



# Seniors Services

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2025–2028 Business Plan  
and 2025 Budget

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# Executive Summary

**Mission:** To provide compassionate, loving, respectful care that is individualized for everyone we serve.

## Services We Provide

- Seniors Services consists of two divisions: Seniors Services Development and Long Term Care.
- There are five Peel Long Term Care centres with an Adult Day Services program co-located within each centre.
- Seniors Services Development provides supports for seniors and older adults living in the community including:
  - Adult Day Services
  - Caregiver Support and Education
  - Respite Care
  - Neurobehavioural Supports
- Long Term Care services include:
  - Resident Care and Services
  - Emotion-Based Butterfly model of care
  - Specialized Behavioural Support Units
  - Neurobehavioural Nurse Practitioner Program
- 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

- 31,283 visits provided by Adult Day Services virtually and in-person and this number continues to increase alongside the waitlist.
- 93 per cent of clients reported that Adult Day Services contributed to their ability to live at home.
- 866 residents served in Peel Long Term Care homes required increased staffing to meet legislative obligations to support quality care, and infection prevention and control measures.
- 93 per cent of new Long Term Care resident admissions had a diagnosis of dementia, which significantly contributes to the complex care needs of residents.

## Highlights of the Business Plan

- Stabilizing operations to improve resident, client, caregiver, and staff experience.
- Cultivating a resilient and empowered workforce by promoting employee psychological health, well-being, and culture.
- Piloting integrated care and expanding Adult Day Services and Respite Care to support clients and caregivers to age at home.
- Leveraging technology and infrastructure to meet current and future needs.

**Table 1. Budget Summary**

	2025	2026	2027	2028
Operating Net Investment (in \$ thousands)	56,814	62,225	72,471	75,296
Capital Net Investment (in \$ thousands)	16,018	17,038	43,132	19,415
Full Time Equivalents	966.2	1001.3	1002.6	1004.3



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# Core Services

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

### Vision

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

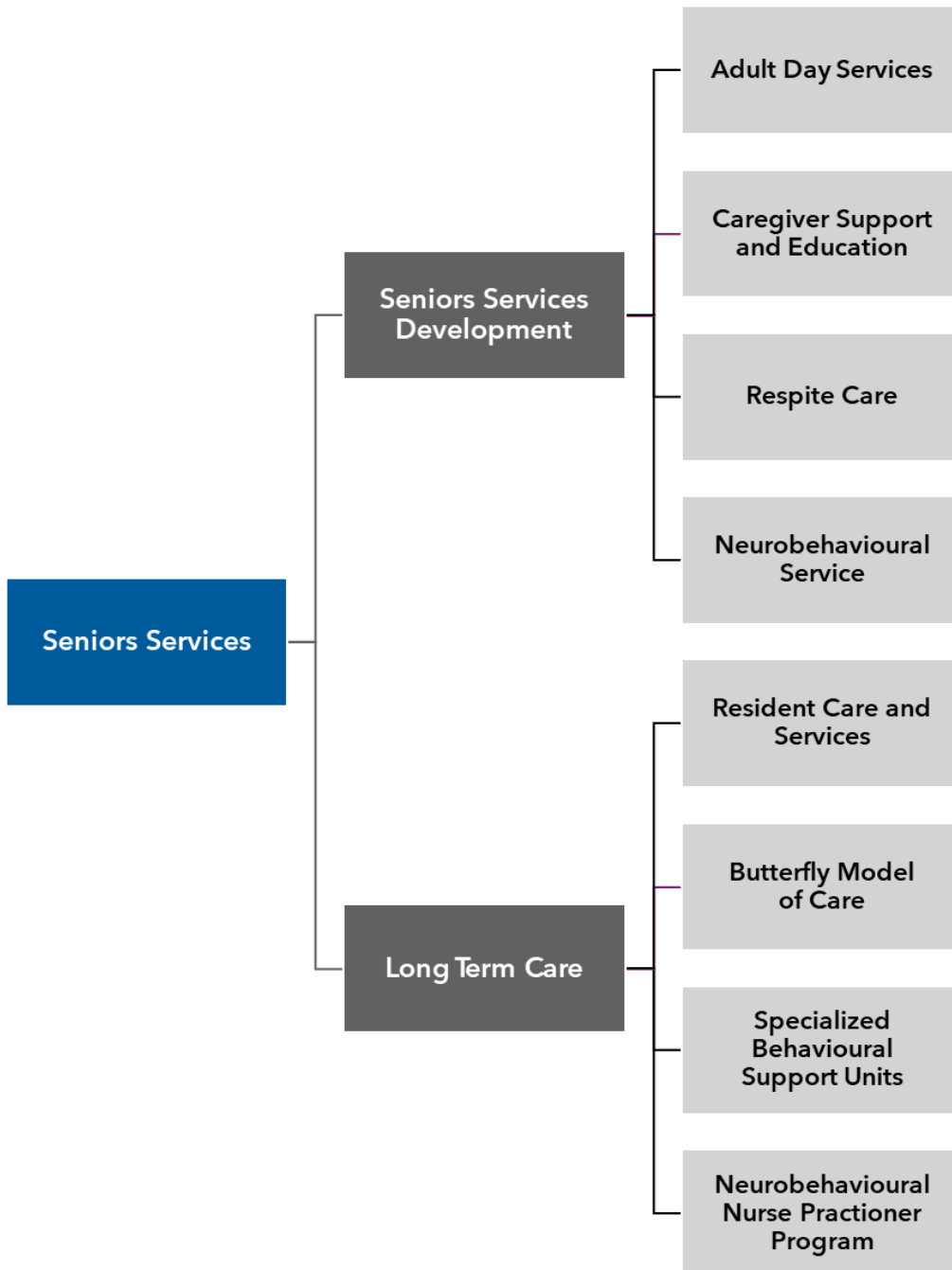
### Mission

To provide compassionate, loving, and respectful care that is individualized for everyone we serve.

### Goals of Service

1. **Cultivate a resilient and empowered workforce.** Empowering leaders and staff through continuous learning, recognition programs, and proactive workforce planning to ensure psychological health, safety, and well-being.
2. **Deliver person-centred care that honours individuals needs and preferences.** Ensuring that individual needs and preferences are honoured through emotion-based care and shared decision-making with residents, clients, and their caregivers.
3. **Facilitate integrated care through purposeful internal and external collaborations.** Strengthening internal and external collaborations to provide comprehensive services and support to seniors, optimizing the coordination of care and services.

# Service Delivery Model



# 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 centres each co-located with an Adult Day Services (ADS) program. 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:

- **Adult day services, In-person and virtual.** Peel Region's ADS program provides clinical and personal care, recreational, and therapeutic programs 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, are diagnosed with dementia, have physical disabilities, chronic illness, or other conditions that require support.  
Virtual services were added due to in-person closures during the pandemic. The continuation of this new innovative service option has allowed Peel to provide a virtual service to existing clients and extends our reach to new clients. In 2023, ADS provided a total of 31,283 in-person and virtual program visits to 379 unique individuals.
- **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. A formal caregiver support group is also available and facilitated by one of our registered social workers.
- **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 convalesce in order to 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 5 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 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, environmental, dietary and therapeutic programs are provided. In 2023, Peel's LTC homes provided 24/7 resident care to 866 individuals.

- **Emotion-based Butterfly model of care.** The Butterfly approach provides emotion-based, person-centred care to those living with dementia. The approach recognizes the importance of social connection and engagement and 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 meaningful engagement between residents and staff. Currently, there are seven Butterfly home areas at Malton Village, Sheridan Villa, Davis Centre, and Tall Pines, and two new Butterfly home areas at the Seniors Health and Wellness Village at Peel Manor.
- **Specialized Behavioural Support Units (SBSU).** Peel operates two transitional Specialized Behavioural Support Units; a 19-bed unit located at Sheridan Villa and a recently Ministry designated 26 beds at Peel Manor. These units serve those with a primary diagnosis of dementia who have expressive responses such as agitation, restlessness, and aggression that cannot be safely and effectively cared for in the community or traditional long term care homes. These units adapt a blended approach of the Butterfly model of care and clinical interventions to meet the specialized care needs of the residents. The length of stay varies based on the resident's needs. Once residents' clinical goals have been achieved and expressive responses have stabilized, they can be discharged to a long term care home or the community.
- **Neurobehavioural nurse practitioner program (NBNP).** Peel Region's NBNP outreach team works in partnership with existing Behavioural Supports Ontario (BSO) Nurses and leads within long term care homes. Since the inception of the program in 2017, the NBNP team and Peel Region's Senior Medical Director and Geriatrician have provided a specialized team approach to optimally manage behavioural and psychological symptoms of dementia for seniors in up



to 23 LTC homes throughout the Ontario Health atHome Central West 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 256 residents in 2023, the NBNP team also builds capacity by providing 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 five 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 per cent to 4.2 per cent between 2016 and 2041.

Exhibit 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 the 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.

#### Exhibit 1. Continuum of Care



In 2023, the following observations were made:

- 80 per cent of current in-person Adult Day Services clients have complex medical care needs including cognitive impairments such as dementia.
- 68 per cent of people living in Peel’s LTC centres have dementia.
- 93 per cent of new LTC residents had a diagnosis of dementia upon admission.

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-based 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.
- 96 per cent of individuals receiving long term home care 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 Across the Seniors Services Sector**

The profound effects of the pandemic and ongoing outbreaks (including COVID-19) have had a disproportionate impact on seniors and significantly amplified vulnerabilities and system pressures including:

### **Workforce and Attrition Pressures**

The past four years have exacerbated long-standing issues related to precarious part-time work, wage disparities, stricter staffing mandates as well as high levels of turnover in the long term care sector. In 2023, the turnover rate for front-line workers was 12.2 per cent in long term care which is still higher than pre-pandemic levels. Frontline health care workers face challenging physical and psychological work conditions in the centres, with an increase in medical complexity in care for residents and clients, as well as the psychological impact of end-of-life care. A comprehensive staffing strategy for the long term care system has been identified by the Ministry to ensure improved working conditions for staff, ongoing staff development and increasing staffing levels across the sector.

### **Legislative Changes**

The *Fixing Long-Term Care Act, 2021* and accompanying regulations aim to strengthen LTC service delivery with a focus on protecting residents' experience and quality of life. However, the costs to implement and to comply with the Act are much greater than what the Ministry has identified. LTC sector partners continue to advocate for funding to support the changes made to comply with the Act and regulations. Additionally, there are requirements under the Act that were mandated but not fully funded by the Province.

## **Increasing Demand and Chronic Underfunding for Seniors Services**

The rapid growth of the aging population is outpacing available home and community supports and long term care bed spaces resulting in 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.

As Peel continues to support the province’s efforts to build more homes faster, as well as supporting the influx of refugees and asylum seekers, demand continues to surge for Seniors Services and the overall health system.

Additionally, there are ongoing challenges related to underfunding for home and community care services and long term care. Base funding increases have been lower than the rate of inflation and have not kept pace with the rising complexity of resident and client care needs and do not accurately account or compensate for high-growth and high-demand communities, leading to increasing waitlists and unmet demand. As of May 2024, Peel Region's Adult Day Services programs had 556 clients on their waitlist, while Peel's LTC homes had 2,755 applications waiting for placement. While the Province has modernized its long term care capital funding program, the development of the Seniors Health and Wellness Village at Peel Manor has not qualified for provincial capital funding.

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

The Quintuple Aim is a framework for addressing system-level challenges. It is grounded in the belief that the simultaneous pursuit of these five aims is necessary for optimal health system functioning:

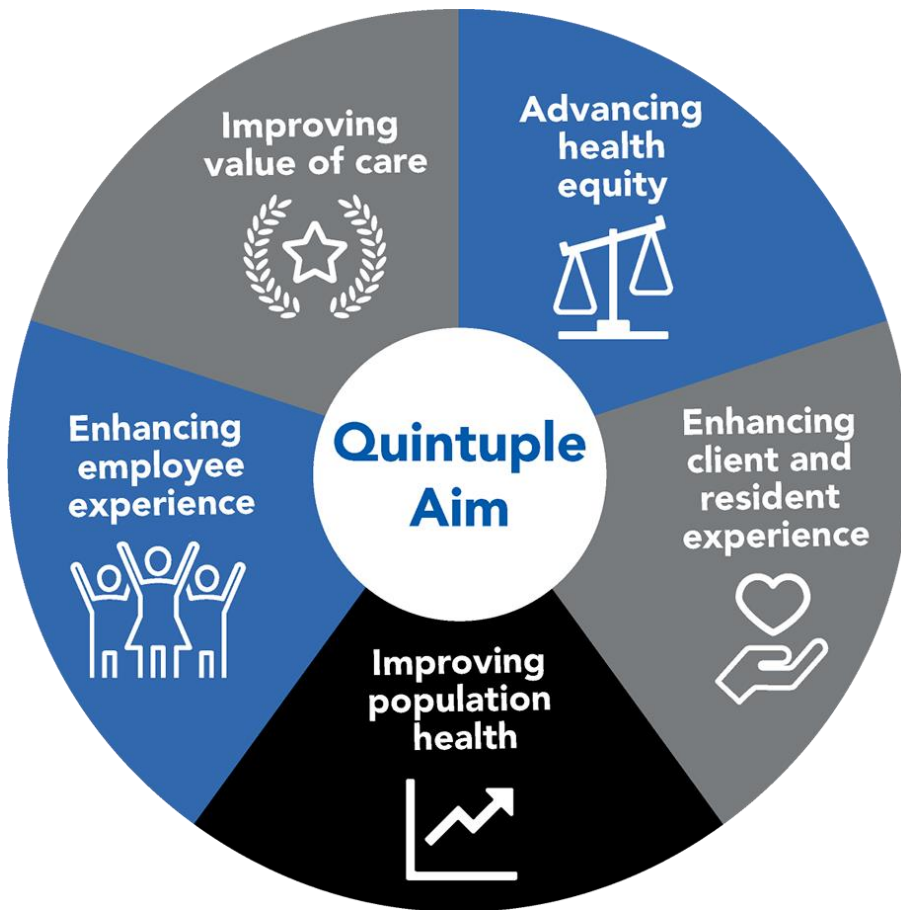
- Improving population health.
- Enhancing client and resident experience.
- Enhancing employee experience.
- Improving value of care.
- Advancing health equity.

The Quintuple Aim expands on the previous Quadruple Aim with the addition of an aim for health equity. 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 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 Exhibit 2).

## Exhibit 2. Quintuple Aim



### Improving Population Health

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

#### Client Well-being (ADS)

94 per cent of ADS clients reported they improved or maintained their well-being based on experience survey results from 2023.

For LTC, selected mandatory indicators are compared against provincial benchmarks. In 2022/2023, 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.

These performance results are the best we have achieved and can be attributed to our commitment to providing evidence-informed, person-centered, and emotion-based care.

## **Enhancing Client and Resident Experience**

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

Examples of results from 2023 include:

### **Client and Caregiver Satisfaction (ADS)**

96 per cent of ADS clients were satisfied with overall programs and services; 100 per cent of ADS caregivers would recommend the ADS program to others.

### **Resident and Family Satisfaction (LTC)**

82 per cent of LTC residents were satisfied with the overall quality of care received at the home; 74 per cent of LTC resident families were satisfied with their loved one's quality of life.

## **Enhancing Employee Experience**

Psychological safety and employee well-being is a Regional and Health Services priority. Two temporary resources are in the early stages of leading this work and have had a positive impact on influencing workplace culture across Seniors Services. Dedicated resources are needed to continue to improve, enhance, and sustain employee health and well-being. In the last employee survey from June 2024, 75 per cent of Seniors Services survey respondents indicated they feel a sense of belonging at work and 70 per cent feel they can talk to their people leaders when they need support. Scores have increased from the last survey on questions related to access and use of psychological resources to support their mental well-being. However, 15 per cent of survey respondents reported experiencing harassment in the workplace. Initiatives to improve respectful behaviour in the workplace and cultural competence are being implemented with the support of this team to foster an inclusive culture.

## **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. In LTC, unnecessary transfers to hospital are minimized through comprehensive care and services that are responsive to changing clinical needs.

## **Self-Reported Ability to Live at Home (ADS)**

In 2023, 93 per cent 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 2023, the avoidable emergency department visit rate (per 100) was 20.6 for Peel LTC homes. This trends below the provincial rate.

## **Enhancing Clinical Capacity Through the Use of New Diagnostic Equipment**

Peel has secured diagnostic equipment through Ministry funding to support treatment of congestive heart failure, falls, pneumonia, and urinary tract infections, as well as intravenous (IV) and wound suture training.

The availability of this innovative approach in a long term care setting is enabling Peel LTC homes to support residents with new or increasingly complex medical conditions to receive comprehensive care and treatment preventing an unnecessary transfer to hospital and building the capacity of our clinical team, leading to better outcomes.

## **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 socio-demographic characteristics (including 2SLGBTQI+) of the clients/residents and those accessing services will help Peel Region tailor programs, services, and interventions in a manner that considers equity, population diversity and is inclusive.

# Awards and Achievements

## Innovation and Excellence Award

Peel Region was the successful recipient of **AdvantAge Ontario's Innovation and Excellence Capital Project Award** for the Seniors Health and Wellness Village (SHWV) at Peel Manor. The SHWV at Peel Manor incorporates a technologically advanced LTC centre with a highly dementia-friendly design and a main-floor service hub which will support the diverse and evolving needs of our community.

## Behavioural Supports Ontario Lead Agency

Peel Region was selected as the successful candidate to take on the Behavioural Supports Ontario (BSO) Lead Agency role in the Central West geography. As a BSO Lead Agency, Peel will provide clinical leadership, planning and operational oversight for integrated behavioural support services in the health system including the community, acute, and Long Term Care through direction and collaboration with Ontario Health.

## CARF® Accreditation

In June 2023, all five ADS programs and LTC homes, as well as the Dementia Care Specialty Programs, successfully attained a 3-year CARF® International accreditation for meeting a rigorous set of quality standards for business and service delivery practices.

## Expansion of the Virtual Adult Day Services 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 those that are also waitlisted clients to integrate successfully into the in-person ADS program.

## Launching of the Integrated Care Model

The integrated care model at the Seniors Health and Wellness Village at Peel Manor launched in March 2024 and is in the early stages of delivering an essential combination of services through an interdisciplinary team. This model of care reinforces the benefits of integrating primary care in community services to support healthy aging at home.



## **Best Practice Spotlight Organization**

Peel Region's Long Term Care homes are celebrating 10 years as a designated Best Practice Spotlight Organization (BPSO) 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. Peel is one of two LTC organizations to have successfully maintained the BPSO designation for this duration.

## **The Butterfly Model of Care**

Peel Region was the first organization in Ontario to implement the emotion-based Butterfly model of care. To date, seven Butterfly home areas have been implemented across 4 of the 5 LTC homes and 2 new Butterfly home areas are opening in the new Seniors Health and Wellness Village at Peel Manor.

## **Emotion-Based Dementia Care Training for Peel Paramedics**

Peel Long Term Care is continuing to spread emotion-based dementia training to build awareness of dementia and strategies to de-escalate heightened situations during crisis and community calls. Training will be facilitated for approximately 780 Paramedics during their annual mandatory training from September through November 2024.

## **Specialized Behavioural Support Unit at Peel Manor**

The Specialized Behavioural Support Unit at Peel Manor opened in March 2024 and has been receiving positive feedback from residents and families on the emotion-based care approach for those with advanced and complex dementia. Base funding was received in July 2024 from Ontario Health.

## **Centre Milestones**

This year marks several significant milestones for all our 5 centres. In addition to the new Seniors Health and Wellness Village at Peel Manor opening, each of the Peel's Long Term Care centres are celebrating anniversaries: 50<sup>th</sup> anniversary for Sheridan Villa, 40<sup>th</sup> anniversary for Vera M. Davis Centre, and 20<sup>th</sup> anniversary for Tall Pines and Malton Village.

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# The 2025–2028 Business Plan Outlook

## Planning for the Future

### 2024–2029 Seniors Services Strategic Plan

Seniors Services Strategic Plan (2024–2029) launched in September 2024 and will support and guide Seniors Services through a series of focused actions, long-term prioritization, and integrated goals. Our plan was built from and nests into the Health Services Departmental Strategic Plan and the overall strategic direction of the organization. It creates a clear direction and focus that will help Seniors Services plan for the future based on the goals identified. The strategic plan was developed from valuable insights from staff, residents, clients, caregivers, and internal and external partners and stakeholders. The three strategic goals that will advance Seniors Services over the next five years are:

- Cultivate a resilient and empowered workforce.
- Deliver person-centred care that honours individual needs and preferences.
- Facilitate integrated care through purposeful internal and external collaborations.

### 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 community care solutions improve outcomes for clients, residents, caregivers, and families as well as reduce costs on public sector budgets. Investing in upstream services (community care) help reduce or delay the need for more downstream, costly services (acute care). 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-based 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 clients, residents, caregivers, and staff to understand what health equity means in maintaining and delivering quality care. Building on both informal and formal avenues of dialogue that allow for open discussion about inequities and how Seniors Services can partner with stakeholders through purposeful engagement will 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**

Employee wellness and workplace culture plans were implemented in 2024 and will support the strategic goal of having a resilient and empowered workforce. Actions will include comprehensive onboarding and leadership development programs to empower leaders and ensure they are coaching and mentoring their employees, recognition programs, cultural competence, and respectful workplace policies and processes. Additional continuous learning programs will support skill building for staff and provide tools to address compassion fatigue, moral distress and psychological safety to increase retention, reduce burnout and empower employees. For example, a partnership with the Canadian Mental Health Association and their “Your Health Space” program brought experts into each of the centres to provide micro-learning sessions on coping with stress and fatigue in the workplace for leaders and front-line employees.

## **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. 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. As the Ministry amends the Regulations, Peel will continue to provide feedback on the proposed changes.

## 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:

### Enhancing Ability to Support Complex Care

Peel maintains the four hours of direct care targets phased in by the Ministry of Long-Term Care for nursing and personal support workers. Additionally, Attending Nurse Practitioner base funding was recently announced by the Ministry commencing 2025–2026. This will enable each of our homes to have a permanent Attending Nurse Practitioner onsite to meet the complex care needs of residents.

### Workforce Management Planning

The Centralized Business Support Unit will be actively engaging in forming strategic partnerships with colleges and universities to enhance our recruitment efforts across all position classifications. This initiative will include leading job fairs and optimizing the hiring process to ensure efficiency and effectiveness.

## Service Delivery

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

The expansion of ADS and introduction of a new respite centre will be managed as a 21-month pilot at the new Seniors Health and Wellness Village (SHWV) at Peel Manor. Performance of the pilot will be monitored, evaluated 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 respite. 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 Centre 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.

### **Expanding Emotion-Based Care**

As part of the planned expansion of emotion-based care through 2026, the Adult Day Services teams will begin formal training of the Butterfly Approach in its five ADS programs. The implementation journey will begin with training in December 2024 and will continue with a gradual and phased launch of the Butterfly Approach in each program area throughout 2025. This is an exciting next step in Peel's continued efforts to spread approaches to care that support the emotional well-being of clients and residents. We look forward to celebrating the successes that go along with this journey in ADS, including being Canada's first Butterfly certified Adult Day Services program.



# Finding Efficiencies

## Continuous Improvement

Health Services is strongly committed to finding efficiencies through improvement initiatives across programs and services. Not only do improvements lead to efficiencies, but they also contribute to the achievement of each domain across the Quintuple Aim (i.e., population health, health equity, value of care or client and employee experience).

Seniors Services has identified various continuous improvement initiatives to focus on over the next 4 years, including:

### **Bi-directional Virtual Adult Day Services and Community Paramedicine Referral Process**

With many frail and elderly individuals living in the community requiring additional services and supports, ADS worked with Community Paramedics to create a bi-directional pathway to refer clients from the community directly to ADS or Community Paramedicine. This improves access to services by creating a seamless referral pathway between Virtual ADS and Community Paramedics.

### **Maximo Work Order Maintenance Management System Dashboard**

This dashboard was developed to improve the management and tracking of maintenance activities to enable effective asset decision-making, improve the resolution of maintenance issues on time, reduce downtime, and unexpected repairs/replacement. The changes have resulted in better visibility and tracking of work orders. Month over month, there was a decrease in unresolved maintenance work orders by 66–95 per cent.

### **Business Coordinator Pilot Project**

Five Business Coordinators were onboarded in 2023 to help reduce the administrative burden for Long Term Care Administrators as a result of increasing operational demands and new requirements under the *Fixing Long-Term Care Act, 2021*. Pilot results showed that there was an average decrease of almost 56 per cent for time spent by LTC Administrators on day-to-day coordinator-related tasks allowing the Administrators more time to focus on strategic priorities and operational initiatives.

### **Diagnostic Equipment to Prevent Hospital Visits**

Peel Region received provincial funding to purchase diagnostic equipment and staff training to reduce potential hospitalizations and to provide better care within the homes. Use of new equipment for four months resulted in early intervention/treatment for nine LTC residents and prevented potential hospital transfers for 36 per cent of residents tested.

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

The *Fixing Long-Term Care Act, 2021*, emphasizes continuous quality improvement (CQI) through the CQI committee and lead in each home. Over the past year, CQI Specialists were onboarded and received baseline CQI training to ensure consistency across the homes. Additionally, they updated the CQI dashboard, are leading CQI projects on falls and emergency department transfers and are relaunching the daily continuous improvement huddle boards with frontline staff (which was paused during the pandemic). Annual CQI reports are made publicly available to increase accountability of improvement initiatives implemented in the homes. Residents and families are partners and are engaged in improving services to enhance the quality of life of 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.

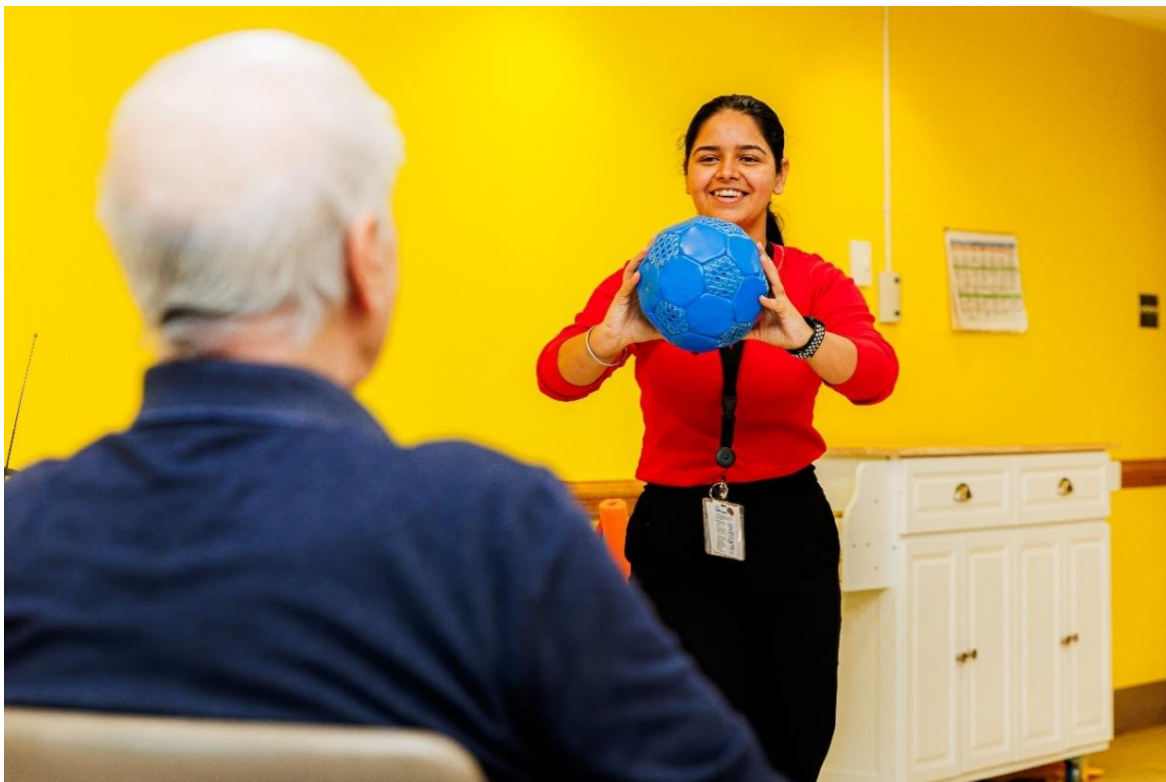
## **Virtual Adult Day Services Program**

During the pandemic, ADS quickly shifted in-person programming to a virtual setting, and this continues to be a vital component of our services. Virtual ADS has extended reach to the community and offers an expedited service support to the many individuals on the lengthy waitlists for in-person ADS and Long Term Care and for those that are not able to travel to in-person programming. In addition to the immediate access, we are also able to provide this service with fewer resources than in-person programming. Partnerships have been developed to provide seamless access to clients via different referral pathways from Ontario Health atHome, Community Paramedicine, Central Registry, and other Community Support Service providers.

## **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 and others 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.

In 2024, ADS implemented a new Collaborative Electronic Health Record (CHR) system to support its primacy care services as part of the new integrated care offerings being piloted. Through the new CHR, 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. This improvement will be supported through Peel Region's Continuous Improvement Program, alongside Health Services targeted efforts to increase skill and competency in continuous quality improvement.





# Transforming Our Business with Technology

Using appropriate software applications holds the potential to strengthen the quality of care delivered to clients and residents. 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 continues to implement new solutions to modernize and enhance the client, caregiver, and provider experience. For example, as SSD expands services to include additional clinical supports and new respite beds, we have rolled out the Telus Collaborative Health Record solution to support greater collaboration amongst clinicians, service providers, clients, and caregivers.

## eLong Term Care Outbreak Management Technology

Access to timely data is critical to effective outbreak management and Infection Prevention and Control (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 IPAC and outbreak management software electronically captures important outbreak data. It is also 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. To date, this application has been implemented at Malton Village and the plan is to roll out to the other homes.

## 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 is occurring at Sheridan Villa and Davis Centre.

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 and overall safety. This involves addressing growth concerns and developing an economic lens for infrastructure.

The state of good repair budgeted for 2025 to 2034 is \$112.0 million. For 2025, an estimated \$11.4 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 2025 Capital Budget include:

- **\$6.2 million** for air conditioning, cooling, generator projects at Sheridan Villa, and Davis Centre.
- **\$2.9 million** for interior work for replacing or repair of shower and tubs, cabinets and doors at Sheridan Villa, Davis Centre, Tall Pines and Malton Village.
- **\$1.5 million** for replacing beds, lifts, general equipment at Sheridan Villa, and Tall Pines.
- **\$0.8 million** for roof repair, building automation system, and other small projects at Sheridan Villa, Davis Centre, Tall Pines and Malton Village.

# Proposed Operating Budget

This part of the Business Plan sets out the financial resources required to deliver the proposed 2025–2028 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 2024 was \$54.1 million and the proposed budget for 2025 is \$56.8 million.

**Net Expenditures:** \$56.8 million (**Total Expenditures:** \$151.8 million)

Description (in \$ thousands)	2023 Actuals	2024 Approved Budget	2025 Proposed Budget	\$ Change Over 2024	% Change Over 2024
Operating Costs	16,557	16,172	16,463	291	1.8%
Labour Costs	97,246	111,818	119,839	8,021	7.2%
Reserve Contributions	6,793	6,793	6,793	–	–
Debt Charges	–	–	–	–	–
Grant Payments	–	–	–	–	–
Facility, IT, HR and Other Support Costs	19,441	19,724	21,233	1,509	7.7%
Recoveries	(11,981)	(11,534)	(12,526)	(992)	8.6%
<b>Total Expenditures</b>	<b>128,056</b>	<b>142,973</b>	<b>151,802</b>	<b>8,829</b>	<b>6.2%</b>
Grants and Subsidies	(68,815)	(64,295)	(68,799)	(4,504)	7.0%
Supplementary Taxes	–	–	–	–	–
Fees and Services Charges	(18,988)	(19,690)	(19,875)	(185)	0.9%
Transfer from Development Charges	–	–	–	–	–
Contributions from Reserves	–	(4,858)	(6,314)	(1,456)	30.0%
<b>Total Revenues</b>	<b>(87,803)</b>	<b>(88,843)</b>	<b>(94,988)</b>	<b>(6,145)</b>	<b>6.9%</b>
<b>Total Net Expenditure</b>	<b>\$40,253</b>	<b>\$54,130</b>	<b>\$56,814</b>	<b>\$2,684</b>	<b>5.0%</b>

Note: May not add up due to rounding.

## 2025 Operating Budget Pressures

Service (in \$ thousands)	Total Expenditures	Total Revenue	Net Cost 2025 vs 2024	
<b>2024 Revised Cost of Service</b>	<b>\$142,973</b>	<b>\$88,843</b>	<b>\$54,130</b>	<b>%</b>
<b>Cost of Living Inflation</b>				
Labour Costs	6,601	–	6,601	
Goods and Services	1,774	–	1,774	
<b>Base Subsidy/Recoveries<sup>1</sup></b>				
Increase in base provincial funding	–	2,305	(2,305)	
Phase in 50 per cent of the impact of Provincial Funding gap from the Tax Rate Stabilization Reserve <sup>1</sup>	–	3,000	(3,000)	
Increase in Permanent Wage Enhancement funding for the personal support workers	611	611	–	
Conclusion of provincial construction subsidy term for 2 long term care homes in 2024	–	(1,209)	1,209	
Funding increase for <i>Fixing Long-Term Care Act, 2021</i> – Staffing to move towards 4 hours of care annual provincial target, based on 2024 actual amounts received	–	2,996	(2,996)	
Increase in Resident User Fee	–	185	(185)	
Removal of capital reserve draws from previous year	–	(369)	369	
<b>Other Pressures<sup>2</sup></b>				
Removal of temporary resources added in 2024 and prior years, not carried to 2025	(1,654)	(1,654)	–	
Removal of previous reserve draw for Seniors Health and Wellness Village at Peel Manor (replaced in 2025 by updated BR # 51)	(2,441)	(2,441)	–	
<b>Base Budget Changes Subtotal</b>	<b>4,891</b>	<b>3,424</b>	<b>1,467</b>	
<b>Service Level Demand<sup>3</sup></b>				
BR# 46 – Resource to Support Sustainability of Health Service's Electronic Medical Records System 1 temporary staff	97	97	–	
BR # 49 – Cultivating a resilient, empowered, and thriving workforce across Seniors Services 2 Permanent staff (previously on temporary basis)	240	–	240	

Service (in \$ thousands)	Total Expenditures	Total Revenue	Net Cost 2025 vs 2024	
BR # 52 – Stabilizing Operations in Long Term Care 6 permanent staff (previously on temporary basis)	569	–	569	
BR # 53 – Building Capacity to Expand Reach of Virtual Adult Day Services for the Frail Elderly Living at Home 2 permanent staff	202	–	202	
BR # 55 – Enabling Care Through Enhanced Information Technology Support for Seniors Services 2 permanent staff	207	–	207	
<b>Growth<sup>4</sup></b>				
BR # 51 – Seniors Health and Wellness Village (SHWV) at Peel Manor Pilot for Adult Day Services and respite bed expansion to June 30, 2026, funded from internal reserves	2,624	2,624	–	
<b>Service Level Changes Subtotal</b>	<b>3,938</b>	<b>2,720</b>	<b>1,218</b>	
<b>Total 2025 Budget Change</b>	<b>8,829</b>	<b>6,145</b>	<b>2,684</b>	
<b>2025 Proposed Budget</b>	<b>\$151,802</b>	<b>\$94,988</b>	<b>\$56,814</b>	<b>5.0%</b>

Note: may not add up due to rounding.

## Operating Budget Pressure Notes

### <sup>1</sup>Base Subsidy/Recoveries

- Peel base pressures, including salaries and inflation impact the cost of goods and services are increasing by \$8.38 million, however funding only increased by \$2.31 million (Provincial funding and permitted increase in resident fees), leaving a gap of \$6.07 million. Phase in 50 per cent of the impact of funding shortfall from the Tax Rate Stabilization Reserve, to smooth in the tax impact of the funding shortfall and provide time for advocacy to the province.

### <sup>2</sup>Base Budget – Other Pressures

- The reversals represent temporary resources or initiatives that were added to the 2024 Budget which are not carried forward or updated for 2025.

### <sup>3</sup>Service Level Demand

- **Budget Request # 46.** Currently there is no dedicated position to provide support post-implementation with Electronic Medical Records for the Health Services department, which poses sustainability concerns. The requested one long term contract is needed as a liaison

and knowledge broker and efficiency measure to ensure integrated access to health data for staff and service delivery for clients across Health Services.

- **Budget Request # 49.** Cultivating a resilient, empowered, and thriving workforce across Seniors Services two permanent staff (previously on temporary basis). Staff are needed to lead the development and delivery of action plans aligned to the strategic goals of the divisions for a sustainable approach to employee psychological health, well-being, and culture.
- **Budget Request # 52.** Stabilizing Operations in Long Term Care six permanent staff (previously on temporary basis). Five coordinators will reduce the administrative burden on homes and the Program Director will provide operational leadership to four divisional teams supporting legislative compliance, operations and Peel Manor transition.
- **Budget Request # 53.** Building Capacity to Expand Reach of Virtual Adult Day Services for the Frail Elderly Living at Home – 2 permanent staff. Presently, the staff providing Virtual adult day programs are at capacity, and additional resources are needed to provide services to additional at-risk clients in the community. These resources will also support onboarding of new clients, advertising of the program, care planning, and program development.
- **Budget Request # 55.** Enabling Care Through Enhanced Information Technology Support for Seniors Services – 2 permanent staff. These resources are for the state-of-the-art Seniors Health and Wellness Village to support resident, client, staff, and visitor safety and well-being by ensuring smooth operations of over 50 diverse technology systems and the broader Seniors Services IT systems.

<sup>4</sup>Growth

- **Budget Request # 51.** Continue operationalizing the Seniors Health and Wellness Village (SHWV) at Peel Manor – Temporary staffing and services to implement the pilot for Adult Day Services and respite bed expansion starting September 1, 2024, to June 30, 2026 covering year 2025, funded from internal reserves. The goal is to provide timely access to health and social services to promote aging-at-home and prioritize the mental health and well-being of seniors and their caregivers. Expanding these services will help respond to the growing pressures on Peel's health system.

## Staffing Resources

Table 2 provides a summary of the staffing resources by Sub-Service (as identified in the Core Services) for the budget year, forecast years and the prior year. The prior year reflects FTE changes approved by Council during the prior year.

**Table 2. Staffing Resources to Achieve Level of Service**

Sub-Service	2024	2025	2026	2027	2028
Adult Day Services	64.5	66.5	86.5	86.5	86.5
Caregiver Support and Education	2.0	2.0	2.0	2.0	2.0
Respite Care	0.9	0.9	9.3	9.3	9.3
Neurobehavioural Service	1.0	1.0	1.0	1.0	1.0
<b>Seniors Services Development (SSD) Total</b>	<b>68.4</b>	<b>70.4</b>	<b>98.8</b>	<b>98.8</b>	<b>98.8</b>
Resident Care and Services	784.8	794.8	801.5	802.8	804.5
Butterfly Model of Care	77.0	77.0	77.0	77.0	77.0
Specialized Behavioural Support Units	22.0	22.0	22.0	22.0	22.0
Neurobehavioural Nurse Practitioner Program	2.0	2.0	2.0	2.0	2.0
<b>Long Term Care (LTC) Total</b>	<b>885.8</b>	<b>895.8</b>	<b>902.5</b>	<b>903.8</b>	<b>905.5</b>
<b>Seniors Services (SSD + LTC) Total</b>	<b>954.2</b>	<b>966.2</b>	<b>1,001.3</b>	<b>1,002.6</b>	<b>1,004.3</b>

Note:

- Staffing resources are regular positions (Full Time Equivalent, FTE).
- Staff providing caregiver support and education are also supporting Adult Day Services.
- Butterfly Model of Care staffing resources do not include baseline FTEs.



# 2025 Total Expenditures and Funding Source

Figure 1. 2025 Total Expenditures (in \$ millions)

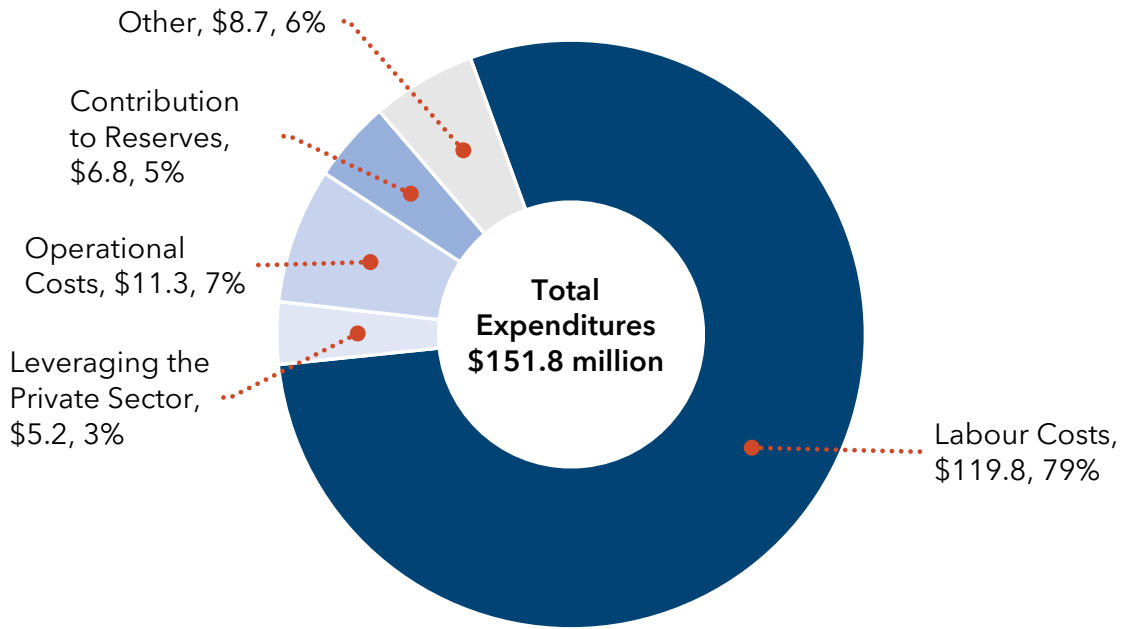
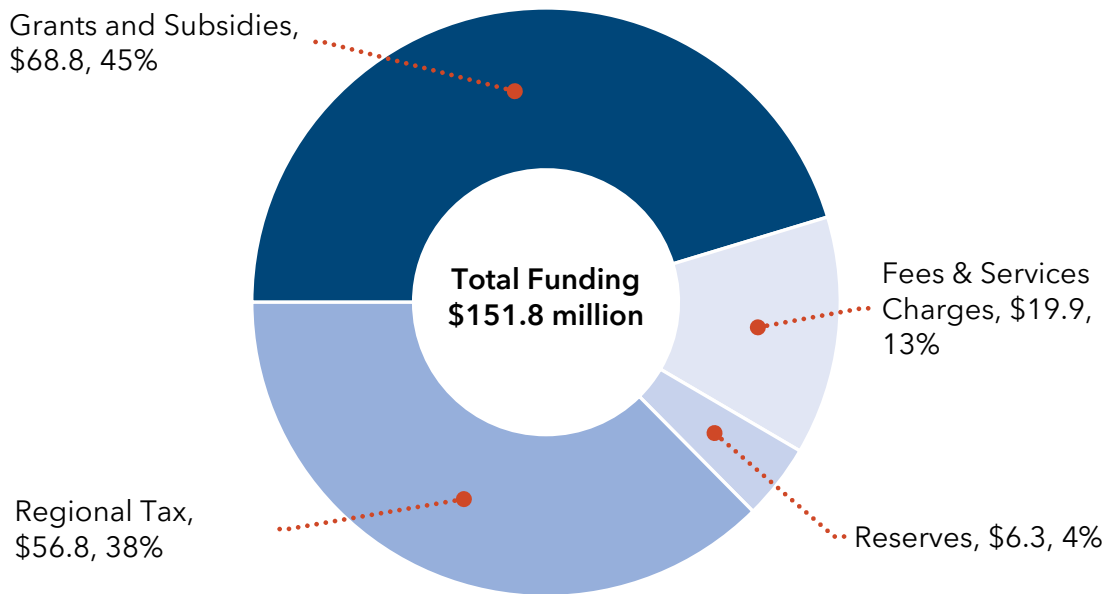


Figure 2. 2025 Total Funding Sources (in \$ millions)



## 2025 Budget Risks

- Continued maturation 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 Adult Day Services. Details are currently unknown.
- System transformation across Community Support Services and Adult Day Services is underway. A hybrid Adult Day Services and Community Services model continue to evolve to provide in-person and virtual services to active and waitlisted clients and caregivers.

## 2026–2028 Operating Forecast

**Table 3. Budget (in \$ thousands)**

	2024	2025	
Total Expenditure	142,973	151,802	6.2%
Total Revenue	(88,843)	(94,988)	6.9%
Net Expenditure	54,130	56,814	5.0%

**Table 4. Forecast (in \$ thousands)**

	2026		2027		2028	
Total Expenditure	160,075	5.4%	164,110	2.5%	168,091	2.4%
Total Revenue	(97,849)	3.0%	(91,638)	(6.3)%	(92,795)	1.3%
Net Expenditure	62,225	9.5%	72,471	16.5%	75,296	3.9%

Note: May not add up due to rounding.

- Forecast years' increases are related to maintaining base services. Forecast includes:
  - The impacts from adding one permanent staff to support research, policy and strategic analysis.
  - 28.4 permanent staff and phase out of reserve draws by moving Adult Day Services and respite expansion pilot to ongoing operations (July 1, 2026).
  - One permanent staffing (2026) and four temporary staffing continuation for stabilizing long term care currently in temporary roles in (2026 and 2027).
- 2026 forecast also includes reserve draw to offset government funding pressures of \$6.0 million to be removed in 2027.

# Proposed Capital Budget

**Capital Budget:** \$16.0 million (**Ten-Year Plan:** \$252.3 million)

## 2025 Capital Budget Overview

Table 5 provides a summary of Seniors Services planned capital project activity for 2025, including funding sources for both new capital project requests in 2025 and projects carried forward to 2025.

**Table 5. Capital Plan by Funding Source (in \$ thousands)**

	Carry-forward from Prior Years (WIP)	2025 Capital Budget	Total Capital in 2025
DC Growth	–	–	–
Externally Funded	–	–	–
Non-DC Internal	31,699	16,018	47,717
<b>Total Expenditures</b>	<b>\$31,699</b>	<b>\$16,018</b>	<b>\$47,717</b>
<b># of Projects</b>	<b>75</b>	<b>11</b>	<b>86</b>

## Existing Capital Projects – \$31.7million

Key Highlights:

- \$8.0 million for completion of Seniors Health and Wellness Village at Peel Manor.
- \$6.2 million for elevator, chiller, cooling and generator projects at Sheridan Villa, Malton Village, Davis Centre, and Tall Pines.
- \$3.5 million for state of good repair of the existing Peel Manor.
- \$3.2 million for exterior work for sealants and caulking walls and concrete repairs at Sheridan Villa, Davis Centre, Tall Pines, and Malton Village.
- \$3.5 million for replace or repair for interior window, floors at Davis Centre, Tall Pines, and Malton Village.

## 2025 Capital Budget – \$ 16.0 million

Key Highlights:

- \$8.3 million for installation and upgrades of cooling system, generator, electrical system at Sheridan Villa.
- \$2.0 million for renovation of tub and shower room and expansion of room at Adult Day Services at Davis Centre, Tall Pines, and Malton Village.

- \$1.8 million for replacing beds, lifts, and general equipment at Sheridan Villa, Davis Centre, Tall Pines, and Malton Village.
- \$1.5 million for replacement of cabinets and case work, floor repairs and general maintenance at Sheridan Villa, Davis Centre, Tall Pines, and Malton Village.
- \$1.4 million for space optimization and separate entrance for Adult Day Services at Davis Centre.
- \$0.5 million for replacing building automation system and security system at Sheridan Villa and Davis Centre.
- \$0.5 million maintenance to address unplanned fluctuations in the state of good repair projects.

See Appendix I for details.

### **2025 Budget Risks**

- Implementation of capital projects may be affected by ongoing heightened inflation and supply chain challenges.

### **Operating Impact of 2025 Capital Budget**

- None.

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# Proposed Capital Plan

**2025–2034 10-Year Capital Plan:** \$ 252.3 million

## By Project Classification

State of Good Repair  
\$112.0 million

DC Funded Growth  
\$17.0 million

Non-DC Funded Growth  
and Other  
\$123.3 million

## Key Highlights

- \$ 112.0 million in projects for state of good repair including:
  - \$41.2 million for air conditioning, heating and cooling projects at Sheridan Villa, Davis Centre, Malton Village, and Tall Pines.
  - \$41.2 million for interior work to replace or repair floor, door, tubs in shower room etc. at Sheridan Villa, Davis Centre, Malton Village, and Tall Pines.
  - \$17.1 million for exterior work to replace or repair roof, windows, doors, paving, and fences at Sheridan Villa, Davis Centre, Malton Village, and Tall Pines.
  - \$5.6 million for building automation system and safety projects at Sheridan Villa, Davis Centre, Malton Village, and Tall Pines.
- \$17.0 million for Development Charge (DC)-funded growth within the placeholder for the development of a new Long Term Care home.
- \$123.3 million in Non-DC funded growth and other projects:
  - \$43.0 million Non-DC funded growth in the placeholder for the development of a new Long Term Care home in 2034.
  - \$80.3 million for other projects including:
    - \$60.4 million for projects for Low Carbon emissions, such as \$5.9 million for Solar Photovoltaic System at Tall Pines and Malton Village, \$6 million air conditioning project at Malton Village, and \$5.6 million terminal equipment upgrade at Sheridan Villa.
    - \$8.9 million for replacement of beds, lifts, furnishings, appliances and general equipment at Sheridan Villa, Davis Centre, Tall Pines, and Malton Village.
    - \$6.0 million for other small projects and investigation, study, and report projects.
    - \$5.0 million as contingency to address unplanned projects.

See Appendix II for details.

# 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 Table 6.

**Table 6. Budget Request Listing**

Proposed Initiative	Division	Budget Req #	FTEs Req	Contract FTE Req	Net Operating Impact \$	Capital \$
Resource to Support Sustainability of Health Service's Electronic Medical System	Health Strategy, Planning and Partnerships	46	—	1.00	—	—
Cultivating a resilient, empowered, and thriving workforce across Seniors Services	Long Term Care	49	2.00	—	240,474	—
Operationalizing the Seniors Health and Wellness Village at Peel Manor	Seniors Services Development	51	—	28.40	—	—
Stabilizing Operations in Long Term Care	Long Term Care	52	6.00	—	569,394	—
Building Capacity to Expand Reach of Virtual Adult Day Services for the Frail Elderly Living at Home	Seniors Services Development	53	2.00	—	201,973	—
Enabling Care Through Enhanced Information Technology Support for Seniors Services	Seniors Services Development	55	2.00	—	206,762	—
Optimizing the Davis Centre Adult Day Services space by adapting the existing layout	Seniors Services Development	57	—	—	—	1,400,000
<b>Total</b>			<b>12.0</b>	<b>29.4</b>	<b>\$1,218,603</b>	<b>\$1,400,000</b>

# Budget Request #: 46

Proposed Initiative	Department	Division	Service Area
Resource to Support Sustainability of Health Service's Electronic Medical System	Health Services	Health Strategy, Planning and Partnerships	Seniors Services

## Description of Budget Request

The Electronic Medical Records (EMR) system is being implemented across Health Services to improve efficiency in the capture and management of client and service delivery. For 2025, starting April 1, 2025, one long term contract full-time Specialist is needed to support the seamless transition of all programs to the EMR system and support the ongoing operational and strategic needs of 350 end users. Without these supports, the EMR system is at risk of long-term sustainability.

## Required Annual Operating Investment

Impacts	2025	2026	2027	2028
Gross Expenditures	96,667	29,811	–	–
Less: Internal and Capital Recovery	–	–	–	–
<b>Total Expense</b>	<b>96,667</b>	<b>29,811</b>	<b>–</b>	<b>–</b>
Rate Stabilization Reserve	96,667	29,811	–	–
External Funding	–	–	–	–
Other Revenue	–	–	–	–
<b>Total Revenue</b>	<b>96,667</b>	<b>29,811</b>	<b>–</b>	<b>–</b>
Net Impact – Tax	–	–	–	–
Net Impact – Utility Rate	–	–	–	–
<b>FTEs</b>	<b>–</b>	<b>–</b>	<b>–</b>	<b>–</b>

## Required Capital Investment

	2025
<b>Total Expenditures</b>	<b>–</b>
Capital Reserve	–
Development Charges	–
External Funding	–
Debt	–
<b>Total Funding</b>	<b>–</b>

## Why Staff Recommend this Initiative

Currently, 18,000 client records are in EMR system with 126 users. Once the remaining programs implement the system, the number of records and users will increase substantially. Currently there is no dedicated position to provide support post-implementation with EMR, which poses sustainability concerns. Requested contract would be a liaison and knowledge broker to ensure integrated access to health data for staff and service delivery for clients.

## Details of Service Change

The EMR system is expected to improve efficiency in the capture and management of client and service delivery while ensuring that legislative requirements for access, security and privacy are met. The system will significantly reduce manual processes. The resource will increase Health Services' capacity to ensure sustainability of the EMR system, integration of the health system and support the operational needs of program areas and clients. This resource will be the primary contact to provide operational support for the EMR system among all programs when they experience any issues beyond their scope and expertise. This position will maintain and manage data quality, control access of users to maintain security and privacy of client medical records as per the *Personal Health Information Protection Act* regulations, identify process improvements, support records management, communicate system updates to users and maintain training resources in the knowledge base. Further the role will support strategic and collaborative health system projects to advance integrated care models and improvement initiatives that leverage technology.

## Service Impact

The resource will help ensure long-term sustainability of the EMR system across Health Services for various programs in Public Health, Seniors Services and Paramedic Services and this position will be cost shared. Leveraging EMR is anticipated to improve efficiency and provide added functions such as: eliminating duplicate charts across health clinics; facilitating client self-scheduling and appointment alerts; providing point-of-sale and inventory management; support billing; and providing detailed reporting and analytics. The EMR system will also help to increase Health Services' capacity for data collection, analysis and reporting to enhance communications, support program planning and facilitate performance management and program evaluations for improvement. Integrating the EMR system with other healthcare solutions allows services to optimize workflows and save time on administration. In addition, strategic improvement opportunities can be enabled through EMR interoperability to support integrated care models that require working with health system partners and stakeholders (e.g. Ontario Health and Ontario Health Teams) that will ultimately improve quality of care, client/resident satisfaction, as well as reduced operational costs.



# Budget Request #: 49

Proposed Initiative	Department	Division	Service Area
Cultivating a resilient, empowered, and thriving workforce across Seniors Services	Health Services	Long Term Care	Seniors Services

## Description of Budget Request

With over 1,400 staff in Long Term Care (LTC) and Seniors Services Development (SSD) divisions providing complex care and 24/7 services to some of Peel's most vulnerable residents, promoting and protecting employee well-being is essential in maintaining a healthy and thriving workforce. Permanent staff are needed to lead the development and delivery of action plans aligned to the strategic goals of the divisions for a sustainable approach to employee psychological health, well-being, and culture.

## Required Annual Operating Investment

Impacts	2025	2026	2027	2028
Gross Expenditures	240,474	80,158	–	–
Less: Internal and Capital Recovery	–	–	–	–
<b>Total Expense</b>	<b>240,474</b>	<b>80,158</b>	–	–
Rate Stabilization Reserve	–	–	–	–
External Funding	–	–	–	–
Other Revenue	–	–	–	–
<b>Total Revenue</b>	–	–	–	–
Net Impact – Tax	240,474	80,158	–	–
Net Impact – Utility Rate	–	–	–	–
<b>FTEs</b>	<b>2.0</b>	–	–	–

## Required Capital Investment

	2025
<b>Total Expenditures</b>	–
Capital Reserve	–
Development Charges	–
External Funding	–
Debt	–
<b>Total Funding</b>	–

## Why Staff Recommend this Initiative

Complex care demands, compassion fatigue, and ongoing staffing crises continue to place immense pressures on all staff in Seniors Services, which has contributed to a fatigued and traumatized workforce, with low staff survey scores for workload management and appreciation. Permanent resources are needed to provide a consistent, evidence-informed, and sustainable approach to promote employee well-being and workplace culture.

## Details of Service Change

Psychological Health and Safety is a corporate priority and our centres have not had sufficient resources or capacity to invest in this vital work. In 2022, two contract resources were hired to implement the National Standard for Workplace Psychological Health and Safety with training funded by a federal grant. Action plans are currently being implemented, including targeted and tailored mental well-being training/tools, and onsite centre-specific support. Recent staff survey scores in areas of balance and workload are 15 per cent lower than the rest of the Region, and 12 per cent lower for questions about having a safe and inclusive workplace and supportive leader. Leadership capacity building is a focus as leaders have the most impact on employee well-being and need to be champions across the centres. Alignment of the work will include the principles of the emotion-based and person-centred care used in the centres and to departmental and divisional strategic plans.

## Service Impact

The impact of this culture and employee well-being work is already visible in the centres since the two contract resources were hired as a pilot, with positive feedback from staff and leaders. However, sick time and leaves are still higher than pre-pandemic levels at 11.5 per cent (from 7.6 per cent) and are contributing to overtime costs. Performance measures and metrics will ensure accountability for staff and leaders and demonstrate the impact of targeted and tailored initiatives and on-site supports. Long-term culture and well-being outcomes will include more visible and confident mental health champions; more engaged and inclusive leaders; and more staff feeling psychologically safe and appreciated by their people leader. These dedicated and knowledgeable resources will strengthen, enhance, and increase uptake of current HR resources and will foster staff engagement, reduce staff absences and overtime costs. Maintaining a more resilient and empowered staff will ultimately result in better service delivery for our vulnerable residents and clients.

# Budget Request #: 51

Proposed Initiative	Department	Division	Service Area
Operationalizing the Seniors Health and Wellness Village at Peel Manor	Health Services	Seniors Services Development	Seniors Services

## Description of Budget Request

In support of the Seniors Health and Wellness Village (SHWV) opening, Council approved a 1-year pilot for expanded Adult Day Services (ADS), including an overnight Respite Care Centre, and Integrated Care Centre (#2021-397). Due to project delays, the pilot is expected to commence in September 2024 until Sept 30, 2025, and a 9-month extension of pilot funding is needed until June 30, 2026, to evaluate the program and better understand the impact on the client needs and health system pressures.

## Required Annual Operating Investment

Impacts	2025	2026	2027	2028
Gross Expenditures	2,623,823	2,711,143	1,400,759	–
Less: Internal and Capital Recovery	–	–	–	–
<b>Total Expense</b>	<b>2,623,823</b>	<b>2,711,143</b>	<b>1,400,759</b>	<b>–</b>
Rate Stabilization Reserve	2,623,823	1,355,571	–	–
External Funding	–	–	–	–
Other Revenue	–	–	–	–
<b>Total Revenue</b>	<b>2,623,823</b>	<b>1,355,571</b>	<b>-</b>	<b>–</b>
Net Impact – Tax	–	1,355,571	1,400,759	–
Net Impact – Utility Rate	–	–	–	–
<b>FTEs</b>	<b>–</b>	<b>–</b>	<b>–</b>	<b>–</b>

## Required Capital Investment

	2025
<b>Total Expenditures</b>	<b>–</b>
Capital Reserve	–
Development Charges	–
External Funding	–
Debt	–
<b>Total Funding</b>	<b>–</b>

## Why Staff Recommend this Initiative

The growing size and complexity of the aging population requires a shift in health spending from acute care. Services offered through this pilot will focus on upstream and wrap-around care interventions that will allow seniors and their caregivers manage their health at home. The one-year integrated care pilot was approved in 2021 and again in 2024 due to project delays. A nine-month extension will provide greater evidence to support the case for future permanent resources for the 2026 budget.

## Details of Service Change

Peel has invested in building the SHWV at Peel Manor to support the local needs of frail seniors. This Council-endorsed, state-of-the-art LTC centre and integrated care centre was built in response to data on Peel's population. The clinical care and services offered will support the health and social needs of seniors living in the community with cognitive impairment and their caregivers. The initiatives and services include: i) ADS program expansion to help reduce current waitlists, ii) an eight-bed overnight respite care centre with integrated ADS daytime programming, and iii) an integrated care clinic offering seniors-focused primary care and specialized neurobehavioural and gerontological oversight to address client and caregiver needs in one place.

The goal is to provide timely access to health and social services to promote aging-at-home and prioritize the mental health and well-being of seniors and their caregivers. Expanding these services will help respond to the growing pressures on Peel's health system. The pilot outcome will inform the 2026 budget request for permanent resources to support the community's need.

## Service Impact

As the demand for health and social services continues to grow, expanded ADS capacity will enable more seniors living in the community to benefit from the services. In addition to the increased demand for services, clients are presenting with more complex medical care needs (76 per cent) and cognitive impairment (72 per cent), both requiring specialized care which that will be provided onsite at the SHWV at Peel Manor through a wide range of service and a comprehensive approach to support seniors and their caregivers in receiving and navigating services, as well as and support aging in place. The SHWV at Peel Manor is an opportunity to scale and spread a sustainable model that addresses critical health system gaps and meet demands of a rapidly aging population. The more seniors supported in community means more acute care resources are available for those that truly need them. Advocacy efforts remain a priority to secure sustainable funding for the wrap-around services beyond the pilot period at the SHWV at Peel Manor. Efforts to respond to short-term and pilot funding opportunities also continue.

# Budget Request #: 52

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

## Description of Budget Request

Increased accountability and enforcement measures for non-compliance under governing legislation adds additional pressures on Administrators and Director. In 2023, five contract resources were piloted to support with reducing the day-to-day burden to allow leadership to focus on maintaining the safety and well-being of residents; as well as the Program Director to support LTC legislative, strategic priorities, and operationalizing the new Peel Manor. The request is to make these six positions permanent.

## Required Annual Operating Investment

Impacts	2025	2026	2027	2028
Gross Expenditures	569,394	189,798	–	–
Less: Internal and Capital Recovery	–	–	–	–
<b>Total Expense</b>	<b>569,394</b>	<b>189,798</b>	<b>–</b>	<b>–</b>
Rate Stabilization Reserve	–	–	–	–
External Funding	–	–	–	–
Other Revenue	–	–	–	–
<b>Total Revenue</b>	<b>–</b>	<b>–</b>	<b>–</b>	<b>–</b>
Net Impact – Tax	569,394	189,798	–	–
Net Impact – Utility Rate	–	–	–	–
<b>FTEs</b>	<b>6.0</b>	<b>–</b>	<b>–</b>	<b>–</b>

## Required Capital Investment

	2025
<b>Total Expenditures</b>	<b>–</b>
Capital Reserve	–
Development Charges	–
External Funding	–
Debt	–
<b>Total Funding</b>	<b>–</b>

## Why Staff Recommend this Initiative

The Act requires significant administrative supports to meet requirements and maintain a safe environment for residents. LTC Coordinators reduce the administrative burden and the Program Director provides leadership to four divisional teams supporting legislative compliance, operations and Peel Manor transition. Given the high-risk environment and successful pilot of these roles, it is critical to maintain these knowledgeable staff.

## Details of Service Change

Combined pressures from the pandemic and new legislation place additional burden on Administrators. The Business Coordinators provide day-to-day support to allow Administrators to focus on high-level strategic priorities. Based on the 2023/24 pilot, there was an approximately 56 per cent reduction in administrative tasks for Administrators related to tracking critical incidents and complaints, resolving home inquiries, and coordinating ministry data and information requests. This has allowed Administrators to shift focus to ensure all requirements are met and invest in leadership responsibilities to drive strategic priorities, support staff, engage with residents and families, and create a culture of well-being, innovation and quality.

The new legislation and enforcement measures include administrative monetary penalties for non-compliance, increasing accountability on senior leadership to manage operations. As well, the scope and size of four centralized teams supporting the centres in education, scheduling and payroll, and general operations support has grown to mitigate risks. The Program Director provides leadership, oversight, and direction on divisional initiatives to these teams, as well as leadership of operationalization plans for the Specialized Behavioral Support Unit and the new Peel Manor.

## Service Impact

The Business Coordinators serve to reduce day-to-day functions and burden from LTC home Administrators to focus their expertise on more pressing areas. This includes providing administrative supports for 14 required care/ services program committees and 28 mandatory annual program evaluations for services in each home. The impact from the pilot and evaluation resulted in more time for LTC Administrators and centre leadership to oversee critical operations tied to safety and quality of care, ensure management of competing operational demands, and increased focus to strategic priorities.

The Program Director ensures processes are developed to transfer residents and support the transition for staff to the new Peel Manor. The role provides leadership and critical oversight to the centralized teams by advising on the implementation and execution of projects with strategic or operational importance for LTC, allowing the Director to focus on divisional and departmental strategic priorities, modernization, and system partnerships.

## Budget Request #: 53

Proposed Initiative	Department	Division	Service Area
Building Capacity to Expand Reach of Virtual Adult Day Services for the Frail Elderly Living at Home	Health Services	Seniors Services Development	Seniors Services

### Description of Budget Request

Virtual Adult Day Services (ADS) was developed for registered and waitlisted clients due to in-person program closures during COVID. Virtual programming has extended reach to seniors in the community and demand continues to grow with direct referral pathways from Community Paramedicine and Ontario Health atHome. Benefits of this program include improved mental, physical, and social well-being of clients. Ontario Health has not provided funding for virtual ADS programs.

### Required Annual Operating Investment

Impacts	2025	2026	2027	2028
Gross Expenditures	201,973	52,817	–	–
Less: Internal and Capital Recovery	–	–	–	–
<b>Total Expense</b>	<b>201,973</b>	<b>52,817</b>	<b>–</b>	<b>–</b>
Rate Stabilization Reserve	–	–	–	–
External Funding	–	–	–	–
Other Revenue	–	–	–	–
<b>Total Revenue</b>	<b>–</b>	<b>–</b>	<b>–</b>	<b>–</b>
Net Impact – Tax	201,973	52,817	–	–
Net Impact – Utility Rate	–	–	–	–
<b>FTEs</b>	<b>2.0</b>	<b>–</b>	<b>–</b>	<b>–</b>

### Required Capital Investment

	2025
<b>Total Expenditures</b>	<b>–</b>
Capital Reserve	–
Development Charges	–
External Funding	–
Debt	–
<b>Total Funding</b>	<b>–</b>

## Why Staff Recommend this Initiative

The loneliness epidemic among seniors is rapidly spreading across Canada and virtual ADS programs are evidence based and have proven to meet the social, intellectual, emotional, physical needs, and decrease loneliness of the participants. In the 2023 experience survey, clients reported improved well-being after participation (94 per cent) and that the programs contribute to their ability to live at home (93 per cent). Additional resources are needed to keep up with the growing demand.

## Details of Service Change

In 2023, three ADS Assistants were hired to sustain the virtual ADS program post pandemic. They currently provide approximately 40 programs per week (including group and 1:1) and two additional staff resources are being requested to continue to expand services. In 2023, a direct referral pathway was developed for our virtual ADS services through Ontario Health atHome, which means that clients no longer need to be affiliated with our in-person programs to access virtual ADS. In 2024, a bidirectional referral pathway was developed between virtual ADS and Community Paramedics to reach additional at-risk seniors in the community. Presently, the staff providing virtual ADS programs are at capacity, and additional resources are needed to provide services to additional at-risk clients in the community. The additional resources being requested will allow for an increase in program delivery by approximately 25 per cent. In addition to offering services, these resources will also support onboarding of new clients, advertising of the program, care planning, and program development. They will also play an important role in relationship building with other agencies and partners that may make referrals into virtual ADS.

## Service Impact

Virtual recreation programs have already proven to be successful based on data from our annual Client and Caregiver experience surveys (since 2021), as well as anecdotal data collection of brain stimulation, socialization, and mood pre- and post-program participation. Significant grant funds have already been spent to secure a robust technology lending program that reduces barriers to participation for clients in the community who do not have access to an electronic device. Over the last several years, the ADS waitlist continues to grow as seniors increase in age and frailty. Some clients are waiting more than a year for an in-person space in ADS after being waitlisted, and without virtual programs there are limited supports available to these clients. This form of service delivery has proven to be vital to clients and their caregivers in the community.



## Budget Request #: 55

Proposed Initiative	Department	Division	Service Area
Enabling Care Through Enhanced Information Technology Support for Seniors Services	Health Services	Seniors Services Development	Seniors Services

### Description of Budget Request

Dedicated Information Technology (IT) operational resources are required to support Seniors Services centres and programs with an immediate focus on the Seniors Health and Wellness Village (SHWV) at Peel Manor. These resources will support resident, client, staff, and visitor safety and well-being by helping to ensure smooth operations of Seniors Services IT systems. The resources will also support the implementation of the Health Services departmental technology plan within Seniors Services.

### Required Annual Operating Investment

Impacts	2025	2026	2027	2028
Gross Expenditures	206,762	64,166	–	–
Less: Internal and Capital Recovery	–	–	–	–
<b>Total Expense</b>	<b>206,762</b>	<b>64,166</b>	<b>–</b>	<b>–</b>
Rate Stabilization Reserve	–	–	–	–
External Funding	–	–	–	–
Other Revenue	–	–	–	–
<b>Total Revenue</b>	<b>–</b>	<b>–</b>	<b>–</b>	<b>–</b>
Net Impact – Tax	206,762	64,166	–	–
Net Impact – Utility Rate	–	–	–	–
<b>FTEs</b>	<b>2.0</b>	<b>–</b>	<b>–</b>	<b>–</b>

### Required Capital Investment

	2025
<b>Total Expenditures</b>	<b>–</b>
Capital Reserve	–
Development Charges	–
External Funding	–
Debt	–
<b>Total Funding</b>	<b>–</b>

## Why Staff Recommend this Initiative

The SHWV at Peel Manor is opening in the Fall of 2024. The site is technologically advanced with over 50 different and diverse technology systems. Dedicated IT operational staffing resources are required to maintain smooth operations of the SHWV's IT systems, thereby helping to ensure the safety and well-being of seniors that live in and visit the SHWV at Peel Manor.

## Details of Service Change

Currently, Seniors Services, which includes both the LTC and SSD divisions, does not have any resources from the corporate IT area dedicated to providing onsite support at its centres. Onsite IT support is typically managed by onsite Seniors Services operational staff whose roles primarily involve delivering care to vulnerable seniors. Time spent trying to sort out IT issues takes away from supporting resident/clients. IT issues that cannot be resolved by the onsite Seniors Services operational staff are usually escalated to staff within centralized divisional teams or to staff within the corporate IT areas.

Over time, the number and complexity of technology systems enabling Seniors Services programs and centres has increased dramatically. The most prominent example of this is the new SHWV at Peel Manor, which is a technologically sophisticated building that includes over 50 IT systems. Smoothly running IT systems are required to ensure the safety and well-being of those who live, work, and visit the SHWV at Peel Manor. In light of the highly technological nature of the new building, an updated approach to IT support is required.

This change will introduce two new onsite IT support-focused resources. Over time, as the IT support requirements at the SHWV at Peel Manor stabilize and reduce in intensity, the focus of these resources will expand to include other Seniors Services programs and centres.

## Service Impact

The outcome of providing enhanced IT operational support to the SHWV at Peel Manor, and other Seniors Services centres and programs, will be accomplished through recruiting two IT resources. The IT resources will receive a rigorous onboarding to ensure that they a) have a thorough understanding of the SHWV at Peel Manor's (and the broader Seniors Services) technology architecture and strategy; b) understand the technology plans of the Health Services department and; c) develop a genuine sense of common purpose with Seniors Services staff in relation to supporting the needs and best interests of the residents, clients, caregivers and others served by Seniors Services.

# Budget Request #: 57

Proposed Initiative	Department	Division	Service Area
Optimizing the Davis Centre Adult Day Services space by adapting the existing layout	Health Services	Seniors Services Development	Seniors Services

## Description of Budget Request

An expansion at the Davis Centre Adult Day Services (ADS) is needed to meet Ministry of Long-Term Care Design Standards. The expansion will ensure resident space is not compromised while addressing the ongoing space issues at the centre including insufficient staff workstations, meeting/training/break rooms, and storage space. It will also allow for a proper entrance/exit for ADS client/caregivers decreasing the risks of exposure to inclement weather.

## Required Annual Operating Investment

Impacts	2025	2026	2027	2028
Gross Expenditures	–	–	–	–
Less: Internal and Capital Recovery	–	–	–	–
<b>Total Expense</b>	<b>–</b>	<b>–</b>	<b>–</b>	<b>–</b>
Rate Stabilization Reserve	–	–	–	–
External Funding	–	–	–	–
Other Revenue	–	–	–	–
<b>Total Revenue</b>	<b>–</b>	<b>–</b>	<b>–</b>	<b>–</b>
Net Impact – Tax	–	–	–	–
Net Impact – Utility Rate	–	–	–	–
<b>FTEs</b>	<b>–</b>	<b>–</b>	<b>–</b>	<b>–</b>

## Required Capital Investment

	2025
<b>Total Expenditures</b>	<b>1,400,000</b>
Capital Reserve	1,400,000
Development Charges	–
External Funding	–
Debt	–
<b>Total Funding</b>	<b>1,400,000</b>

## Why Staff Recommend this Initiative

The ADS program at the Davis Centre requires physical changes to the current layout to meet design standards and program needs. The renovation will allow for a dedicated entrance for ADS clients, which will enhance infection prevention measures and provide needed workspace for LTC and ADS staff. The optimized space will also enhance the client and resident experience, allowing for greater variety of activities and programs.

## Details of Service Change

The scope of work for this new space includes the removal of existing concrete sidewalk and pavers at the addition, partial demolition of existing low canopies at new vestibule, removal of soffit and relocation of conduit at high canopy, removal of existing windows at the existing activity room (Albion Room) and cut sill to floor, removal and modification of existing baseboard heaters at removed windows, removal and relocation of exterior push buttons and keypads, new concrete at footings and foundations, construction of new insulated exterior wall assembly, installation of new windows and doors, new concrete slab, floor/base and walk-off mat, installation of new ceiling and lighting, addition of force flow heater at the vestibule and ductless split system at the Solarium, extension of sprinklers to the Solarium and vestibule, new concrete sidewalk to vestibule door location, adjustment of courtyard pavers to ensure proper flow to existing drain or relocation of existing drain, new provisions for the new door operator complete with push button, security keypads and electrical, strike for the new vestibule, new power provisions for the new HVAC equipment, and new power circuits from existing electrical panels to feed new electrical devices/equipment to suit.

## Service Impact

The renovation of the existing area will eliminate the need for ADS clients to use two different programs areas throughout the day, which will improve their experience. These improvements are in alignment with the quintuple aim framework used across Health Services that strives to advance the health system by improving the client and caregiver experience.

These changes will bring the space into compliance with the Ministry of Long-Term Care Design Standards for which non-compliance could result in monetary penalties.

Over the past few years there has been an increase in staff working out of the centres. Many of these positions are mandated under the *Fixing Long-Term Care Act*. As a result of the current space available, there are very few workstations and many staff are working in impractical places that do not provide enough privacy for confidential conversations with residents, clients, and staff. This renovation will accommodate increased staff space needs without removing space from residents and clients.

# Appendix I

**Table 7. 2025 Financing Sources and Funding Status (in \$ thousands)**

Project	Name	Description	Total Expense	Development Charges	Reserve Funds	External Funding	Debt Funding
255402	David Centre Optimizing Space Project	Optimizing the Davis Centre Adult Day Services space by adapting the existing layout	1,400	–	1,400	–	–
255404	Sheridan Villa 2025 Capital Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	8,473	–	8,473	–	–
255405	Davis Centre 2025 Capital Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	1,410	–	1,410	–	–
255406	Tall Pines 2025 Capital Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	1,145	–	1,145	–	–
255407	Malton Village 2025 Capital Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	1,387	–	1,387	–	–
255408	Divisional 2025 Allowance	To budget for unplanned fluctuations experienced in budgeted state if good repair projects in LTC homes	500	–	500	–	–
255409	Divisional 2025 Projects	LTC Division to address state of good repair or improvements required for building infrastructure or equipment to support direct care for five homes	685	–	685	–	–
255414	Sheridan Villa 2025 Facility Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	295	–	295	–	–

Project	Name	Description	Total Expense	Development Charges	Reserve Funds	External Funding	Debt Funding
255415	Davis Centre 2025 Facility Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	135	–	135	–	–
255416	Tall Pines 2025 Facility Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	470	–	470	–	–
255417	Malton Village 2025 Facility Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	118	–	118	–	–
<b>Seniors Services Total</b>			<b>\$16,018</b>	<b>–</b>	<b>\$16,018</b>	<b>–</b>	<b>–</b>

# Appendix II

**Table 8. 2025 10–Year Combined Capital Program (in \$ thousands)**

Project	Name	Description	2025	2026	2027	2028	2029	Yrs 6-10	Gross
255402	Davis Centre Optimizing Space Project	Optimizing the Davis Centre Adult Day Services space by adapting the existing layout	1,400	–	–	–	–	–	1,400
255404	Sheridan Villa 2025 Capital Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	8,473	7,237	10,226	4,417	2,993	27,016	60,362
255405	Davis Centre 2025 Capital Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	1,410	1,247	2,385	6,663	399	5,984	18,088
255406	Tall Pines 2025 Capital Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	1,145	2,024	3,725	4,519	2,298	31,218	44,929
255407	Malton Village 2025 Capital Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	1,387	5,497	25,620	3,227	2,356	18,419	56,506
255408	Divisional 2025 Allowance	To budget for unplanned fluctuations experienced in budgeted state of good repair projects in Long Term Care homes	500	500	500	500	500	2,500	5,000

Project	Name	Description	2025	2026	2027	2028	2029	Yrs 6-10	Gross
255409	Divisional 2025 Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	685	–	–	–	–	–	685
255414	Sheridan Villa 2025 Facility Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	295	395	185	19	–	67	961
255415	Davis Centre 2025 Facility Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	135	42	227	–	21	–	425
255416	Tall Pines 2025 Facility Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	470	96	264	36	1,093	1,524	3,483
255417	Malton Village 2025 Facility Projects	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	118	–	–	34	107	233	492
345402	Building for Development of New Long Term Care Services	To address needs of growing frail senior population that the new long term care services may need to be developed	–	–	–	–	–	60,000	60,000
<b>Seniors Services Total</b>			<b>\$16,018</b>	<b>\$17,038</b>	<b>\$43,132</b>	<b>\$19,415</b>	<b>\$9,767</b>	<b>\$146,961</b>	<b>\$252,331</b>