

**Position Paper | December 2023**

# Improving Data in Long-Term Care

The Pan-Canadian Health Data Strategy Expert Advisory Group has identified workforce data and long-term care data as two priority areas for improvement. As governments across the country continue to develop major policy reforms for long-term care, in terms of both infrastructure and care, they are doing so with an unclear picture of the sector, residents, and the staff who care for them.

Access to reliable, validated, and standardized resident data is instrumental for effective care. Data is used at the home level to create person-centered care plans, understand the preferences and strengths of individual residents, and ensure that the specific needs of each resident are being met. At the organizational level, long-term care operators can assess the aggregate acuity and needs of the residents by unit or by facility and compare with the national benchmark. This information allows operators to allocate staff to areas where the need is greatest.

Unfortunately, data in long-term care is neither standardized nor consistently collected. In terms of understanding resident need, only two-thirds of Canadian long-term care homes use interRAI, a tool that is the gold standard in resident assessments. Of those homes, many are not using the long-term care specific version of the tool (LTCF), which is specifically developed to support the needs of residents experiencing dementia. interRAI is exceptionally useful for policy makers as data is transferred directly to the Canadian Institute for Health Information (CIHI) in near real time. This enables policy to be developed based on current information and needs.

Similarly, a lack of workforce and operational data remains a challenge for long-term care homes. Workforce data has been identified as a major gap across all health sectors, presenting unique challenges for addressing the health and human resources crisis. Understanding the aggregate staffing make up in long-term care, where the gaps are, the demographics of the workforce, whether there are geographic challenges in rural and remote areas, and a myriad of other factors that weigh into policy making require clear data. This does not currently exist. In long-term care this is exacerbated by a lack of knowledge about the broader operational capacity of homes. Without effective Management Information Systems (MIS), details on the financial, human resources, and infrastructure challenges of homes remain limited.

At a government level, understanding the aggregate and average needs of residents, and the operational and staffing needs of homes, allows for more effective long-term planning, policy development, and budget responses. Improving data availability is a vital step in ensuring the long-term care sector is appropriately resourced to provide quality care for all. CALTC supports efforts by the federal and provincial/territorial governments to prioritize data in health care. The

establishment of a data center of excellence that specifically considers long-term care homes and their specific needs to support data generation, analysis, and mobilization would be very welcome.

As discussions on data and long-term care continue, specific attention needs to be given to address data burden. There is a significant need for data development in long-term care in clinical, workforce, and operational areas, but there are very limited resources. As we look to the future, skilled positions in clinical informatics, data systems, cyber security, and artificial intelligence will be needed to support the long-term care sector. It is essential that planning going forward for long-term care not only considers what is needed for data,

but how it will be created and operationalized on a daily basis, ensuring that required resources and education are available.

As we continue to navigate several information gaps in long-term care, it is essential that any data being used for purposes such as research, evidence for policy development, media communication, funding decisions, or to inform a position, has been validated before contributing to misinformation on long-term care. We must be cognizant of the many ways data can cause harm to organizations or individuals, ensuring steps are taken to consider the accuracy and quality of data before using it in ways that impact decision makers.

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## Clinical Resident Assessment Data

InterRAI is the global gold standard in resident assessment. Conducting regular resident assessments are a vital element in developing care plans and ensuring a resident's needs are met. interRAI is a user-friendly tool that allows staff to conduct quality and comprehensive assessments while also ensuring comparability across sectors, compatibility with other health providers, and direct connections with CIHI to improve the aggregate data available to policy makers. For long-term care homes, the interRAI software systems must be upgraded by 2026 to the newest version of the interRAI, called the LTCF. The version widely in use in Canada today is the "InterRAI MDS" and will no longer be supported by CIHI after the upgrade deadline.

Homes face three major challenges in accessing interRAI: the initial set up costs, which is an acute challenge for smaller homes; the necessary internet and technological infrastructure; and a lack of staff with the required skills and expertise to conduct the assessments and collect the data. As well, resources are needed to complete the transition to InterRAI LTCF.

### CALTC is proposing the federal government:

- Develop a dedicated funding envelope for long-term care homes to **access interRAI, including upgrading existing versions to the LTCF.**
- Develop a dedicated funding envelope for long-term care homes to **upgrade internet infrastructure** to be compatible with the internet connectivity requirements to support reporting to CIHI.
- Ensure long-term care homes are funded appropriately to **train staff in resident assessments** and have the time and skills to input the data, as well as support for the addition of IT expertise to long-term care homes.

## Workforce and Operational Data

Health human resources is the number one issue facing Canada's health and long-term care sectors, yet policy makers are limited in their ability to respond because of the lack of clear data about the existing workforce. Improving workforce data is a fundamental step in addressing both the short and long-term health human resources challenges.

### CALTC is proposing the federal government:

- Develop and fund a **pan-Canadian health workforce data strategy**, as identified by the Health Canada Summary Report of the Health Human Resources Symposium.
- Develop a **standard national approach** for the collection of health and long-term care workforce data.
- Prioritize long-term care in the development of the federal government data centre of excellence, with **resources needed to support workforce data collection and utilization** in long term care homes.
- Publish **regular reports** on the state of the health and long-term care workforce in Canada.
- Provide long-term care homes with **funding for an informatics lead** to ensure privacy legislation and policy, cyber security, data sharing agreements, data collection, submission, findings analysis, and reporting can be fully implemented.
- Develop a dedicated funding envelope for long-term care homes to **support data collection practices**.

### About CALTC

The Canadian Association for Long Term Care (CALTC) is the national voice of long-term care, delivering resident-centred care services to seniors across Canada when they can no longer live at home. Since its inception in 2002, CALTC has been working together to share information, best practices, and evidence to improve the quality of care provided to residents in long-term care, no matter where they live.

