

CIVIC AFFAIRS

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An independent fact-finding organization reporting to the public on civic affairs.

HOMES FOR THE AGED

Story No. I - Background for Action

Fellow Citizens:

In the wake of the creation of a Metropolitan Federation, news reports have told the public of extensive capital undertakings advocated by the new Metropolitan Council. Among its current plans is a new home for the aged at Newmarket costing perhaps four to five million dollars. The proposal has been put forward by the Council's Standing Committee on Housing and Welfare, approved in principle by the Metropolitan Council, cleared with the provincial Department of Welfare and a contract let for architect's plans. The new home will accommodate 525 residents and, with a margin for changing occupancy, should provide for at least 500 elderly persons.

The Newmarket building does not pretend to solve greater Toronto's problem of homes for the aged. It will house only what are called "special care" patients. For other groups, the estimated requirement has been calculated at just under 2,000 beds. Sites and plans are being studied for three additional homes. Press reports have mentioned a figure of \$2,500,000 each, although nothing is settled.

For citizens who have not been in close touch with the subject of homes for the aged, the above figures raise two questions: 1) Why is there need for so much new accommodation immediately following federation? 2) How can the development be reconciled with the recent introduction of national old age pensions for all over 70 and the extension of old age assistance on a means test basis to those over 65?

The immediate answer to the first query is simple enough. With the new plan of government, suburban people will no longer be admitted to the York County Home. The City, for its part, operates only one home--Lambert Lodge--and it has been recognized from the beginning as stop-gap accommodation requiring replacement. Moreover, in terms of patient-beds, neither home has been at all adequate to meet the post-war claims on space.

A number of points are suggested by question two. To begin with, the high cost of living in urban areas has reduced the \$40 per month to minimum subsistence value even for persons who are canny managers of funds. Indeed, in the City's view, the situation is now well-nigh impossible for some people living in rented quarters. The explanation is twofold. First, the cost of shelter bulks particularly large in a personal budget that

must be confined to bare essentials. Secondly, the years of inflation have inflicted on Toronto the sharpest increases in rentals of any large Canadian city.

Last spring, City Council took advantage of an offer of subsidy from the Province to introduce a system of supplementary financial aid intended particularly for people forced to pay out a disproportionate share of their income in rent. Needy persons over 65 can qualify on a restricted means test basis for additional payments up to \$10 a month. The cost is shared equally by the two levels of government. As of January 1st, 538 older people in this City were in receipt of these supplementary assistance cheques. Similar payments have been made by five suburban municipalities cheques. Similar payments have been made by five suburban municipalities cheques. Hill, Long Branch, New Toronto, North York and Scarborough.

By the judicious use of supplements to offset the blighting effect of high urban rents, present pensioners can probably maintain themselves without other resources--provided they are in good health. But let illness strike, or even the reduced capacity of advancing years, and further assistance, either public or private, becomes a root necessity. Where the pensioner's ability to look after himself is reduced for long periods or perhaps permanently, and where other help is not forthcoming, public care seems clearly in order.

Pensions reduce the calls on public accommodation for elderly persons; they permit others admitted to such quarters to rebate a goodly share of the cost or in a few cases to pay their way in full. But they do not rule out the need for Homes for the Aged.

Again, Ontario's Homes for the Aged Act recognizes that some people can no longer support or care properly for themselves by the age of 60, while in rare circumstances, this situation may be reached at an even while in rare circumstances, this situation may be reached at an even earlier age. Yet such people cannot qualify for public pensions until they reach 65. For some of them, public care is the accepted answer.

Finally, the coverage and benefits of social legislation are steadily being expanded. The changes reflect the fact that the public is apparently prepared to do more for the less fortunate than was done in the past. At all three levels of government, legislation for elderly persons is recording this gradual change in outlook.

If it were not for the help of families and private charities the number of people who become dependent on public care would, of course, be much larger than it now is. It has been estimated that private charities much larger than it now is. It has been estimated that private charities in the area are looking after some 1,600 elderly persons. Again, the courts may require those with means to contribute up to \$20 weekly to the support of their dependent parents. But this is a remedy of last resort which is utilized by municipalities only rarely.

Metropolitan Responsibilities for the Aged

The role assigned to the Metropolitan Municipality for the care of the agod is easily defined. Under 'Rill 80' the Metropolitan Council is required to operate a home for the agod. Like other municipalities required to experience, Metropolitan Toronto must now establish and throughout the Province, Metropolitan Toronto must now establish and maintain accommodation to the satisfaction of the Ontario Minister of Welfare. Its mandatory duties towards elderly persons, as such, are limited to this one field—public institutional care. However, the limited to this one field—public institutional care to elder Metropolitan government will give more than incidental assistance to elder

people through its assigned responsibility for the hospitalization and burial of indigents. Additionally, the Metropolitan Municipality is permitted to engage in public housing and may, if it wishes, arrange for the construction of dwelling units earmarked for occupance by older persons.

The services assumed by the new government will leave important responsibilities in local hands. The area municipalities will continue to screen those seeking admission to homes for the aged. They will still take applications for provincial old age assistance payments and rule on, and share in the cost of, any supplementary aid. Where accommodation in homes for the aged is insufficient, the local municipality may take it upon itself to provide accommodation at its own expense in nursing homes or, where available, to employ the facilities of homes operated as private institutions under voluntary sponsorship. In recent years, the shortage of public accommodation has forced the municipalities in the metropolitan area to rely heavily on such accommodation. In addition, the local municipalities provide grants to voluntary agencies giving services to elder citizens. Then, too, the area municipalities remain free to develop housing projects for the elderly. Since the war, the Township of York has carried out one apartment undertaking of this sort; and local participation need not end at that. Finally, such local area services as public health nursing will continue to contribute to the welfare of older people.

Since the purpose of this two-part report is to deal only with Homes for the Aged, it would be inappropriate to dwell on the wide range of special services for elder citizens now provided under public and semi-public auspices. Last May, the Welfare Council of Toronto issued a report headed "A Co-ordinated Programme of Community Services for Older People in Toronto". This document, prepared at the request of the City's Standing Committee on Welfare, outlined existing services and detailed the Welfare Council's objectives for extending services in the days ahead. The report was printed with brief commentaries by the Commissioner of Public Welfare and the Medical Officer of Health. Those interested can secure copies either from the Health or Welfare Departments of the City or from the Welfare Council.

Estimated Requirements

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Last fall, as the basis for metropolitan action on old people's homes, the Commissioner of Housing and Welfare secured information from each of the thirteen local municipalities on the number estimated as requiring care, including the number being looked after in the two existing homes—the York County Home for the Aged and the City's Lambert Lodge. The figures developed from their replies showed the following picture:

	Aged Persons Requiring Public Care in Metropolitan Toronto Ordinary Care			
City of Manager	Up and About	Bed Patients	Special Care	TOTALS
City of Toronto				
Patients in Lambert Lodge	449	183	115	747
Supported in Nursing Homes & Private Institutions	185	31	111	327
Lambert Lodge Waiting List	219	129	151	499
Twelve Suburbs				
Patients in County Home	15	3	25	43
Others Receiving or Requiring Ca.	re 565	193	112	870
TOTALS	1,433	539	514	2,486

In explanation, it should be noted FIRST -- that special care patients are persons suffering the effects of senility. They do not need the services of a mental hospital and would not, in fact, be admitted to such an institution. This grouping included 313 bed or infirm patients and 201 who were up and about, making up the total of 514 persons. SECOND -- a more detailed breakdown was secured from the City than from the suburbs. It showed that Toronto was actually caring for 1,074 elderly persons while a further 499 were awaiting placement in Lambert Lodge or elsewhere. The cost of maintaining 327 of these persons in nursing homes or private institutions was being met entirely by the City less contributions obtained from the individuals themselves. Had they been housed in a recognized Home for the Aged, the Province would have met half the public cost of maintenance. THIRD -- the waiting list total for Lambert Lodge has fluctuated widely and has usually been higher than the figure of 499 persons reported to the Commissioner. In a report to the City Council last June it was estimated at approximately 650. As of December 31, 1953 the number stood at 558 persons. FOURTH -- in arriving at the combined estimate, a nominal number of persons were added to the returns to allow for cases in which no requirement had been shown in certain categories by some smaller suburbs.

The startling fact revealed by the Commissioner's figures is the very large number recognized as requiring public care for whom no accommodation was available in either of the two homes for the aged. Waiting lists, it is true, have a way of dwindling when put to the test of final screening for admission. On the other hand, some who might properly apply may have been discouraged from doing so knowing that the present space is entirely taken and that a large backlog exists. In any event, there is a requirement for well over one thousand people now under care from the City proper, while on a similar basis the suburbs could probably establish a figure of some 500 persons. Everything considered, the Metropolitan Council appears warranted in reckoning on public responsibility for at least two thousand older persons. But it would seem advisable also for the Council to secure a more precise count of those requiring care.

Metro Must Act

Under its governing statute, the Metropolitan Municipality is required to take over the expense of suburban patients maintained in the York County Home. The forty-three suburban persons who were resident at the year-end may remain for the present; but no new applications will be considered, barring an agreement to the contrary.

Five years ago, when the old Christie Street Hospital was reopened as Lambert Lodge, the Province's payment of grants was made conditional upon steps being taken for its replacement. Those who have visited the one-time factory building will probably have praise for the way it has been adapted and run as a home for the aged. They will no doubt agree, also, that the accommodation as such is badly outmoded and poorly located Nevertheless, its current classification as a home entitles the Metropolitan government to take over and operate the Lodgs. On the other hand, the view has been advanced that the City's long-term interest in the property should not be sacrificed by reason of its present temporary use. And the Province will certainly expect the Metropolitan authority to develop more suitable quarters as quickly as possible. Meanwhile, the Metropolitan Council has agreed to pay the City a nominal rental.

With jurisdiction over one-quarter of the Province's total population, the Metropolitan Council has inherited temporary accommodation in

homes for the aged for less than eight hundred persons. And it has no permanent accommodation whatsoever. So long as the shortage exists, the responsibility for alternative care in nursing homes and private institutions reverts to the local municipalities who must meet the entire cost without benefit of provincial grants. Moreover, the burden upon them is quite uneven. According to the 1951 census, just over 60 percent of the total metropolitan population resided in the City proper. By contrast, the City contained over 72 percent of the people over 65 years of age. Taking all these factors into account, early action by the Metropolitan government to build or purchase suitable Homes for the Aged would appear to be a 'must'!

President

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Director