

RETIREMENT HOME ACCREDITATION IN ONTARIO:
IN WHOSE INTEREST?

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Abstract

In Ontario, we are currently dealing with a profound public policy void in the area of retirement home regulation. Reflecting the neo-liberal political context, much of this industry's growth has occurred with limited or no legal regulation and minimal, if any, involvement from the government. This paper discusses various possible options for addressing the issue of unregulated retirement homes, with a special emphasis on voluntary accreditation.

This study sought the unique perspectives of retirement home administrators from both accredited and non-accredited homes. Conversations with participants converged around a number of key issues, including affirming the importance of regulation, affirming the need to compete and succeed in the retirement home market, emphasizing the negative aspects of accreditation, and the responsibility of being accountable to various stakeholders. Administrators also offered their perspectives on policy issues and the role of government.

This study provides insight into the question of "In whose interest is the current retirement home system?" It became evident throughout this study that there is value in creating some level of government regulation beyond what currently exists. It is argued that future policy in this area must hold the interests of seniors as primary, and not the interests of the business community.

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INTRODUCTION

The last two decades have witnessed an impressive expansion of assisted-living for older people in many western countries. Assisted-living is often conceptualized as a model or type of long-term care that provides an alternative to the classic institutional framework while attempting to maintain the autonomy and independence of older people in a communal setting (Chapin & Dobbs-Kepper, 2001; Family Caregiver Alliance, 2003). The sector, typically labeled in North America as the ‘retirement home industry’ has grown from a marginal form of housing, often supported by volunteer groups in limited areas, to a field in which private entrepreneurs and government bodies have produced what they hold to be a viable and cost-effective alternative to formal institutionalization (Doron & Lightman, 2003).

Reflecting the neo-liberal political context, much of this industry’s growth has occurred with limited or no legal regulation and minimal, if any, involvement from the government. “Regulated” accommodation is typically considered to be that in which the provincial government licenses operators, sets standards, and inspects for compliance with the standards, while “unregulated” accommodation usually comprises everything else (Lightman, 1992). Regulation is a process, usually involving inspection, intended to ensure minimum quality and standards in the delivery of a service or the provision of a commodity. When services are privatized, regulation is generally put forward as a way to ensure the public interest is protected. Regulation is often deemed desirable when users

of a service, whether vulnerable or frail, are unable to exercise the rights of consumers. Regulation is seen as a way to address the substantial imbalance of power between those providing the service and those using it, so providers do not abuse their power and all conditions associated with the delivery of the service are satisfied (Lightman, 2003). Voluntary monitoring processes, like accreditation, represent a middle-ground regulatory option. Indeed, such a system exists in Ontario in the form of the Ontario Retirement Communities Association (ORCA), whereby retirement homes can voluntarily choose to be assessed and maintain a certain set of standards.

My personal experiences as a clinical social worker in a medical setting have caused me to become very interested in the issue of retirement home regulation. My daily practice involves working closely with older adults who, due to various new medical issues or functional decline, find it necessary to pursue retirement home living. I have often assisted clients and families in evaluating appropriate retirement home services and assessing whether a certain home will meet their needs. I have been troubled in seeing residents of homes who receive poor care but have nowhere else to go. In helping clients and families through the process of choosing a new retirement home, I have become aware of many of the problems that elderly people encounter while trying to arrange for retirement home support and have become more intrigued with the complexities of the system itself.

Given the above realities within the retirement home system and in acknowledging my personal orientation to this issue, I was compelled to consider the following broad questions: Is formal legal regulation the most appropriate policy to

protect the needs and rights of frail residents? How does the government also respect the legitimate interests of retirement home owners and operators? What insights can be gained by understanding the views of retirement home administrators, and can their perceptions of the issues be used to inform future policy in this area? Perhaps most importantly, how do we as a society ensure seniors have a sense of empowerment as they choose for themselves which retirement home and what level of support services they will receive? As stated by the Commission of Inquiry into Unregulated Residential Accommodation (Lightman, 1992), “We are dealing with a profound public-policy void.”

The following section of this paper will discuss the various bodies of literature used to inform this study.

LITERATURE REVIEW

This study drew on several bodies of literature and begins with a discussion of the various forms of residential accommodation that now exist, with a focus on retirement homes. Next, the social and demographic considerations that provide the background knowledge for this investigation are outlined. Finally, the stage is set within a neo-liberal context, and the possible options for addressing the issue of unregulated retirement homes are highlighted, with a special emphasis on accreditation.

Residential Assisted-Living Options

The three main types of residential care options for seniors in Ontario are briefly reviewed in order to provide a better understanding of the unique place retirement homes occupy when it comes to the choices facing seniors. Retirement homes will then be discussed in greater detail, given the focus of this study. One type of residential care option for seniors is **supportive housing** (Ontario Ministry of Health and Long-Term Care, 2002). Supportive housing is designed for people who only require minimal to moderate care. Often the accommodation is an apartment or a group residence. Most tenants require some assistance with personal care in order to live independently. Meals and social services are optional. At some locations, a small number of supportive units are integrated into a building where most of the other tenants do not need support. At other locations, most if not all of the tenants require support services. Buildings are

owned and operated by municipal governments or non-profit groups such as service clubs, religious or cultural groups or seniors' organizations. Support services within the residence are funded by the Ministry of Health and Long-Term Care (MOHLTC) and the quality of service is monitored by the regional MOHLTC office under the Long-Term Care Act (Ontario Ministry of Health and Long-Term Care, 2002). Accommodation costs are based on market rent for similar apartments, and if tenants are eligible, the government will subsidize the rent.

Long-term care homes (also known as nursing homes) are institutions which provide a home-like setting, and are designed for people who require the availability of twenty-four hour nursing services, daily assistance with personal care, and/or require a secure environment due to issues of confusion and wandering. Long-term care homes offer higher levels of care than are typically offered in either retirement homes or supportive housing. Long-term care homes are provincially licensed and regulated, and accommodation and care services are subsidized by the provincial government. These homes are funded specifically to provide nursing and personal care and promote quality of life and independence through the provision of recreational activities, therapy services, counseling, spiritual care and other programs (Ontario Seniors' Secretariat, 2004). The government's guiding principle with respect to long-term care in the province states that all homes must meet the needs of its residents (Ontario Ministry of Health and Long-Term Care, 2002).

When it comes to **retirement homes** or **retirement residences**, there is no provincial definition as there is for supportive housing and long-term care. This is

because there are no regulations governing retirement homes. The Commission of Inquiry into Unregulated Residential Accommodation (Lightman, 1992) defines a retirement home or “rest home” as “any residential premises in which three or more persons unrelated to the owner/operator reside, and in which one or more of the following conditions is satisfied:

1. the operator is paid for caring for residents, whether or not this care is actually received
2. the operator makes public or gives others, such as hospital discharge planners, to understand that care to residents is provided by the operator
3. care is regularly provided by the operator to residents

For the purpose of the above definition, “care” includes the following:

1. any assistance with the activities of daily living (bathing, grooming, dressing, personal hygiene, toileting, dining)
2. the provision of any health care (for example care provided by nurses or therapists)
3. staff on the premises to assist with medications, supervise the activities of the residents, and/or respond to personal emergencies

The Ontario Retirement Communities Association (ORCA), the province’s voluntary accreditation agency for retirement homes, has defined a retirement residence as “a residential complex that is occupied or intended to be occupied by ten or more persons who are primarily sixty-five years of age or older, for the purpose of receiving care services, whether or not receiving the services is the primary purpose of the occupancy” (Ontario Retirement Communities Association, 2004).

How retirement living is defined has significant implications for policy development. Manard and Cameron (1997) conducted a national study in the United States which interviewed assisted living developers about various trends in the industry. Participants in this survey stated that one of the central problems facing the industry is

that policy-makers and the general public do not understand the various types of senior housing “products”, including assisted living. The determination of where assisted living begins and ends on the health care continuum is a crucial part of the defining process. Confusion about the industry’s proper place and relationship to independent living and skilled nursing was a topic raised by several participants in the Manard and Cameron (1997) study. Because they felt that policy-makers lacked understanding and sensitivity about the core features and philosophy of assisted living, these developers expressed concern about the future regulatory environment for the industry.

With the exception of public health issues, retirement homes are not funded or regulated by the Ministry of Health and Long-Term Care. The tenancy is governed by the Tenant Protection Act (1997). The accommodation and food preparation in retirement homes are regulated by the Health Protection and Promotion Act and the associated guidelines for safe meal preparation, sanitation and water quality.

Government resources for the public explain, “Retirement homes are nearly all for-profit facilities, and care and support services in these settings are neither funded nor regulated by the provincial government” (Ontario Seniors’ Secretariat, 2004). Guides for seniors and their families warn, “As there are currently no mandatory government standards or guidelines related to the provision of care in retirement residences, and therefore no mandatory inspection of homes, it is of utmost importance when searching for a retirement home that you be an informed consumer” (Goldstein, 2004, p. 1).

Virtually all retirement homes are private businesses run by entrepreneurs on a for-profit basis. Essentially, these homes provide accommodation, varying levels of care

and supportive services in a residential setting for those who can no longer manage daily living with independence. Homes typically provide meals, social and recreational programs, twenty-four hour staffing, laundry and housekeeping services, supervision and administration of medications, and most often a degree of personal care and assistance with the activities of daily living. If a retirement home operator chooses to provide more extensive care for a fee, there are no guidelines to regulate this care provision and protect the rights of residents. Any person can own and operate a retirement residence, whether or not they have any qualifications or experience.

In reality, while retirement homes are typically considered to be home to seniors who require minimal assistance, older individuals with significant long-term care needs are increasingly living in these residences. Retirement homes may accept residents whose care needs are greater than the homes are capable of meeting. In addition, residents decline with age and their need for care increases, so that persons entering a retirement home at a high level of functioning may eventually develop needs that cannot be met in the residence. The Ontario Retirement Communities Association gathers statistics on the 60% of retirement homes which it accredits, and reports that the average age of retirement home residents in those homes is currently 82. There are thirty-seven thousand seniors in Ontario currently living in retirement residences and 76% of them require daily care (Ontario Retirement Communities Association, 2004). It can be argued that given the aging of the population, and the fact that seniors are living longer than ever before, their increased care needs will result in seniors requiring a higher level of support in retirement home settings.

Lack of Regulation: Tensions and Concerns

While the issue of seniors' care in retirement homes is little addressed or articulated by either the government or the public, the construction of the issue of long-term care (institutional nursing care) and seniors has received much greater attention. The provincial Ontario government has been vocal about discussing the topic of long-term care in terms of seniors "rights", casting it as an issue of "dignity". When introducing plans for new long-term care legislation on November 3, 2004, Health and Long-Term Care Minister George Smitherman stated, "Our proposed legislation will set out clear expectations for homes to meet when caring for some of the most vulnerable people in our province...nothing is more important than ensuring the comfort, safety and dignity of the seniors who live in these homes..." (Ontario Ministry of Health and Long-Term Care, Nov. 3, 2004). Currently, standards of care for residents in long-term care homes are regulated and enforced, and the government is investing more resources into improving this situation.

It is puzzling and seemingly illogical, then, that seniors' needs in long-term care homes are defined differently than those living in retirement homes. The "most vulnerable people in our province" also live in retirement residences - in fact, it could be argued that those living in unregulated retirement homes are more at risk than those seniors who live in long-term care homes, and yet their interests are not presently deemed matters of public policy concern. It is puzzling as well, that this issue seemed to be of

concern from a public policy standpoint in the past, given the Commission of Inquiry into Unregulated Residential Accommodation in 1992, and has been a hovering concern for the years since then, but the issue has still not been taken up actively in the policy arena.

Canada's changing demography makes attention to the quality of retirement homes a matter of increasing urgency. As of July 1, 2004, thirteen percent of Canada's population was over the age of 65 years (Statistics Canada, 2004). Ontario is home to approximately 1.5 million seniors, which is equal to forty percent of Canada's seniors. By 2028, the number of senior citizens in Ontario will double (Ontario Seniors' Secretariat, 2004). Seniors are the fastest growing age group in the country (National Advisory Council on Aging, 2003). The fastest growth in the seniors population is occurring among the oldest Canadians. In 2001, over 430,000 Canadians were over the age of 85 years, which was more than twice as many as in 1981 and more than twenty times as many in 1921 (Health Canada, 2001, p.3). The proportion of Canadians over age 85 is expected to grow to 1.6 million in 2041, representing 4% of the overall population (Health Canada, 2001, p. 3).

Issues of concern to seniors, and specifically regulation of retirement homes, are being articulated from a number of perspectives by community groups and informed observers. For example, the National Advisory Council on Aging (2003: 27) reports that "For seniors experiencing considerable difficulties managing alone as they become frail or disabled, there is a growing need for high quality, alternative supportive housing options. Selection of a retirement home can be chancy as a lack of consistent process to

ensure quality standards in services – either through regulation or accreditation – means there are some great homes and some awful ones.”

The CBC News has conducted research into the severity of the problems which result from unregulated retirement homes (CBC News, March 14, 2000). The report states, “Between living in your own home and requiring a nursing home there’s a murky area of seniors’ homes called ‘retirement homes’. They’re meant for seniors who need just a little help with meals and maybe some personal care. But in Canada, retirement homes are poorly regulated and in some of them, life for elderly, vulnerable people has become a nightmare.” The report goes on to say, “Seniors have found poor care, neglect - even abuse - in places that promised they were good homes. Three provinces, Ontario, Alberta and Quebec, with seventy percent of Canada’s population, essentially have no regulations governing retirement homes.” University of Toronto Professor of social policy Dr. Ernie Lightman conducted a one-man inquiry for the Ontario government into the state of retirement homes in the province. He stated, “I went in expecting some awful stuff. I found stuff far worse than I expected. I was deeply depressed at the end of it” (CBC News, March 14, 2000). But his recommendations for protecting seniors were largely ignored by the government. “There’s a law of the jungle that operates here [in retirement homes]. There are no inspectors, there’s no licensing. An operator can do anything he can get away with.” There are no requirements for staffing, either in terms of numbers of staff in the home, or level of skill they possess.

The provincial government has acknowledged the importance of bringing broader seniors issues to the forefront of public attention and policy development. John

Gerretsen, as Ontario's Minister Responsible for Seniors, stated in a letter to the public in April 2004, "The Ontario government is committed to helping seniors live safely, with the dignity and respect they deserve and the supports they need." The Ontario Seniors' Secretariat functions to improve the quality of life for Ontario's seniors by undertaking and influencing policy initiatives for seniors with a multi-ministry focus, developing and supporting public education efforts about seniors' issues, and maintaining close working relationships and partnerships with seniors' organizations in the province. Interestingly, this government body has made no effort to create policy initiatives specific to retirement homes.

My own experiences from clinical practice have shown me that seniors are living in retirement homes that are not meeting their basic personal needs. I have spoken numerous times with elderly clients and their families who are very often not informed about how the retirement home system works, and are surprised to learn that the government stays out of the picture where care standards are concerned. In speaking with my colleagues about this issue, each one agrees that this issue truly matters and the government and the public need to take a much deeper look at how the retirement home system operates, and how it can best serve older residents' interests.

The problem, then, is clear: seniors living in unregulated retirement homes in Ontario are currently at risk for poor care and maltreatment, and the government is doing nothing to address this situation. The issue of great concern is that the lack of standards, regulations and inspections for retirement residences can create problems for seniors and

their families who have an expectation that the operations of their homes are monitored to ensure a reasonable level of quality and safety.

Retirement Homes: A Matter of Public Policy?

The current retirement home system offers a market-driven approach with a lack of government regulation. It has been noted previously that there have been concerns raised in regards to our current system, but the result up to now has been government inaction. A voluntary accreditation process is thus entered into by some retirement home operators. My main concern throughout this study was to explore the complexities and possibilities of regulation. In this section, I will examine a range of approaches drawing on theoretical and research literature.

The role of government in regulating services and institutions of many kinds is highly contested, especially in neo-liberal times. From a review of debate and the literature, three possible directions and positions are discernable and are introduced here:

- 1) The market can continue to run without interference, in the absence of direct legal regulation or government intervention
- 2) The government could create and enact legislation that would cover all aspects of accommodation and care within retirement homes
- 3) Mechanisms in a middle ground between these two positions, such as accreditation, could be devised in an effort to meet the needs of seniors.

The Case Against Direct Legal Regulation

Resistance to regulation is fundamentally based on the neo-liberal ideology which argues that the state should not interfere with the workings of the private market, and that the power of the market is a more equitable and efficient tool for the regulation of human

behaviour than any system of government intervention (Doron & Lightman, 2003). This argument gains strength in settings (such as Israel) where the industry has grown and expanded without regulation, but also without scandals or dramatic failures (or none that have attracted public attention) (Doron, 1995).

The state views assisted-living as a free market alternative to the supply of institutional care funded and regulated by the government. Private entrepreneurs recognize assisted-living as a potential source of profit. Some think that government simply should not be providing service that can be provided by the private sector.

Retirement homes evolved in Ontario as a private-sector response to social needs for accommodation and care that were otherwise not being met. Accommodation and care are supplied to seniors by the operators, thus creating a power imbalance between sellers and buyers, and creating a potential for abuse of this power. The market assumption of sovereign consumers making informed choices cannot apply in full to a vulnerable population.

The government's sense of responsibility toward seniors extends to those in long-term care homes, but not to those in retirement homes. This places a burden on the elderly person to ensure quality care, a burden that is difficult to deal with. As well, the retirement home industry is not funded by the government, so the responsibility and cost of living in such a residence is placed on the older person or their family. This accommodation is a commodity purchased on the open market, and as no public funds are involved, the government's primary interest is to ensure that the market works as it should.

Some retirement homes are targeted at the “well elderly” and offer a particular style of living in which care services are rarely delivered. Other retirement homes are actually nursing homes in every way except for the provincial regulation, licensing and funding under the Nursing Homes Act. One of the strengths of the industry has been its flexibility and ability to respond to a range of needs identified in the market (Lightman, 1992).

A clear illustration of the business focus of the retirement home industry is the existence of Real Estate Investment Trusts (REIT). Retirement REIT is a publicly traded income trust that is in the business of acquiring seniors housing properties and managing them for the purpose of growing the industry and generating profit for shareholders (Retirement Residences REIT, 2006). A REIT buys existing retirement homes whose owners may want or need to get out of the business, and also develops new properties. The character of the industry in Ontario is changing. The existence of these larger organizations means there are fewer independent operators to serve the unique needs of seniors. The stated “business mission” of these Investment Trusts is to “generate stable and growing distributable income and maximize unit value through the efficient management of our seniors care homes and related services, and by growing the business through accretive acquisitions and new developments” (Retirement Residences REIT, 2006). A discussion of seniors’ needs and best interests does not dominate within this market-based approach to the industry.

Another argument opposing regulation is on the grounds that such actions diminish the autonomy of seniors and promote their infantilisation: parallels between the

need to protect children and the need to protect older people are rejected, even by some seniors' rights organizations, as being condescending and disempowering (Doron & Lightman, 2003). Older residents of these homes and their families would have limited or no involvement in making the decisions that affect their daily lives, as the only decision-makers in a formal regulatory process would be the regulators and the owners/operators of the homes.

Some observers also suggest that any imposition of minimum standards within homes will increase the cost of provision for those operators previously operating below the new acceptable norms, and may cause a reduction in the housing supply. Those homes which are already above the minimum threshold of standards will be unaffected. At the lower end of the market, however, the added expense of complying with regulations would translate into higher costs for the operators which would likely be passed on to residents. For those home operators who choose not to absorb the costs or pass them on to residents (who live on fixed incomes and would be unable to pay the increase), homes would have to close, resulting in the eviction of vulnerable residents. This decrease in the supply of assisted-living programs particularly affects residents at the bottom end of the market range (Manard & Cameron, 1997). The Commission of Inquiry into Unregulated Residential Accommodation acknowledged that this issue was the most troubling to come before them in their investigations (Lightman, 1992). The intent of regulations and standards is to protect vulnerable persons, however, if the effect of regulation is to eliminate scarce housing, is this protection? Is substandard housing that may place residents at risk better than no housing?

Another argument against government intervention is that regulations have limitations. Just because standards exist does not guarantee they will be efficient or effective. A lack of resources, both financial and human, and social prioritizing may lead to inspections not being undertaken and standards not being enforced (Doron & Lightman, 2003). Government regulation also carries substantial costs, and in an atmosphere of fiscal constraint the political will to allocate funds may be in doubt: meaningful regulation is necessarily labour intensive and costly (Floyd, 1993).

The Case for Direct Legal Regulation

Does the government have an obligation to provide for and protect its elderly citizens? Certainly the recurrent evidence of neglect and abuse among residents, as discussed in the literature review, argues for a direct protective role on the part of the government. There definitely exists a power imbalance between those who own the home and deliver the service and those who reside in the home and receive support. In the absence of some protective regulatory arrangements, vulnerable and frail residents may be taken advantage of, exploited, ill-treated, or find their rights constrained in numerous other ways by the owner, managers and/or workers (Edelstein, 1998).

Some argue that not only would regulation protect current retirement home residents, but it would also protect potential residents and families. Potential residents have great difficulty in comparing a wide variety of homes, services and treatment that exists in different settings. Regulation would necessarily cause the industry to become more standardized and thus, potential residents would have more consistent ways to compare various options.

Another argument in favor of regulation is the reality that as the elderly continue to age, their functional and care needs increase. At the point of entry into a retirement home, many residents are capable of functioning independently with little need for assistance. As time progresses, however, needs increase and what started out as an appropriate setting for the resident turns into a dangerous one, where care needs may not be met. Without regulations or legal supervision, residents are placed at risk. Regulation can dictate when a retirement home is serving residents who should really be cared for in institutions which can provide more assistance.

Regulation is also a means to protect the interests of operators. Legal regulation allows owners and operators to achieve a sense of commercial legitimacy through formal recognition of the quality of their service. It may also protect the industry against low standards or dishonest operators who discredit everyone (Doron & Lightman, 2003). Since regulation would set parameters for the industry, operators would be protected from consumers' unrealistic or unreasonable expectations of what services and care the retirement home should be expected to provide.

Alternatives to Direct Legal Regulation

Creative combinations or alternative solutions to those above may be necessary, given the disadvantages of each option and the challenges of vested interests. Clearly, the status quo cannot continue given the empirical evidence of inadequate protection, neglect, abuse, exploitation and even death. However, comprehensive regulation poses several of its own problems, as stated above.

One option which would provide for some regulation of the industry is municipal by-laws. Some local governments in Ontario have assumed responsibility for assuring some minimum standards in retirement homes by enacting by-laws. There are wide disparities in the content, coverage and enforcement of local by-laws among different communities, for example, some municipalities only set standards for the physical environment while others also regulate care (Lightman, 1992). In essence, municipal authorities have the right to determine what is acceptable in terms of standards, and to enforce the by-laws. Since municipal retirement home by-laws are usually combined with municipal licensing, failure to meet standards may result in a home having their license to operate the home taken away.

Another option, that of voluntary accreditation, already exists across the province of Ontario, and the complexities of this particular option are the focus of this research paper.

Accreditation is an effective, internationally recognized evaluation process used by many countries worldwide to assess quality in health care organizations (Ontario Seniors Secretariat, 2003). For example, the Canadian Council on Health Service Accreditation (CCHSA), an independent, non-government organization accredits hospitals, long-term care facilities, Community Care Access Centres, and some home and community support services. Although the CCHSA does not accredit retirement homes, residences may seek accreditation from the Ontario Retirement Communities Association (ORCA). In the absence of provincial standards, and to optimize quality living for residents, ORCA has organized a set of voluntary, comprehensive evaluation standards

upon which accreditation is contingent. The Accreditation Standards manual used by ORCA during mandatory regular inspections of homes includes regulations for administration, recreation, food and meal services, housekeeping, laundry, the environment, and resident care. Standards specific to resident care ensure that quality care services are delivered to residents. Included in standards for resident care are medication management, levels of qualification required by staff, policies and procedures for monitoring the safety and security of cognitively impaired residents, regular evaluation of residents by a physician and standards of practice regarding infection control procedures. In order to be a voluntarily accredited member of ORCA, residences must pay a fee and meet up to 199 standards under the categories stated above (Ontario Retirement Communities Association, 2004).

Those who argue against government intervention note that regulations and systems of supervision based on the free market exist without state involvement. Voluntary accreditation by an industry association is funded through membership fees without dependence on, or surveillance by, the state. When these systems work well, they provide appropriate and reliable information for potential residents and allow “consumers” to make informed decisions. Such an approach may even dictate the minimum acceptable standards for the entire industry, without the need for government involvement or formal legal regulation (Floyd, 1993).

However, ORCA reports that while 60% of retirement homes voluntarily comply with ORCA’s system of accreditation, 40% do not. When put in concrete terms, this presents a staggering statistic: while almost twenty-two thousand Ontario seniors are

living in retirement residences approved by ORCA for the quality of their care and service, approximately fifteen thousand seniors are living in homes which are not willing to be monitored for standards of safety and care. Clearly, not all homes will voluntarily submit to regulations, thus providing power to the argument that legislation is necessary to ensure the well-being of seniors in these homes. In fact, the Commission of Inquiry into Unregulated Residential Accommodation (Lightman, 1992) rejected voluntary accreditation as being insufficient in itself to safeguard the public interest exactly for this reason. However, the Commission acknowledged the merits of voluntary accreditation stating it would provide consumers valuable information about potential residences and thereby lessen the likelihood of poor or uninformed choices.

Exploring Accreditation: Conceptual Issues

Organizational Legitimacy

The literature on institutional theory and organizational legitimacy provided the theoretical backdrop for the study, and paved the way for this researcher to develop the following questions: Is “legitimacy” an issue of concern to retirement home administrators? If so, how is legitimacy defined by them? What do retirement home administrators perceive as the possible implications of adding another legitimizing agent, such as the government, into this realm of private enterprise? Past research in this area has not studied the perspectives of retirement home administrators, instead focusing on organizations such as commercial banks (Deephouse, 1996), hospitals (Ruef & Scott, 1998) and other fields such as education (Durand & McGuire, 2005).

The organizational field is increasingly characterized by standard-setting agencies, accreditation agencies, and the like (Durand & McGuire, 2005). Brunsson and Jacobsson (2002) note that current trends toward reduced government regulation imply a growing role for non-governmental accreditation bodies. By attesting that associated organizations meet specified standards, these institutional agencies provide legitimation to organizations.

Institutional theory postulates that the social framework of norms, values, and expectations constrains and influences organizational actions (Durand & McGuire, 2005). From this perspective, organizations seek to achieve and maintain their legitimacy (DiMaggio & Powell, 1983; Meyer & Rowan, 1977). A legitimate organization can be defined as one whose values and actions are congruent with the values and expectations of the larger environment (Dowling & Pfeffer, 1975). Legitimacy justifies the organization's role in the social system and helps attract resources and the continued support of constituents (Parsons, 1960). Ongoing fulfillment of societal expectations is a necessary condition for the survival of most organizations (Ashforth & Gibbs, 1990).

Legitimacy is also conferred upon or attributed to the organization by its constituents (Perrow, 1970). Public opinion is a key factor in the endorsement of an organization, and has the important role of setting and maintaining standards of acceptability (Elsbach, 1994; Galasskiewics, 1985; Meyer & Rowan, 1977).

Researchers have also found that organizations that conform to the strategies used by other organizations are recognized by regulators and the general public as being more

legitimate than those that deviate from normal behaviour (Deephouse, 1996; Meyer & Rowan, 1977; DiMaggio & Powell, 1983).

Motivations for Seeking Accreditation

When an organization is deciding whether or not to seek non-governmental accreditation, there are many factors that contribute to this decision. The literature which explores this particular issue is drawn from many areas of organizational life and industry, and suggests that there are internal and external positioning strategies associated with this choice.

Many organizations choose to become accredited as part of their public relations and marketing plans (Gingrich, 2002a). This is a way to communicate an organization's commitment to quality. By completing the accreditation process, organizations are able to expand their services into new markets. The seal of accreditation provides consumers with a sense of security in choosing an unfamiliar organization for services for loved ones (Gingrich, 2002a). Consumer awareness is an important issue noted by researchers. Accreditation is an important criterion used by consumers when selecting service providers, and is often used as the initial filter to narrow down choices. The accreditation outcome is also a way to benchmark an organization with other organizations (Gingrich, 2002b).

Many organizations choose to use the accreditation preparation process as an opportunity and a strategy for conducting a total organization evaluation (Gingrich, 2002b). The accreditation standards provide a framework for this evaluation and a focus

for the action plan. By using the accreditors' standards for conducting the evaluation, the organization has external objectivity built into its evaluation process.

In today's times of diminished human resources, organizations are seeking ways to enhance morale and increase job satisfaction. There is a sense of pride and accomplishment that comes with the successful completion of the accreditation preparation and survey process (Gingrich, 2002b). This permeates the organization's self-image and public image and serves to enhance the organization in the eyes of its employees. Accreditation preparation is also a strategy used by organizations to enhance team-building.

Accreditation and Public Trust

Bekkers (2003) conducted research into accreditation and philanthropy in the Netherlands, focusing on the relationship between trust and charitable giving. The author notes that because participation in the system is voluntary, accredited philanthropic organizations stand out as more trustworthy to the public than non-accredited organizations. Accreditation gives the charitable organization the right to use an accreditation seal to signal their trustworthiness to the public. Fund-raisers can "buy" legitimacy by conforming to the rules and bearing the seal. Causes that do not have the right to bear the accreditation seal will be less successful in fundraising (Bekkers, 2003). Instead of deciding on the accountability of the charity themselves, donors take the seal as a signal of trustworthiness. Although the issue of accreditation and public trust has not been studied within retirement home organizations, Bekkers' (2003) research on charitable organizations highlights some of the issues of concern for this study.

It has been argued that the success of an organization is dependent on the public's awareness of its system of accreditation. Schuyt (2003) found that people who knew the accreditation seal of philanthropic organizations in the Netherlands were actually more trusting of charities than people who did not know the seal.

For the purpose of this study, it is hypothesized that retirement home administrators' perceptions of whether any or all of the above issues are important will determine the choices they make on whether to seek accreditation or not.

The above conceptual analyses of the complexities and dynamics of regulatory processes informed and gave texture to my exploration of the perspectives of retirement home administrators.

METHODOLOGY

The sample included retirement home administrators from both accredited and non-accredited homes. The rationale for choosing to speak with individuals in the role of administrator was based on several factors. Previous literature has not sought the perspectives of retirement home administrators in regards to the issue of regulation. Administrators are in a position that allows them to have an understanding of the business aspects of the industry, as well as a personal connection to the residents and families. Administrators are uniquely positioned on the front-line of service provision. As well, I was interested in speaking at a different level with the types of individuals with whom I work on a professional level, when I assist older individuals in finding appropriate accommodation. I often connect in the workplace with retirement home administrators, but until now, have not been able to seek out their perspectives on regulation in a meaningful way.

In order to explore the perspectives of retirement home administrators, I undertook a small qualitative study. In interviews with administrators who had both sought and not sought accreditation with ORCA, I invited their views on the significance of accreditation, the possibility of government regulation and the details of their own operations.

The study included personal interviews with four retirement home administrators (lasting between 60 minutes to 90 minutes). The sample was purposive (Luborsky &

Rubenstein, 1995), and included three retirement home administrators who had sought accreditation for their homes, and one administrator who had not sought accreditation. The sample was chosen from homes within the same city, so as to ensure that the homes had similar characteristics in regards to populations served and regional characteristics. I had never had contact with any of the participants prior to the research. It was of primary importance that I had no previous interaction with the home or the administrator, either professionally or otherwise, in order to ensure that the participants were not influenced to participate and there was no conflict of interest related to the work I do with seniors and retirement homes.

The sample was selected from a list of all nine retirement homes in the city, five of which were accredited and four of which were not. Three different sources were used to ensure that no homes were overlooked. A list of all homes, both accredited and non-accredited, was provided to me by the local Community Care Access Centre, and the same listing of homes was in the Care Guide publication. The ORCA website also provided names of all accredited homes in the city. These three sources of information are readily available and accessible to the public.

After an initial phone call to each of the nine administrators, a letter of information and a consent form were mailed out to the five who consented to receive further information on the study. A follow-up phone call to the five possible participants was placed one week later to further discuss the study and respond to any concerns that potential participants had. Of the five, four administrators agreed to set up an interview and participate in the study. There was some difficulty encountered in recruiting

participants for this study, which is worthy of mention. I attempted to facilitate the process by allowing the potential participants to choose the date, time and place of the interview, with no restrictions on my part. Potential participants stated they were very busy, and in fact, half of the participants who took part in this research had to reschedule their interview more than once, due to their busy schedules. The difficulty encountered in recruiting participants may speak to the fact that the issue of retirement home regulation is a contested one, in which there are conflicting perspectives and arguments both for and against. One potential participant from a non-accredited home who had initially agreed to an interview later cancelled, stating that “further approval was required” for her participation. Two other administrators from accredited homes questioned whether I had any affiliation with the ORCA accreditation body, and even when they received assurance that this was not so, declined participation. This was a common concern even among those who did participate. Each final participant expressed some hesitation initially regarding the possibility that I might have ties to ORCA, but were satisfied with the ethical assurances that were given by me prior to the interviews. In all, four administrators out of a possible nine were interviewed.

The final sample was composed of all female administrators with various backgrounds and numbers of years in the role of retirement home administration. The retirement homes were also varied in terms of their size, occupancy, ownership and levels of care provided to residents.

One participant had a professional designation as a registered nurse, and had worked in a hospital setting for years. She had been in the role of administrator for

twenty-seven years, although not all at her current retirement home. Her home had accommodation for ninety residents, and at the time of the interview the home was at full capacity. The home had been in operation for sixteen years and was owned by a REIT. The decision of whether to pursue accreditation was made at the corporate REIT level. The home provided service to individuals who are generally independent with minimal care needs.

Another participant had a professional background as a recreation therapist. She had worked as a retirement home administrator for fifteen years. Her home had space for one-hundred and sixty-seven residents and at the time of the interview was not quite at full capacity. The home had been open for eight years. It was not owned by a REIT, but instead was owned by a smaller independent company. This company decides whether the retirement home will pursue accreditation. This home provided various levels of care including service for those who are almost fully independent, different types of assisted living and full dementia care.

A third participant had a professional designation as a registered nurse in geriatrics. She had twenty-one years as a retirement home administrator, and had worked in both accredited and non-accredited homes. Her current home had room for sixty-one residents, was at full capacity at the time of the interview and had been in operation for six years. The home was owned by a REIT (different from the first participant) and the decision on accreditation was made at the corporate level. This home only provided service to fully independent residents with no care needs.

A fourth participant had a professional designation as a registered practical nurse and had been in her role as an administrator for twenty years, although not all at the same home. Her retirement home had availability for forty residents, but at the time of the interview had only sixteen residents. The home had been operating for seventeen years. The home was not owned by a REIT at the time of the interview, but instead had been under receivership, due to bankruptcy, for several years. The owner of the home made the decision surrounding accreditation. This home provided accommodation for generally independent residents with some minimal care needs, and did not provide nursing home level care.

The interviews were conducted with the use of an interview guide (see Appendix A). All participants consented to having the interview audio-taped and transcribed. All participants chose to have the interviews conducted at their respective retirement homes during business hours. Even though each of the questions in the interview guide was posed during each interview, participants all chose to elaborate on various topics. I allowed the conversation to be guided at times by the participants, in order to allow them to thoroughly express their thoughts, and discuss the issues which were important to them. As well, I guided the dialogue along some paths and not others, depending on where the participant chose to focus. Mauthner and Doucet (1998) note that as qualitative researchers, we engage in a somewhat unsystematic process of following up certain leads and seeing where they take us.

Field notes were written shortly after the interviews to capture my initial perceptions of the interview setting, interactions between participant and researcher, and

other observational data. While it is recognized that this kind of information is valuable, the main source of data for this research were the interview transcripts. Each transcript was read several times, first in its entirety, paying close attention to tone, then line by line for specific words, then by paragraph and ideas, to generate larger themes. Analysis was restricted to manifest content of written transcripts.

Lincoln and Guba (1985: 124) draw attention to the concept of transferability when discussing whether a working hypothesis developed in one context may be applicable to another context. In terms of transferability, it is noted that this study was based on a small sample of administrators in strictly urban retirement homes. It is possible that administrators of rural homes may have different perspectives on the issues. As well, the fact that participants ultimately selected themselves as participants may speak to their particular professional goals or personal characteristics. While acknowledging these limits to transferability, the information gathered from these interviews nonetheless provides an interesting base of experience from which to develop a preliminary analysis of key issues. At the outset of the study, I had made an assumption that retirement home administrators had more decision-making power than they actually have in terms of choosing whether their home will be accredited. It turns out that the decision is made at the corporate level for most homes, however, administrators still had very strong views on the accreditation process, the concept of regulation, and future recommendations for the industry.

FINDINGS

This section will present the various themes that emerged from the interviews with participants. Conversations with administrators converged around a number of key issues.

Affirming the Importance of Regulation...at Some Level

One of the initial questions posed in the interview asked participants about their general view toward the concept of retirement home regulation. This broad-based question did not yet seek to consider the different forms of regulation, but only sought to gauge operators' overall view on whether some form of regulation is desirable. All four participants stated without hesitation that some type of regulation was "necessary".

Participants' views on whether the industry requires some regulation seemed to be connected to a commonly held value. Without being prompted toward such a discussion, three of the participants acknowledged the vulnerability of the retirement home resident population and potential for abuse that exists without proper regulation. In relation to the senior population that is served by these homes, one participant clearly stated:

We're dealing with a fragile population. Residents, sometimes, when they move into facilities they won't say too much because they're not trusting. To them, their whole being has been placed in the hands of all these people, and they don't want to rock the boat for fear that they're going to pay the price. Even if that's not the case, that's what they feel.

The participant who managed the non-accredited home argued a direct link between resident maltreatment and lack of standards:

I think there's too many abused seniors. Right now there's no standards. I could go into my house and open it up and make it a retirement home. There is no standard for that, 'cause there are houses like that out there and I know for a fact that's what they've done. For that reason I think regulation would be a very beneficial thing for the seniors.

Another participant admitted that seniors are taken advantage of by home operators who are “not truthful about what they can provide for service and what they really can’t”, thus setting up seniors with false expectations of the care they can depend on, and thus, “the client’s going to suffer.”

The three participants from the accredited homes all affirmed the importance of achieving and sustaining a sense of pride and accomplishment in being deemed accredited by ORCA. This was actually the most commonly discussed positive aspect of accreditation. Interestingly, the concept of intrinsic benefits that is discussed in the literature is echoed in the responses given by administrators. Comments included “It makes us proud because of all the work we do, when we get some kind of recognition that we are doing a good job.” In regards to achieving accreditation, another operator stated, “I feel I’ve accomplished something and that I’m doing my job.”

For the administrator of the non-accredited home, a sense of pride in the service she provides for residents was very important, and had nothing to do with whether ORCA deemed her home good enough or not. She stated, “We give excellent care here and I’m very proud of the care that I do give here, and that my staff give to my residents.” Even the language this administrator used, for example the words “my residents” showed a

sense of ownership and responsibility that this participant felt toward the residents in her home. This administrator felt that going with ORCA does not ensure that residents are “loved”. Each administrator ultimately projected themselves as a ‘good’ operator, but those who were from the accredited homes equated their ‘goodness’ with the fact that ORCA deemed them so. This finding echoes the literature which has found that organizations view themselves to be legitimate if the accreditation body endorses them.

Affirmation of the Need to Compete and Succeed

All participants raised the issue of competition within the retirement home industry. A major theme was the fact that retirement homes are businesses, and that accreditation is perceived by operators as being closely tied to success as a business. The operator from the non-accredited home stated that her home was not at full occupancy, and that its non-accredited status has something to do with that: “I have had people turn away because we’re not ORCA. I believe that’s true, that when people find out we’re not ORCA, then they don’t bother making a follow-up appointment, or I just don’t hear from them again.”

Participants were asked whether they felt joining ORCA was necessary if they wanted to survive in the industry. All three accredited administrators felt that to stay competitive in the business, there is no choice but to join ORCA. One participant shared a story about a chain of homes that chose to reconsider their decision to continue to pursue accreditation, and thus faced the consequences:

A few years ago, one company, quite a large one, decided they were no longer going to be with ORCA. So that was huge dollars, a big chain

with a lot of money. They pulled out, and I mean, it was unbelievable. Within two years they were back in again because there's nothing else. They were back full force. They had to because there was no way around it. They didn't want to pay the money. They could save a pile of money with the number of facilities that they have. So they pulled out, and I tell you, they were black-balled by everybody. Everyone knows that story.

Participants acknowledged that "it's just too risky" not to be a part of ORCA.

All participants acknowledged accreditation as an important "marketing tool" for their business. The three accredited operators spoke about the importance of posting their accreditation plaques for the public to see when doing "marketing tours." Operators were aware of the effect of this particular marketing strategy: "Having that little symbol on your marketing projects in the public eye, the public feels more secure. That's proven."

Another participant went further in saying that one of the only real benefits of joining ORCA, is to use them for marketing purposes:

People are getting educated. They recognize that ORCA symbol, so having that symbol beside your name on your literature, people are recognizing that ORCA accreditation symbol. It gives you credibility. So, in all honesty, that's really what it does for you. Other than that, it doesn't do a lot.

An operator from an accredited home summed up the competitive nature of the business:

There's so much choice now. There's retirement homes going up on every corner every time you blink, so the competition is huge and people will go to accredited homes. Why not when they have the choice? Years ago you didn't have a choice. Now they're just popping up all over so people will go to those who have quality.

One participant admitted that competition can be so strong that keeping the home full of residents can be more important than resident safety:

There are a lot of people who want to fill beds. There's pressure from

owners. At times there's pressure from a lot of sources to keep these beds filled. Frankly, they'll accept anybody who walks through their doors whether they can do it or not.

In every interview, participants agreed that it is important to them that the public in the community has a positive view of the home. The importance that administrators placed on marketing their services and their accreditation speaks to their desire to put forth a positive image to the public. Participants spoke about the importance of the public seeing their accreditation on their websites, and on their other sales materials. One administrator acknowledged that even though the public's knowledge about accreditation and regulation is not strong at all, simply knowing that a home is accredited through ORCA is enough for families to think that the home is reputable.

There was agreement among the accredited participants that it was necessary to join ORCA in order to survive in the business. One reason for this was that if other homes in the community are joining ORCA, they felt compelled to join as well so they were "kept in the loop". One operator stated that joining ORCA is just a way to "keep up with the Jones'." It came across clearly in all the interviews that the operators felt there was no choice in the decision of whether to seek accreditation. Participants noted that there are so many new homes that are opening in the community that are seeking accreditation, why would the public choose to go to a non-regulated home? Even the operator from the non-accredited home admitted that her bed census is low and she has had potential residents turn away because the home is not with ORCA. This home experienced bankruptcy three years ago, and is now being taken over by other interests.

It will be interesting to pay attention to whether the new owner will choose to become accredited.

These perceptions by participants are consistent with the literature which shows that organizations that conform to strategies used by other organizations are recognized by regulators and the public as being more legitimate than those who do not.

One participant talked about how important it is that the “general population perceives us to be” a home which provides good service. Participants discussed how public image ties closely to whether the home will be a successful business: “If you’re in any type of competitive mode as an operator or as a chain...you want to have a strong name in the community and a good presence, and be reputable.” The goal of the business is clear, as stated by one operator, ““In all facilities, you’re trying to reassure either the clients themselves or their family that you’re care-based, and that you’re focused on providing the best service and care for that individual, so you’re really selling peace of mind.”

Emphasizing the Negative Aspects of Accreditation

All participants from the accredited homes were very vocal about the negative aspects of their experiences with the accreditation process. Administrators all agreed that the process was “cumbersome” and sometimes “overwhelming”, given the “couple hundred standards” that are reviewed. Two participants discussed the labour involved in completing the process: “There’s a heck of a lot of paperwork, and it takes time for the managers to do...sometimes it impedes what you’re doing...sometimes it’s too much”

and “They’re spending so much time going through the paperwork, it’s not creating a positive atmosphere. The frustration level is really high.”

Three other issues were not raised unanimously, but were still seen as important to participants. One mentioned the cost of accreditation as a negative, “I would rather not have to pay. I would rather give it to the residents.” Another operator felt strongly that the peer review system of accreditation that ORCA uses is an important negative aspect of the process. She stated,

I agree with the concept of accreditation. I don’t agree with how they go about it now. I think it’s a very biased process to tell you the truth. You’ve got peers that are evaluating you, so you’ve got people who are running retirement homes going into other facilities and doing the surveying. Well you get a lot of biased people because maybe they’re working for another home. You can see it. That I don’t like. I have seen facilities that over the years have been given three year accreditations that shouldn’t have even had a one year accreditation. Then I’ve seen wonderful establishments...and they’re getting one’s and two’s and can’t get three’s. It’s because of the surveyors. Because ORCA is its own entity, if you try to say something to them, forget about it. You get nowhere. They have a process where you can evaluate your survey and the surveyor, and fine, you can complain about your surveyor or whatever you don’t agree with. It doesn’t change nothing. I think there needs to be some kind of fair evaluation that is the same across the board.

One participant felt that ORCA does not do enough to educate the public:

They don’t do anything to promote the fact that there are different types of retirement living. It’s not about that at all. If it’s about educating the public about what retirement home lifestyle is like? They don’t do that. So does that benefit me? No.

Multiple Accountabilities

A theme that was especially strong throughout the interviews was that administrators felt a great responsibility to be accountable to various others: residents, the

general public and ORCA. The non-accredited home administrator did not have accountability to ORCA, but did state that it was very important to be accountable to residents and the public.

All four participants talked about the importance of being accountable to others. As one administrator stated, "It keeps everyone honest." Participants agreed that "our product should be open and we should be up front about it." Each administrator recognized the necessity of being accountable to the public. It was important to them that the public feels secure going to a place that they know is being held accountable to them through the accreditation process. One participant stated, "It's necessary for the public to know that their homes are doing whatever they can to have quality care."

Two participants also discussed the importance of being responsible to the accreditation body. One stated, "It keeps us on our toes. You can't let down because we have to answer to our accreditation body...we always have to watch what we do." Another administrator talked about proving themselves "in the eyes of ORCA".

One participant linked accountability to a sense of security:

It's a security knowing that when we are being accredited, that someone's looking at your work and saying, 'yes, you have everything in place.' At least you know that there is some way of checking and assuring that you're doing something that's safe and promoting a facility that's safe for people to live in. If you're going to promote what you say you have, they're gonna make sure you do it. I think it's a secure way to run a business.

All participants, including the non-accredited operator, felt that in order to be fully accountable, it was necessary to have some type of regulation. One participant summed up the group's overall point of view:

If you decide that we need standards and that we need to be accountable

to our residents and to the public, then we need to have an accreditation process. Who, unless you're accredited, unless you have a survey, really assures that those values are being followed? You need some kind of process to make sure that what you're saying, you're delivering.

Although the above responses illustrated that administrators felt they needed to be accountable to residents, the public and ORCA, it is interesting to note that no participant said it was important to be accountable to the owners of the residence. I did not ask participants directly about their sense of responsibility to the owners, and it is interesting to note that without being prompted toward such a discussion, administrators did not mention it.

Policy Issues and the Role of Government

Although all participants emphatically agreed that there should be some type of regulation for the industry, there was little agreement on what form that regulation should take. Participants were asked in broad, open-ended terms what they would like to see happen in terms of regulation and policy.

One participant from an accredited home felt the ideal situation would be one where there is "one set of standards for all retirement homes". This participant did not agree with municipal licensing because "every community's different and one community is going to have lower standards than another community." The most important factor for this administrator is that there is equity in the regulating system: "If you're going to regulate retirement homes and set standards it should be for everywhere. The residents all deserve the same." This person felt that while it was not ideal for there to be only one organization that does accreditation, there also should not be a lot of

choice “because then people start to choose the simplest or the one that fits into their way of thinking. You shouldn’t be able to pick and choose whatever fits.” This participant anticipated that if the government did get involved in regulating the industry, “they would probably give it to an outside organization like ORCA to do.” This administrator felt that while the government has a right to regulate nursing homes because those homes are funded by the government, this is not the case with retirement homes: “The government gives us absolutely zero in terms of running the home.” This participant also questioned whether government involvement would “make us not private anymore.” Ultimately, this participant still wanted ORCA to be involved in the regulating system:

I think the government should recognize ORCA. They have worked very hard and they understand retirement homes. To try and come in and re-do something that’s already been established doesn’t make sense to me.

For another participant, the most important policy issue was public education. She discussed how the lines are blurred with respect to retirement home and nursing home care, and that this poses a very real problem for potential residents and families. This participant thought there should be a separation of retirement home policy from long-term care policy because that would serve to further confuse the public: “If you really poll the average person, they don’t make a distinction between all the different levels of care, and so if you’re going to do it that way, you’re going to have a population that’s even more confused.” She went on to say, “There’s a lot of crossover, and I think that needs to be where the regulation will really make a difference for folks, and people will get put in the right place the first time.” This operator went on to talk about how she thinks the government should assist people to prepare for retirement by putting out

information packages when they turn sixty-five, informing them about the different levels of care that exist, and the different care industries that can meet various needs. This participant felt that the government's lack of action in providing this education stems from their lack of knowledge about this area of policy: "I don't think this government has their mindset around what it is to get older."

Speaking further on her perception of the government's lack of insight into aging issues and the retirement home industry, this participant stated that although she felt the government should legislate some type of regulation,

It's such a grey area that they're scared to. I really think they're scared. I don't think they truly understand the layers, the layers that are involved with us. It's not cut and dried. You're not looking at apples and apples. I don't think this is something where you can lump all in one. Number one, it won't work, and it's not going to help the people that it's designed to help.

This operator felt the current accreditation system needs to be changed in that:

There needs to be some kind of fair evaluation that is the same across the board. They need to clean it up a bit and the surveyors need to be unbiased and not let their personal emotional stuff get in it too. Maybe it would be better if there was a couple of different entities to go to for that accreditation, you know, and it wasn't put in all one group of hands. I don't like the one-man show, and you have no other alternatives and so you just be quiet and you do this. But what do you do? There's nowhere else to go. There should be options.

This participant was clear in her opinion that the government needs to get involved with regulating the industry. She stated,

The government is taking too long to do anything about this. There has to be some kind of inspection system. I don't think any one group of people can stand and say, 'we're the best, we're doing it right, nothing can be added or changed here and we are the be all and end all. I don't agree with the government not getting involved.

Another participant of an accredited home felt that overall, the retirement home regulation system should remain out of the hands of government. She did not feel the existing accreditation system needed any modifications:

I think the public deserves to have someone say, 'yes, this is a safe home', but a private is a private and I don't think the government should have their hands in it. I just believe that we're a private company and we should not have to follow the guidelines of the government. Having just one accreditor do it, let's say ORCA, without having the government involved, then you question, 'well who's watching them?', but the public's watching. If we're doing something so bad, then the public would know. So having one person come in I think is an ideal situation, and if it's ORCA, fine. If it's non-government, fine.

This participant felt that retirement home regulation should stay separate from long-term care regulation because the retirement home industry is private and should not be joining government. She also acknowledged that "if we start blending with long-term care that's gonna put us back. Family members don't see the difference between retirement home and long-term care still."

The operator from the non-accredited home thought that the government should set standards in some way, but did not elaborate on what that should look like. She did feel that it was not necessary for regulation to go through ORCA, and did not feel that ORCA accreditation was enough to ensure a good home:

Just because you're ORCA doesn't mean you're gonna have those qualities met. We give excellent care here, and I'm very proud of the care that I do give here, and that my staff give to my residents. The residents wouldn't stay here if their standards and their needs weren't being met.

Still, this operator stated, "there should be some sort of regulation somewhere. Certainly there's a need for it." This operator noted that a lack of public awareness about retirement homes does cause problems:

The consumer needs to have retirement home information. They have every right to this information and I think they should have it. I get lots of phone calls where people say, 'I don't even know what to ask you', so I think there needs to be some type of format for them to start the process.

When it came to their opinions as to whether the retirement home industry should be regulated, participants unanimously agreed that some type of regulation is "necessary". They made the connection between regulation and good care when they spoke about the potential for maltreatment that exists when homes are not providing the level of service that residents require. There was evidence however, that this commonly held value that seniors deserve proper treatment conflicts with other values held by operators. A good example of this is that participants acknowledged the potential for abuse of residents without regulation, but none agreed that the government should be able to step in and demand strict regulations of these homes to address the issue.

Another contradiction was evident when participants talked about the importance of having standards, but not at the expense of maintaining autonomy as a private organization. A reflection of this complexity and ambivalence was expressed by one participant who thought that regulation was "necessary", but that accreditation should be a voluntary process: "I think everyone has that right. I honestly don't think it should be forced, but it should be a choice." Statements such as this reflect the competing values held by those in the retirement home business. How do operators reconcile these conflicting points of view? Three of the four operators had chosen to be part of homes that choose voluntary accreditation, while the operator from the non-accredited home maintains that she operates a home where seniors' needs are of primary importance, regardless of whether ORCA says so or not.

It is evident within these contradictions that participants occupied a tense space in dealing with and mediating multiple interests.

DISCUSSION

The literature which explores the reasons why an organization chooses to seek accreditation supports that there are both internal and external strategies associated with the choice (Gingrich, 2002a). The findings of this study overwhelmingly provide support for this argument. In terms of intrinsic benefits, the literature shows that there is a sense of pride and accomplishment that comes with participating in and completing the accreditation process. All three participants from the accredited homes discussed the positive ways that being accredited makes them feel, and spoke about the pride and accomplishment they experience in knowing that their home is meeting certain standards, and that the work they do to prepare for accreditation is acknowledged. The participant from the non-accredited home also noted that she was proud of the care she gives to her residents, regardless of whether ORCA was part of the process.

In this study, however, intrinsic benefits were not found to be nearly as important to administrators as external strategies. It can be argued that internal positioning strategies, while important, are not sufficient to make a successful business. Certainly, in the responses given by all four administrators, accountability to others, marketing and public awareness were the key areas of importance, and participants linked these strategies as most important in the success of the business.

In terms of accountability, while all participants talked about being accountable to the public, none spoke about the importance of being accountable to the owner of the

residence. It was evident, however, that even though the participants didn't say they were accountable to the owner, their actions showed that they were. The three administrators of the accredited homes often talked about how it was most important that they remain competitive in the industry and keep their occupancy full. These were the reasons why the homes chose accreditation – to keep their competitive edge. These statements do not reflect the interests of the homes' residents, but instead speak to the importance of keeping the owners satisfied. The market operates on the assumption that administrators have an allegiance to the residence owner, and will work to keep the home competitive in the marketplace. Perhaps participants did not mention this allegiance in the interviews because of their desire to maintain their homes' reputations as being most concerned with the well-being of its residents.

One of the research questions that provided grounding for this study focused on the theme of organizational legitimacy. I was interested in determining whether “legitimacy” is seen as important to retirement home operators, and if so, how do these individuals define legitimacy? It is clear that ORCA acts as an external legitimizing agent in the retirement home industry, and it is also very evident that the administrators who participated in this study are acutely aware of the power that this agency has. A major reason expressed by these administrators for choosing accreditation, is because the public expects a certain level of quality and service, and regulation is the only thing that can provide this level of assurance. This reasoning connects directly to the definition of a legitimate organization, as being one where the values and expectations of the larger environment are congruent with one another (Dowling & Pfeffer, 1975). Participants

from the accredited homes ultimately argued that they should be seen as legitimate simply because ORCA has deemed them so. It appears from these interviews that operators not only give a lot of power to ORCA, which maintain ORCA's legitimacy as the legitimizing body, but that operators also perceive that the public feels the same way. Participants often spoke about their perception that if ORCA justified their place in the community, that was good enough, and the public should agree.

Administrators' perceptions of the public's views toward their legitimacy was a huge factor in whether operators chose to become accredited. Participants, including the non-accredited administrator, stated that it was of primary importance that the public have a good opinion of their homes. This perception was tied closely to the topic of marketing and putting forth a positive image. The literature by Bekkers (2003) on the philanthropy industry shed light on this issue, and the finding of this study matched the findings of Bekkers (2003). Especially notable were participants' perceptions that the public accepts the seal of accreditation from ORCA as a symbol of trust and legitimacy. The administrator of the non-accredited home agreed that the symbol is used as a "clout thing", and the public believes the accreditation symbol is a signal of legitimacy. The accredited participants all agreed that being able to use the ORCA logo was worth the price and effort of accreditation, and one even asserted that the "only real benefit" of joining ORCA was being allowed to use the ORCA symbol on their marketing materials.

Significantly, participants spoke much more about the negative aspects and problems of accreditation than they did about positive ones. This is telling because even though all participants highlighted the negative aspects, three of them still chose to join

ORCA. The issues discussed above show that operators do feel coerced into seeking accreditation, and information provided by the non-accredited operator shows that survival in this competitive industry does depend on being deemed legitimate by the accreditation body.

In Whose Interest...?

As previously noted, even though all participants agreed the industry should be regulated, there was disagreement among operators as to what regulation should look like. These varying opinions seemed to be closely tied to participants' values. Some administrators placed quality service and proper care of seniors as the most important value, and thus argued that regulation should be mandatory, while some felt that the right of an operator to choose regulation is a more important value to uphold. Even when there was agreement between operators as to whether regulation should be mandatory, participants disagreed on what form that regulation should take. Two participants thought the government should be involved in regulating homes, while two others felt that accreditation by one or more bodies was the better way to proceed with regulation. It became clear that two participants highly valued their right to be "private" organizations, and they questioned whether government involvement would threaten that value. This caused me to question whose interests are being served by the current state of affairs? The current system of accreditation by one body, with no government intervention, clearly serves the interests of these operators who want to maintain their independence, privacy and freedom from external intrusion. It does not serve the interests of senior

residents as well, since this current system of regulation does not provide equal security for all seniors in retirement homes.

The way in which participants framed the issue of public versus private seems to be what one would expect from market actors. In the current market system of retirement homes, seniors' interests are not primary: serving them is a means to an organizational end, namely, making profit. The market essentially reduces public citizens to private consumers. One administrator spoke about her perception that if residents do not like the service, or feel they are not having their needs met, they can just get up and leave. This assertion casts senior residents as regular consumers and their care at the retirement home as simply a consumer good. Many times, seniors cannot leave their retirement home because they have some level of impaired function, whether cognitive or physical, and require some assistance with daily tasks. The market assumption that the elderly are all informed consumers cannot apply when this population is vulnerable due to the power imbalances which exist between residents and home owners. This is an inappropriate assumption given the reality of the situation faced by so many seniors in Ontario, as was described in the beginning of this paper. Besides, other homes in the same market offer many of the same services and have the same philosophy, so where is a senior citizen to go? Seniors have little support from the government in this area, as the market continues to regulate and monitor itself.

When participants spoke about the importance of keeping the retirement home and long-term care home industries separate in regards to regulation and policy, on the surface they seemed to relate these comments to a sense of identity. Although

participants worded their views in terms of families and residents needing to know the differences in level of service provided in these types of homes, these statements spoke to the importance of identity. All participants felt that it was very important for them to maintain their separate identity from the nursing home industry. When this is considered at a deeper level, could it be that by aligning themselves with nursing home policy, that is one way to connect more closely with government, and this goes against operators' desire to maintain their independence as private bodies? Or are these statements just based on maintaining identity? Could it be that these statements speak to administrators' desires to protect their market niche?

Different participants talked about how although they feel the government should stay out of regulating and monitoring homes for certain levels of standards and safety, the government should get involved in other ways that would ultimately benefit the retirement home. There was a view on the part of two administrators that the government should only get involved in the industry if it will serve to benefit the industry. Involvement for the safety and rights of residents should not be the primary role of government, according to these participants. This view was expressed in several ways, for example, when administrators talked about the government only being entitled to monitor the retirement home industry if the home gets to receive funding from the government (like nursing homes), or when it was expressed that it should be the government's responsibility to educate the public about the retirement home industry to make it easier for homes to get "quality" residents. Essentially, if retirement home

administrators' characterization of what the government should do for them is self-serving, then it is not in the best interests of seniors.

Administrators all asserted their good reputations in the community and their caring philosophy toward the population they serve. I do not wish to imply that for retirement home owners and administrators, the only goal is profit and the interests of the residents are not important. In my interactions with participants, it is clear that these individuals have a genuine desire to work closely with seniors, and work hard to create a caring environment. Many views expressed by participants, however, illustrated that a main interest of the industry is to be successful and profitable. It was stated by all accredited administrators that the main reasons they chose to seek ORCA was to stay competitive in the industry. Participants wanted me to know that they are a caring group, but did not hide the fact that they run a business and that beds need to be full to remain in the industry. It is evident from these interviews that, unsurprisingly, a great deal of energy from retirement home staff and owners goes into keeping up with the market and remaining competitive in the market.

The implications of this study for both practice and policy are worthy of mention. From a practice perspective, social workers who assist older clients in finding suitable retirement home accommodation and care need to be aware of the way the retirement home industry functions. The social work role must include education, so that the client and family are well-informed of their options and how to best meet their needs for now and in the future. Social workers must advocate with clients, especially those who are vulnerable, to ensure their best interests are being upheld. Social policy must change to

include legislation which will mandate a certain level of regulation in all retirement homes, regardless of the level of care services they provide. Many private business practices in this province, such as restaurants, daycares, and repair shops, are extensively regulated by the government, so the argument that the state has no right to interfere in the transactions which occur between retirement home operators and residents is unreasonable. There are many difficult issues that need to be considered within a policy framework if regulation is to be seriously regarded. The most important goal for any policy intervention on the issue of retirement home regulation is the dignity and empowerment of the older person who has a right to appropriate and safe choices.

When I started this study, I held the view that voluntary accreditation is an effective way to ensure that seniors receive quality service, and that the main problem is that not enough retirement home operators have chosen to seek accreditation. I assumed that retirement home operators who chose accreditation were doing so primarily in the interests of their residents and that those who chose not to seek accreditation had something to hide. I did not previously realize the importance of being accredited for remaining competitive in the industry. I assumed that retirement home operators chose accreditation because they wanted to, not because they felt they had no other choice. Looking back on my experience with helping clients find retirement homes to suit their needs, I see more clearly the extent of the marketing that is done for the “benefit” of potential residents and families. This project confirmed my sense that some level of government regulation is necessary beyond the current voluntary arrangement which is now in place in Ontario. More specifically, a level of regulation is necessary which has

seniors' interests at heart, and not the interests of the business community. This type of policy intervention was recommended over ten years ago (Lightman, 1992) and remains an urgent matter for today.

In completing this study, it became evident to me that the issue of retirement home regulation is filled with complexity. The issue is multi-dimensional and there are many ways to frame the issue. The views expressed by administrators shed light on these complexities and call for further serious discussion about the best ways to serve senior citizens within the retirement home industry. What did become clear is that leaving the industry to regulate itself does little to ensure that the rights of seniors are protected. I learned from administrators that the current system of regulation, consisting solely of voluntary accreditation, is used more by retirement home operators as a business tool than it is for protecting the needs of residents. In doing this study, it was made clear that there is value in creating some level of regulation beyond what currently exists.

APPENDIX A

Interview Guide

Voluntary accreditation exists in many domains and for many organizations and groups in society. Some see the voluntary accreditation process as a promising way to monitor and assure consistent and quality service, while others question its value for various reasons. What is your view toward the concept of accreditation for retirement homes? What do you think about accreditation as a voluntary process for retirement homes?

Some retirement home operators choose to seek accreditation from ORCA, while others choose not to submit to ORCA's process and criteria for accreditation. What are some of the issues you have considered when deciding whether or not to seek accreditation from ORCA?

Why do you think other home operators make the decisions they do on whether to seek accreditation or not?

In your experience, what do you see as the pros and cons of accreditation through a voluntary organization such as ORCA?

Have you had moments where you have reconsidered your decision to pursue/not pursue accreditation? Why did this happen? What caused you to reconsider?

How do you think the general public views accreditation of retirement homes? Do residents or families raise the issue with you or not?

What do you see as the pros and cons of accreditation in general? Would accreditation be more appropriate if offered through another type of association?

The provincial government is involved in regulating and setting standards for long-term care homes. If the government decided to somehow legislate certain levels of regulation for all retirement homes, what would be your view toward this? Are the issues faced by long-term care homes and retirement homes the same? Different?

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