

# Seniors Services

2024–2027 Business Plan  
and 2024 Budget

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# Executive Summary

Mission: To provide compassionate, loving, respectful care that is equitable for the people we serve as their health needs change.

## Services we provide:

- Seniors Services consists of two divisions; Seniors Services Development and Long Term Care
- There are five Peel Long Term Care homes with an Adult Day Services program co-located within each home
- Seniors Services Development provides Adult Day Services, Social Work Supports, Caregiver Support and Education, Respite Care, and Neurobehavioural Supports to enable clients to age in place
- Long Term Care provides Resident Care and Services including an Emotion-Focused Butterfly model of care, access to a Specialized Behavioural Support Unit, and a Neurobehavioural Nurse Practitioner Program to meet their individual care needs
- With continued focus on innovative and person-centred care delivery as well as employee well-being and workplace culture, Seniors Services is committed to providing high quality care to clients, residents, caregivers, and families in Peel Region

## Interesting facts about this service:

- 25,632 visits provided by Adult Day Services virtually and in-person and this number continues to increase alongside the waitlist
- 93% of clients reported that Adult Day Services contributed to their ability to live at home and to meet growing demand, overnight respite care beds and Adult Day Services spaces will require expansion
- 830 residents served across all five Peel Long Term Care homes require increased staffing to meet legislative requirements to support quality care and infection prevention and control measures

- 87% of people living in Long Term Care homes have a cognitive impairment, including dementia further contributing to the complex care needs of residents

## Highlights of the Business Plan include:

- Enhancing workforce to improve resident, client, caregiver, and staff experience
- Phased implementation and compliance with the Fixing Long-Term Care Act, 2021 to enhance resident experience and quality of life
- Establishing a team for major health/seniors-supporting initiatives to plan for growing demands of an aging population
- Piloting integrated care and expanding ADS and Respite Care to support clients and caregivers to age at home
- Leveraging technology and infrastructure to meet current and future needs

Net Investment (\$000s)	2024	2025	2026	2027
Operating	54,191	56,107	57,966	59,939
Capital	6,784	4,655	3,448	4,984
Full Time Equivalents	946.91	948.91	948.91	948.91

# Core Services

## Vision, Mission, Goals of Service and Service Delivery Model

### Vision

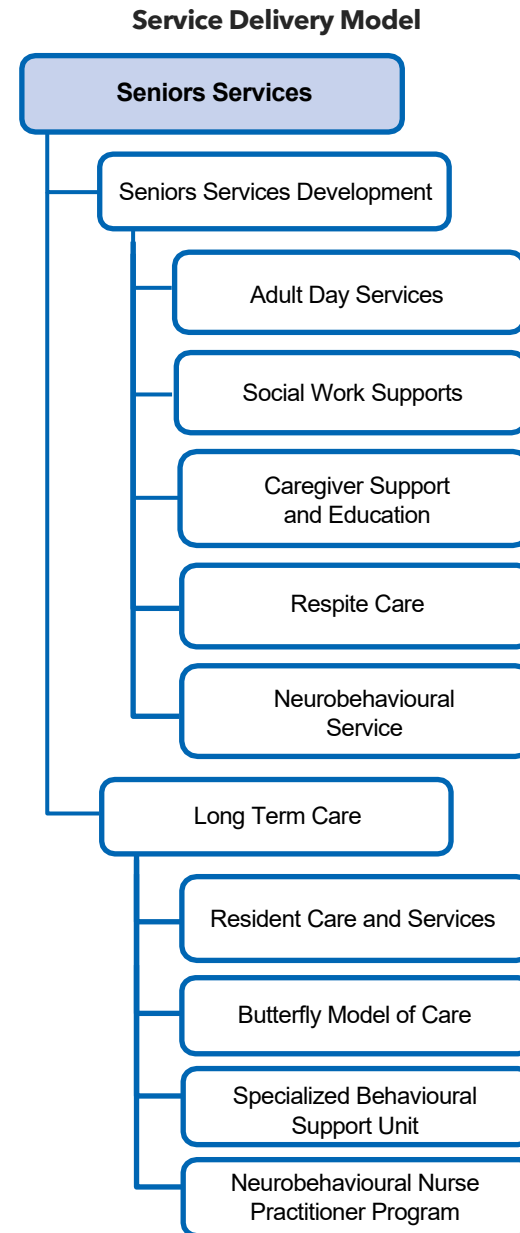
Individuals receive person-centred, innovative, integrated care and support, enhancing their quality of life.

### Mission

To provide compassionate, loving, respectful care that is equitable for the people we serve as their health needs change.

### Goals of Service

1. **Deliver Integrated Care:** We work collaboratively with the people we support and health care partners to serve the community.
2. **Deliver Person-Centred Care:** We provide individualized care that is guided by diversity, equity and inclusion.
3. **Cultivate an Engaged Workplace Culture:** We acknowledge and support the importance of each other's psychological health and well-being in our workplace.
4. **Foster Workforce Enablement:** We provide effective resources to empower staff and to adapt to the changing needs of the community.



# Service Levels and Trends

## Service Levels

Seniors Services consists of two divisions; Seniors Services Development (SSD) and Long Term Care (LTC). There are five Peel LTC homes with an Adult Day Services (ADS) program co-located within each home. SSD and LTC support individuals with complex care needs in Peel. Services focus on helping clients, residents, caregivers, and families to thrive through integrated and innovative care that is delivered in unique and culturally diverse ways.

### **The following highlights the levels of services provided to clients under Seniors Services Development.**

Peel Region's ADS program provides care and engagement for individuals living in the community. It is a service provided during the days, evenings and weekends for people who are socially isolated or need assistance with day-to-day activities. This includes clients who are frail, have cognitive impairments, physical disabilities, chronic illness, or other conditions that require support. In 2022, ADS served 258 clients across its five centres, both virtually and in-person.

#### **Adult Day Services, In-Person**

In-person services are currently working towards operating at 100% of their pre-pandemic numbers, and this is expected to be achieved by the end of 2023. In 2022, ADS provided 10,510 in-person program visits.

#### **Adult Day Services, Virtual**

In response to the COVID-19 pandemic, virtual ADS services were introduced to both registered and waitlisted clients. Programs are provided in group settings and individually. ADS provided 15,122 virtual visits in 2022.

## **Social Work Supports**

Social work counselling and support are available to both clients and caregivers. Social Workers completed 2,583 interactions in 2022. These can include clinical and supportive counselling, system navigation, and education.

## **Caregiver Support and Education**

Monthly education sessions provide caregivers with information and supports to continue caring for their loved ones at home. The Building Caregiver Capacity Collaborative also gives caregivers an opportunity to share resources, identify service gaps, and develop action plans to address caregiver needs.

## **Respite Care**

Overnight respite care allows clients from the community to temporarily stay at a short-stay bed. Respite Care is equipped with 24-hour staffing to assist with activities of daily living and offer recreational activities. Caregivers can take time to recuperate while they continue to care for their loved ones in the community.

## **Neurobehavioural Service**

The Neurobehavioural Service, including a Neurobehavioural Nurse Practitioner (NBNP) and a Geriatrician, uses a team-based approach to optimize the management of behavioural and psychological symptoms of dementia for seniors living in the community. Comprehensive Geriatric Assessments (CGA) are conducted to inform on-going management and person-centred individualized treatment plans.

**The following highlights the level of services provided to residents under Long Term Care.**

### **Resident Care and Services**

Peel owns and operates 703 LTC beds, across five municipal LTC homes: Peel Manor, Tall Pines, Davis Centre, Malton Village, and Sheridan Villa. Innovative approaches, such as emotion-focused care approaches, are used to meet the needs of residents focusing on quality and the engagement of every resident in unique and personally meaningful ways.

Each home provides 24-hour care to residents who are unable to live in the community in their own homes and who need assistance to manage their day-to-day activities. In addition to nursing and personal care, other LTC services such as clinical care, recreational, and therapeutic programs are provided. In 2022, Peel's LTC homes provided 24/7 resident care to 830 individuals.

### **Emotion-Focused Butterfly Model of Care**

The Butterfly model of care provides emotion-focused, person-centred care to those living with dementia. The model focuses on understanding, acknowledging, and embracing human feelings to improve overall well-being. The program creates a home-like environment, works to elicit positive memories, and promotes connection between residents and staff. Currently, there are Butterfly home areas at Malton Village, Sheridan Villa, Davis Centre, and Tall Pines.

### **Specialized Behavioural Support Unit (SBSU)**

The SBSU is a 19-bed specialized unit located at Sheridan Villa. This unit serves those with a primary diagnosis of dementia who have expressive responses such as agitation, restlessness, and aggression. The unit adapts a blended approach of the Butterfly model of care and clinical interventions to meet the specialized care needs of the residents. Once residents' clinical goals have been achieved and expressive responses have stabilized, they can transition to their next place of residence.

### **Neurobehavioural Nurse Practitioner Program**

Peel Region's NBNP team works in partnership with existing Behavioural Supports Ontario (BSO) Nurses and leads. Since the inception of the program in 2017, the NBNP team and Peel Region's Senior Medical Director have provided a specialized team approach to optimally manage behavioural and psychological symptoms of dementia for seniors in 20 long term care homes throughout the Home and Community Care Support Services Central West (HCCSS CW) catchment area. Using a person-centred approach, individualized treatment plans are created to support the best possible outcome for the resident. In addition to supporting 265 residents in 2022, the NBNP team also provides employee education on dementia care as well as family counselling and support.

## Trends

### Supporting Peel's Aging Population Through the Continuum of Care

Seniors are the fastest growing age group in Peel with one in four residents expected to be over the age of 65 by 2041. Accelerated growth is expected among the oldest seniors in Peel, with the proportion of residents 85 years and older anticipated to grow from 1.3% to 4.2% between 2016 and 2041.

Figure 1 describes the continuum of care that depicts increasing care needs and supports required. As seniors are living longer, their needs and expectations for community and health services increase and become more complex, creating increasing pressures on seniors' services and acute care sectors. Seniors Services is continuously working to enhance seniors' quality of life and to deliver integrated health care by working with system partners to ensure seniors have access to the services they need across the care continuum.



Figure 1 Continuum of Care

### Seniors Services Development

### Long Term Care

In 2022, the following observations were made in SSD and LTC:

- 76% of current in-person clients have complex medical care needs including cognitive impairments such as dementia.
- 87% of people living in Peel's LTC homes had a cognitive impairment, including dementia.

As a result, specialized approaches to care in both community-based care and traditional LTC homes are needed. Seniors Services continues to adopt an emotion-focused and person-centred approach when delivering care and services.

Caregivers are crucial to the health system in supporting their loved ones who are experiencing health challenges. Their caregiving comes with profound emotional, mental, financial, and physical impacts to their own well-being that must be considered to sustain an effective health system. In Canada, caregiver distress is prevalent:

- Caregivers who live with a person receiving home care are twice as likely to be distressed than those who do not.
- 95% of individuals receiving home care for a long term period have an unpaid caregiver and more than one in three of these caregivers are distressed.

This highlights the need for services to support both caregivers and clients.

### **System Pressures in the Long Term Care Sector**

The prolonged nature of the COVID-19 pandemic and disproportionate impact on seniors has significantly amplified vulnerabilities and system pressures including:

**System Wide Coordination Challenges:** Supporting seniors in the community can delay the need for long term care placement, enable aging in place, and allow better use of finite resources across the system. According to the Canadian Institute for Health Information, 1 in 9 residents could be supported in the community with appropriate supports (i.e., not requiring long term care). The lack of system wide coordination between organizations continues to exist when supporting seniors along the continuum of care.

**Chronic Underfunding:** There are ongoing challenges related to underfunding for home and community care services and long term care. Current funding formulas do not accurately account or compensate for high-growth and high-demand communities, leading to increasing waitlists and unmet demand. In 2023, Peel Region's Adult Day Services programs had 531 clients on their waitlist, while Peel's LTC homes had 2,475 clients waiting for admission. While the Province has modernized its long term care capital funding program, many older buildings (such as Peel Manor) have been unable to qualify for provincial funding.

**Workforce and Attrition Pressures:** The COVID-19 pandemic has highlighted long-standing issues related to precarious part-time work, and lower wages across the sector, as well as large turnover in the sector related to these issues. Frontline health care workers continue to face challenging work conditions and exposure to COVID-19 that results in high rates of absenteeism and subsequently adds to workload with unplanned hours or longer shifts.



**Gaps in Mental Health Services of Seniors and Caregivers:**

Along with dementia care, supports that address the broader mental health needs of seniors remains a gap in available services. Peel Region has been calling on the provincial government to address this unmet need. In addition, long term care homes continue to experience COVID-19 outbreaks. As a result, social opportunities and mealtime interactions that can help to support mental well-being within the home have been impacted by the need for social distancing and periods of isolation.

**Legislative Changes:** The *Fixing Long-Term Care Act, 2021* and accompanying aim to strengthen LTC service delivery with a focus on protecting residents' experience and quality of life. However, the costs to implement and to be in compliance are much greater than what the Ministry has identified. LTC sector partners continue to advocate for funding to support the changes made to meet compliance to the Act and regulations.

**Increasing Demands for Long Term Care Beds:** The rapid growth of the aging population is outpacing available bed spaces in long term care and is accelerating the demands for services beyond capacity. It is not sustainable nor is it cost-effective to meet the increasing demands through a traditional “bricks and mortar” LTC beds approach.

With compounding political, environmental, and social pressures growing every day, it is vital to adapt the way services are provided. Innovative supports and care solutions are needed to address these unmet needs. This calls for the adoption for new technologies, engaging in continuous quality improvement initiatives, and forming strategic partnerships with government, agencies, and community organizations.

# Performance Measures and Results

Seniors Services is committed to delivering services economically and efficiently. Performance measures are used to help assess how well Seniors Services is doing at achieving goals and where to improve operations. The results also inform decision-making and strengthen accountability. The performance measures utilized in Seniors Services are well-aligned with the “Quintuple Aim” framework adopted by Health Services (as shown in Figure 2).

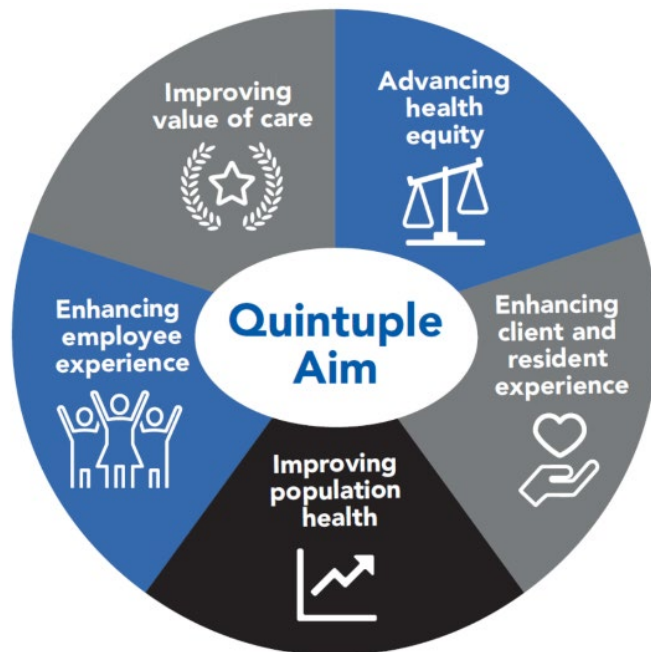


Figure 2 Quintuple Aim

The Quintuple Aim provides a framework for addressing system-level challenges as we advance healthcare in Peel Region. This model expands on the previous Quadruple Aim framework with the addition of a fifth aim for health equity. This is intentional and in recognition that without an explicit aim for health equity we will miss the opportunity to build equity into all we do and how we work.

At Peel, this means that health services, experiences and systems are equitable, just and work for everyone; no one is left out or behind regardless of social position or other socially determined circumstances. Seniors Services strives towards the simultaneous pursuit of all five aims in the work we do.

This framework focuses on enhancing client and resident experience, improving population health, enhancing employee experience, improving value of care, and advancing health equity.

### Enhancing Client and Resident Experience

Clients, residents, caregivers, and families are surveyed to understand their overall experiences at the LTC homes.

Examples of results from 2022 include:

**Client and Caregiver Satisfaction (ADS):** 99% of ADS clients were satisfied with overall programs and services; 100% of ADS caregivers would recommend the ADS program to others.

**Resident and Family Satisfaction (LTC):** 84% of LTC residents were satisfied with the overall quality of care received at the home; 72% of LTC resident families were satisfied with their loved one’s quality of life.

### Improving Population Health

Health indicators are used to evaluate the quality of care delivered in SSD and LTC. For example:

**Client Well-being (ADS):** 99% of ADS clients reported they improved or maintained their well-being based on experience survey results from 2022.

For LTC, selected mandatory indicators are compared against provincial benchmarks. In 2021/2022, Canadian Institute for Health Information reported that Peel Region's LTC homes trend better than provincial averages for performance indicators in the areas of:

- Prescribed anti-psychotic drugs without a diagnosis of psychosis
- Residents who had a new pressure ulcer, or one that worsened
- Use of daily physical restraints
- Residents who have fallen in the last 30 days
- Residents experiencing moderate pain daily or any severe pain
- Residents with worsened symptoms of depression

### **Enhancing Employee Well-being**

Staff shortages, challenging workloads, and cumulative exposure to stressful events have highlighted the importance of enhancing approaches to support psychological health and well-being of employees. In response, a Health Services Culture and Well-being Community of Practice was established. It identified the following immediate priorities: leadership development, raising awareness and engagement with well-being initiatives, and promoting diversity, equity and inclusion tools and resources. In addition, selected employees took part in a provincial training program that aims to support the National Standard of Canada for Psychological Health and Safety in the Workplace.

Information obtained from staff and leadership focus groups and surveys will inform and guide employee wellness and workplace culture in 2024. In the first half of 2023, 167 employees participated in focus groups and interviews which will aid in developing recommendations targeted towards enhancing employee psychological health and wellness in LTC and SSD.

### **Improving Value of Care**

A high-quality health system manages transitions well, providing people with the care they need, when and where they need it. This ensures resources are optimized across the continuum of care. In SSD, programs and services are aimed to help seniors to age in place to delay or avoid LTC admission.

**Self-Reported Ability to Live at Home (ADS):** In 2022, 93% of ADS clients surveyed reported that the ADS program contributed to their ability to live at home.

**Potentially Avoidable Emergency Department Visits (LTC):** To support reducing potentially avoidable and costly emergency department visits of LTC residents, LTC successfully implemented the PreviewED tool. This tool measures early detection of health decline in residents. In 2022, the avoidable emergency department visit rate (per 100) was 18.9 for Peel LTC homes. This trends below the provincial rate.

### **Advancing Health Equity**

SSD and LTC, in partnership with others in Health Services, are exploring avenues to incorporate health equity in the performance measurement framework. Capturing and reviewing data that illustrates the sociodemographic characteristics of the clients/residents and those accessing services will help Peel Region tailor programs, services, and interventions in a manner that considers equity and population diversity.

## Awards and Achievements

### **CARF® Accreditation**

CARF® International is an independent accrediting body of health and human services. Accreditation demonstrates that service providers meet a rigorous set of quality standards for their business and service delivery practices and demonstrate an ongoing commitment to quality improvement. In June 2023, all five ADS programs and LTC homes, as well as the Dementia Care Specialty Programs successfully attained a three-year CARF® International accreditation.

### **Sustainment of the Virtual ADS Program**

Peel Region's virtual ADS program enables seniors in the community to maintain or improve their health at home. Virtual ADS is available at no cost for registered and waitlisted clients. A free technology lending program is also available to enable access to clients without their own devices. The continuity in care through the virtual ADS program has contributed to a client's ability to live at home and has enabled smoother transitions for waitlisted clients to integrate successfully into the in-person ADS program.

### **Maturation of the Integrated Care Model**

The integrated care model at the Seniors Health and Wellness Village at Peel Manor will deliver an essential combination of services through an interdisciplinary team. As the program has matured, findings reinforce the benefits of integrating primary care in community services to support healthy aging at home. A primary care physician and integrated care manager were added to the program at Peel Manor to support with maturation of the integrated care model.

### **Best Practice Spotlight Organization**

Peel Region's LTC homes were one of the first to be designated as a Best Practice Spotlight Organization by the Registered Nurses Association of Ontario (RNAO). LTC is committed to implementing evidence-informed best practices throughout all five homes to enhance the quality of life for seniors. Over the years the interdisciplinary teams have successfully implemented several Best Practice Guidelines and have trained many team members to be Best Practice Champions. In 2023, Peel Region received re-designation until 2025.

### **The Butterfly Model of Care**

Peel Region was the first organization in Ontario to implement the emotion-focused Butterfly model of care. To date, seven Butterfly home areas have been implemented across four of the five LTC homes.

### **Emotion-Focused Dementia Care Training for First Responders**

Peel LTC was successful in receiving funding to pilot an emotion-focused dementia care training for first responders. Peel Long Term Care will develop and facilitate training for a pilot group of participants for Peel Police, Caledon OPP, and Paramedics. The goal of this training is to build awareness of dementia, and strategies to de-escalate heightened situations during crisis and community calls.

### **Initial Transitional Behavioural Support Unit Funding**

The Transitional Behavioural Support Unit (TBSU) focuses on meeting the needs of seniors with advanced dementia who are experiencing expressive behaviours through targeted, specialized, clinical care. The TBSU has received funding to initiate implementation for 2022/2023.

# The 2024 -2027 Business Plan Outlook

## Planning for the Future

### Enabling Seniors to Age in Place

To effectively enable seniors to age in place, a sustainable approach to receiving coordinated, wraparound services is needed. Innovative solutions improve outcomes for clients, residents, caregivers, and families as well as reduce costs on public sector budgets. Investing in upstream services help reduce or delay the need for more costly services. This is achieved by collaborating across system partners, establishing integrated care, sustaining ADS in-person and virtual care, and providing a respite care centre. This model transforms the way services are delivered by keeping the client and their caregiver at the centre of care.

### System Partnerships and Health Equity

Seniors Services will continue to build and sustain cross-sectoral partnerships to support vulnerable and at-risk seniors in the community and those living in long term care homes. With an intended move towards emotion-focused care, there is a greater awareness within long term care of how health equity has been embedded in many of the Seniors Services' practices; starting from the admission process and throughout a resident's length of stay to ensure there is a sense of individualized person-centred care. There is a concerted effort to continue to look for opportunities to review processes and create awareness for all key stakeholders including the residents, families, and staff to understand what health equity means in maintaining and delivering quality care for the residents. Building on both informal and formal avenues of dialogue that allows for open discussion about inequities and how Seniors Services can partner with stakeholders

through purposeful engagement will continue to further develop partnerships in creating a space of trust amongst all stakeholders.

Priority must be placed on partnership with community organizations and others in the health care system that build relationships that focus on discussion and networking by working together to co-design programs to advance health equity, improve system integration and reach those in need. Collaboration and partnership will include but is not limited to government agencies (Ontario Health and Local Ontario Health Teams), community organizations and participation on tables in an advisory and leadership capacity, local hospitals (William Osler, Trillium), post-secondary institutions for research, education, and student placement opportunities, research centres, local health service providers, and community organizations.

### Supporting the Mental Health of the workforce

All LTC homes and ADS centres have successfully completed the Ontario Centres for Learning, Research and Innovation (CLRI) in Long-Term Care Workplace Mental Health Program.

There are plans to continue to develop and build capacity among the Workplace Mental Health program participants. Key learnings from the program will be shared with the LTC homes and ADS centres through the support of the program participants. In addition, information obtained from staff and leadership focus groups and surveys will inform and guide employee wellness and workplace culture plans for 2024 and beyond.

## Phased implementation and Compliance with the *Fixing Long-Term Care Act, 2021*

The *Fixing Long-Term Care Act, 2021* (“Act”) and Ontario Regulation 246/22 aim to strengthen LTC service delivery with a focus on protecting residents, experience and enhancing their quality of life. These changes focus on measures to improve staffing and accountability. The regulatory changes under the *Act* are being implemented in phases (between 2022-2025) and have considerable impacts on Peel’s own service delivery and operational objectives. These include staffing requirements and increases to support direct hours of care, changes to compliance and enforcement, Infection Prevention and Control (IPAC) measures, quality improvement requirements, and requirements for medical directors.

## Enhancing our Workforce

As a result of upcoming and ongoing projects, additional staff are needed to operationalize and sustain work underway. SSD and LTC will build greater capacity to enhance existing programs and develop innovation in the following areas:

### Implementing Supports for the *Fixing Long-Term Care Act, 2021*

Increases to direct care staffing hours are needed to meet the provincial targets for nursing staff and personal support workers. By March 31, 2025, residents will receive four hours of direct care. In addition, the Act requires each home have a designated Quality Specialist to facilitate new continuous quality improvement requirements including monitoring and reporting on homes quality and residents’ quality of life.

### Establishing a Team for Major Health/Seniors-Supporting Initiatives

As a result of the accelerated growth of seniors in Peel, a dedicated team to provide ongoing planning and support for major initiatives associated with the support of seniors in the community will be established to meet the growing demands of an aging population. This team will lead and ensure achievement of outcomes for major initiatives associated with improving seniors-focused health-related services and system capacity.

### Stabilizing Long Term Care Operations

Sustaining increased IPAC requirements and providing complex resident care post-pandemic will support an environment that is focused on care, safety, and sanitization. Additional staff resources are required to support these efforts which will maintain resident engagement, person-centred care, reduce social isolation, and provide work-life balance and less burnout to staff.

## Service Delivery

### **ADS and Respite Care Expansion and Integrated Care Pilot**

The expansion of ADS and introduction of short-stay respite will be managed as a 12-month pilot at the new Seniors Health and Wellness Village (SHWV) at Peel Manor. Performance of the pilot will be monitored, and results will be used to inform permanent staffing decisions. In the absence of provincial funding at this time, this pilot will enable Peel Region to address unmet demand for services. It will also provide greater ability to manage ongoing impacts to Peel Region's budget, and time to establish sustainable funding.

Through the expansion of the current ADS Program at Peel Manor, up to 90 participants can attend in-person programming each day. Increasing capacity will allow greater reach to seniors in the community.

In addition, the Respite Care Program at Peel Manor will provide temporary relief for caregivers to enable them to continue supporting their loved ones at home. Along with the expansion of ADS and respite care services, a new clinical model is being implemented that delivers primary care and specialty care such as neurobehavioral services.

These services will work together in an integrated approach to deliver wraparound supports for clients and their caregivers. This will enable them to age at home as long as possible. The benefits realized will support seniors, their caregivers, while also reducing pressures on the acute care system and LTC home waitlists.

### **Securing Approval and Funding for Transitional Behavioural Support Unit (TBSU) at Peel Manor**

Peel Region is working to secure funding through Ontario Health and Provincial approval for designation of a 29-bed TBSU pilot at Peel Manor. This model focuses on meeting the needs of seniors with advanced dementia who are experiencing expressive behaviours through targeted, specialized, clinical care. The TBSU will also leverage the Butterfly model of care to provide emotion-focused care and ensure strong collaboration between the interdisciplinary team, family members, and the community.

### **Expanding Emotion-Focused Care**

LTC will conclude the implementation of the final three Butterfly home areas at Peel Manor, which will include the new TBSU and two other home areas. By the end of 2024, there will be ten Butterfly home areas across all five LTC homes. In addition, the principles and approaches of emotion-focused care will extend beyond the designated Butterfly home areas.

# Finding Efficiencies

## Continuous Improvement

The objective of Peel Region's Continuous Improvement Program is to optimize service delivery and maximize value for tax dollars spent. The completion of continuous improvement initiatives positively impacts client and resident experience, employee engagement, cost savings and cost avoidance.

Highlights of the many projects and improvements underway include:

### **TransHelp Streamlined Application Process**

Working with TransHelp, a specialized public transit service, the ADS team created a streamlined application process for ADS clients to access TransHelp services. The ADS program has seen an increase in TransHelp clients as a result of this process improvement.

### **Consent Documentation Review**

The ADS Overall Consent Form and Physician Consent Form have been reviewed and updated in a variety of ways that improve both the client and service provider experience. The consent documentation was reviewed and adapted to ensure the forms are user-friendly, informative and gather adequate information to reduce duplication resulting in faster completion and efficient use of electronic submissions.

### **Enhancements to Continuous Quality Improvement Practices**

The application of the changes of the *Fixing Long-Term Care Act, 2021*, have reinforced practices and infrastructure that continue to make improvements to the LTC Home environment. The Act emphasizes continuous quality improvement (CQI) through the CQI committee and a designated quality lead.

Work is underway to create a CQI program that encompasses quality planning, quality improvement, and quality control and assurance that makes connections and distinguishes the roles and responsibilities at both a divisional level and the centre level which includes residents and families as partners in developing a program that captures the critical work that enhances the quality of life of the residents

### **Butterfly Model Sustainability**

An evaluation framework has been developed in collaboration with Health Intelligence Analytics and LTC to monitor and evaluate the effectiveness of the Butterfly model of care in LTC. The model will be examined using the following five quintuple aim objectives: improving quality of care, improving resident experience, improving staff well-being, realizing service efficiency, and applying a health equity lens.

### **Enhanced Workforce Data Collection and Management**

As Seniors Services continues to centralize scheduling and payroll practices, the Centralized Business Support Unit (CBSU) will implement enhanced data collection practices that will identify workforce trends, including overtime, agency usage, sick time, etc. that will aid in the development of action plans to make improvements in ensuring there are consistent practices across the division to address workforce challenges. In addition, policies and processes will be updated to enforce standardization related to scheduling and payroll practices.



The following highlights operational activities in place that ensure continued accountability:

### **Implementation of New Electronic Health Record System**

In 2023, ADS implemented a new Electronic Health Record (EHR) system for clients within Peel's five ADS centres. Through the new EHR, clients will have one file regardless of the number of Peel ADS programs they attend. This will increase communication across centres, reduce the need for clients and caregivers to repeat themselves, and reduce overall risk. Clients will also be able to receive one itemized invoice that will clearly outline the charges for the month.

### **Continuous Quality Improvement (CQI) Committees and Annual Quality Improvement Reports at Long Term Care**

The divisional leadership team monitors CQI through key indicators to establish priorities and track performance of the division. Each home has their own CQI Committee in place that utilizes an interdisciplinary approach to maintain a structure that supports quality care and services in alignment with legislative requirements, Long Term Care Service Accountability Agreement obligations, CARF® Standards and best practices guidelines. Annual CQI reports are made publicly available to increase accountability of improvement initiatives implemented in the homes.

# Transforming Our Business with Technology

Using appropriate software applications holds the potential to strengthen the quality of care delivered to clients, residents and employees. It is anticipated that ongoing investments in technological solutions will be required to meet current and future needs.

## **Seniors Services Development Digital Health Record Solutions**

SSD is working towards implementing new solutions to modernize and enhance the client, caregiver, and provider experience. As SSD expands services to include additional clinical supports and new respite beds, technologies are needed to support greater collaboration amongst clinicians, service providers, clients, and caregivers. A new project, Electronic Medical Record Implementation Project, is underway to implement collaborative technology to address this need.

## **DocuSign for Adult Day Services**

ADS is implementing DocuSign as a way for clients and caregivers to electronically sign consent documentation. This will enable a smoother admission process.

## **Virtual Adult Day Services Program Technology**

During the pandemic, ADS quickly shifted in-person programming to a virtual setting. Virtual programs and services will continue to be a vital component of ADS well beyond the pandemic. Maintaining technologies to deliver virtual ADS programming will reduce barriers to care and allow greater reach to seniors in the community.

## **Central Registry Adult Day Services Waitlist Management at Sheridan Villa**

Sheridan Villa is participating in a pilot project with ADS providers from the legacy Mississauga Halton Local Health Integration Network (LHIN) to centralize waitlist management for ADS programs. In this pilot, applications to participate in ADS will be streamlined so that when ADS providers have a vacancy, they will reach out to the Central Registry via CareDove to receive the information of the next client on the waitlist. This process will improve efficiency for providers as clients will only be contacted once by Central Registry staff until a spot is available at their program of choice.

## **Adult Day Services Access to Electronic Health Records**

Access through external partnership to give health care providers timely and secure access to comprehensive health information including hospital visits, lab results, dispensed drugs, diagnostic images, and home and community care information. This has been implemented across all ADS programs.

## **Long Term Care Outbreak Management Technology**

Access to timely data is critical to effective outbreak management and IPAC in LTC homes. Existing practices that used paper-based processes to collect outbreak data posed challenges to using real-time data to understand patterns of disease transmission. The new IPAC and outbreak management software electronically captures important outbreak data. It can also be used to plot resident signs and symptoms on a digital floorplan allowing better visualization of outbreak patterns within the home. This application is an important tool that can support early detection of infections.

### **Long Term Care Virtual Communication with Clinicians**

Maintaining secure communication within the care team is important in the virtual environment. To address this, LTC is currently implementing an application to manage secure conversations and engagement. This technology supports real-time and confidential conversations between clinicians when coordinating resident care.

### **Long Term Care Asset Management**

The implementation of a new asset management application will support comprehensive facility management, planning and maintenance. This system will record all assets, their value, and end of useful life for decision-making. The work order maintenance management module is a tool to record all maintenance activities to ensure compliance as well as providing a safe and secure environment to residents.

### **Long Term Care Access to Electronic Health Records**

Access through external partnership to give health care providers timely and secure access to comprehensive hospitalized resident health information including hospital visits, lab results, dispensed drugs, diagnostic images, and home and community care information. This has been implemented at all of the LTC homes. Additionally, an Integrated Project connecting long term care homes to hospitals to allow for bi-directional data exchange during transitions in care. This initiative will be piloted at Sheridan Villa.

Currently, technologies used in SSD and LTC do not integrate with the broader health system. Leveraging integrated technology solutions will achieve operational efficiencies and improve services across the continuum of care. SSD and LTC are committed to collaborating with system partners to achieve a digitally enabled health system.

## Maintaining our Infrastructure

To ensure that infrastructure is responsibly maintained, Seniors Services must define a reasonable state of good repair and set priorities to maintain existing service levels. This involves addressing growth concerns and developing an economic lens for infrastructure.

The state of good repair budgeted for 2024 to 2033 is \$60.8 million and \$17 million for development charges (DC) projects. For 2024, an estimated \$5.3 million in state-of-good repair capital projects ensures Peel Region's long term care homes meet service levels and maintain infrastructure.

Highlights of the major state of good repair projects for the 2024 Capital Budget include:

- \$1.7 million for general integrated construction work for washroom, allowance for equipment at Sheridan Villa, Davis Centre, and Tall Pines
- \$1.3 million for mechanical allowance, air conditioning, heaters projects at Sheridan Villa, Davis Centre, and Malton Village
- \$1.3 million for replacing bed, lift, general equipment at Sheridan Villa, Davis Centre, Tall Pines, and Malton Village
- \$1.0 million for roof repair and maintenance at Sheridan Villa, and Davis Centre

# Proposed Operating Budget

This part of the Business Plan sets out the financial resources required to deliver the proposed 2024-2027 Business Plan. Information is provided by major expenditure and revenue category as well as by program. The cost to maintain existing service levels and operationalize prior decisions are identified separately from proposed changes. The budget for 2023 was \$47.0 million and the proposed budget for 2024 is \$54.2 million.

## Net Expenditures: \$54.2 million (Total Expenditures: \$142.7 million)

Description	2022 Actuals	2023 Approved Budget	2024 Proposed Budget	\$ Change Over 2023	% Change Over 2023
Operating Costs	16,976	14,000	16,194	2,194	15.6%
Labour Costs	95,886	102,029	111,472	9,442	9.3%
Reserve Contributions	6,793	6,793	6,793	-	-
Debt Charges	-	-	-	-	-
Grant Payments	-	-	-	-	-
Facility, IT, HR and other support costs	18,447	19,220	19,774	554	2.9%
Recoveries	(11,012)	(11,550)	(11,534)	16	(0.1)%
<b>Total Expenditures</b>	<b>127,090</b>	<b>130,492</b>	<b>142,699</b>	<b>12,207</b>	<b>9.4%</b>
Grants and Subsidies	(67,217)	(59,541)	(63,960)	(4,419)	7.4%
Supplementary Taxes	-	-	-	-	-
Fees and Services Charges	(17,096)	(19,315)	(19,690)	(375)	1.9%
Transfer from Development Charges	-	-	-	-	-
Contributions from Reserves	-	(4,670)	(4,858)	(188)	4.0%
<b>Total Revenues</b>	<b>(84,313)</b>	<b>(83,527)</b>	<b>(88,508)</b>	<b>(4,981)</b>	<b>6.0%</b>
<b>Total Net Expenditure</b>	<b>\$42,777</b>	<b>\$46,965</b>	<b>\$54,191</b>	<b>\$7,226</b>	<b>15.4%</b>

Note: May not add up due to rounding

## 2024 Operating Budget Pressures

\$'000	Total Expenditures	Total Revenue	Net Cost 2024 vs 2023	
<b>2023 Revised Cost of Service</b>	<b>130,492</b>	<b>83,527</b>	<b>46,965</b>	<b>%</b>
<b>Cost of Living/Inflation</b>				
Labour costs	2,618	-	2,618	
Goods and Services	1,435	-	1,435	
<b>Base Subsidy/Recoveries</b>				
Increase in Provincial funding	385	944	(559)	
Increase in Resident user fee	-	352	(352)	
<b>Cost Mitigation</b>				
Efficiencies identified from operational cost reviews	(90)	-	(90)	
<b>Other Pressures<sup>1</sup></b>				
Reversal of COVID related 37 FTEs carried in 2023 Budget	(2,335)	(2,335)	-	
Reversal of Fixing Long Term Care Act temporary staffing included in 2023 Budget	(518)	(518)	-	
Reversal of cost and reserve draw related to Adult Day Services and respite bed expansion included in 2023 budget, now proposed to operate in 2024 (see below under 'Growth')	(1,088)	(1,088)	-	
Stabilizing Operations in Long Term Care - resources to stabilize programs impacted by the pandemic (13 contract staff, continuation of Council resolution #2023-500)	1,380	1,380	-	
<b>Base Budget Changes Subtotal</b>	<b>1,787</b>	<b>(1,265)</b>	<b>3,052</b>	
<b>Service Level Demand<sup>2</sup></b>				
Phased Implementation of the Fixing Long-Term Care Act, 2021 - Staffing to move towards 4-hours of care annual provincial target 37.34 FTEs funded by the Province and Quality leads/Specialist 5.0 FTEs (Budget Request #6, Council resolution #2022-594)	4,549	3,336	1,213	
Stabilizing Operations in Long Term Care – converting 18.2 FTEs to permanent roles originally approved for COVID prevention and containment under Council resolution #2022-669 (Budget Request #5)	1,735	-	1,735	

\$'000	Total Expenditures	Total Revenue	Net Cost 2024 vs 2023	
Support to deliver major health/seniors-supporting initiatives 4 FTEs, 2 contract staff (Budget Request #107)	836	245	590	
<b>Growth<sup>3</sup></b>				
Completion and operationalization of the Seniors Health and Wellness Village (SHWV) at Peel Manor - Temporary staffing and services to implement 1-year pilot for Adult Day Services and respite bed expansion starting Jan 1, 2024, funded from internal reserves including one-time implementation costs (Budget Request#8, Council resolution #2021-397)	3,300	2,665	635	
<b>Service Level Changes Subtotal</b>	<b>10,420</b>	<b>6,246</b>	<b>4,174</b>	
<b>Total 2024 Budget Change</b>	<b>12,207</b>	<b>4,981</b>	<b>7,226</b>	
<b>2024 Proposed Budget</b>	<b>\$142,699</b>	<b>\$88,508</b>	<b>\$54,191</b>	<b>15.4%</b>

Note: May not add up due to rounding

## Operating budget pressure notes:

### Base Budget - Other Pressures<sup>1</sup>

- The reversals represent temporary resources that were added to the 2023 Budget which are not carried forward to 2024.

### Service Level Demand<sup>2</sup>

- Phased Implementation of the Fixing Long-Term Care Act, 2021 - As described in a Council Report titled “Ontario’s Fixing Long-Term Care Act, 2021 and Ontario Regulation 246/22” dated June 23, 2022, staffing and related costs of 37.34 FTE are included in the proposed budget for 2024, to meet the annual provincial target. This represents the final addition to reach provincial target of 4 hours of care per resident per day. The funding is expected in the amount of \$3.336 million. Also proposed as part of the request, the conversion of 5 Quality leads/Specialists to permanent basis for all five long term care homes to meet the requirements of the Act.
- Stabilizing Operations in Long Term Care – proposed 18.2 resources are to sustain increased Infection Prevention and Control (IPAC) requirements, ongoing outbreaks, and sustain complex resident care post-pandemic. These positions are assessed from the 37 FTEs that were approved by Council for COVID prevention and containment efforts in 2021-2023.
- Support to deliver major health/seniors-supporting initiatives – 4 FTEs and 2 contract staff are proposed for major initiatives associated with improving seniors-focused health-related services and system capacity. The cost for contract staff for 1-year term is to be fully funded from internal reserves.

### Growth<sup>3</sup>

- Completion and operationalization of the Seniors Health and Wellness Village (SHWV) at Peel Manor – Due to delays experienced in the completion of Seniors Health and Wellness Village, the Adult Day Services and respite beds expansion as approved by Council resolution #2021-397, the commencement of the 1-year expansion pilot and one-time implementation costs are shifted to Jan 1, 2024. In 2023, the costs were added to commence the pilot as of July 1, 2023. 2023 costs and related internal reserve funding is reversed in the proposed 2024 Budget.



## Staffing Resources to Achieve Level of Service

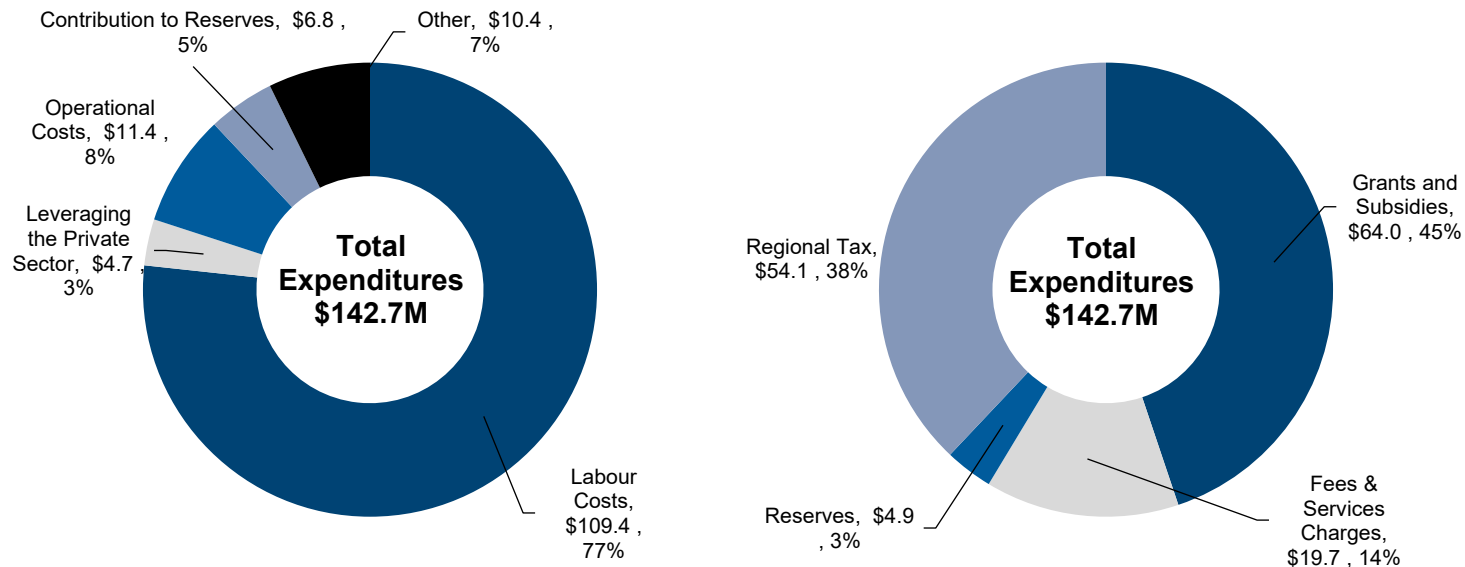
Sub Service	2023	2024	2025	2026	2027
Adult Day Services	54.5	58.5	60.5	60.5	60.5
Social Work Supports	2.0	2.0	2.0	2.0	2.0
Caregiver Support and Education	2.0	2.0	2.0	2.0	2.0
Respite Care	0.9	0.9	0.9	0.9	0.9
Neurobehavioural Service	1.0	1.0	1.0	1.0	1.0
<b>Seniors Services Development (SSD) Total</b>	<b>60.4</b>	<b>64.4</b>	<b>66.4</b>	<b>66.4</b>	<b>66.4</b>
Resident Care and Services	745.60	806.1	806.1	806.1	806.1
Butterfly Model of Care	45.0	45.0	45.0	45.0	45.0
Specialized Behavioural Support Unit	29.4	29.4	29.4	29.4	29.4
Neurobehavioural Nurse Practitioner Program	2.0	2.0	2.0	2.0	2.0
<b>Long Term Care (LTC) Total</b>	<b>822.0</b>	<b>882.5</b>	<b>882.5</b>	<b>882.5</b>	<b>882.5</b>
<b>Seniors Services (SSD + LTC) Total</b>	<b>882.4</b>	<b>946.9</b>	<b>948.9</b>	<b>948.9</b>	<b>948.9</b>

Note: Staffing resources are regular positions (Full Time Equivalent, FTE)

Note: Resources are shared between Adult Day Services, Social Work Supports and Caregiver Support and Education

Note: Butterfly Model of Care staffing resources do not include baseline FTEs

## 2024 Total Expenditures & Funding Source (In \$M)



## 2024 Budget Risks

- Budget has been developed assuming Peel's services will continue to be provided, notwithstanding any governance decisions resulting from Bill 112.
- Development of Ontario Health Central Region and Ontario Health Teams is ongoing, which may impact the operating environment and related expenses, as well as funding for ADS. Details are currently unknown.
- System transformation across Community Support Services and ADS is underway in response to COVID-19. A hybrid ADS and Community Services model continue to evolve to provide in-person and virtual services to active and waitlisted clients and caregivers.
- The Province of Ontario recently announced significant changes to staffing for direct care and other areas of operations under the *Fixing Long-Term Care Act, 2021*. There is uncertainty about the timing and extent of funding from the province. There is a risk the funding will not be provided to support implementation of the requirements. Service providers and LTC partners continue advocacy and lobbying efforts.

## 2025 - 2027 Operating Forecast

	Budget			Forecast					
	2023	2024		2025		2026		2027	
	\$'000	\$'000	%	\$'000	%	\$'000	%	\$'000	%
<b>Total Expenditure</b>	130,492	142,699	9.4%	141,643	(0.7)%	145,084	2.4%	148,791	2.6%
<b>Total Revenue</b>	(83,527)	(88,508)	6.0%	(85,536)	(3.4)%	(87,118)	1.8%	(88,852)	2.0%
<b>Net Expenditure</b>	46,965	54,191	15.4%	56,107	3.5%	57,966	3.3%	59,839	3.4%

Note: May not add up due to rounding

- Forecast years' increases are related to maintaining base services
- 2025 forecast includes 2 FTEs for virtual Adult Day programming at Peel Manor and Davis Centre

# Proposed Capital Budget

**Capital Budget: \$6.8 million** (Ten Year Plan: \$137.2 million)

## 2024 Capital Budget Overview

The following table provides a summary of Seniors Services planned capital project activity for 2024, including funding sources for both new capital project requests in 2023 and projects carried forward to 2024.

Capital Plan By Funding Source	Carry-forward from Prior Years (WIP) (\$'000)	2024 Capital Budget (\$'000)	Total Capital in 2024 (\$'000)
DC Growth	-	-	-
Externally Funded	-	-	-
Non-DC Internal	44,444	6,784	51,228
<b>Total Expenditures</b>	<b>44,444</b>	<b>6,784</b>	<b>51,228</b>
<b># of Projects</b>	<b>80</b>	<b>6</b>	<b>86</b>

## Existing Capital Projects - \$44.4M

- \$19.7M Seniors Health and Wellness Village project
- \$7.2M Elevator, chiller, cooling and generator projects at Sheridan Villa, Malton Village, Davis Centre, and Tall Pines
- \$3.8M Davis Centre facility-wide repair and upgrade
- \$3.5M Peel Manor Facility Maintenance
- \$3.2M Beds, lifts, or other equipment replacement for all five homes
- \$1.9M Building Automation System project at Malton Village and Tall Pines
- \$1.6M Interior work to replace or repair for window, floor, etc. at Davis Centre, Tall Pines, and Malton Village
- \$1.4 M Exterior work for Sealants & Caulking Walls, concrete repairs at Sheridan villa, Davis Centre, Tall Pines, and Malton Village
- \$1.4M in various small equipment replacement at Sheridan villa, Davis Centre, Tall Pines, and Malton Village
- \$0.7M Replacement of nursing call system at Sheridan Villa, and Davis Centre

## 2024 Capital Budget - \$6.8M

### Key highlights:

- \$1.7M General Integrated Construction work for washroom, allowance for equipment at Sheridan Villa, Davis Centre, and Tall Pines
- \$1.3M Mechanical Allowance, Air conditioning, Heaters projects at Sheridan Villa, Davis Centre, and Malton Village
- \$1.3M Replacing bed, lift, general equipment at Sheridan Villa, Davis Centre, Tall Pines, and Malton Village
- \$1.0M Roof repair and maintenance at Sheridan Villa, and Davis Centre
- \$0.5M Surveys and Studies at Sheridan Villa, Davis Centre, Tall Pines, and Malton Village
- \$0.4M Irrigation System and general landscaping projects at Davis Centre, Tall Pines, and Malton Village
- \$0.3M Enhanced building access at Davis Centre Adult Day Services (Budget Request #116)
- \$0.3M Interior work for window, floor repairs at Davis Centre, Tall Pines, and Malton Village

*See Appendix I for details.*

## 2024 Budget Risks

- Budget has been developed assuming Peel's services will continue to be provided, notwithstanding any governance decisions resulting from Bill 112.

## Operating Impact of 2024 Capital Budget

- None

# Proposed Capital Plan

## 2024 - 2033 10-Year Capital Plan - \$137.2M

### By Project Classification:

<b>State of Good Repair</b> <b>\$60.8M</b>	<b>DC Funded Growth</b> <b>\$17.0M</b>	<b>Non-DC Funded Growth &amp; Other</b> <b>\$59.4M</b>
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#### Key Highlights:

- \$60.8M Projects in State of Good Repair including
  - \$35.8M Elevator, Air conditioning, Heating & Cooling projects at Sheridan Villa, Davis Centre, Malton Village, and Tall Pines
  - \$12.8M Interior work to replace or repair door, floor, cabinets at Sheridan Villa, Davis Centre, Malton Village, and Tall Pines
  - \$6.2M Exterior work to replace or repair roof, window, door, and fence, etc. at Sheridan Villa, Davis Centre, Malton Village, and Tall Pines
  - \$2.6M Shower room renovation at Tall Pines
  - \$1.9M in various small state of good repair projects in all five homes for building and equipment maintenance and replacements.
  - \$1.5M Building sitework to repair or install for road paving & surfacing, irrigation systems, gate and fence at Sheridan Villa, Davis Centre, Malton Village, and Tall Pines
- \$17.0M DC Funded Growth – Placeholder for the development of a new Long Term Care home in 2033

- \$59.4 M in Non-DC funded growth and other projects:
  - \$43.0M Non-DC Funded Growth - Placeholder for the development of New Long Term Care Home in 2033
  - \$16.4M Other projects including:
    - \$7.1M Replacement of bed, lift, furnishings, appliances and general equipment at Sheridan Villa, Davis Centre, Tall Pines, and Malton Village
    - \$4.5M LTC Maintenance to address unplanned fluctuation projects
    - \$1.8M Interior work for window covering, wall painting, sealing at Sheridan Villa, Davis Centre, and Malton Village
    - \$1.2M Surveys and Studies at Sheridan Villa, Davis Centre, Tall Pines, and Malton Village
    - \$1.0M Consulting and design services provided to Building Automation System (BAS), split system for air conditioning at Davis Centre, Malton Village, and Tall Pines
    - \$0.8M of various minor enhancements and additions in five homes over the 10-year period

*See Appendix II for details.*



2024 Financing Sources and Funding Status (\$'000)

			2024				
<u>Project</u>	<u>Name</u>	<u>Description</u>	<i>Total Expense</i>	<i>Development Charges</i>	<i>Reserves &amp; Reserve Funds</i>	<i>External Funding</i>	<i>Debt Funding</i>
245404	Sheridan Villa Maintenance & Equipment	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	1,587		1,587		
245405	Vera M Davis Maintenance & Equipment	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	2,098		2,098		
245406	Tall Pines Maintenance & Equipment	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	1,239		1,239		
245407	Malton Village Maintenance & Equipment	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	910		910		
245408	LTC Divisional Allowance	To budget for unplanned fluctuations experienced in budgeted SOGR projects in Long Term Care homes	500		500		
245409	LTC Divisional Maintenance & Equipment	To budget for SOGR projects in Long Term Care homes	450		450		
<b>Seniors Services</b>			<b>6,784</b>		<b>6,784</b>		

2024 Ten Year Combined Capital Program (\$'000)

			<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>	<u>2028</u>	<u>Yrs 6-10</u>	<u>Gross</u>
<u>Project</u>	<u>Name</u>	<u>Description</u>							
245404	Sheridan Villa Maintenance & Equipment	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	1,587	1,089	395	2,175	2,393	10,715	18,354
245405	Vera M Davis Maintenance & Equipment	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	2,098	1,975	73	139	553	2,578	7,416
245406	Tall Pines Maintenance & Equipment	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	1,239	1,041	1,712	1,269	2,582	14,731	22,574
245407	Malton Village Maintenance & Equipment	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	910	50	768	901	3,336	17,394	23,359
245408	LTC Divisional Allowance	To budget for unplanned fluctuations experienced in budgeted SOGR projects in Long Term Care homes	500	500	500	500	500	2,500	5,000
245409	LTC Divisional Maintenance & Equipment	To budget for SOGR projects in Long Term Care homes	450	0	0	0	0	0	450
335402	Building (or Facility) for Development of New LTC Services	To address needs of growing frail senior population that new long term care services may need to be developed	0	0	0	0	0	60,000	60,000
<b>Seniors Services</b>			<b>6,784</b>	<b>4,655</b>	<b>3,448</b>	<b>4,984</b>	<b>9,364</b>	<b>107,918</b>	<b>137,153</b>

# Budget Requests

This table presents the costs by Budget Request for proposed new initiatives. Each BR is numbered. Detailed descriptions of the budget requests can be found in the pages following the table.

Proposed Initiative*	Division	Budget Request #	FTEs Requested	Contract FTE Requested	Net Operating Impact \$	Capital \$
Stabilizing Operations in Long Term Care	Seniors Services - Long Term Care	5	18.2	0.0	1,734,543	0
Phased Implementation of the Fixing Long-Term Care Act, 2021	Seniors Services - Long Term Care	6	42.3	0.0	1,213,883	0
Seniors Health and Wellness Village (SHWV) at Peel Manor operations	Seniors Services - Seniors Services Development	8	0.0	28.4	635,160	0
Support to deliver major health/seniors-supporting initiatives	Seniors Services - Seniors Services Development	107	4.0	2.0	590,423	0
Enhanced building access for Adult Day Services clients	Seniors Services - Seniors Services Development	116	0.0	0.0	0	250,000
<b>TOTAL</b>			<b>64.5</b>	<b>30.4</b>	<b>4,174,009</b>	<b>250,000</b>

## Budget Request #: 5

Proposed Initiative	Department	Division	Service Area
Stabilizing Operations in Long Term Care	Health Services	Long Term Care	Seniors Services

### Description of Budget Request

All positions are to sustain increased Infection Prevention and Control (IPAC) requirements, ongoing outbreaks (55 confirmed), and sustain complex resident care post-pandemic. Council endorsed 36 FTE in 2020 and 2022 (Council Res 2020-810 and 2022-594) and Long Term Care needs 13.8 FTE (of the 36) to continue as permanent with the addition of 2 new permanent FTE and 2 temporary FTE changed to permanent. Finally, converting 0.4 FTE to permanent for a Dietary Team Lead to meet mandated hours.

### Required Annual Operating Investment

Impacts	2024 \$	2025 \$	2026 \$	2027 \$
Gross Expenditures	1,734,543	-	-	-
Less: Internal and Capital Recovery	-	-	-	-
<b>Total Expense</b>	1,734,543	-	-	-
Rate Stabilization Reserve	-	-	-	-
External Funding	-	-	-	-
Other Revenue	-	-	-	-
<b>Total Revenue</b>	-	-	-	-
Net Impact - Tax	1,734,543	-	-	-
Net Impact - Utility Rate	-	-	-	-
<b>FTEs</b>	18.2	-	-	-

### Required Capital Investment

	2024 \$
<b>Total Expenditures</b>	-
Capital Reserve	-
Development Charges	-
External Funding	-
Debt	-
<b>Total Funding</b>	-

## Why Staff Recommend this Initiative

Activation staff are required to provide ongoing meaningful resident engagement, reduce the risk of social isolation and enhance resident wellbeing.

Facilities staff are needed to meet the increased operational needs including increased IPAC measures and demands for environmental services.

Clerks are needed to support inventory, distribute PPE/supplies and manage clerical duties of the nursing dept.

The Dietary Team Lead will support 3 homes in meeting mandated hours and support audits.

## Details of Service Change

Activation staff: Individualized programs need to continue, particularly to support increasingly complex bed-bound residents. Person-centered social engagement opportunities have expanded from morning to evening to enhance resident well-being. Residents will have more programs occurring at their preferred times (per legislation and survey results) to avoid isolation and depression.

Facilities staff: Support for current workload in housekeeping, laundry and janitorial/maintenance, while providing a consistent level of service across 5 homes. The Act includes increased requirements for IPAC where cleanliness is regularly audited. Homes strive to provide 25 minutes of cleaning and 9 minutes of laundry per resident per day. Overtime has been incurred to date to meet these levels which affects staff psychological wellness and leads to burnout. Janitorial/Maintenance staff is required at the Davis Centre where an aging building needs more repairs to maintain it in a state of good repair and considerable capital projects require support during implementation.

Nursing Clerks: Maintaining inventory of adequate supplies, including PPE, will continue to keep staff and residents safe. Residents will have access to clinic programs with scheduled appointments. Resident charts will be appropriately maintained, contributing to resident care with necessary documentation readily available.

Dietary Lead: 0.4 FTE needed for Long Term Care (LTC), current role is split with Adult Day Services.

## Service Impact

Enhanced Activation services help meet the residents' needs as per the Resident Survey and Butterfly Care Model.

Maintaining a clean and sanitized environment will reduce the spread of viruses. Additional staff resources to support laundry at the Davis Centre will reduce the need for overtime which can impact work-life balance and lead to burnout.

Maintaining LTC homes in a state of good repair supports a safe and healthy environment by eliminating hazards and reduces risk to operations and capital investments when equipment and components issues are addressed before deterioration or failure.

Nursing Clerks allow nursing staff to be alleviated of non-critical administrative functions, allowing them to focus on care to residents which includes increased responsibilities with the new Act. Staff and residents will have necessary medical/nursing and personal care supplies and PPE through inventory coordination. Resident chart information will be regularly updated to meet each resident's needs. Clinic appointments will be scheduled for residents in need to optimize health conditions. A Dietary Lead supporting 3 homes will increase time supporting residents and opportunities for audits.

## Budget Request #: 6

Proposed Initiative	Department	Division	Service Area
Phased Implementation of the Fixing Long-Term Care Act, 2021	Health Services	Long Term Care	Seniors Services

### Description of Budget Request

The Fixing Long-Term Care Act, 2021 stipulates the requirement of increasing the minimum hours of direct care for resident to four hours, this ask of 37.34 FTE represents the last phase to meet the legislative staffing levels which carries on from the 2022-24 increase (Council resolution #2022-594). Based on provincial requirements, this should be fully funded. The Act mandates every home to have a designated Quality Lead/Specialists (five FTE) to coordinate continuous quality improvement (CQI) initiatives.

### Required Annual Operating Investment

Impacts	2024 \$	2025 \$	2026 \$	2027 \$
Gross Expenditures	4,549,412	-	-	-
Less: Internal and Capital Recovery	-	-	-	-
<b>Total Expense</b>	4,549,412	-	-	-
Rate Stabilization Reserve	3,335,529	-	-	-
External Funding	-	-	-	-
Other Revenue	-	-	-	-
<b>Total Revenue</b>	3,335,529	-	-	-
Net Impact - Tax	1,213,883	-	-	-
Net Impact - Utility Rate	-	-	-	-
<b>FTEs</b>	42.3	-	-	-

### Required Capital Investment

	2024 \$
<b>Total Expenditures</b>	-
Capital Reserve	-
Development Charges	-
External Funding	-
Debt	-
<b>Total Funding</b>	-

## Why Staff Recommend this Initiative

To adhere to the mandated change in direct care hours, hiring 37.34 FTE for 2024 is required to meet the needs of the residents to provide the level of care prescribed. This will improve the level and quality of care for residents.

The Act requires each home have a designated Quality Specialist to facilitate new CQI requirements including monitoring and reporting on homes quality and residents' quality of life.

Failure to hire these staff can result in monetary penalties from the province.

## Details of Service Change

Of the initial request in 2022 for 80 FTE to meet the mandated 4 hours of direct care (Res 2022-594), the remaining addition of 37.34 FTE for 2024 will be filled with Registered Nurse, Registered Practical Nurse, and Personal Support Worker roles based on operational needs of the homes. In order to meet the provincial target, Peel Manor will require 9.38 FTE, Sheridan Villa will require 7.55 FTE, Davis Centre will require 3.41 FTE, Tall Pines will require 8.50 FTE, and Malton Village will require 8.50 FTE. The provincial government provides funding however the amounts for 2024 have not yet been shared, there is a risk that provincial funding may not be received in the anticipated amounts for the level of staff to be hired which would create additional tax levy pressures for Peel Region. The Act also adds additional requirements and accountabilities in the area of quality management and absence of resources to support the additional responsibilities. The 5 Quality Specialists converted into permanent FTE will allow LTC homes to meet the legislated requirements, sustain a coordinated and interdisciplinary frontline quality improvement program, support interim/annual reporting and developing/enhancing continuous quality improvement (CQI) operational initiatives, monitor progress, build capacity for quality improvement at the home level, enhance care, service delivery, and quality of life for residents, and resident and family satisfaction with services.

## Service Impact

Hiring 37.34 FTE will align with provincial target of 4 hours of direct care as more staff in the homes will lead to greater amount of time spent caring for and engaging with each resident to ensure they are getting the care needed to improve their quality of life. The provincial government provides funding however the amounts for 2024 have not yet been shared, there is a risk that provincial funding may not be received in the anticipated amounts for the level of staff to be hired which would create additional tax levy pressures for Peel Region. Dedicated Quality Specialist FTE will ensure accountability within each home to identify, plan, monitor, implement, evaluate and report necessary improvements that increase safety, decrease risk and improve quality of care, leading to enhancements, efficiencies, and reduce risks including non-compliance with legislative requirements. Securing a permanent quality lead role in each home will more appropriately enable focused work by a specialist with quality improvement training, to build capacity with staff and implement quality improvement requirements. Although mandated, the Quality Specialist positions do not come with provincial funding.

## Budget Request #: 8

Proposed Initiative	Department	Division	Service Area
Seniors Health and Wellness Village (SHWV) operations	Health Services	Seniors Services Development	Seniors Services

### Description of Budget Request

In support of the SHWV implementation and opening, Council already approved a phased approach to SHWV operations in 2021 (Council resolution #2021-397), including a one-year pilot (approx. \$2.7M and 27.4 FTEs) for expanded ADS, the Respite Centre and the Integrated Care Centre. Due to project delays, the pilot is now expected to commence on 2024 instead of 2023. Additional budget is being requested based on an updated assessment of resources needed to sustain robust SHWV operations. The total request is for 28.4 contract positions.

### Required Annual Operating Investment

Impacts	2024 \$	2025 \$	2026 \$	2027 \$
Gross Expenditures	3,300,161	-	-	-
Less: Internal and Capital Recovery	-	-	-	-
<b>Total Expense</b>	3,300,161	-	-	-
Rate Stabilization Reserve	2,665,001	-	-	-
External Funding	-	-	-	-
Other Revenue	-	-	-	-
<b>Total Revenue</b>	2,665,001	-	-	-
Net Impact - Tax	635,160	-	-	-
Net Impact - Utility Rate	-	-	-	-
<b>FTEs</b>	-	-	-	-

### Required Capital Investment

	2024 \$
<b>Total Expenditures</b>	-
Capital Reserve	-
Development Charges	-
External Funding	-
Debt	-
<b>Total Funding</b>	-



## Why Staff Recommend this Initiative

The growing size and complexity of the aging population requires a shift in health spending from acute care (e.g. Alternate Level of Care beds) to a focus on upstream interventions. Access to services within the SHWV will allow seniors and their caregivers to manage their health at home. Funding for the SHWV operations, including a one-year integrated care pilot, was approved under council resolution #2021-397.

## Details of Service Change

In 2021, seniors account for approximately 15% of the population of Peel. There was a 20% growth in Peel seniors between 2016 and 2021, and this rapid growth is expected to accelerate in the decades ahead.

In 2023, Peel Region's Adult Day Services programs had 531 clients on their waitlist, while Peel's LTC homes had 2,475 clients waiting for admission. The majority of Peel Region's ADS clients and LTC residents have a diagnosis of dementia or cognitive impairment. In addition, most seniors want to age in place, prolong their independence and maintain their autonomy within the community.

Beyond providing best-in-class LTC supports, the SHWV and its programs will enable Peel's seniors to manage their health effectively in the community, prolong their independence and alleviate health system pressures – e.g. through delaying LTC admissions, reducing Emergency Department visits, freeing up Alternate Level of Care beds, etc. The SHWV will enable this through delivering an integrated model of care for seniors living in the community. The integrated model includes enhanced ADS services for up to 90 clients a day, short-stay respite (8 beds) to alleviate caregiver burden, and clinical services including primary care, neurobehavioural supports, social work, dental services, etc. The integrated model also includes strong collaboration with community paramedics and external system partners (e.g. the hospital system, home and community care, local community agencies, etc.).

## Service Impact

Through the staffing and other cost elements proposed, the SHWV at Peel Manor will be able to operate effectively and meet resident and client requirements. Continued investment in SHWV will enable a full 12-month pilot for the comprehensive, integrated care model that will operate multiple programs and services to support seniors within the community. Adaptions to the SHWV model can be made as lessons learned from the pilot arise. The SHWV integrated care pilot will be able to operate until the end of 2024. The SHWV will integrate seniors services within the Peel community and help empower seniors with the right resources to maintain their health at home.

## Budget Request #: 107

Proposed Initiative	Department	Division	Service Area
Support to deliver major health/seniors-supporting initiatives	Health Services	Seniors Services Development	Seniors Services

### Description of Budget Request

At the present time, there is no permanent Regional staff group (below Director level and with appropriate subject matter expertise) in place to lead, and ensure achievement of outcomes for, major initiatives associated with improving seniors-focused health-related services and system capacity. The purpose of this request is to establish such a group/section, including base staffing. Once established, a key priority for the team will be the Wilson Lands (Caledon) development initiative. The total request is for 4 permanent and 2 contract positions.

### Required Annual Operating Investment

Impacts	2024 \$	2025 \$	2026 \$	2027 \$
Gross Expenditures	835,814	-	-	-
Less: Internal and Capital Recovery	-	-	-	-
<b>Total Expense</b>	835,814	-	-	-
Rate Stabilization Reserve	245,391	-	-	-
External Funding	-	-	-	-
Other Revenue	-	-	-	-
<b>Total Revenue</b>	245,391	-	-	-
Net Impact - Tax	590,423	-	-	-
Net Impact - Utility Rate	-	-	-	-
<b>FTEs</b>	4.0	-	-	-

### Required Capital Investment

	2024 \$
<b>Total Expenditures</b>	-
Capital Reserve	-
Development Charges	-
External Funding	-
Debt	-
<b>Total Funding</b>	-

## Why Staff Recommend this Initiative

The seniors population and demand for services addressing their needs (and their caregivers) is growing in Peel, proportionally more so in Caledon. Subject matter experts have been developed in SSD with the program of SHWV projects but inadequate internal resource capacity exists to deliver on major seniors/health-related opportunities such as the Wilson Land donation. Considerable Caledon community and political challenges will exist surrounding the unmet needs of frail seniors (i.e., urgent care, ADS, LTC).

## Details of Service Change

Historically, the core teams established for managing large-scale initiatives associated with seniors services have been resourced via the use of temporary, contract positions paid for out of capital funding. For example, such an approach was used for the resourcing of key project management roles tasked with delivering the Seniors Health and Wellness Village (SHWV) at Peel Manor initiative. This approach is sub-optimal as has been evidenced in excessive turnover of staff on such contract-based teams, sometimes resulting in implementation timeline delays, re-work to plans and designs, delays in filling vacant positions in home bases, etc.

The proposed service change will establish a functional section/team and base staffing, inside Health Services – Seniors Services Development, to provide ongoing oversight and support for major initiatives associated with the support of seniors. The proposed team will be made of two 13-month contract staff (1 Advisor and 1 Specialist), three staff contract conversions (1 Senior Project Manager, 2 Project Managers), and one new permanent FTE (Project Coordinator). One of the initial and key focuses of this new section will be coordinating the multi-year efforts required for the development of the donated Wilson Lands in Caledon. Based on the donation agreement, this land is to be used for a health care facility and/or senior's centre, wellness centre, etc.

## Service Impact

Section establishment: Job descriptions will be developed for the required resources. Contract conversions will be used to fill some roles (based on the availability of suitable resources from the SHWV project team or elsewhere). A transparent process will be leveraged to recruit for roles that cannot be filled via contract conversions.

For Wilson Lands development, planning and implementation is likely to use phasing similar to the following:

- Plan of Approach: Develop a plan for undertaking the initiative - e.g. outline key activities, resources, governance structures, timelines, funds, etc.
- Master Program Development: Development of a master program for the Wilson Lands Redevelopment that includes all intended program and service elements.
- Functional Program Development: Identification of building and space requirements, major equipment, staffing needs, etc.
- Specifications Development: Development of detailed designs and specifications for use in RFPs or alternate procurement approaches.
- Procurements: Completion of appropriate procurement processes to acquire the goods and services needed.
- Implementation and Construction: Construction of the required Wilson Lands Redevelopment components. Estimated to take 5-10 years to complete.
- Operational Readiness and Occupancy Planning: This includes efforts required to prepare for operations on-site and move-in of residents, patients, clients, etc.

## Budget Request #: 116

Proposed Initiative	Department	Division	Service Area
Enhanced building access for Adult Day Services clients	Health Services	Seniors Services Development	Seniors Services

### Description of Budget Request

Adding a vestibule to the current ADS entrance will allow for a proper entrance for clients/caregivers to protect them and LTC residents from the impact of inclement weather. Currently, the frequent use of the ADS entrance causes outdoor elements to be funneled into the shared ADS and LTC home space, affecting residents living within proximity (Pod 8) of the entrance. Adding a second door will be more secure, and reduce the risk of elopement, increasing safety and security.

### Required Annual Operating Investment

	2024 \$	2025 \$	2026 \$	2027 \$
Gross Expenditures	-	-	-	-
Less: Internal and Capital Recovery	-	-	-	-
<b>Total Expense</b>	-	-	-	-
Rate Stabilization Reserve	-	-	-	-
External Funding	-	-	-	-
Other Revenue	-	-	-	-
<b>Total Revenue</b>	-	-	-	-
Net Impact - Tax	-	-	-	-
Net Impact - Utility Rate	-	-	-	-
<b>FTEs</b>	-	-	-	-

### Required Capital Investment

	2024 \$
<b>Total Expenditures</b>	250,000
Capital Reserve	250,000
Development Charges	-
External Funding	-
Debt	-
<b>Total Funding</b>	<b>250,000</b>

## Why Staff Recommend this Initiative

The entrance vestibule will reduce exposure to outdoor elements and reduce wasted energy from escaping heat and air conditioning as the outside elements come into the home. In current state the door is opening directly into the LTC hallway, creating large drafts of cold air during winter months. During snow and rain conditions, the precipitation is coming into the hallway and creating a risk of slips and falls for residents, clients, and staff.

## Details of Service Change

The scope of work for building a vestibule includes the following: remove existing concrete sidewalk and pavers at the addition, demolish portion of existing low canopies at new vestibule, remove soffit and relocate conduit at high canopy, remove and relocate exterior push buttons and keypads, pour new concrete footings and foundations, construct new insulated exterior wall assembly, install new windows and doors, new concrete slab, floor/base and walk-off mat, install new ceiling and lighting, add force flow heater, extend sprinklers to the vestibule, new concrete sidewalk to vestibule door location.

## Service Impact

Renovation of the existing entrance to include a vestibule will reduce wasted energy and result in cost savings for Peel due to less wasted heat and air conditioning. It will improve the living experience of residents whose rooms are close to the entrance as there will be less draft during the winter months. Clients of the ADS program will be more comfortable as they will not be exposed to the outside elements as clients come and go from the program. There is also a reduced risk of elopement for both ADS clients and LTC residents as having a vestibule will create a second door that would have to be passed through to leave the building.