desi Barriers to Disc	-		23	-	in Post-Acu	te Care by	for <u>Open</u> Patie top four Barrie	ers to Discha	arge
 Currently, the longest median wait time is for barrier (median wait time of 488 days; 90th per 	or patients with a de				Social			322 (24%)	1,800						
• The median wait time for common SNS as a behavioural, 188 days for mental health and 4 shown).				Post-Acute	ehavioural	107 (8%)		1,600 1,400 (s, 1,200 a) 1,0000 HI 8000 time 800 800 800 800						129
				Care	Mental Health	100 (8	1%)		100 € 100 € 100 € 100 € 100						
					-				200						

Question: Who are the current patients design	ated ALC? (Continue	d)		Access to Care
As of Jan 31, 2023	0 to 64 years old	65 to 74 years old	75 to 84 years old	85+ years old
% of Acute Care Patients Designated ALC by Age Group	17%	18%	31%	34%
% of Post-Acute Care Patients Designated ALC by Age Group	32%	18%	24%	26%
 Of the 3,425 patients designated ALC waiting in acute care beds as of Jan 31, 202 years of age or older (31% were 75-84 years old; 34% were 85+ years old). By age groups, the 90th percentile wait times (from longest to shortest) are 196 who are below the age of 65 years old, 106 days for patients who are 65-74 years patients who are 75-84 years old and 75 days for patients who are 85 years or old. By age groups, the median wait times (from longest to shortest) are 19 days for patients who are 65 years old, 17 days for patients who are 65-74 years old, 14 da who are 75-84 years old and 13 days for patients who are 85 years or older. The most common discharge destination for 0-64 year olds was rehab (23%). For groups, the most common discharge destination was long term care (27% for 65-7 and 31% for 85+). 	23, 65% were 75 days for patients old, 84 days for er. batients who are ys for patients - older age	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	Care % 300 250 241 20200 (sc 0) 15053 139 100 50 0	196
 Of the 1,315 patients designated ALC waiting in post-acute care beds as of Jan 32 were below the age of 75 years old (32% were 0-64 years old; 18% were 65-74 yea By age groups, the 90th percentile wait times (from longest to shortest) are 1,03 patients who are below the age of 65 years old, 411 days for patients who are 65-days for patients who are 75-84 years old and 210 days for patients who are 85 ye By age groups, the median wait times (from longest to shortest) are 120 days for are below the age of 65 years old, 46 days for patients who are 75-84 years old, 42 days for patients who are 65-74 years old and 22 days for patients who are 85 years or old. The most common discharge destination for 0-64 year olds was supervised or as (42%). For older age groups, the most common discharge destination was long ter 65-74, 67% for 75-84 and 67% for 85+). 	L, 2023, 50% ars old). 4 days for 74 years old, 267 ars or older. 9 patients who 8 days for er. sisted living Jan 31, 202 Feb 28, 202 May 31, 202 Jun 30, 202 Jun 30, 202 Feb 28, 202 May 31, 202 Feb 28, 202 Feb 28, 202 May 31, 202 Feb 28, 202 Feb			

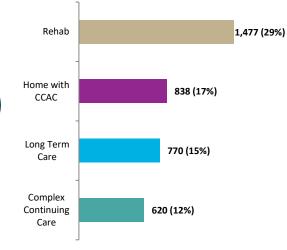
of Jan 31, 2023	LTC	Rehab	ссс	Home w/ CCAC	ome w/ Comm. Services	Home w/o Support	SAL	Conv. Care	МН	Palliative	ι	Jnknow
of long wait Acute Care Patients Designated ALC Discharge Destination	47%	5%	9%	10%	5%	1%	10%	2%	0.9%	2%		7%
of long wait Post-Acute Care Patients Designated C by Discharge Destination	53%	0.8%	0.5%	6%	5%	1%	24%	0.1%	0.1%	0.3%		9%
Of the 3,425 patients designated ALC in acute care be ad been waiting 30 days or longer. There were 55 (2%			ses	portion of Long Waite ALC in	rs out of all <u>Ope</u> Acute Care - Tre		ated	Age and SNS	Breakdown for Long Jan 31, 2		Acute C	are - As
ear. The majority (47%) of long waiters in acute care were		-		Cases < 3	0 Days 📃 Long Wa	it Cases			Specialized Needs &	& Supports	No. of	% of Acu Open AL
llowed by home with CCAC (10%).				0% 10% 20	<u>1% 30% 40% 50% 60</u>	% 70% 80% 90% 100%			as a Barrier		Cases	Cases
57% of long waiters in acute care had at least 1 SNS r	equirement (nee	eds and/or harriers) T	he 📘				0 -64	4 65-74	Social		179	16%
ost frequent SNS requirements as a barrier for long w				Jan 31, 2021 Feb 28, 2021 Mar 31, 2021 Apr 30, 2021 May 31, 2021			= 75-8		Behavioural		89	8%
havioural (8%), neurological (5%) and infection contr			′	Apr 30, 2021					Neurological	- 1	51	5%
he long waiters in acute care beds were typically old			(20%	May 31, 2021 Jun 30, 2021					Infection Control/Is Mental Health	olation	42 25	4%
	del, 30% wele / .	years of age of older	(30%	Way 31, 2021 Jun 30, 2021 Jul 31, 2021 Aug 31, 2021 Sep 30, 2021 Oct 31, 2021 Dec 31, 2021 Jan 31, 2021 Jan 31, 2021 Feb 28, 2022 Mar 31, 2022 Apr 30, 2022				231	Medications/Labs/T	herany	25	2% 2%
re 75-84 years old; 28% were 85+ years old).			Ö	Sep 30, 2021			311	21%	Equipment/Structur		17	2%
			e l	Nov 30, 2021			28%		Wound Care		12	1%
			P	Jan 31, 2022				229	Respiratory (exclude	es ventilation)	11	1%
				Feb 28, 2022 Mar 31, 2022			3	24 21%	Bariatric		10	0.9
				Apr 30, 2022 May 31, 2022 Jun 30, 2022			30		Feeding		7	0.6
				Jun 30, 2022					Development		7	0.6
				Jul 31, 2022 Aug 31, 2022					Dialysis		5	0.5
				Jul 31, 2022 Aug 31, 2022 Sep 30, 2022 Oct 31, 2022 Nov 30, 2022 Dec 31, 2022 Jan 31, 2023					Mechanical Ventilat	ion	3	0.39
Of the 1,315 patients designated ALC in post-acute ca			cases	portion of Long Waite ALC in Po	rs out of all <u>Ope</u> st-Acute Care -		ated	Age and SNS B	reakdown for Long V of Jan 31,			
d been waiting 30 days or longer. There were 185 (14									Specialized Needs &			% of Po
ar.	were waiting fo	r long term care. This	was	Cases < 3	0 Days 📃 Long Wa	it Cases					NO. OT	
r. he majority (53%) of long waiters in post-acute care owed by supervised or assisted living (24%).	-	-				it Cases % 70% 80% 90% 100%			as a Barrier		Cases	ALC Cas
r. he majority (53%) of long waiters in post-acute care owed by supervised or assisted living (24%).	-	-		0% 10% 20					as a Barrier Social		Cases	ALC Cas
r. he majority (53%) of long waiters in post-acute care owed by supervised or assisted living (24%). 1% of long waiters in post-acute care had at least 1	SNS requiremen	t (needs and/or barrie	rs).	0% 10% 20 Jan 31, 2021 Feb 28, 2021 Mar 31, 2021			0 -6		as a Barrier Social Behavioural		211 91	ALC Cas 27' 12'
r. he majority (53%) of long waiters in post-acute care owed by supervised or assisted living (24%). 1% of long waiters in post-acute care had at least 1 e most frequent SNS requirements as a barrier for lo	SNS requirement	t (needs and/or barrie st-acute care were so	rs).	0% 10% 20 Jan 31, 2021 Feb 28, 2021 Mar 31, 2021			■ 0-6 ■ 75-		as a Barrier Social Behavioural Mental Health		211 91 82	ALC Cas 279 129 119
r. he majority (53%) of long waiters in post-acute care owed by supervised or assisted living (24%). 1% of long waiters in post-acute care had at least 1 most frequent SNS requirements as a barrier for lo %), behavioural (12%), mental health (11%) and neu	SNS requirement ong waiters in po urological (4%) re	t (needs and/or barrie st-acute care were so equirements.	rs). cial Post-	0% 10% 20 Jan 31, 2021 Feb 28, 2021 Mar 31, 2021 Apr 30, 2021 May 31, 2021 Jun 30, 2021					as a Barrier Social Behavioural Mental Health Neurological		211 91	ALC Cas 279 129 119 49
r. he majority (53%) of long waiters in post-acute care owed by supervised or assisted living (24%). 1% of long waiters in post-acute care had at least 1 e most frequent SNS requirements as a barrier for lo %), behavioural (12%), mental health (11%) and neu he long waiters in post-acute care beds were typical	SNS requirement ong waiters in po urological (4%) re Ily younger; 58%	t (needs and/or barrie st-acute care were so equirements.	rs). cial Post-	0% 10% 20 Jan 31, 2021 Feb 28, 2021 Mar 31, 2021 Apr 30, 2021 Jun 30, 2021 Jun 31, 2021					as a Barrier Social Behavioural Mental Health Neurological Development		211 91 82 33	ALC Cas 279 129 119 49 39
r. he majority (53%) of long waiters in post-acute care owed by supervised or assisted living (24%). 1% of long waiters in post-acute care had at least 1 s most frequent SNS requirements as a barrier for lo %), behavioural (12%), mental health (11%) and neu he long waiters in post-acute care beds were typical	SNS requirement ong waiters in po urological (4%) re Ily younger; 58%	t (needs and/or barrie st-acute care were so equirements.	rs). cial Post	0% 10% 20 Jan 31, 2021 Feb 28, 2021 Apr 30, 2021 Jun 30, 2021 Jun 31, 2021 Jun 31, 2021 Jun 31, 2021 Sep 30, 2021				-84 = 85+	as a Barrier Social Behavioural Mental Health Neurological	al	211 91 82 33 22	ALC Cas 279 129 119 49 39 29
r. he majority (53%) of long waiters in post-acute care owed by supervised or assisted living (24%). 1% of long waiters in post-acute care had at least 1 e most frequent SNS requirements as a barrier for lo %), behavioural (12%), mental health (11%) and neu he long waiters in post-acute care beds were typical	SNS requirement ong waiters in po urological (4%) re Ily younger; 58%	t (needs and/or barrie st-acute care were so equirements.	rs). cial Post-	0% 10% 20 Jan 31, 2021 Feb 28, 2021 Mar 31, 2021 Apr 30, 2021 Jun 30, 2021 Jun 30, 2021 Jun 31, 2021 Sep 30, 2021 Oct 31, 2021 Nov 30, 2021 Oct 31, 2021 Nov 30, 2021			■ 75·	-84 = 85+	as a Barrier Social Behavioural Mental Health Neurological Development Equipment/Structur	al	211 91 82 33 22 16	ALC Cas 279 129 119 4% 3% 2% 1%
r. he majority (53%) of long waiters in post-acute care owed by supervised or assisted living (24%). 1% of long waiters in post-acute care had at least 1 s e most frequent SNS requirements as a barrier for lo %), behavioural (12%), mental health (11%) and neu he long waiters in post-acute care beds were typical	SNS requirement ong waiters in po urological (4%) re Ily younger; 58%	t (needs and/or barrie st-acute care were so equirements.	rs). cial Post-	0% 10% 20 Jan 31, 2021 Feb 28, 2021 Mar 31, 2021 Apr 30, 2021 Jun 30, 2021 Jul 31, 2021 Aug 31, 2021 Oct 31, 2021 Oct 31, 2021 Dec 31, 2021 Dec 31, 2021 Jan 31, 2022 Dec 31, 2021 Jan 31, 2022 Feb 80 Core			15	-84 8 5+	as a Barrier Social Behavioural Mental Health Neurological Development Equipment/Structur Infection Control/Isc	al	211 91 82 33 22 16 9	ALC Cas 279 129 119 4% 3% 2% 1% 1%
ar. The majority (53%) of long waiters in post-acute care lowed by supervised or assisted living (24%). '1% of long waiters in post-acute care had at least 1 s e most frequent SNS requirements as a barrier for lo '%), behavioural (12%), mental health (11%) and neu 'he long waiters in post-acute care beds were typical	SNS requirement ong waiters in po urological (4%) re Ily younger; 58%	t (needs and/or barrie st-acute care were so equirements.	rs). cial Post-	0% 10% 20 Jan 31, 2021 Feb 28, 2021 Mar 31, 2021 Apr 30, 2021 Jun 30, 2021 Jul 31, 2021 Aug 31, 2021 Oct 31, 2021 Oct 31, 2021 Dec 31, 2021 Dec 31, 2021 Jan 31, 2022 Dec 31, 2021 Jan 31, 2022 Feb 80 Core			15 19 177	-84 8 5+	as a Barrier Social Behavioural Mental Health Neurological Development Equipment/Structur Infection Control/Isc Medications/Labs/Ti	al blation herapy	211 91 82 33 22 16 9 9	Acute O ALC Cas 279 129 119 4% 3% 2% 1% 0.66 0.66
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ar. The majority (53%) of long waiters in post-acute care lowed by supervised or assisted living (24%). 21% of long waiters in post-acute care had at least 1 s e most frequent SNS requirements as a barrier for lo 2%), behavioural (12%), mental health (11%) and neu The long waiters in post-acute care beds were typical	SNS requirement ong waiters in po urological (4%) re Ily younger; 58%	t (needs and/or barrie st-acute care were so equirements.	rs). cial Post-	0% 10% 20 Jan 31, 2021 Feb 28, 2021 Mar 31, 2021 Apr 30, 2021 Jun 30, 2021 Jul 31, 2021 Aug 31, 2021 Oct 31, 2021 Oct 31, 2021 Dec 31, 2021 Dec 31, 2021 Jan 31, 2022 Dec 31, 2021 Jan 31, 2022 Feb 80 Core			15 19 177	-84 = 85+ 50 50 315 41%	as a Barrier Social Behavioural Mental Health Neurological Development Equipment/Structur Infection Control/Isc Medications/Labs/Ti Bariatric Respiratory (exclude Feeding Wound Care	al blation herapy	211 91 82 33 22 16 9 9 9 5 5 5 4 4	ALC Cas 279 129 119 4% 3% 2% 1% 0.69 0.69 0.55
d been waiting 30 days or longer. There were 185 (1- ar. The majority (53%) of long waiters in post-acute care lowed by supervised or assisted living (24%). 71% of long waiters in post-acute care had at least 1 s e most frequent SNS requirements as a barrier for lo 7%), behavioural (12%), mental health (11%) and neu The long waiters in post-acute care beds were typical ars old (41% were 0-64 years old; 17% were 65-74 ye	SNS requirement ong waiters in po urological (4%) re Ily younger; 58%	t (needs and/or barrie st-acute care were so equirements.	rs). cial Post-	0% 10% 20 Jan 31, 2021 Feb 28, 2021 Mar 31, 2021 Jun 30, 2021 Jun 30, 2021 Jun 30, 2021 Jun 30, 2021 Sep 30, 2021 Sep 30, 2021 Oct 31, 2021 Nov 30, 2021 Dec 31, 2022			15 19 177	84 85+ 315 41% 134	as a Barrier Social Behavioural Mental Health Neurological Development Equipment/Structur Infection Control/Isc Medications/Labs/Ti Bariatric Respiratory (exclude Feeding	al Jation herapy s ventilation	211 91 82 33 22 16 9 5 5 4	ALC Cas 279 129 119 4% 3% 2% 1% 0.66 0.66 0.55

Question: Where did discharged patients	designate	ed ALC go	o and how lo	ong did they	y wait?				Acc	ess to Care
Jan 2023	LTC	Rehab	ссс	Home w/ CCAC	Home w/ Comm. Services	Home w/o Support	SAL	Conv. Care	МН	Palliative
% of discharge Acute Care Patients Designated ALC by Discharge Destination	15%	29%	12%	17%	8%	2%	9%	2%	1%	4%
% of discharge Post-Acute Care Patients Designated ALC by Discharge Destination	62%	0.8%	3%	9%	8%	0.8%	14%	1%	0.2%	1%
• In Jan 2023, 5,031 patients designated ALC were discharged from acute patients, 29% were discharged to rehab, 17% to home with CCAC, 15% to to complex continuing care.	o long term care a		Volume of Patient: Care by top fo	s Designated ALC <u>L</u> ur Discharge Desti				it Time for Patient: Care by top four D	ischarge Destin	

• 20% of closed acute care patients designated ALC were discontinued, with the most common discontinuation reasons being change in medical status (7%) and unplanned repatriation (6%) (data not shown).

• The longest median wait time was for long term care (median wait time of 27 days; 90th percentile wait time of 82 days).

• The median wait time for acute care patients designated ALC discharged to other common discharge destinations was 5 days for rehab, 7 days for home with CCAC and 8 days for complex continuing care (data not shown).



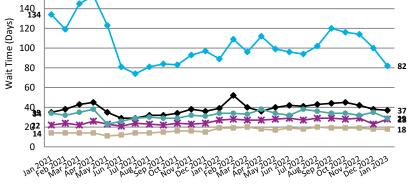
Volume of Patients Designated ALC Discharged from Post-Acute

Care by top four Discharge Destinations - Jan 2023

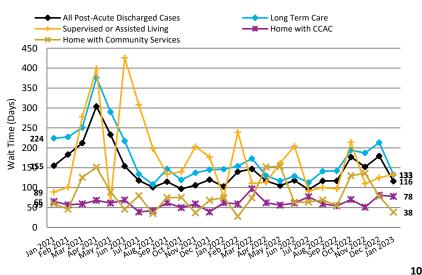
383 (62%)

cute

Long Term Care Complex Continuing Care



90th Percentile Wait Time for Patients Designated ALC <u>Discharged</u> from Post-Acute Care by top four Discharge Destinations



• In Jan 2023, 622 patients designated ALC were discharged from post-acute care beds. Of these patients, 62% were discharged to long term care, 14% to supervised or assisted living, 9% to home with CCAC and 8% to home with community services.

• 20% of closed post-acute care patients designated ALC were discontinued, with the most common discontinuation reasons being change in medical status (8%) and transfer to acute care (6%) (data not shown).

• The longest median wait time was for convalescent care (median wait time of 44 days; 90th percentile wait time of 63 days).

• The median wait time for post-acute care patients designated ALC discharged to other common discharge destinations was 30 days for long term care, 19 days for supervised or assisted living, 21 days for home with CCAC and 9 days for home with community services (data not shown).

Long Term Care
Supervised or
Assisted Living
Home with
CCAC
Home with
Community
Services
49 (8%)

ear-To-Date (YTD) - July 2011 to Jan 2023	LTC	Rehab	ccc	Home w/ CCAC	Home w/ Comm. Services	Home w/o Support	SAL	Conv.	Care	МН	Palliative
6 of discharge Acute Care Patients Designated ALC by Discharge Pestination	12%	31%	13%	19%	4%	3%	8%	49	6	0.7%	6%
6 of discharge Post-Acute Care Patients Designated ALC by Discharge Pestination	47%	3%	4%	15%	6%	2%	18%	5%	%	0.2%	1%
• From July 2011 to Jan 2023, 544,013 patients designated ALC were disc beds. Of these patients, 31% were discharged to rehab, 19% to home wit continuing care and 12% to long term care.	0			ents Designated AL op four Discharge I		-	me for Patie	-	ted ALC <u>Disch</u> Destination -		Acute Care b
 18% of closed acute care patients designated ALC were discontinued, w discontinuation reasons being change in medical status (7%) and death (6) 			Rehab		170,9		estination	YTD Volume	% of Discharged Cases	Median Wait Time (Days)	90th Percentil Wait Time (Day
• The longest median wait time was for long term care (median wait time	e of 32 days; 90th				(31%	%) Rehab		170,932	31%	5	15
percentile wait time of 140 days).			_			Home with CC	-	105,362	19%	6	26
• The median wait time for acute care patients designated ALC discharge	d to other commo	n 🗖				Complex Cont	0	68,099 63,122	13% 12%	7	28
discharge destinations was 5 days for rehab, 6 days for home with CCAC			Home with CCAC		105,362	Long Term Car Supervised or		44,324	8%	32 10	140 44
			Home with CCAC		(19%)	Palliative Care		32,157	6%	5	21
continuing care.						Convalescent		21,525	4%	10	27
		<u>a</u>	-			Home with Co	nmunity Services	19,429	4%	7	31
		6				Home without	Support	15,377	3%	4	20
			Complex Continuing Care	68,099	(13%)	Mental Health		3,686	0.7%	5	44
			- Long Term Care	63,122 (:	12%)						

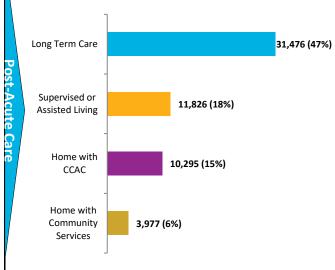
care beds. Of these patients, 47% were discharged to long term care, 18% to supervised or assisted living, 15% to home with CCAC and 6% to home with community services.

• 22% of closed post-acute care patients designated ALC were discontinued, with the most common discontinuation reasons being change in medical status (7%) and transfer to acute care (6%) (data not shown).

• The longest median wait time was for long term care (median wait time of 48 days; 90th percentile wait time of 249 days).

• The median wait time for post-acute care patients designated ALC discharged to other common discharge destinations was 21 days for supervised or assisted living, 14 days for home with CCAC and 14 days for home with community services.

Post-Acute Care by top four Discharge Destinations - YTD



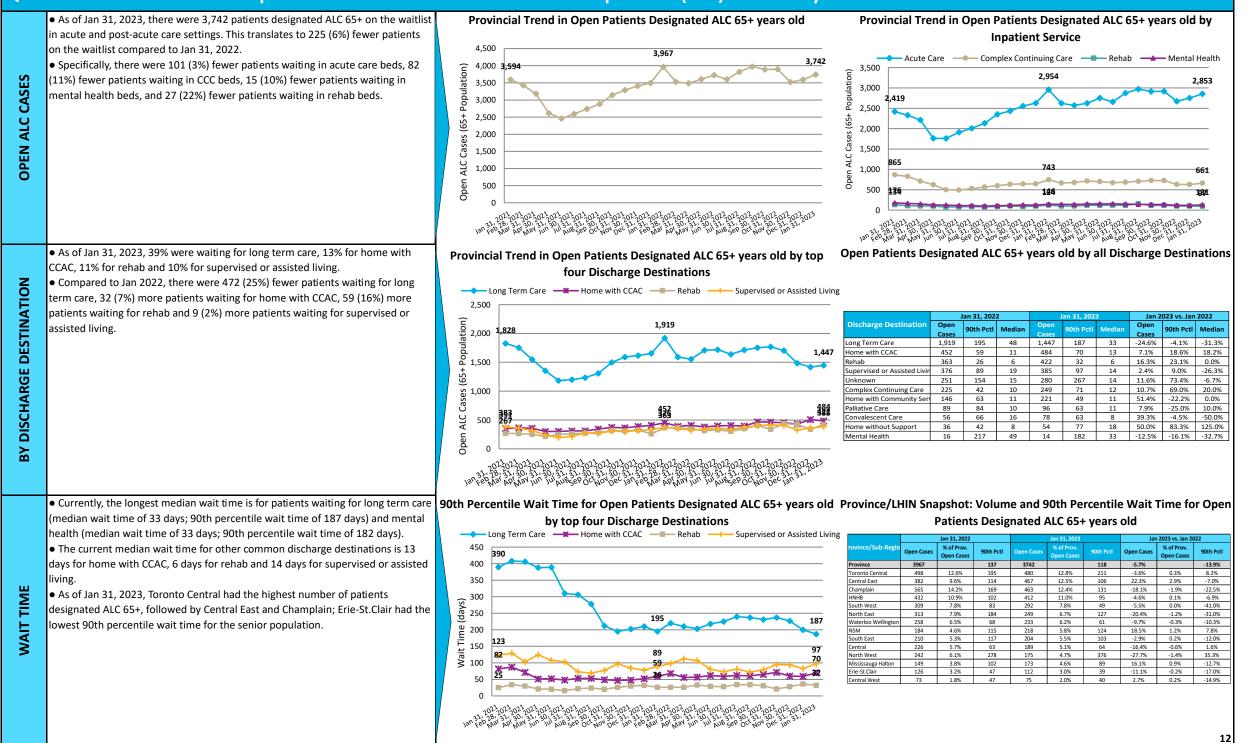
by Discharge Destination - YTD

Discharge Destination	YTD Volume	% of Discharged Cases	Median Wait Time (Days)	90th Percentile Wait Time (Days)
Long Term Care	31,476	47%	48	249
Supervised or Assisted Living	11,826	18%	21	147
Home with CCAC	10,295	15%	14	64
Home with Community Services	3,977	6%	14	77
Convalescent Care	3,093	5%	12	33
Complex Continuing Care	2,636	4%	10	53
Rehab	1,722	3%	7	42
Home without Support	1,253	2%	12	70
Palliative Care	708	1%	11	65
Mental Health	104	0.2%	23	241

11

Question: Have there been improvements in ALC within the Seniors Population (65+) since last year?

Access to Care



This is **Exhibit "C"** referred to in the Affidavit of **Dr. Samir Sinha**, sworn this 21 day of March, 2023, in accordance with O. Reg 431/20, Administering Oath or Declaration Remotely.

A Commissioner for taking Affidavits etc.(*or as may be*) (pursuant to O. Reg 431/20)

Amanda Marie O'Brien, a Commissioner etc. Province of Ontario, for Goldblatt Partners LLP, Barristers & Solicitors Expires November 15, 2024



2021 Report on Compliance with Long-Term Care Legislation As reflected in Inspections of Homes.

For many years Concerned Friends have been reporting on the inspections within the 627 long-term care facilities located across Ontario. Inspections are conducted by the Ministry of Long-Term Care and all of the reports are made available for public access when you search for an individual <u>home</u>. Our team of volunteer reviewers are tasked with assessing each inspection report and have compiled the following data for 2021.

Compliance Procedures: When a Long-Term Care home inspector visits a home to conduct an inspection, relevant Inspection Protocols are used to determine if the home is compliant or non-compliant with Long-Term Care legislation and regulations.

If the home is non-compliant the inspector issues a Written Notice (WN). The inspector can also issue a Voluntary Plan of Correction (VPC) for the home to work on internally. Or the inspector may make a Compliance Order (CO) with which the home is required to comply. Follow up inspections are conducted when Compliance Orders are issued to ensure that the home has corrected the non-compliance(s) identified in the Orders in a previous inspection.

In the most serious cases, the inspector can make a Director's Referral (DR) which may result in a Director's Order (DO). The inspector or the Director can also issue a Work Order (WO). The Director may issue Order for Mandatory Management, or other specialized orders.

Inspections Completed in 2021: The number of inspections completed decreased a little from 2020 to 2021. However, in both those years, the number of inspections was significantly lower than in 2019, by at least 28%. Although each of the seven Ministry Service Area Office (SAO) has responsibility for inspecting 85-90 homes, the number of inspections completed varies widely across SAOs, by as much as 100% -- e.g., 160 for London SAO in 2021, but 343 in Ottawa SAO. And the number of inspections ranges widely from year to year – London SAO did 481 inspections in 2019.

Numbers of Non-Compliances: But, in spite of fewer inspections, the numbers of WNs, VPCs, and COs increased in 2021 over 2020. The number of DRs and DOs is about the same. But the numbers of COs and DRs is significantly lower in both 2020 and 2021 than in 2018 and 2019. A large part of the decrease in COs and DRs can be attributed to a decrease in these non-compliances under our category of Facility Management (55% fewer).

Separate Problem Category for Infection Protection and Control (IPAC): Reviewers noted an increase in non-compliance related to Infection Protection and Control (IPAC) in 2021 – an understandable focus during the second year of the pandemic. Therefore, we have decided to add a specific category for Infection Control, distinct from the other safety concerns and hazards (e.g., bed rails, unlocked doors, etc.)

Comprehensive Annual Inspections: PCIs vs RQIs: In 2017 virtually every home in Ontario received a Resident Quality Inspection (RQI). In 2018 the number of RQIs completed fell to 327 for 627 homes (18 in 2019, 0 in 2020).

Proactive Compliance Inspections (PCIs) were introduced late in 2021 (17 completed). Up to April 18, Concerned Friends has received 20 PCIs in 2022. So far Reviewers are reserving judgment regarding the PCIs – we are not certain they are as thorough as the RQI. And the focus seems to be less directly on the resident experience (the RQI started from interviews with residents and families).

Focus on Critical Incident and Complaints: When Reviewers met with the Director of Compliance in June of 2019, we were informed that the focus of inspections would be on the backlog of complaints and critical incidents which had accumulated over time. The suggestion seemed to be that these inspections would now take precedence over comprehensive annual inspections. However, inspections involving complaints and critical incidents are focused on the issue at hand and seldom go beyond. Many aspects of care receive no attention until a problem occurs or a complaint is made.

Inspection Delays: In addition, many complaints and critical incidents are not investigated promptly enough to get an accurate picture. Staff may not remember pertinent information when weeks go by, and documentation may be sparse or missing.

Off-Site Inspections During the Pandemic: Every inspection report lists all the dates of visits to the home during the inspection. During 2020 and 2021, increasingly more dates were listed as "off-site", which we understand to mean that the inspection was conducted by telephone. Reviewers are concerned that inspections by telephone are likely to be less adequate than those in person and look forward to seeing their numbers reduced.

Changes in Reviewers Activities: When comprehensive annual inspections were common, Reviewers did a detailed review of each RQI report. In addition, Reviewers also focused on any other inspections where the inspector had issued one or more compliance orders (COs). When RQIs were discontinued, Reviewers agreed to review all inspection reports for WNs, VPCs, COs etc. The results for all Ontario homes are tabulated on an annual spreadsheet for each of the seven SAOs and provide the basis for the accompanying tables of statistics.

2021 LTC INSPECTION DATA SUMMARY

Non-Compliances by Service Area Office

Service Area (SAO)	No. of Homes			umber Compli	of Each ance				umber Compli			20 Comp Ord	liance	Comp	18 liance lers
	in SAO	WN	VPC	СО	DR	DO	WN	VPC	СО	DR	DO	СО	DR	СО	DR
London	89	408	218	119	2	0	245	146	78	2	0	135	8	89	4
Central West	88	431	273	111	8	2	345	184	101	10	2	198	26	124	6
Hamilton	92	516	274	64	0	0	337	179	49	0	1	119	6	120	6
Toronto	88	492	306	81	1	2	501	307	87	7	3	105	1	101	4
Central East	88	762	431	186	5	2	523	327	75	0	1	75	1	63	1
Ottawa	94	391	269	26	1	0	414	202	46	2	0	49	3	90	14
Sudbury	88	545	338	68	3	1	479	258	134	4	0	124	9	131	21
TOTALS	627	3545	2109	655	20	7	2844	1603	570	25	7	805	54	718	56

Inspection Types by Service Area Offices

Service Area (SAO)	No. of Homes		2021 Ty	Nun pe of I		of Eacl ction	ı		2020 Tyj	Num De of li		f Each tion	I		2019 Typ	Num be of li		f Each tion	1
	in SAO	CIS	Cmpl	Other	PCI	FU	Totals	CIS	Cmpl	Other	RQI	FU	Totals	CIS	Cmpl	Other	RQI	FU	Totals
London	89	88	50	4	5	13	160	106	67	11	0	7	191	279	156	9	0	37	481
Central West	88	127	86	11	3	34	261	175	88	19	0	37	319	132	99	7	0	59	297
Hamilton	92	104	68	6	2	12	192	130	91	1	0	31	253	187	157	4	2	55	405
Toronto	88	120	93	4	2	21	240	134	109	3	0	11	257	174	163	4	0	26	367
Central East	88	163	91	10	1	17	282	158	100	2	0	16	276	121	116	3	1	18	259
Ottawa	94	178	140	4	2	19	343	161	124	2	0	16	303	242	184	5	0	21	452
Sudbury	88	139	89	19	2	60	309	136	80	19	0	52	287	181	91	18	7	86	383
TOTALS	627	919	617	58	17	176	1787	1000	659	57	0	170	1886	1316	966	50	10	302	2644

Summary of Compliance Orders (CO) - Director Referrals (DR) - Director Orders (DO) By Non-Compliance Category (Definitions explanation below)

											N	ON-C	OMPL	IANCE	CAT	EGORY	,													
	Nu Perso	rsing onal (Ca	re Pla	n	Reside	ent Ri	ghts		dicati ssues		D	ietary	ı	Safet	y Haz	ards		ntena ssues	nce	Facility Qualit		agem't Irance		Abuse glect*		Tota	ıls 20	21
SAO	со	DR	DO	со	DR	DO	со	DR	DO	со	DR	DO	со	DR	DO	со	DR	DO	со	DR	DO	со	DR	DO*	со	DR	DO	со	DR	DO
London	42	1	0	13	1	0	10	0	0	10	0	0	1	0	0	14	0	0	3	0	0	26	0	0	0	0	0	119	2	0
Central West	17	2	0	7	0	0	8	0	0	11	1	0	3	0	0	13	2	1	1	0	0	15	1	1	18	2	0	93	8	2
Hamilton	14	0	0	9	0	0	3	0	0	8	0	0	0	0	0	17	0	0	2	0	0	7	0	0	6	0	0	66	0	0
Toronto	4	0	0	6	0	0	10	0	2	7	0	0	4	0	0	26	0	0	7	0	0	9	0	0	8	1	0	81	1	2
Central East	17	0	0	15	1	0	5	0	0	8	0	0	32	1	0	71	2	2	4	0	0	15	1	0	19	0	0	186	5	2
Ottawa	3	0	0	2	0	0	5	0	0	0	0	0	0	0	0	13	1	0	0	0	0	2	0	0	1	0	0	26	1	0
Sudbury	12	0	0	4	0	0	13	1	0	5	0	0	2	0	0	15	2	0	0	0	0	5	0	1	12	0	0	68	3	1
2021 TOTALS	109	3	0	56	2	0	54	1	2	49	1	0	42	1	0	169	7	3	17	0	0	79	2	2	64	3	0	639	20	7
2020 Totals*	83	7	0	69	1	0	61	2	0	42	2	0	45	1	0	106	4	0	16	1	0	98	2	6	60	4	0	580	24	6
2019 Totals	106	8		117	10		156	5		72	5		26	2		94	9		26	0		208	15					805	54	0
2018 Totals	101	2		84	4		134	11		54	7		25	1		104	7		14	2		202	22					718	56	0

CO - Compliance Order DR - Director Referral DO - Director Order * In 2020 there were 6 Directors' Orders (DOs) for Mandatory Management, which are listed under Facility Management.

**Prior to 2020, Abuse and Neglect by Staff was included in Residents' Rights.

In 2018-19, there were few DOs and we did not separate them from DRs.

NON-COMPLIANCE CATEGORY DEFINITIONS

Nursing and Personal Care includes general nursing care, assessment & reassessment of resident needs, wound care, pain management and weight care management,

Care Plans includes implementation of plan, accessibility to care staff, reviews and revisions as necessary, interdisciplinary care conferences which include resident and family, and complete, accurate documentation.

Resident Rights includes the right to dignity, privacy, respect, individuality, and freedom from all categories of abuse; consent to treatment, appropriate resident activities and programming, and bathing/grooming provided as appropriate.

Medication Issues includes orders signed for by appropriate personnel, storing, documenting, dispensing, and evaluation of medication use.

Dietary includes all issues related to nutrition, hydration, and meal service.

Safety/Hazards includes <u>infection control</u> and any practice that could contribute to risk or injury, such as bed rails, water temperature safety, poor disaster plans, unlocked doors.

Maintenance includes maintenance, housekeeping issues and general cleanliness as well as unclean or inadequate linen and supplies.

Facility Management & Quality Assurance includes staffing issues, information provided to residents, critical incident reporting, policy & program development, implementation and evaluation, including abuse policies.

Staff Abuse or Neglect of Residents - a new category - previously included under Resident Rights

							spect stails																	N	lon-Co	mpli	ances N	oted										
		Owne	rshin					Туре		Compliance Orders		eadline	ers	ine	During Inspection # of Non- Compliance Remedied	npliance	Nursing and	^{>} ersonal Care	Care Plans		Resident Rights	Madication	Management	Dietary	nfaction	Protection	Safet Hazards		Maintenance		Facility Management		Abuse or Neglect		тс	TAL	\$	
ID #	NAME of HOME	Aunicipal	or Profit	Last Date of VISIT		CIS	0	Other FU		# of Complian	CO #'s	mplian	Directors Orde	DO/DR Deadline	During Inspec Compliance R	Date Non-Compliance Remedied	W V N P C	/ C > 0	W V N P C	C V 0 N	V V N P C	C W O N	V C P O C	W V N P C	C W O N	V C P C C	2 W V	/ C	W V N P C	C W O N	/ V (C W	V P C		W N	v	с 0	COMMENTS
2715	Avalon Retirement Centre		<u>د</u> س	Jul/Aug	1211-0001		1			**	-			-				\uparrow			\top	2													2	0	0	Mishandling Narcotic meds., fail train staff re natrcotic handling doing narcotic count.,
2715	Jarlette Health Services(concurrent)			Jul/Aug	1211-0001		1															2													0	0	0	
								_																											0	0	0	
2830	Barnswallow Place Care Sienna Senior Living	++	1	Feb.	922119_0004	-	-	1		1	001	****				*****		++		_	+	-	_		1	1	1	+	_	_		-		-	1	0		CO1 Infection control Hand hygiene Fail safe use slings & size matched residents
				April	1315_0002	1	1	1							1				1 1						1					1	. 1				3	2	0	Flawed hand sanitizer but corrected while inspectopn ongoing, Fail use required 2 staff to rotate res in bed led to injury, Staff, Environment .supplies not audited for IPAC control
				Sep.	1315-0003	1	1 1																						1						1	0	0	Failure to clean wheelchairs weekly as required.
2057	Bay Haven Nursing Home		1	Fob/Mar	791730 0005		1																1										$\left \right $		2	2	_	Fail to do recquired bi-weekly self-assesmnt, Fail give patient required meds, Dir infection control not trained
2657	Bay Haven Nursing Home Incorp.	╉┼		Feb/Mar April	781729_0005 1163_0002	1	1		\vdash				+		-		╉┼╴	+	+	+	++	1	1	\square	$\left + \right $	\vdash	1		+	1		+	\mathbb{H}	+	3	3	U 0	not trained
				October	1163-0003	1	1 1										1								1							1			3	0	0	Fail read Rapid Antigen Test(RAT) before starting work, Fail protect Res. from Staff abuse, Fail 3 week skin integrity check & treatment
2010	Bennett Health Care Centre		1	Cant	1202 0001												1				$\uparrow \uparrow$											1			1	-	0	Fail to follow Falls Mgt. Program(72 hr watch program)
2816	Managed by Extendicare	++		Sept.	1303_0001		1										1	++			++		-					+				+	+	-	1	0	0	Fail to rollow Fails Wigt. Program(72 nr watch program)
																																	П		0	0	0	
2788	Braemar Retirement Centre		1	Feb.	972633_0001		1																	1 1	2	2				1	. 1				0	0	0	Blocked caregiver rights to visit re COVID, Infection control-staff not using PPEs properly, Menus lacked hydration and variety,Infection control-hand hygiene
	MacGowan Nursing Homes Ltd	++				-	-						_					+					-									-	+	-	0	0	0	
																					$\uparrow \uparrow$														0	0	0	
M507	Brucelea Haven LTC Home	1			922119_0005	1	1																									1			1	0	0	Fail immediate report suspected neglect to DIR
				February July	922119_0006 1533_0001	1	1 1										2													5		2			9	0	0	Fail screening/orientation staff candidates before hiring.Fail train new staff re abuse/neglect.Fail proper skin/wound assessment returning hospital.Fail weekly skin assesments return hos.Fail immed. Report Supsect abuse to DIR.Fail report correct names staff suspected in abuse.Fail use Abuse Checklitr e investigation suspect abuse.Fail use Abuse Checklitr e investigation suspect abuse.Fail do Police check before hire.Fail do police check Agency RN within 6 months hire.
2953	Burton Manor	\square	1	May	1436-0001												1	Π			$\uparrow \uparrow$	\top			1	H	\uparrow	\square	┮		Ħ	1	Ħ	t	2	0	ů N	Failure Falls Prevention led to injury, Failed Hand Hygiene during Snack Service
2953	Chartwell				1436-0001	1	1 1										1				1				2										2	0	0	Figure during snack service Fail follow PPE measures - risk to residents,Fail to clean/disinfect transfer equipment,Failed send SDM complaint to Director-failures led to Hospitalization
		\square	+			\vdash			\vdash	-	-		-				$\parallel \mid$	+	+	+	+	+	+	\square	\square	\square	++	+	+	+	H	+	\vdash		0	0	0	
2651	Cambridge Country Manor	tt	1	Nov.	1158-0001	1	1											\pm	+						H	┢╋					\Box	\pm	┢╢	_	0	0	0	
	Carrescent Care	П																\square	Ц		\square			Ц	\square			П			Ц		Ц	_	0	0	0	
2748	Caressant Care Arthur	\mathbb{H}	1	January	750539_0002	╀	1		\vdash				+					++	+	+	++	+	+	\mathbb{H}	\mathbb{H}	\vdash	+	++	+	+	++	+	\mathbb{H}		0	0	0	
2/40	Carrescent Care	tt		sanudiy	. 30335_0002	L							\pm													Ħ						\bot	Ħ	_	0	0	0	
				Sept																															0	0	0	
2000	Company Core France	H		leeuro o	001310 0001	F	Ę		Щ	\neg			-				\square	$+ \mp$	\square		$+ \mp$	\square		\square	\square	\vdash	$+\top$	$+\top$	\square		\vdash	+	Ħ	_	0	0	0	
2603	Caressant Care Fergus	11	1	January	981218_0001	1	1								I																		1_1		0	0	0	<u></u>

						Inspe Deta	ection ails	ı													N	on-Con	nplian	ces Note	d								
		Ownersł	hip				Ту	pe	Compliance Orders		Deadline	Orders	line	During Inspection # of Non- Compliance Remedied	mpliance	Nursing and Personal Care	Care Plans		Resident Rights	Medication Management			Protection	Safety Hazards	Maintenance	Issues	Facility Management	5	Abuse or Neglect		τοτά	ALS	
ID #	NAME of HOME	Municipal Non-Profit	For Profit	Last Date of VISIT		CIS	Cmpl Other	FU PCI	# of Complia	CO #'s	Compliance Deadline	Directors Ore	DO/DR Deadline	During Inspe Compliance F	Date Non-Compliance Remedied	wv	C W V 0 O N P 0 C	C W D N	-	wv	v w c	C W	V C		C W V	/ C V		C W O N		C W N		c o	COMMENTS
¢	Carrescent Care			August	1114_0001			1						2		1		2		3	1	1		2						10	C		Door lock repaired, Posted menues corrected, Resident/Staff call bells not all finctional,Mgt fail respond to Res. Council in 10 days, Fail show Res. Council consulted before/after satisfaction surveys,Fail consult/update pain mgt prog. yearly,Fail appt. clear infection control(IPAC) lead staff ignorance, Meds & Meds cart not secured safely,Meds Mgt team failed hold quarerly meetings,Fail doc. Q2 improvements in meds mgt.
				October	1114-0002		1											1				1					3			5	C		Failed to have IPAC lead, Fail follow reg food temp(equip broken).Res.on tray service lunch not given food choices.Res.'s meal tray services not served at correct temp - risk of not being eaten or food poisining risk, Facility Food Manager not fully qualified for job.
2595	Caressant Care Harriston		1		1108_0001	1										1		1				1								3	C	0 0	
(Carrescent Care																													0	C	0	
2664	Caressant Care Listowel	-	1	Apr/May	1170_0001	1												+					++	1	++		2	1		0	-	-	Self-Assess. Tool as required, New IPAC lead not
	Carrescent Care																													0	C		
\square									-														+		++	+				0			
2471	Chartwell Elmira LTC Res.		1	Aug/Sept	1075_0001	1			1								1					2								3	C		Fail follow care plan re Res.behaviors,Fail appy IPAC Lead,Daily assessmts infection signs not done,
	Chartwell									001	****			1	###########							1	1							1	C	1	CO1 Serious failure follow Infection Control standards.
2000			_	Nov.	1075-0002			1															++					_		0	0		
1	Chartwell Westmount LTC Chartwell concurrant	+		January January	729615_0003 729615_0002	1	1	\vdash	1	001	*****	+		1	****	┠┼┤	+++	╉╋	+	++	++	++	++	++	++	++	++	1	$\left \right $	0	0		CO1 Post Fall assessment not fully done over 5 days
Ē			H		3013_0002	Ħ	+	\vdash	Ê	551		+						+	\square	++	++	++	++		++	+ +	+		Ħ				Unsafe transfer/positioning, fail prompt report
				April	1365_0001	1		1			****				****					1	1			1 1				1		1	1		alleged abuse Meds order must be reviewed/processed at once issued.
\vdash		+	\vdash	July	1365_0002	1		1	1	002	*****			1	*****	┠┼┤	+++	+	+	1	1	+++	++	++	++	++	++	+	\vdash	1	_		Fail Report Medication incident Previous COs complied with
2781	Collingwood Nursing Home			May/Jun	1272_0001	Ħ	1	Ħ	+			+				2	1	+	\square	++	1	1	++	4	1	+ +	1	1	H	12			skin care changes not w. consultation NP etc.Worsened
	Collingwood Nursing Home Ltd			July	1272_0002		1									-											-			0	a		
			7	Oct/Nov	1272-0003	1	1		1			Τ													ΙT	ΙT	1		ΙT	1	0	0	Home w. less than 69 beds must have IPAC lead working 17.5 hrs. per week

						Inspe Deta	ection ils					Non-Compliances Noted																								
		Owne	ership				Туре		ice Orders		e Deadline	ers	ine	During Inspection # of Non- Compliance Remedied	npliance	Nursing and	Personal Care	Personal care Care Plans		Resident Rights		Medication Management	Management	Dietary	Infection Protection	Safety Hazards	Maintenance	Maintenance Issues	Facility	Management	Abuse or Neglect		тот	ALS		
ID #	NAME of HOME		or Profit	Last Date of VISIT		CIS .	Cmpl Other	F.U	# of Compliance Orders	CO #'s	S S	Directors Ord	DO/DR Deadline	Juring Inspec Compliance R	Date Non-Compliance Remedied	W N	V C P O C	w١	V C P O C	W N N I	V C P O C	wv	C W O N	V C P O C	W V C N P O C	wv	C W O N	V C P O C	W V N P C	C١	N V O N P O C	с и о м	/ V	C O		
		2 2	ZŰ						. #		0		<u> </u>	00		\mathbf{T}		\mathbf{h}												\mathbf{H}			0	0 0	0	_
2856	Columbia Forest		1																													_	_	0 (0	
	Revera Long Term Care Inc								-			-						++								+ $+$ $+$				+			0	0 0	0	
																																-	_	0 (0	
2124	Cooksville Care Centre		1	Apr/May	1050_0001	1																			1 1				1 1				2	2 (Meal time hand hygiene rules not followed, Fail use 0 Self Assessment tool as required served, Must have full PPE where ever needed mas	
	Rykka Care Centre			Aug/Sept	1050_0002		1																1		2								3	0	respirators etc., All staff must wear full PPE when 0 infection present and follow discard policies	
									-											_													0	0 0	0	
																																-	0	0 (0	
1027	Country Lane LTC Residen. Southbridge Health Care Grp Inc		1	Nov	1024-0001	1			-			_						++			_									\vdash			0	0 0	0	
	Managed by Extendicare																	+															0	_	0	
																																-	0	0 (0	
2633	Creedan Valley Care Com. Sienna Senior Living		1	Jan/Feb Jan/Feb	729615_0005 729615_0004	1		1				1	*****		*****	4		++	_								_			\vdash		_	0		0 0 Fail comply 2021 Orders	
				August	1142_0001			-	1			1						$^{++}$															_	0 0	0 No Findings	
2124	Derbecker's Heritage House		1	Cant	1052 0001	1																			+							_	0	0 0	Care plan not updated, IPAC audits not done during infection outbreak	g
2134	Derbecker's Heritage House Ltd			Sept.	1053-0001	1								1				1														T	0	0 0		
																																	0	0 (0	
	Dufferin Only	4	-						-								-															_	0	0 (0	
M516	Dufferin Oaks concurrent	1	_	Feb/Mar Feb/Mar	_876606_0008 876606_0007	1	1	_	_							2	2	1	1	1	1					+++	-		1	\vdash		-	4	3 (0 intervention equip not available,Pain interventions 0 Denied right to see visitor of their choice. 	
	ondaron	ht		1 CO/ Wildi	0/0000_000/		-													-	-											-	0	_	0	-
2777	Eden House Nursing Home		1	July	1268_0001	1	1																									_	0	0 (0	
┣─	Southbridge Health Care Grp Inc		_															++			_									\vdash	++		0		0	
																		$^{++}$														_	0	0 0	0	
2725	Elgin Abbey Nursing Home		1	January	890758_0001			1	4	001	4/1/2022A1				*****	‡ 1	1																1	0	1 CO1 Pain mgt effectiveness not re-assessed	
	Capricorn Investments Corp Ltd									002	4/1/2022A1				*****	ŧ 1	1																1	0	1 CO2 Skin & Wound care not weekly re-assessed	
	Managed by Extendicare									003	4/1/2022A1				*****	# 1	1																1	0 :	1 CO3 Pain mgt.not re-assessed or lead to reduction	
										004	4/22/2022A1				*****	ŧ									1 1								1	0	1 CO4 Infection control - hand hygiene/PPE/signage .	
																1	1																1	1 (O Continence care products inappropriate	
				May/Jun	1221_0001			1																	1								1	0 (0 Fail comply all home entry screening	
2513	Errinrung LTC Home		1	October	1081-0001	1																											0		0	
	Southbridge Health Care Grp Inc	Ц																Цİ																0 (0	
 	Managed by Extendicare	\square	+			\vdash	+	_		\vdash		+				+	_	┢┼	+	\square	+	\square	\vdash	\square	++	┼┼┼	+	\vdash		\vdash	++			0 0	0	
2847	Extendicare Brampton	\parallel	1	Oct/Nov	1332-0001	1	1					\uparrow				2		$\uparrow\uparrow$				+	\square	+	++	\uparrow	\top	\vdash		$ \uparrow $	+	╈	2	0 4	Skin/wound care clean protocols not followed,Faile 0 weekly skin/wound Nursing assessments	≥d
2047		$ \uparrow$	1	000/1100	1552 0001		1		1																					\square		╞				
 		\square	+			\vdash	+	_		\vdash		+				+	_	┢┼	+	\square	+	\square	\vdash	\square	++	┼┼┼	+	\vdash		\vdash	++	+	0	0 0	0	
-		\mathbf{H}				\vdash	+		+			+				+		++	+	\square	+		\vdash		++	+ + +	+	\vdash	H	\vdash	++	_	_	0 0	0	—
2892	Extendicare Halton Hills		1	February	781729_0004	1			L							1	1														Ш	-	_	_	0 Required falls prevention plan not followed	
	Extendicare (concurrent)				781729_0003		1											П					\square	Д							П	_	-	0 (0	
L				May/Jun	1377_0001	1	1		<u> </u>							2		1					Ш			1			1			1	5	0 (0 changed,Fail to engage SDM when patient's needs	

						Inspe Detai	ction Is									I								N	Non-C	omplia	ances No	oted									
		Owners	hip				Тур	e	nce Orders		Deadline	ders	line	During Inspection # of Non- Compliance Remedied	Date Non-Compliance Remedied		Nursing and Personal Care		Care Plans		Resident Rights	Medication	Management	Dietary		Infection Protection	Safety Hazards		Maintenance Issues		Facility Management		Abuse or Neglect	то	DTAL	s	
ID #	NAME of HOME	nicipal I-Profit	Profit	Last Date of VISIT			her		f Compliance	CO #'s	8	Directors Orde	DO/DR Deadline	ring Inspe npliance I	te Non-Co nedied	W N	V	C W D N	V 0 P 0 C	C W D N		C W Y	V C P O C	W V N P C	v 0 1 0	V V C N P O C	: W V N P C	C W 0 N	V V N P C	C W O N	V C P C C			N		c O	
		Mur Non				CIS	5 d	PCI	# of	8	Cor	ä	8	Cor	Dat Rer																						COMMENTS
																																		0	0	0	
																																		0	0	0	followed. Not documented documented falls required
	Fairview Mennonite Home	1		October	1491-0001	1										2											1							3	0		followed, Not documented documented falls required Falls interventions
C524																																		0	0	0	
																									П							П	П	0	0	0	
2745	Faith Manor Nursing Home	1		February	823653_0006	1												1								1 1								2	1		Staff multiple failures perform hand hygiene w. alcohol based sanitizer, Care plan required Falls Prevention device attached wheel chair
												+						_	++	_		++			\vdash			$\left \right $				++	+	0	0	0	
												+							\uparrow													+		0	0	0	
2707	Forest Heights		1	Sept	1205_0001	1								1		4		1											2	2				9	0		Care Plan not currant, Pain mgt monitorings not evaluated/monitored/Fail monitor/manage pain mgt post hospitalization,Fail use correct skin assess. tool,Fail monitor vitals post fail,Fail report fire to DIR.Faulty laundry equipment maintenance,Fail organize regular laundry equip. Inspection/maintenance, Fail order regular dyres: vent cleaning,
	Revera Long Term Care Inc																																	0	0	0	
																																		0	0	0	
												-							+			+						+				+		0	0	0	
																																		0	0	0	
M526	Gateway Haven LTC Home	1	-	Dec/Jan	977754_0032		1				*****	+			******	_	+	1	-	1		+								1		1		1	0	_	CO1 Fail Care Plan Pain re-assessments CO2 Fail 5 day response Res. Re-admission request
																1	1			1	1													2	2		Fail provide needed care, assistance, Fail to assess mobility device used, Fail provide hydration between meals
				Dec/Jan	977754_0033 (A1)	1			2 (001 #	*****				*****	#																1	1	1	0		CO1 Fail prompt report negligent care to Dir CO2 Fail revise Falls prevention plan that led to death
							\square		C	002 #	*****				*****	# 1		1	\square		Ш			Ш	Ш			\square						1	0	1	patient
-			\vdash	Mar/Apr	702650 000545	\vdash		+	1	001	*****	+		<u> </u>	****	1	1	+	++	+	\square	++	_	Н–	Н	++	++	\square	++	-		+	╇	1	1	_	Required skin/wound assessments not done CO1 Refusal to re-admit patient incorrect
					792659_0005A1 792659_0006		1	1	1 (100	*******	+		-	*******	_	1	+	++	+	\vdash	++	+		++	++	+	++	++	1		╘	┽╋	_	1		New Pain Mgt. Policy not followed
				June	1548_0001	1	1									Ĺ			\square			\square												0	0	0	No findings
	A dual a factor da anti-			June	1548_0002	\square	1	1				1 [DR001	<u> </u>			\square	\perp	\square	\square	\square	+		\square	Щ	\square	++	\square	$\downarrow \downarrow$	\square		++	+	0	0	-	patient denied re-admission.Referred to DIR
2639	Administrative Monetary Per Georgian Heights	naity		May	1146 0001	\vdash	++	1	-+	+		+				┢	\vdash	+	++	+	\vdash	++	+	\vdash	++	++	++	\vdash	++	+		++	+	0	0		Ordered re-admit resident Fine \$1100.00 No findings 11 Protocols used
2030	Southbridge Health Care Grp Inc				1140_0001		$\pm \dagger$									\mathbf{T}		╈	$\pm \uparrow$		Lt	$\pm \pm$			\square				$\pm \dagger$			$\pm \dagger$		-	0	0	
	Managed by Extendicare						П					T					П		П			П		П	П	П	\square	\square	Д			П		-	0	0	
-			⊢			\vdash	++	+		-		+				+	\vdash	+	++	+	\vdash	++	+	\mathbb{H}^{-}	\mathbb{H}	++	++	\vdash	+	+		++	+	0	0	0	
2705	Golden Dawn Nursing	1		January	977754_0001	\square	1	+	1 (001 #	*****	+			*****	#	\square	_	++		\vdash	\square	_	Щ	Щ	1 1	++	\square	\parallel	\square		++	+	1	0	1	CO1 Infection control-PPE, signage, eye protection
							\square	\square						<u> </u>			Ш		\square		Ц	\square		Щ_	Щ	1 1	$\downarrow \downarrow$	\square	\parallel			$\parallel \mid$		1	1	-	Infection control Staff not respecting infection protocols.
				May	1203_0002	1		1								1				1										5		2		9	0		CIS 2 abuse to Dir, Fail to order immediate Med. Insp resident, Fail immediate all staff SURGE training re Abuse,

						Inspe Deta	ection iils																	Non-0	Complia	ances Note	ed									
		Ownersh	nip				Ту	pe	# of Compliance Orders		: Deadline	Orders	dline	During Inspection # of Non- Compliance Remedied	Date Non-Compliance Remedied		Personal Care		Care Plans	Resident Rights		Medication Management			Infection Protection	Safety Hazards	_	- Iviaintenance - Issues		Management		Abuse or Neglect	- T	OTAI		
ID #	NAME of HOME	icipal Profit	Profit	Last Date of VISIT			pl Der		Compli	#'s	ä	Directors O	DO/DR Deadline	ing Insp 1pliance	e Non-C nedied	N	V C P C C	-	V C P O C	W V N F	V C P O C	W V N P C	-	V C V P O I C	V V C V P O C	W V O N P O C	C W	V C P O C			W N N F		Ν	V P C	c O	
		Munic Non-P	For P			CIS	Oth Oth	PCI P	# of	CO #'s	Corr	Dire	/00	Duri	Date Rem				Ĩ			Ĩ						-						C		COMMENTS
												1																			1	1	1	0	1	CO1 Protect res on Res abuse
	Failure Written notification			Octber	1203-0003		1					1 1	*****			+		-					++								1	1	1	0	_	COT Protect les on Res abuse
Admi	nistrative Monetary Pena	lty A																				\square			\square				\square							\$1.100 related to Order 8/5/2022
	Golden Years Nursing		4		1026-0001	1								1	Nov.3	1		T							1		1				\square	П	3	0	0	infected bedroom roommate, Failed to address 12 continance care Res. over night.
	Golden Years Nursing Homes (Cambridge) Inc.			000,000	1010 0001	_																											0	0	0	
																																	0	0	0	
2588	Good Samaritan Nursing Clurelea Ltd		1 (October	1102-0001	1		_				_						_					++	++		+++	_		1				1	0	0	Late report Fall injury leading hospitalization
																																	0	0	0	6
2942	Grace Manor	1	1	Feb.	823653_0005		1											1	1				1	1	1 1								3	3	0	Fail plan follow diet restrictions re allergies, Fail to individualize diet re Res. allergies, Infection control - hand hygiene Fail complete post-fall assessment, Unsafe use transfer
	Holland Christian Homes Inc.		L	July	1426_0001		1									1		1								1			1				4	0		device,Care plan failed identify transfer device,fail report CIS Fall to DIR.
								_				-					_										-			-	\vdash		0	0	0	
																																	0	0	0	
M606	Grey Gables Home Aged	1	1	Nov.	1601-0001	1								1											1				1				2	0	0	IPAC lead not qualified, IPAC lead not working required hours
																										\square							0	0	0	
2770	Hanover Care Centre	+	1	March	836766_0002			1				-									+			++		+++	+		++		\vdash	+	0	0	0	
	Hanover Nursing Home Ltd				-																												0	0	0	
2887	Hawthorn Woods Care Comm.	+	1	January	876606_0002	1		_				-									+			++	++	+++	+	$\left \right $			$\left \right $	+	0	0	0	
2007	Sienna Senior Living				876606_0002 876606_0001		1		L							1	1		Ľ					$\pm \pm$			\pm	LΤ			Ш		1	1	0	Fa1l assess skin/wound weekly
			/	April	1372_0003	1												1			П	\square	П	\square									1	0	0	Nurse shift change assess skin ulcer, Staff fail rotate skin patient every 2
				Sept.	1372-0004		1									3		1		1					1								6	0		hours,Fail engage SDM in patient skin care,IPAC hand hygiene /PPE/ Droplet faulty,
									3	001	28/11/2022									1	1												1	0		CO1Record audit assess. & re-assess causes and treatment Res. Behaviors. Keep Home records.
										002	28/11/2022					1	1	1															1	0		CO2 Educate PSWs/Registered Staff on skin & wound assessment Policy
										003	28/11/2022					1	1	1						\square									1	0	1	CO# Skin Presure ulcers require Weekly assessmnt
MED1				October	1507 0001		П					T				F	\square	F			П	П	П	П	Ŧ	$ \square$		H	H	T	П	П	0	0		No findings
1001	Huronlea Home for the Aged		-	October	1597-0001	1	+	+	-			+				┢	+	+	\vdash	\vdash	+	++	++	++	++	+++	+	\vdash	++	+	\mathbb{H}	╈	0	0	_	
																								\square	T				\square		Ц		0	0		
									L																								0	0	0	
901	King Nursing Home		1 (October	1003_0001		1																						4		1		5	0	0	responses to Complaints, Failed document action taken

						Insp Deta	ection iils	ĺ							I							Non	-Comp	olianc	es Note	d								
		Ownershi	ip				Тур	e	nce Orders	Deadline	Orders	line	During Inspection # of Non- Compliance Remedied	mpliance	Nursing and	Personal Care	Care Plans	Becident Biahte	vesident nignts	Medication	Management	Dietary	Infection Destroy		Safety Hazards	enance	lssues	Facility Management		Abuse or Neglect		тоти	ALS	
ID #	NAME of HOME	Municipal Von-Profit	or Profit	Last Date of VISIT		CIS	Cmpl Other		# of Compliance CO #'s	Compliance Deadline	Directors Ord	DO/DR Deadline	During Inspec Compliance F	Date Non-Compliance Remedied	w١	V C P O C	W V C N P O C	W N	V C P O C	wν	C W	V C	W V N P C	CΥ	V V C I P O C	W V N P C	C V	/ V	C W O N	V	C W N	v	c o	COMMENTS
	King Nursing Home Ltd																														0		0 0	
																															0			
		╏┼┼	_				++				+					_			+						++	$\left \right $	++				0		0 0	Confidentiality Res files at risk unlocked door.
2917			1	April	1401_0001	1	1						1														:	ι 1			1	. 1	-	Fixed
	Steeves & Rozema Enterprise Ltd	┟┼┼	+			$\left \cdot \right $	+		\vdash		++		<u> </u>		\mathbf{H}	+	\square	\square	+		\square	\square	H	\vdash	++	\vdash	++	+		\square	0		-	
																															0			
2358	LaPointe-Fisher Nursing		1	Мау	1066_0001	1	1																1		2			2	2		7	, c	0 0	Fail report critical incident (fall) in 3 days, Report staff abuse failed include report immediate prevention action, CI report to DIR failed submit plan to correct abuse, Staff made unsafe transfers, Staff failed use Care Plan re responsive behaviors, Staff use physical force caused skin impairment, Fail use Infectioin Control Hand Hygiene,
	Lapointe-Fisher Nursing Home Ltd															_				_									_		0			
		╏┼┼						+								-											++				0		-	
																															0	-	-	
IVI549	Lee Manor Home	1			800532_0002 729615_0008	1		1								-									1 1		++				0	1	-	Accessible windows not protected w.screen
	concurrent		7	March	729615_0007			1							1	1				2 2			1 1					1 4			8	: 8	3 0	Fail yearly consult/Jadapt Res. Continence care products, Fail retrain re abuse/Neglect policies,Fail 10 day limit response to complaints re Res. Care,Fail quarterly review all Meds incidents,Fail direct Care staff full training Falls Prevention/Skin Wound Care/Fain Mgt. & Recognition, Hand Hygiene failures training,practices,Fail report complaints to DIR,Fail quarterly review Meds Mgt by Medical.Dir,Animi Home,Dir Nursing & Pharmacist to be pro-active.
				May/Jun October	<u>1566_0001</u> 1566-0002	1									1																0		-	Meds not administered according to care plan
965	Maitland Manor				920420_0002	1							1			T				1							$\uparrow\uparrow$		1		0	1	1	
	Southbridge Health Care Grp Inc				1016-0001	1	1																1		2				2		5	; c	0 0	Fail stop Res on Res sexual abuse, No policy to assess Res capacity to give consent touching, Fail fully monitor res to protect from harm, Fail fulltime monitor Res to protect other Residents from harm, Fail ensure all IPAC signage/ protocols followed at all times
┣	Managed by Extendicare	┟┼┼	+			$\left + \right $	++	+	\vdash		++				+	+	\vdash	\vdash	+	+	\vdash	\vdash	H	\vdash	++	\vdash	++	+	+	\mathbb{H}	0			
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		Owne	rship				т	ype	nce Orders		Deadline	lers	line	During Inspection # of Non- Compliance Remedied	mpliance	Nursing and	Personal Care	Care Plans		Resident Rights		Medication Management	Dietary	Infection	Protection	Safety Hazards	Maintenance	Issues	Facility Management		Abuse or Neglect	тс	ΟΤΑΙ	LS	
ID #	NAME of HOME	Municipal		Last Date of VISIT		CIS	Cmpl Other	FU	# of Compliance Orders	CO #'s	Compliance I	Directors Orders	DO/DR Deadline	During Inspe Compliance F	Date Non-Compliance Remedied	W N	V C P O C	wν	C	N V N P C	C W	v v	w v		C W	V V C N P O C		/ C V	V V P N P O C	C W	V C P O C	Ν	V P C		COMMENTS
2911	Maple Grove Care Com.		1	August	1395_0001	1														1				1		1			1	1		5	0	0	CIS report lacked outcome report,CIS report failed name staff involved, Staff fail treat res.w.respect, IPAC rules not followed (signage/PPE/N95 masks etc., Use expired sanitizers,masks, etc.
	Sienna Senior Living				_				1	001	17/10/2022					1	1															1	0	1	CO! Failed update, manage Falls Prevention program, risk mgt, care plans
																			\square													0	0	0	
																																0	0	0	
	Maple View		1																																District initiated Inspection. Staff neglect of Res,Falls prevention and skin protection actions not taken, Continence care for 3 Res incomplete, Unlocked doors-Safety issue,
2690		╟┼		Nov.	1190-0001	+			+			+				2		\parallel	+	+	+	+				1	+		1	1		5	0	0	Mandatory training for staff not completed
	Southbridge Health Care Grp Inc																															0	0	0	
	Managed by Extendicare								_											_									++	+		0	0	0	
2612	Meaford LTC Centre (peo.ca)		1	January	836766_0001			1																								0	0	0	
	Peoplecare			Nov.	1122-0001		1	++	_			_							+		_							+				0	0	0	
																\square			П										\square			0	0	0	
2727	Morriston Park Nursing		1	February	981218_0002			1																								0	0	0	
	Retirement Home Specialists Inc.		_						_										\square										\square	\square		0	0	0	
		$\left \right $										+				+			++		_							++	++	++		0	0	0	
C547	Nithview Home		1	March	923751_0007	1			1	001	****				09/06/2022	2 1	1															1	0	1	CO1 3 unwitnessed Falls. Vital signs, neurological assessments not completed
																		2 1	L													2	1	0	Care Plan re mobility not followed, Head injury routine not documented/followed CO1 Fail refer Res. Behaviours.to Behaviour
	concurrent			March	923751_0008A1		1		1	001	****				09/06/2022	2				1	1											1	0	1	Supports Ont. (BSO), fail change Care Plan
									1	002	****				09/06/2022	2								1	1							1	0	1	CO2 Failed Hand Hygiene with all Residents snack time
																		1 1		3						1 1						5	2	0	doors, DIR not notified Family Council formed,Mgt. Home fail timely response to
				May/Jun	1501_0001	1	1	1						1												1						1	0	0	Heat related issue
		H				\square		\square				\square				П		H	П	\square		\square	Щ	\square		1	\square	П	\square	\square		1	0	_	Unsafe transfer - sling size incorrect
1053	Parkview Manor H.C.C.	\vdash	1				\top		1			+					+	\square	$^{+}$	+	+	$\uparrow \uparrow$	++				++	++	++	+	+	0	0		
	Southbridge Health Care Grp Inc	Ħ	\square		1	$\uparrow \uparrow$	\top	\dagger	1			\uparrow					┢	$\uparrow\uparrow$	\square	+	\top	$\uparrow \uparrow$	\dagger	++		++	$\uparrow \uparrow$	$\dagger \dagger$	\dagger	$\uparrow \uparrow$	┢	0	0	0	
	Managed by Extendicare	Ħ	\square		1	$\uparrow \uparrow$	\top	\dagger	1			\uparrow					┢	$\uparrow\uparrow$	\square	+	\top	$\uparrow \uparrow$	\dagger	++		++	$\uparrow \uparrow$	$\dagger \dagger$	\dagger	$\uparrow \uparrow$	┢	0	0	0	
		П														\square			П				\square					Π				0	0	0	
2952	Parkwood Mennonite		1	March	792659_0004				1							1	1			1 1	2	2 2		1 1					3 3			8	8		Continence care must be individualized, evaluated, documented Fail train all staff annually abuse prevention, Fail investigate, resolve complaints within 10 days, Fail Meds. Review quarterly, Direct Care Staff not Hully trained falls, skin,pain mgr. Res. need assistance Hand Hygiene program, Written Complaints not immediately sent to Director, Meds mgt. team must evaluate system Quarterly

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		Own	ership				T	уре	nce Orders		Deadline	ders	line	During Inspection # of Non- Compliance Remedied	mpliance	Nursing and	Personal Care	Care Plans		Resident Rights	Medication	Management	Dietary	Infection	Protection	Safety Hazards	Maintenance	Issues	Facility Management		Abuse or Neglect		тот	ALS	
ID #	NAME of HOME	Municipal	Non-Profit For Profit	Last Date of VISIT		CIS	pl	FU FU	#CI # of Compliance Orders	CO #'s	ar	Directors Orde	DO/DR Deadline	During Inspe Compliance I	Date Non-Compliance Remedied	N N	VC	w v	C W	V V C I P C C	W N	V C	W V C N P C C	w v		V V C I P O C	N		wv	C V 0 M	V V I P C			C O	
																																	0	0 0	
M562	Peel Manor	1																															0	0 0)
-		H	+			H	+	++	+	+		\vdash				+	\square	┼┼┤	+	++	+	+	++	++	\vdash	++	$\left\{ + \right\}$	+	+	+	╂╂		-	0 0	0
C522	PeopleCare A.R. Goudie	Ħ	1	February	792659_0003				1											\parallel	1	1	\parallel	1 1					1 1				_	0 0) Failed consult Family Council, Failed train yearly direct care staff Pain Skin&Wound care, infection protection hand hygiene failed
		H																									Н				\square		-	0 C	
2606	Peoplecare Hilltop Manor	Ħ	1	February	981218_0003	1			1	001	#############				19/05/2022	2								1 1	1		†				\square		1	1 1	CO1 Serious wide failure Hand Hygiene
	Peoplecare			May	1117_0002		1	1	-	001					13/03/2021	1											Ħ		1				2		Written complaint not immediately sent to Director, Wound not assessed weekly 7 times
					1117_0001	1	1									1		2											1				4		Fail to revue/revise Care Plan re weight gain (Res. Behav),Fail chart (DOS)res. Responsive Behaviors & create a plan,Fail inform SDMs re res' abuse behavior, Fail repond with Pain Mgt program after Patient's 3 Falls,
									3	001	****																					1	0	0 1	CO1 Required immediate Police report re suspect abuse CO2 Must retrain all staff on all Abuse or Suspected
		Ц								002	31/10/2022																					1	0	-	Abuse Policy Reporting/handling
2600	Pinecrest Manor	+	1	Sept.	1112-0001	1	_		_	003	31/10/2022					+		+++												-	+	_	_	0 1 0 0	suspected sexual abuse(Failed to Protect)
	Revera Long Term Care Inc	П																															_	0 0	
																																_	_	0 C	2 D
	Pinehaven Nursing Home	\square	1	February	750539_0004	1				_									_					1						_	\square	_		0 0	Stools w. torn material cant disinfect
	Schlegel Villages Inc.	\vdash																															0	0 0	0
						$\left \right $			+								_							$\left \right $								-	0)
	Riverbend Place	Ц	1	January	922119_0001	1				_																					П	_	-	0 0	
	Revera Long Term Care Inc			May/Jun	1246_0001	1	1									2					1					1			1					0 0	Fail head injury rourine after Fail, Mgt fail post door
M570	Rockwood Terrace Home	1		June	1579_0001	1																											0	0)
		H	+			H	+	++	+	+		\vdash				+	\square	┼┼┤	+	++	+	+	++	++	\square	++	$\left\{ + \right\}$	+	+	+	╂╂		-	0 C	0
2767	Royal Terrace	П	1	August	1258_0001	1										П				1	Ц					1	П	Ц		:	L	_	_	_) masks while helping infected Res.,Fail immediate report
	Shanti Enterprises Limited																																0	0 0)
		\square																															0	0 0	

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		Owne	ership				1	Туре	nce Orders		Deadline	ders	line	During Inspection # of Non- Compliance Remedied	mpliance	Nursing and	Personal Care	Care Plans		Resident Rights	Medication	Management	Dietary	Infection	Protection	Safety Hazards	Maintenance		Facility Management	Management	Abuse or Neglect		τοτα	LS	
ID #	NAME of HOME		Non-Profit For Profit	Last Date of VISIT		CIS	-	r.	PCI # of Compliance Orders	CO #'s	ance	Directors Orders	DO/DR Deadline	During Inspe Compliance F	Date Non-Compliance Remedied	W N N I	V C	W V N P C		/ V 0 P 0 C		V C	W V 0 N P 0 C	C W V D N P C		W V N P C		V C P O C		C١	NV			о	COMMENTS
C568	Saint Luke's Place (3014)		1	January	962753_0002				1							1					1	1	1 1	1 1	1				1 1			5	0 4 0 0	0	Fair clean Res.mooning alos entire nome, Fair review meal/snack times w. Res. Council nor provide needed
2710	Sara Vista Revera Long Term Care Inc		1	July	1208_0001		1																									0		0	
2762	Shelburne LTC Home		1	October	1253-0001	1																										0	-		
	Southbridge Health Care Grp Inc					$\left \right $						$\left \right $												$\left \right $							+	0	0	0	
M573	Simcoe Manor Home	1		Jul/Aug	1582_0001		1									1		1						Ħ					1			0			Fail do weekly assess. Skin breakdown, Fail document treatment skinn breakdown, instructioins skin ointment and cream use not made clear in orders.
	Southampton Care Centre Ltd		1			-	$\left \right $	+				H				Ħ							Ŧ		\mathbf{H}		Ŧ					0	0	0	
	Jarlett Health Services		_						_	_						\square			_	$\left \right $												0	0	0	
2926	St. Andrew's Terrace LTC		1	January	729615_0001	1																										0		_	
	Steeves & Rozema Enterprise Ltd			April	981218_0006		1	+								2	2						+	1 1	1							3	3	0	reposition resident every 2hrs night shifts, Hand hygiene meal time not followed
				May/Jun	1410_0001	1	1							2		3		2		3				2		1	1		1			13	0	0	infection tracking sheets, Fail Directive #3 screening all entries/ visitor sheets & distance keeping, Home refused applicant's residency unjustly re responsive behavior,
				Aug/Sept	1410_0002	1	1													1						1					1	3	. 0	0	SOM not immediately informed re Fall and admin to hospital,staff used unsafe transfer action,Manager Res. Care fail remove abuser immediately when Res. Complained
C564	St.Joseph's Health Guelph		1	Oct-Nov.	1506_0001	1														1						1					1	3	0	0	Fail to protect one Res. from harmful interactions from another Res,no BSO done; BSO Care plan for one Res. not implemented to stop harm to others, Critical doors left unlocked.
																																0			
																																0	0	0	
	Stayner Care Centre		1	October	1230-0001	1	1																	3			1					4	0	0	Fail follow Directive PPE rrules plus bi-weekly regular IPAC self;assessments when home not infected,Hand hygenie failures, Res. Rooms,washrooms, not cleaned properly,Fail duily common areas/high touch areasbdisinfection.

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		Owner	rshin				Тур	IE.	nce Orders		Deadline	ers	ine	During Inspection # of Non- Compliance Remedied	npliance	Nursing and	Personal Care	Care Plans		Resident Rights	Medication	Management	Dietary	Infection	Protection	Safety Hazards	Maintenance	Issues	Facility Management	Mallagement	Abuse or Neglect	,	тс	OTAL	s	
ID #	NAME of HOME	Municipal Non-Profit	Profit	Last Date of VISIT		CIS	Other Crieven		# of Compliance	CO #'s	8	Directors Orde	DO/DR Deadline	During Inspec Compliance F	Date Non-Compliance Remedied	w	V C	W V N P C	C W	V	c w	V C V P O C	W V 0 N P 0 C	c w v	/ C	w v c	w	V C	W V N P C		ΝV	С	W N	V P C	С	COMMENTS
2735	Stayner Care Centre Inc																																0	0	0	
2735																																	0	0	0	
		++	+			╉┼	++	+										++	+	+	++	++	++	++	++		+	+	_				0	0	0	
2863	Stirling Heights																																0	0	0	
	Axr Operating (National) Lp	++	1	Feb/Mar	729615_0006	╂┼	++	1				_						++	+	+	++	++	++	++	++		++	+	_	_	_		0	0	0	
				Sept.	1348_0001	1																		2					1				3	0	0	Staff failed wear full PPE equipment when interacting w.Residents,IPAC protection /control before & after contact especially in infection period, Fail post notices of infection in Home - external & internal sites
						+	+					_								++					+								0	0	0	
1001	Strathcona LTC		-	February	729615_0006	1		1				_								++					+							-	0	0	0	
2624	Sharon Farms & Enterprise Ltd Summit Place			Jun/Jul	_1020_0001		1									2		1			1												4	0	0	Fail engage SDM in Care plan, Post Fall Assess. not done,Res assisstive device re Falls not available,Meds administration serious flaws/fail drud administration.
2021	Revera Long Term Care Inc		1	April	1133-0001	1										11																	0		0	
				Арті	1133-0001																												0		0	
M578	Sunnyside Home	1		April	1585_0001			1																									0	0	0	
				June	1585_0002	1				001	****				03/10/202	2 2													1		1		4	0	0	rough handling patient,Fail provide post fall assessment
				October	1585-0003			1																									0	0	0	
				Oct/Nov	1585-0004	1															1												1	0	0	Fail Admin correct Meds & RPN report mistake(20days)
M581	Sunset Manor Home	1		Jan/Feb	876606_0005	1			7	001	****			1	29/06/2022	,			1		1				11								1	0		cor rail co #2 due Jan 14/22rail minediate report/inspect/assess res.v.res abuse
11.501				Junyreb	0,0000_0000																_												-			CO2 Fail CO#3 due Jan14/22 Immediate
			-					-		002	##########	_			29/06/2022	2			-						++					_	1	1	1	0	1	report/investigate alleged abuse
										003	*****				19/05/2022	2													1	1			1	0	1	CO3 Fail CO#8 due Jan 14/22 Fail document removal of patients' foley catheters
		\square			772155 000142		$\uparrow\uparrow$				****			4	29/06/2022					\square	1	1	$\uparrow\uparrow$	$\uparrow\uparrow$	\square		\square						1	0		CO4 Fail administer/manage patients hypoglycemic protocols/treatments
		++	+		773155_0001A2	╂┼	++				*****	+			29/06/202		+	+	+	+	1		++	++	++	++	$\uparrow \uparrow$	+	+	\square	+		1	0	1	COS Fail CO#1 due Dec.30/21 correct Medication admin errors for several patients
					773155_0001A1					005	*****										1	1											1	0	1	
		\square				$\downarrow \downarrow$	++			006	****				19/05/2022	2	\square	$\downarrow\downarrow$		\parallel	$\downarrow \downarrow$	$\downarrow \downarrow$	++	1	1	++	\square	\parallel				\square	1	0	1	CO6 Fail engage Residents in Hand Hygiene CO7 Fail CO# 5 due Jan 14/22 Muliple Skin Wound
		\square			773155_0001A2	$\downarrow \downarrow$	++			007	****					1	1	$\downarrow\downarrow$		\square	\parallel	$\downarrow \downarrow$	++	\square	\parallel	\square	\square					\square	1	0		care failures assess,document treat
	concurrent															2	2		1	L 1	1	1		1 1	1								5	5		Multi failures Staff Infection control practices , Failure deliver patient's scheduled care plan, 2 cognitive impaired res's pain asses not completed, Fail notify SDM of Res abuse by other Res, Meds incidents not reviewed/analyzed/reporting/ taking corrective actions,taking corrective actions
				Jan/Feb	773155_0002A2		1		1	001	****								1	L	1												1	0		CO1 Responsive Behaviors. 3 Res with RB staff failed to take 5 step process to keep track/reviewed High Risk rounds
																			1	L 1													1	1	0	Fail bathed Res at choice 2 times week to meet hygiene requirements

			Í				pectic ails	n															No	n-Com	nplian	ces Note	ed								
		Owners	shin					уре	nce Orders		eadline	ers	ine	During Inspection # of Non- Compliance Remedied	npliance	Nursing and	Personal Care	Care Plans		Resident Rights	Medication	Management	Dietary	Infection		Safety Hazards		Issues	Facility	мапаветтепт	Abuse or Neglect		тот	ALS	
ID #	NAME of HOME	Municipal Non-Profit	For Profit	Last Date of VISIT		CIS	Cmpl Othor	<u>u</u>	# of Compliance Orders	CO #'s	Compliance Deadline	Directors Orders	DO/DR Deadline	During Inspec Compliance R	Date Non-Compliance Remedied	W V N I	V C P O C	wv	C W O N	/ V (P (C	C W D N	V C	W V C N P C C	w v	/ C	W V C N P C C		V C	W V N P C		N V	C١	νv	c o	
				May	1587_0001	1	1	1								2							2			1			1		1		7	0 0	Res abuse, fail report abuse immediately, Bruising not referred to Diatician for nutrition care bruises, Weekly
	Admin Monetary Penalty			·····,					1	. 001	*****										1	1				_			_		_		1	0 1	Failed to meet compliance #005 of 2022_773155_0001, O. Reg. 79/10 s.131.(2).AMP#001 Medication Orders \$5500.00
				June	1587_0002	1	1	1						1		2		2		1		1		2		1							8	0 1	Care pian become termineter, a instances care pians indus etc. not followed, Bathing requirements not followed, disinfection policies not followed, infection surveillances not followed/checked,nutrition/hydration policies not followed,lack clarity careplan use/positioning of mobility
	Admin Monetary Penalty								1	. 001					29/06/2022	2 1																	1		Skin and Wound Care/assessments repeated failures follow requirements over 3 years Financial penalty \$5500.
				Aug/Sep	1587_0003	1	1							5		3		1						1									5	0 0	Altered skin integrity,, pressure ulcers,confusion physicians orders,misplaced skin creams,use outdated inspec. Tool
																1		2		3	1			1					1				9	0 0	care plan unclear,care plans not followed,fail do required skin assessments,Fail prevent res.v.res. verbal abuse,IPAC standards not ensured/followed, changed
	Admin Monetary Penalty								2	2 001	. 24/10/2022					1	1																1	0 1	Serious failures follow Physicians' skin/wound /ulcer care for number residents care. Failed audits of care,Fail maintain records all care actions Financial Monetary Penalty. 55500
	Admin Monetary Penalty									002	24/10/2022										1	1											1	0 1	Multiple Serious Failures Medications Financial Penalty \$11,000.
M616	Tall Pines LTC Centre	1		Jan/Feb	876606_0004	1																											0	0 0	
				Jan/Feb	876606_0003		1					H				\square		\square			\square			\square	П		\square			\square		F	_	0 0	
M563	The Elliott LTC Residence	1		August	1628_0001	1																		1											Failure to report positive staff COVID Infection reports immediately as required
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3048	The Village at University Gates					$\left[\right]$	1														Π		+		\prod								0	0 0	Unclear intervention direction/strategy prevent injury, PPE rules not followed during COVID outbreak, Fail engage SDM in care plans,Fail follow Meds order
	Schlegel Villages Inc.			October	1476-0001	1			1	. 001						1		1			1			1	1								4	0 0	changes, CO1 Fail follow PPE use policy and disinfection practices put Residents at risk
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2915	The Village Riverside Glen		1	Jan/Feb	750539_0003	\vdash	1	++	_	+		\vdash				1	1	\vdash	\square	++	+		+++	++	++	++	++	+	+	\vdash	+	+	1	1 (Failed use Falls prevention required device
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		Owners	ship				1	ype	-	ice Orders	Deadline	lers	ine	During Inspection # of Non- Compliance Remedied	mpliance	Nursing and	Personal Care	Care Plans		Resident Rights	Medication	Management	Dietary	Infection	Protection	Safety Hazards	Maintenance	lssues	Facility	Management	Abuse or Neglect		тс	DTALS	5	
ID #	NAME of HOME	Municipal Non-Profit	For Profit	Last Date of VISIT		CIS	Cmpl	i i	PCI	# or compliance Orgers CO #'s	npliance	Directors Orde	DO/DR Deadline	During Inspection # of Compliance Remedied	Date Non-Compliance Remedied	W Y	V C	W V O N P O C	C W D N		wν	C W O N	V C	wv	C V 0 N	/ V /	C W O N	VC	wv	0	w v	С	W N	v	C O	COMMENTS
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2859	The Village Sandalwood Park		1	January	823653_0002	1						$\left \right $				\square		1 1									+						1	1	-	ail review/revise Res. Care plans every 6 months.
				January	823653_0001		1												1	1											1 1		2	2		Res.Rights refuse consent specimen collection, Fail report observed abuse to DIR
				Mar/Apr	876606_0011		1			1 00	1 ########	+			25/07/2022	2 1	1																1	0		CO1 Skin,wound care. Fail report weekly assessments infections to Skin Care Lead
				iviai/Api	870000_0011		1			1 00		,			23/07/2022	2 1	1																1	0	-	lawed fail use alcohol based rub/failed
				July	1344_0001	1	1	1	_	_						1		1						2					1				5	0	0	wearing gloves,Staff failed follow Head Injury
	The Village of Winston Park		1																																	
2783				March	876606_0009		1					$\left \right $				\downarrow											+						0	0	0	
	Winston Hall Nursing Homes Ltd	\vdash	$\left \right $	March	876606_0010		\mathbb{H}	1	╉	+		╉╋		+		++	+	++	-	\vdash	++	$\left + \right $	\vdash	+	$\left \right $	++	+	+	\vdash	$\left \cdot \right $		┢╋	0	U		DO1 follow up
				May Oct	1274_0003 1274-0004	1	1	++	-							++			-					1				-		\vdash			1	0	0	ailure to screen all entries to home,staff & visitors No findings
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2559	The Village Seniors Com.		1	August	1111_0001	1								1		2		1								1							4	0	0 r	nishandled/miscommunicated handling res. Led to
	Hanover Operating Inc.							++	_			+				++			_								+	_					0	0	0	
	Trillium Court		1					++	-			+				++			-							+	+	-					0	0	0	
2773	Trillium Court		Ľ	Feb.	977754_0002			1	_	1 00	1 14/03/202	2			26/04/2022	2	+	++	-		$\left \right $			1	1	+	+	_					1	0	1	CO1 Infection control - hand hygiene mealtime
	Revera Long Term Care Inc			April	1264_0001			1						1																			0	0	0	CO complied with
2580	Trinity Village Care	1		January	750539_0001		1																										0	0	0	
				August	1094_0001A1	1	1									3		2			1			1							2		9	0		staff abuse(Fired), Fail keep SDM informed,Failure provid ull Care Plan,Head injury routine not followed after
	On and off-site inspections									1 00	1 04/11/202	2									1	1											1	0	1 t	ank empty
963	Tullermore Care Community		1	July	1015_0001	1	1	H										2	1		H			1				-		H			4	0	0 F	ail respond to Res.Behaviors correctly, RPN broke
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	Turke Only Of Mars 1991	\vdash					\mathbb{H}	++	+	_		+				++	+	++	+	\square	\vdash	$\left \cdot \right $	\square	\square	\square	++	+	+	\square	\vdash	+	╟╟	0	0		Vissing Point-Care-signage & disinfection
2752	Twin Oaks Of Maryhill Inc.	\vdash	1	July	1245_0001	1	\vdash	++	+	+		╉┥		2	2	++	++	++	+	\vdash	\vdash	$\left + \right $	\vdash	2	\vdash	++	+	+	\square	\mathbb{H}	+	⊢⊦	2	0	0 e	equipement,Fail hand hygiene
		\vdash	╞╴┨				H	++	╈			\uparrow		1		$\uparrow \uparrow$	+	++	1			+	+	\square		++	+	+	\square	\vdash	+	\mathbb{H}	0		0	
2734	Vera M. Davis Com.	1		Mar/Apr	890758_0005		1							1		1	1					\square		1 1					1 1	\Box		Ц	3	3	_	nygiene policy not followed, Critical incident report (Fall
		\vdash	+				\vdash	++	+	+		+				+	+	++	+	\square	\vdash	++	\mathbb{H}	+	\vdash	++	+	+	\vdash	\mathbb{H}	+	╟╟	0	0	0	
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	and room			October	1340-0001	1										2		2			3								1				8	0	0	ans intervention plan, rail use lans intervention plan, rail
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M629	Wellington Terrace LTCH	1		June	1624_0001				1					2			Π		l		1					1				Π		T	2	0	4	Air temp not always measured,Fail supervise res. Consuming meds.
						1																	H										0	0		2 issues complied with during inspection

						Inspe Deta	ection ils														N	on-Cor	npliar	ces Note	d								
		Ownersh	hip				Тур	e	nce Orders	Deadline	ders	dline	ction # of Non- Remedied	Compliance	ng and	sonal	Care Plans	Docidont Dichto		Medication Management	Dietary	Infection	Protection	Safety Hazards	Maintenance Issues		Facility Management		Abuse or Neglect	тс	TALS	;	
ID #	NAME of HOME	5 5	or Prot	Last Date of VISIT		CIS	Cmpl Other		# of Complia CO #'s	npliance	Directors Orc	DO/DR Dead	During Inspe Compliance F	Date Non-Co Remedied										W V C N P O C		C W O N						-	COMMENTS
2928	Woodhall Park Care Com.		1	February	876606_0006	1																1	1	1						0	0		Fail disinfect nail clippers, Use of inappropriate /unsafe wheel chair
	Sienna Senior Living				876606_0005		1												11											0	0	0	
	Sub Totals WN & VPC																	\square	+	++										0	0	0	
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This is **Exhibit "D"** referred to in the Affidavit of **Dr. Samir Sinha**, sworn this 21 day of March, 2023, in accordance with O. Reg 431/20, Administering Oath or Declaration Remotely.

A Commissioner for taking Affidavits etc.(*or as may be*) (pursuant to O. Reg 431/20)

Amanda Marie O'Brien, a Commissioner etc. Province of Ontario, for Goldblatt Partners LLP, Barristers & Solicitors Expires November 15, 2024





September 14, 2022

MEMORANDUM TO: Health System Partners

FROM:Nancy Matthews, Deputy Minister, Ministry of Long-Term Care
Alison Blair on behalf of Dr. Catherine Zahn, Deputy Minister, Ministry of
Health
Matthew Anderson, President and CEO, Ontario Health

RE: Bill 7 Implementation to Support Ontario's *Plan to Stay Open: Health System Stability* and Recovery

On August 18th, the government launched Ontario's <u>Plan to Stay Open</u>: Health System Stability and Recovery. This five-point action plan was developed to address Ontario's urgent need to stabilize the health and long-term care sectors and preserve our hospital capacity this fall/winter and into the future. As we look ahead, with the potential for a new wave of COVID-19 and other respiratory illnesses, our focus remains on ensuring patients, residents, clients, and communities continue to receive the care they need from our health system. This means ensuring Ontarians receive the right care in the right place.

Together with partners across the system, we have begun immediate steps to implement several key strategies from the plan. This includes operationalizing the *More Beds, Better Care Act, 2022* (the "Act", formerly Bill 7) (More Beds, Better Care Act, 2022, S.O. 2022, c. 16 - Bill 7 (ontario.ca)) that received Royal Assent on August 31, 2022. The Act is aimed at facilitating the admission of eligible patients, who are clinically determined as needing an Alternate Level of Care (ALC), into a long-term care home, while they wait for placement in a preferred home.

As we move forward with this implementation, we are grounded in a 'home-first' philosophy, ensuring that, whenever possible, patients arriving in a hospital are supported in returning to their home. However, where that is not possible and long-term care is determined to be the appropriate setting, we are committed to ensuring those patients are compassionately and respectfully supported as they transition to long-term care, where their health and personal care needs can be met and their independence, safety, and quality of life enhanced. Effective September 21, 2022, the remaining provisions of the Act will come into force. In addition, changes to the regulations under the *Fixing Long-Term Care Act, 2021* (<u>O. Reg. 484/22</u>) and the *Public Hospitals Act* (<u>O. Reg. 485/22</u>, <u>O. Reg. 486/22</u>) will come into effect (see attached appendix for a summary of the regulations). These regulations will provide added clarity and specific requirements enabling and supporting the changes outlined in the legislation. The most significant change is the ability of Home and Community Care Support Services (HCCSS) placement coordinators, working collaboratively with hospitals and long-term care homes, to facilitate an eligible ALC patient's admission into a temporary long-term care home, while they wait for a preferred home.

All sectors should be aware of these changes as they support care to patients, families, caregivers, clients, and residents.

The following outlines some high-level information and specific direction where change is required to support this implementation:

Home and Community Care Support Services:

- A comprehensive Ministry of Long-Term Care field guidance document has been developed, in partnership with HCCSS and Ontario Health, to support HCCSS placement coordinators implement the new regulations (see attached). Consistent with current best practice, integrated care teams from the hospital and HCCSS should first review all options to have the patient return to their home.
- HCCSS placement coordinators must consider various factors, in consultation with the
 patient and family prior to authorizing admission to a long-term care home, including a
 patient's care needs, accommodation requested and distance from the patient's preferred
 location(s). They will also consider travel for loved ones, caregivers and religious, ethnic,
 and linguistic preferences.
- HCCSS placement coordinators will continually engage the patient, family, caregiver, or substitute decision-maker, making every effort to seek consent at each stage of the process. If not achieved, the placement coordinator will continue to move forward with the determination of eligibility and other admission processes, without consent, with the goal of finding a suitable temporary arrangement in a long-term care home while they wait for their preferred home.
- A patient's choice of where they ultimately want to live will remain. A patient will be placed in a priority status on the wait list for a preferred home while in a temporary arrangement in a long-term care home. Where applicable, their place on a waiting list for a reunification priority access bed, would also be maintained.

Long-Term Care Homes

• Long-term care homes are required to review the information sent by the placement coordinator and either approve or not approve the admission, related to the temporary arrangement, promptly and to admit an eligible patient. (In practice, this would ideally occur within less than five (5) days).

- In addition, long-term care homes should work proactively with HCCSS and their Ontario Health region to identify available specialized supports and services for patients that could enable admissions that would otherwise not be possible.
- As previously communicated by the Ministry of Long-Term Care, long-term care homes are expected to bring beds back online that are no longer needed for pandemic-related isolation purposes. This is critical to increase available capacity within long-term care homes across the province.
- Long-term care homes are authorized to collect, use and disclose an ALC patient's personal health information to enable the long-term care admissions process.

Hospitals

- The discharge of a patient from a hospital remains a clinical decision that is undertaken in consultation with the interdisciplinary care team that facilitates ongoing dialogue with the patient, family, caregiver, or substitute decision-maker.
- HCCSS placement coordinators should keep hospitals informed throughout the eligibility assessment and application process and notify the hospital if a temporary care arrangement has been facilitated and if consent has or has not been provided by the patient or substitute decision-maker.
- Hospital personnel, as appropriate, are authorized to collect, use and disclose personal health information in respect of ALC patients as they carry out the eligibility assessment process including in cases where, despite reasonable efforts, patient consent has not been obtained.
- Hospitals will continue to be required under the *Health Insurance Act* to charge the daily chronic care co-payment to ALC in-patients who are awaiting placement in a long-term care home, subject to any applicable reductions or exemptions.
- Effective November 20, 2022, hospitals will be required under the *Public Hospitals Act* regulations to charge a standardized daily fee of \$400 to patients who no longer require hospital care, but who remain in hospital after being discharged, including ALC patients who have been authorized for admission to a long-term care home. This fee must be charged every day that the discharged patient remains in the hospital after a 24-hour period. In the case of a patient who will require care or supports in another setting after they are discharged from hospital (e.g., home care, long-term care, etc.), it is expected that members of the discharge planning team will coordinate regarding the timing of discharge to help ensure that, on the discharge date, any necessary arrangements are in place. Where issues related to the implementation of these changes arise, patients, families and caregivers should be encouraged to connect with the hospital's patient relations office.

Primary Health Care Providers

• Primary health care providers should familiarize themselves with the changes to support communication with patients, caregivers, and families, as appropriate.

• Primary health care providers, as defined in the regulation, are authorized to collect, use and disclose personal health information respecting ALC patients as they carry out the long-term care home eligibility assessment and placement process, including in cases where, despite reasonable efforts, patient consent has not been obtained.

Home and Community Care Service Providers

- Home and community care service providers should enhance efforts to support safe and timely transitions to home and other community settings.
- Service providers should familiarize themselves with the changes to support communication with patient, caregivers, and families, as appropriate.
- A service provider that was providing home and community care services to an ALC patient immediately before their admission to hospital is authorized to provide personal health information respecting that patient to a placement coordinator to assist the coordinator in carrying out the long-term care home eligibility assessment and placement process, including in cases where, despite reasonable efforts, patient consent has not been obtained.

As a system, we are requesting that you continue to work collaboratively through Ontario Health regional Access and Flow tables in support of a consistent and coordinated implementation approach across the province.

We understand the significant challenges ahead for our health system and know we can count on your ongoing collaboration. Our shared goal remains -- equitable access to quality care for all Ontarians by ensuring people receive the right care in the right place. Once again, thank you for your continued commitment and dedication to caring for millions of Ontarians each day.

If you have any questions or require further information, please contact the Ministry of Long-Term Care for changes under the *Fixing Long-Term Care Act, 2021* by email at <u>LTC.Info@ontario.ca</u>, and the Ministry of Health for changes under the *Public Hospitals Act* by email at <u>CSU.MOH@ontario.ca</u>.

Sincerely,

Martien

Nancy Matthews Deputy Minister, Ministry of Long-Term Care

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Matthew Anderson President and CEO, Ontario Health

Alison Blair on behalf of Dr. Catherine Zahn Deputy Minister, Ministry of Health

C: Dr. Kieran Moore, Chief Medical Officer of Health Dr. Barbara Yaffe, Associate Chief Medical Officer of Health Alison Blair, Associate Deputy Minister, Pandemic Response and Recovery, Ministry of Health Melanie Fraser, Associate Deputy Minister, Health Services, Ministry of Health Erin Hannah, Assistant Deputy Minister, Ministry of Long-Term Care Jeff Butler, Assistant Deputy Minister, Ministry of Long-Term Care Adriana Ibarguchi, Assistant Deputy Minister, Ministry of Long-Term Care Peter Kaftarian, Assistant Deputy Minister, Ministry of Health Peter Spencer, Director, Legal Services, Ministry of Health/Ministry of Long-Term Care Tara Wilson, Director, Ministry of Health Amy Olmstead, Executive Lead, Ministry of Health Donna Kline, Chief Communications and Engagement Officer, Ontario Health Anna Greenberg, Chief Regional Officer, Toronto & East, Ontario Health Susan DeRyk, Chief Regional Officer, Central & West, Ontario Health Brian Ktytor, Chief Regional Officer, North, Ontario Health Michael Sherar, President and CEO, Public Health Ontario Cynthia Martineau, CEO, Home and Community Care Support Services Lisa Levin, Chief Executive Officer, AdvantAge Ontario Donna Duncan, Chief Executive Officer, Ontario Long Term Care Association Samantha Peck, Executive Director, Family Councils Ontario Dee Tripp, Executive Director, Ontario Association of Residents Councils Monika Turner, Director of Policy, Association of Municipalities of Ontario Michael Jacek, Senior Advisor on Social and Health Policy, Association of Municipalities of Ontario Chris Murray, City Manager, City of Toronto

ONTARIO HEALTH COALITION AND ADVOCACY CENTRE FOR THE ELDERLY

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HIS MAJESTY THE KING IN RIGHT OF ONTARIO AS REPRESENTED BY THE ATTORNEY GENERAL OF ONTARIO, THE MINISTER OF HEALTH, and THE MINISTER OF LONG-TERM CARE

Respondents

Court File No.

ONTARIO SUPERIOR COURT OF JUSTICE

Proceeding commenced in Toronto

AFFIDAVIT OF DR. SAMIR SINHA (Sworn March 21, 2023)

GOLDBLATT PARTNERS LLP

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Counsel for the Applicants

Applicants