Long-term Care in Canada: For those with family in LTC facilities during COVID-19 pandemic, size mattered

RELATIVES OF LTC RESIDENTS OFFER MORE PRAISE TO SMALLER, PRIVATELY RUN HOMES IN HANDLING PANDEMIC

May 25, 2021 – It has been more than a year since COVID-19 outbreaks first tore through many long-term care facilities in this country, resulting in more than 15,000 resident deaths, which account for approximately two-thirds of all fatal coronavirus cases in Canada.

It has also been a year of shocking revelations about the conditions at some facilities and failed responses that in many situations led to the needless loss of life among this frail population.

Those with little lived experience with or personal proximity to the long-term care world in Canada might be forgiven for assuming such horror stories were the norm.

But new data from the non-profit Angus Reid Institute – canvassing the opinions and experiences of Canadians whose own family members and close friends were in long term care – indicate the vast majority believe their loved one’s LTC facility handled its COVID-19 response as well as “could be expected” (39%) or “well enough overall” (42%), while one-in-five say their loved one’s LTC facility failed in its duties.

The Institute sought to understand the experiences of more than 800 Canadians who currently have or have had a family member or close friend in care within the past year. From this report emerges a multifold story. While, as mentioned, most facilities are seen to have done at least an average job caring for the loved ones of those surveyed, not all facilities are created equal.

Criticisms are consistently higher for LTC facilities that are government-run or operated by large private companies as part of a chain. On each of the questions of overall COVID-19 handling, communication, and protection of residents, respondents whose loved ones were in smaller, privately run facilities are half as likely to offer a negative appraisal.

METHODOLOGY:

The Angus Reid Institute conducted an online survey from March 15 – 18, 2021 among a representative randomized sample of 816 Canadian adults who are members of Angus Reid Forum and have a loved one currently living in a long-term care facility or did within the past year. For comparison purposes only, a probability sample of this size would carry a margin of error of +/- 3.5 percentage points, 19 times out of 20. Discrepancies in or between totals are due to rounding. The survey was self-commissioned and paid for by ARI. Detailed tables are found at the end of this release.

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More Key Findings:

- For one-in-three respondents, based on their loved one’s current mental and physical health, at-home care for that individual would be impossible. For another 45 per cent, it would only be possible with considerable help.

- Among those who visited long-term care frequently to visit their loved ones, one-third (31%) became more involved in providing care themselves after the pandemic began.

- One-in-three respondents with loved ones in either a government-operated (34%) or larger chain-run private facility (31%) say staffing levels represent significant concerns. Those assessing smaller private facilities are half as likely to say this (16%).

- Overall, one-in-five Canadians would not recommend the current facility that their loved one is residing within, while the rest say that they probably (45%) or definitely (24%) would.

- 46 per cent of respondents to this survey say there were COVID-19 cases in their loved ones’ LTC facility. One-in-ten say this person became sick but recovered (11%) while 6 per cent say they passed away.

About ARI

The Angus Reid Institute (ARI) was founded in October 2014 by pollster and sociologist, Dr. Angus Reid. ARI is a national, not-for-profit, non-partisan public opinion research foundation established to advance education by commissioning, conducting and disseminating to the public accessible and impartial statistical data, research and policy analysis on economics, political science, philanthropy, public administration, domestic and international affairs and other socio-economic issues of importance to Canada and its world.

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Part One: Loved ones in long-term care

This special two-part Angus Reid Institute study on long-term care facilities in Canada sought to capture personal experiences with – and attitudes toward – this topic. This first report focuses on the experience of Canadians in long-term care (currently or within the past year). An upcoming report will also canvass this group, while additionally delving into the attitudes of the general population, particularly in regards to future policy issues regarding long-term care in Canada.

Profile of those in care

For the purposes of this survey, long-term care facilities are defined as those that are provincially licensed and regulated and provide living accommodation for elderly individuals as well as on-site nursing and personal care 24 hours a day, 7 days a week.

Census data indicate that over 200,000 senior citizens in Canada (ages 65 and above) live in these types of dwellings. Note that this does not refer to retirement residences that provide “assisted living” services, where nursing staff are not always on-site.

While statistical data on COVID-19 infections and related deaths in these facilities reveals the extent to which the virus spread within them, this Angus Reid Institute survey sought to quantify the lived experiences of seniors living in long-term care during the pandemic, relying on self-reporting from members of their family and close friends.

According to their loved ones, half of the Canadian seniors who lived or were living in long-term care in the last year represented in this sample are or were over 85 years old. They are or were twice as likely to be women and most (84%) live or lived with at least one medical condition. Three-quarters live or lived in a private room. These demographic data (summarized in the infographic below) align closely with those of the general population, as does data on the length of stay.
Type of facility

The pandemic has brought renewed focus not only to the overall state of long-term care homes in Canada, but also to those who own and/or operate them. This report will shed light on both of these elements, as the LTC residents represented in this study come from a variety of facilities.

Specifically, they’re equally likely to have lived in a government-operated facility (37%) as one operated by a private company (39%), while a smaller proportion (9%) were housed in a facility run by a community or religious group. Among those in private facilities, the largest number of respondents identified their loved ones as living in a home run by a large company operating a chain of facilities (53%), while a quarter said their loved one was in home operated by a small individual firm.

This data is similar to statistics provided by the Canadian Institute of Health Information (CIHI), indicating a nearly even split between private (whether for-profit or non-profit) and public ownership.

At-home care not feasible for most

Importantly, while elderly individuals may be most comfortable and happy living in their own homes, this is not a viable option for many. For one-in-three respondents, based on their loved one’s mental and physical health, it would be impossible. For another 45 per cent, being at home would not be feasible without considerable help, findings supported by similar CIHI data:
Support with regular, daily activities such as eating and personal hygiene is the most common type of assistance needed for residents to be at home. The second most common support long-term care residents would need, however, is social interaction.

Indeed, recent ARI studies have shown how social isolation and loneliness present a serious challenge for Canadians of all ages, especially those that may have to live alone.

Notably, nine-in-ten respondents say their loved one would need at least two of the supports listed below:

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**Ability to be living in an at-home situation**  
(Has/had a loved one in long-term care, n=625*)

- No way that would be possible: 32%
- Not really without massive help: 45%
- Yes, with help: 19%
- Yes, relatively easily: 4%

*Question not asked of those whose loved one passed away in the past year*
Part Two: Public or Private? It's size that matters more

Ratings for facilities strong overall

Canada’s long-term care industry has been heavily scrutinized in the fallout of the COVID-19 crisis. This, after nearly seven-in-ten of Canada’s COVID-19-related deaths have occurred in these facilities. While other nations have endured challenges as well, Canada’s proportion of deaths is 28 points higher than the international average for this industry.

Despite these staggering statistics, it is worth noting that the overall ratings offered by those who have loved ones in care are generally positive.

Indeed, 86 per cent of respondents say that the overall quality of care their family member or close friend receives is good, while 89 per cent praise the professionalism of the staff. This suggests a high level of satisfaction with LTC facilities – notwithstanding the coronavirus:

**Percentage of respondents rating each as excellent or good**
(Has/had a loved one in long-term care, n=816)

<table>
<thead>
<tr>
<th>Service</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall cleanliness and upkeep of the building</td>
<td>90%</td>
</tr>
<tr>
<td>Professionalism of the staff</td>
<td>89%</td>
</tr>
<tr>
<td>The shared spaces in the residence</td>
<td>87%</td>
</tr>
<tr>
<td>The residents’ own space (their suite or room)</td>
<td>87%</td>
</tr>
<tr>
<td>The overall quality of care</td>
<td>86%</td>
</tr>
<tr>
<td>The social atmosphere within the residence</td>
<td>85%</td>
</tr>
<tr>
<td>Amenities/services/activities</td>
<td>84%</td>
</tr>
<tr>
<td>Quality of medical care provided e.g. doctor visits/follow-up</td>
<td>83%</td>
</tr>
<tr>
<td>Quality of nursing care for residents e.g. amount of...</td>
<td>79%</td>
</tr>
<tr>
<td>Quality of the food served</td>
<td>75%</td>
</tr>
<tr>
<td>Staffing levels – i.e., the number of workers there at any...</td>
<td>72%</td>
</tr>
</tbody>
</table>

Key concerns with government, large private providers

Responses are more critical, however, for three key aspects of long-term care accommodation. Three-in-ten respondents voice concern over the staffing levels at their loved one’s facility. The intensity of criticism is higher for those with loved ones in government care and housed by larger private companies compared to smaller private operators when it comes to the quality of food served and the overall quality of nursing. Notably, 28 per cent of those whose loved one is in a larger private facility say the quality of nursing care is poor or terrible; this proportion is double that of those in smaller private facilities:
Less criticism of smaller providers

Digging deeper into these data, ratings for smaller private companies are consistently higher than those of government-run facilities or larger chains. On the question of overall quality of care, a key indicator for satisfaction with these facilities, two-in-five of those whose loved one is in a smaller private facility (38%) say that the overall care is excellent, while only nine per cent take a negative view. In comparison, those whose loved one is in a residence operated by a large private company are twice as likely to offer a negative rating (18%), while far fewer say the care reaches an outstanding level:

Rating for each element of LTC home
"The overall quality of care provided at that long-term care residence"
(Has/had a loved one in long-term care)

*Small sample size, interpret with caution
One-in-five would not recommend residence

What this all portends is a divided population when it comes to the likelihood that a person with intimate knowledge of a facility would recommend it to others. While one-quarter whose loved one is in either government care or a large private facility say they would definitely recommend it to another person looking for care, the same number in each case say they would not. Meanwhile, when it comes to smaller companies providing care, respondents are much more bullish in their endorsements:

Would you recommend this long-term care residence to someone else who needed care?
(Has/had a loved one in long-term care)

![Graph showing recommendation rates by type of facility](image)

*Small sample size, interpret with caution

Part Three: Experiences during the Pandemic

For Canadians with family or friends living in long-term care, ensuring the quality of care provided by these facilities is a constant priority regardless of who operates them. Even under normal circumstances, potential issues with professionalism, cleanliness, and other aspects of the residence’s accommodation could endanger the health of loved ones. During a pandemic, however, the threat posed by these issues is magnified.

Nearly one-in-five say their loved one contracted COVID-19

Asked specifically about their own experience, 17 per cent say their loved one caught COVID-19 themselves, and 6 per cent died as a result, in line with the case fatality rate observed in Canada’s care homes. While these percentages appear low in relation to the overall sample, they represent thousands of lives lost. At the time of this writing, more than 15,000 LTC residents have died due to COVID-19, representing roughly 65 per cent of the total number of COVID-19 deaths in Canada.
Overall, nearly half (46%) of respondents who have had a loved one in long-term care during the pandemic report cases of COVID-19 among residents in that facility. Again, this aligns quite closely with data on the proportion of care homes in Canada which have had an outbreak. The same can be said of regional data, shown in the table below:

<table>
<thead>
<tr>
<th>COVID-19 outcomes on loved ones in long-term care (Reported by friends and family of LTC residents, n=816)</th>
<th>Region</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total</td>
</tr>
<tr>
<td></td>
<td>(n=816)</td>
</tr>
<tr>
<td></td>
<td>BC</td>
</tr>
<tr>
<td></td>
<td>(n=113)</td>
</tr>
<tr>
<td></td>
<td>AB</td>
</tr>
<tr>
<td></td>
<td>(n=101)</td>
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<tr>
<td></td>
<td>SK/MB</td>
</tr>
<tr>
<td></td>
<td>(n=126)</td>
</tr>
<tr>
<td></td>
<td>ON</td>
</tr>
<tr>
<td></td>
<td>(n=281)</td>
</tr>
<tr>
<td></td>
<td>QC</td>
</tr>
<tr>
<td></td>
<td>(n=117)</td>
</tr>
<tr>
<td></td>
<td>ATL</td>
</tr>
<tr>
<td></td>
<td>(n=78*)</td>
</tr>
<tr>
<td>Resident cases at their LTC home but loved one did not get COVID-19</td>
<td>29%</td>
</tr>
<tr>
<td>Loved one infected with COVID-19 but survived</td>
<td>11%</td>
</tr>
<tr>
<td>Loved one died of COVID-19</td>
<td>6%</td>
</tr>
<tr>
<td>No resident cases at their LTC home</td>
<td>38%</td>
</tr>
<tr>
<td>Unsure if there were resident cases</td>
<td>16%</td>
</tr>
</tbody>
</table>

*Small sample size, interpret with caution

One-in-four Canadians with a loved one in a long-term care facility that had cases of COVID-19 say the facility’s pandemic response was indeed inadequate. Facilities that successfully avoided COVID-19 cases receive near unanimous positive reviews:
One-in-five say LTC fell short on COVID-19 management

Asked how their loved one’s long-term care residence managed the threat of the virus, one-in-five (19%) say the facility either “fell short” or “failed to do what should have been done”. Still, a majority are satisfied with the facility’s response:

All things considered, including what was known back at the beginning of the pandemic, would you say this long-term care residence:
(Has/had a loved one in long-term care, n=816)

- Did everything that could be expected: 39%
- Did well enough overall: 42%
- Fell short/failed to do what should have been done: 19%

Research into how the pandemic has been handled by the long-term care industry put scrutiny on chains of for-profit homes. For instance, a brief from the Ontario COVID-19 Science Advisory Table listed “chain ownership” as being one of the three “most important risk factors for the magnitude of an outbreak”.

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Indeed, responses to the question of how well care homes responded vary by the types of organization managing the LTC residence, with lower ratings coming from those commenting on large private facilities, as seen in this graph:

*Small sample size, interpret with caution

Respondents were also asked about specific aspects of the long-term care residence’s COVID-19 response, including its implementation of public health measures, communication with residents’ families, and overall effectiveness of protecting residents from the virus. Of these items, facilities received the highest number of negative reviews on their communication with families, with 27 per cent saying they did a poor or terrible job on this.
But high marks from most on response

It is notable that in terms of specific responses to the pandemic, most LTC facilities receive high praise. Overall, 35 per cent say that the facility they are familiar with did an excellent job in implementing public health measures when the pandemic began; this rises to half (53%) among small private companies. Another half overall (49%) say that the facility did a good job:

Over this past year, given the pandemic, what kind of job has this long-term care facility done with their implementation of public health measures?
(Has/had a loved one in long-term care)

*Small sample size, interpret with caution*

When it comes to protecting residents in care from sickness and risk of death from COVID-19, one-quarter (23%) say that the facility their loved one is in did a poor or terrible job. This rises to nearly three-in-ten (28%) among large chains. That said, 78 per cent of those with loved ones in care say that the facility did a good or excellent job in ensuring the safety of residents:
Over this past year, given the pandemic, what kind of job would you say this long-term care facility has done at protecting residents from COVID-19? (Has/had a loved one in long-term care)

*Small sample size, interpret with caution

**How did relatives handle the situation?**

Concerns were pervasive enough that more than half (55%) contacted the residence with questions about COVID-19, and one-in-five (22%) seriously considered moving their loved one out. That proportion may well have been higher, were it not for the sheer impracticality of bringing that person home, as discussed earlier in this report.

**Did you or any of your family members do any of the following in response to concerns about COVID-19 and your loved one in that long-term care facility?**

(Has/had a loved one in long-term care, n=816)

- Contact the LTC residence with specific concerns/questions about COVID-19: 55% Yes, did that; 45% No, did not
- Seriously consider moving your loved one out of the residence: 22% Yes, did that; 78% No, did not
- Become more involved in providing care yourself during COVID-19 (feeding, bathing, sleeping over): 20% Yes, did that; 80% No, did not
- Make a complaint (to management, the board, a provincial body etc.): 20% Yes, did that; 80% No, did not

Those who had been visiting their loved one frequently pre-pandemic were even more likely to have contacted the residence or taken other action due to concerns around COVID-19; a third of them (31%) became more involved in providing care themselves.
Did you or any of your family members do any of the following in response to concerns about COVID-19 and your loved one in that long-term care facility? (Percentage saying yes for each)

<table>
<thead>
<tr>
<th></th>
<th>Total (n=816)</th>
<th>Frequency of visiting</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Once per week or more (n=308)</td>
</tr>
<tr>
<td>Contact the LTC residence with specific concerns/questions about COVID-19</td>
<td>55%</td>
<td>63%</td>
</tr>
<tr>
<td>Seriously consider moving your loved one out of the residence</td>
<td>22%</td>
<td>27%</td>
</tr>
<tr>
<td>Become more involved in providing care yourself during COVID-19 (feeding, bathing, sleeping over)</td>
<td>20%</td>
<td>31%</td>
</tr>
<tr>
<td>Make a complaint (to management, the board, a provincial body etc.)</td>
<td>20%</td>
<td>30%</td>
</tr>
</tbody>
</table>

**Impact of visiting restrictions**

After more than a year of zero or limited face-to-face contact with their loved ones, vaccinations now offer long-term care residents a much-needed light at the end of the tunnel. As LTC residents across the country receive their second dose of COVID-19 vaccines to become fully inoculated, provinces have begun planning for the easing of visitor restrictions.

For their part, half of LTC residents’ family and friends say their province’s visitation restrictions have been appropriate. The rest, however, are more likely to say they have been too strict (31%) rather than too relaxed (21%). These opinions are similar to those present in the general population regarding overall COVID-19 restrictions, and therefore likely reflect broader feelings of pandemic life:

**Views on province’s restrictions for visiting residents at long-term care facilities during the COVID-19 pandemic**

(Has/had a loved one in long-term care, n=816)

- Way too strict: 10%
- Too strict: 21%
- About right overall: 49%
- Too relaxed: 15%
- Way too relaxed: 6%
While these visiting restrictions have reduced the risk of illness for the elderly, they do have detrimental side effects on well-being. Three-quarters (73%) report that their loved one has suffered “some” or “serious” impacts from restrictions on visiting.

**Impact of COVID-19 visiting restrictions on loved one in LTC**
(Has/had a loved one in long-term care, n=816)

- Serious impact – isolation during Covid had serious effects on them: 36%
- Some impact – loneliness, maybe some confusion: 37%
- Modest impact – missed visiting but okay: 20%
- No real impact on them: 6%

**Stress, second thoughts of keeping loved one in LTC**

Given the heightened risk COVID-19 poses for elderly and vulnerable populations, it is unsurprising that the vast majority of Canadians with a loved one in long-term care this past year have experienced some degree of anxiety. For many, this has been a source of acute stress.

**How would you describe your own level of concern or stress about your loved one in long-term care during the COVID-19 pandemic?**
(Has/had a loved one in long-term care, n=816)

- Low stress/Felt under control: 15%
- Some stress at times: 38%
- Pretty stressful overall: 31%
- Really stressful/Lots of worry: 16%

As the caretaking burden often falls more heavily upon women than men, it is significant to note that high stress levels for female respondents reach a majority, ten points higher than among men:
Chapter two of this report will examine attitudes among the general population toward long-term care facilities and federal and provincial governments’ handling of this file during the COVID-19 pandemic and beyond.

For detailed results by age, gender, region, education, and other demographics, [click here.](#)

For detailed results by facility management and frequency of visitation, [click here.](#)