# **Seniors Services**

2023–2026 Business Plan and 2023 Budget



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## **Executive Summary**

Mission: To provide compassionate, loving, and respectful care to seniors and their caregivers in their time of need.

## Services we provide:

- Seniors Services Development (SSD) provides adult day services, social work supports, caregiver support and education, overnight respite care, and neurobehavioural supports to enable clients to age in place.
- Long Term Care (LTC) homes provide resident care and services for those no longer able to live at home. Residents are provided with an emotion-based model of care, access to a specialized behavioural support unit, and a neurobehavioural nurse practitioner program to meet their individual care needs.

With continued focus on innovative and person-centred care delivery as well as employee wellbeing and workplace culture, Seniors Services is committed to providing high quality care to clients, residents, caregivers, and families in the Region.

## Interesting facts about this service:

- 20,439 in-person and virtual visits were provided by Region of Peel's Adult Day Services (ADS) programs between July 2021 and June 2022
- 88% of clients reported that ADS contributed to their ability to live at home, according to data gathered in 2021
- The Region of Peel was the first organization in Ontario to implement the emotion-based Butterfly model of care
- 92% of residents were satisfied with the overall quality of care received at Region of Peel's LTC homes, according to data gathered in 2021

# **Highlights of the Business Plan** include:

- Responding to increasing demands to support clients/residents with complex care needs through innovative service delivery models and expansion of programs and services
- Ensuring compliance to new legislative requirements
- Investing in emotion-based and person-centred care
- Leveraging multi-faceted solutions to increase capacity (e.g., resources, technology, and infrastructure)
- Supporting workforce enablement (e.g., empowering employees to do their jobs well; supporting employee psychological health and wellbeing)

Net Investment (\$000s)	2023	2024	2025	2026
Operating	46,965	46,614	47,998	50,096
Capital	10,016	6,811	4,989	5,595
Full Time Equivalents	879.1	918.5	918.5	918.5

## **Core Services**

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

#### **Vision**

To support seniors in Peel through the continuum of care where clients living in the community receive services and supports that allow them to age in place in their homes longer, and residents who live in our Long Term Care homes receive care and supports to enhance their quality of life.

#### **Mission**

To provide compassionate, loving, and respectful care to seniors and their caregivers in their time of need.

## **Goals of Service**

- 1. **Deliver integrated care:** We work together to deliver the best care possible.
- 2. **Deliver person-centred care:** We provide care that meets every persons' unique needs.
- 3. **Cultivate an engaged workplace culture**: Like family, we support each other to succeed.
- 4. **Foster workforce enablement:** We have the right supports that empower us to do our jobs well.

# **Seniors Services** Seniors Services Development Adult Day Services Social Work Supports Caregiver Support and Education Respite Care Neurobehavioural Service Long Term Care Resident Care and Services **Butterfly Model of Care** Specialized Behavioural Support Unit Neurobehavioural Nurse Practitioner Program

**Service Delivery Model** 

## **Service Levels and Trends**

### **Service Levels**

Seniors Services consists of services related to Seniors Services
Development (SSD) and Long Term Care (LTC). SSD and LTC support
those 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 SSD.

The Region of Peel's Adult Day Services (ADS) program provides care and engagement for individuals living in the community. It is a service provided during the days, evenings and weekends for people who are socially isolated or need assistance with day-to-day activities. This includes clients who are frail, have cognitive impairment, physical disabilities, chronic illness, or other conditions that require support. In 2021, ADS served 315 clients across its five locations, both virtually and in-person.

**Adult Day Services, In-Person:** In-person services are currently operating at a reduced capacity due to restrictions and protocols in place to reduce the risk of COVID-19 transmission. Between July 2021 and June 2022, ADS provided 7,142 in-person program visits.

**Adult Day Services, Virtual:** In response to the COVID-19 pandemic, virtual ADS services were introduced to both registered and waitlisted clients. Programs are provided in group settings and individually. ADS provided 13,297 virtual visits between July 2021 and June 2022.

**Social Work Supports:** Social Work counselling and support are available to both clients and caregivers. Social Workers complete an average of 220 interactions per month. These can include clinical and supportive counselling, system navigation, and education.

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

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

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

The following highlights the levels of services provided to residents under LTC.

Resident Care and Services: The Region owns and operates 703 Long Term Care (LTC) beds, across five municipal LTC homes: Peel Manor, Tall Pines, Davis Centre, Malton Village, and Sheridan Villa. Innovative approaches, such as the Butterfly Model of Care, are used to meet the needs of residents focusing on quality and the engagement of every resident in unique and personally meaningful ways.

Each home provides 24-hour care to residents who are unable to live in the community in their own homes and who need assistance to manage their day-to-day activities. In addition to nursing and personal care, other LTC services such as clinical care, recreational, and therapeutic programs are provided. In 2021, the Region's LTC homes provided 24/7 resident care to 795 individuals.

Butterfly Model of Care: The Butterfly Model of Care provides emotion-based, person-centred care to those living with dementia. The model focuses on understanding, acknowledging, and embracing human feelings to improve overall wellbeing. The program creates a home-like environment, works to elicit positive memories, and promotes connection between residents and employees. The Butterfly Model of Care is currently implemented at Malton Village and Sheridan Villa.

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

Neurobehavioural Nurse Practitioner Program: The Region's Neurobehavioural Nurse Practitioner (NBNP) team works in partnership with existing Behavioural Supports Ontario (BSO) Nurses. Together with the NBNP team and the Region's Senior Medical Director provide a specialized team approach to optimally manage behavioural and psychological symptoms of dementia for seniors in up to 23 long term care homes throughout the Home and Community Care Support Services Central West (HCCSS CW) catchment area. Using a person-centred approach, individualized treatment plans are created to support the best possible outcome for the resident. In addition to supporting the 260 residents currently in the program, the NBNP team also provides employee education on dementia care as well as family counselling and support.

### **Trends**

## Supporting Peel's aging population through the continuum of care

Seniors are the fastest growing age group in Peel with one in 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% to 3.8% between 2011 and 2041.

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



Figure 1 Continuum of Care

## **Seniors Services Development**

## **Long Term Care**

In 2021, the following observations were made in Seniors Services Development and Long Term Care:

- 90% of in-person clients in Peel's Adult Day Services program have a cognitive impairment diagnosis (which can include a diagnosis of dementia) and 92% of current in-person clients have complex medical care needs.
- 87% of people living in Peel Long Term Care homes had a cognitive impairment, including dementia

As a result, specialized approaches to care in both community-based care and traditional LTC homes are needed. Seniors Services continues to adopt an emotion-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 wellbeing 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% of individuals receiving home care for a long term period have an unpaid caregiver and more than one in three of these caregivers are distressed.

On average, between January 2022 and July 2022, there were 568 waitlisted clients for the ADS program. This highlights the need for services to support both caregivers and clients.

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

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

- System wide coordination challenges: Lack of coordination between organizations continue to exist when supporting seniors along the continuum of care. According to the Canadian Institute for Health Information, 1 in 9 residents could be supported in the community with appropriate supports (i.e., not requiring long term care). Supporting seniors in the community can delay the need for long term care placement, enable aging in place, and allow better use of finite resources across the system.
- Chronic underfunding: There are ongoing challenges
  related to underfunding for home and community care
  services. Current funding formulas do not accurately account
  or compensate for high-growth and high-demand
  communities, leading to increasing waitlists and unmet
  demand. While the Province has modernized its long term
  care capital funding program, many older buildings (such as
  Peel Manor) have been unable to qualify for provincial
  funding.

- Workforce and attrition pressures: The COVID-19 pandemic has highlighted long-standing issues related to precarious part-time work, and lower wages across the sector, as well as large turnover in the sector related to these issues. Frontline health care workers continue to face challenging work conditions and exposure to COVID-19 that results in high rates of absenteeism and subsequently adds to workload with unplanned hours or longer shifts.
- Gaps in mental health services of seniors and caregivers: Along with dementia care, supports that address the broader mental health needs of seniors remains a gap in available services. The Region of Peel has been calling on the provincial government to address this unmet need. In addition, long term care homes continue to experience COVID-19 outbreaks. As a result, social opportunities and mealtime interactions that can help to support mental wellbeing within the home have been impacted by the need for social distancing.
- Legislative changes: The new Act (Fixing Long-Term Care Act, 2021) and regulations that were recently implemented

- aim to strengthen LTC service delivery with a focus on protecting residents' experience and quality of life. However, the anticipated costs to implement new regulations is expected to be high. LTC sector partners have highlighted that compliance costs are far greater than those presented by the Ministry.
- Increasing demands for LTC beds: The rapid growth of the aging population is outpacing available bed spaces in long term care and is accelerating the demands for services beyond capacity. It is not sustainable nor is it cost-effective to meet the increasing demands through traditional "bricks and mortar" LTC beds.

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 Region of Peel is committed to delivering services economically and efficiently. The Region's performance measures are used to help assess how well we are doing at achieving our goals and where we need to improve operations. The results also inform decision-making and strengthen accountability.

The performance measures utilized in Seniors Services are well-aligned with the "Quadruple Aim" framework adopted by Health Services (as shown in Figure 2). This framework focuses on improving value for money, enhancing client and resident experience, enhancing employee experience, and improving population health outcomes considering health equity.

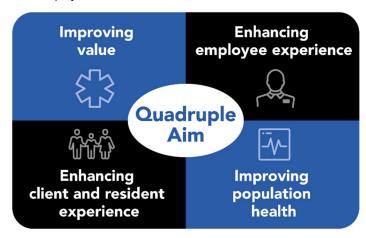


Figure 2 Quadruple Aim

#### **Enhancing client and resident experience**

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

Examples of results from 2021 include:

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

**Resident and Family Satisfaction (LTC)**: 92% of LTC residents were satisfied with the overall quality of care received at the home; 72% of LTC resident families were satisfied with their loved one's quality of life

#### Improving population health

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

**Client Wellbeing (ADS):** For SSD, 94% of ADS clients reported they improved or maintained their wellbeing based on experience survey results from 2021.

For LTC, selected mandatory indicators are compared against provincial benchmarks. In 2020/2021, Canadian Institute for Health Information reported that Region of Peel'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

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

#### **Enhancing employee experience**

Employee wellbeing and a positive workplace culture are central to delivering high-quality care to clients and residents. Over the course of the COVID-19 pandemic, the Region of Peel created Temporary Isolation Housing Program (TIHP) to support employee wellbeing. Those who met eligibility requirements were provided with the option of receiving Regionally funded temporary housing to support safe self isolation. To date, SSD and LTC employees accessed the TIHP on 78 occasions.

Staff shortages, challenging workloads, and cumulative exposure to stressful events during the pandemic has highlighted the importance of enhancing measures to support psychological health and wellbeing of employees. In response, a Health Services Culture and Wellbeing Advisory Group was formed in early 2022. It identified the following immediate priorities: leadership development, raising awareness and engagement with wellbeing initiatives, and promoting diversity, equity and inclusion tools and resources. In addition, selected employees will undergo a provincial training program that aims to support the National Standard of Canada for Psychological Health and Safety in the Workplace. Specific measures to understand the impact of this program will be determined.

#### Improving value

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

**Self-Reported Ability to Live at Home (ADS):** In 2021, 88% of ADS clients surveyed reported that the ADS program contributed to their ability to live at home.

Potentially Avoidable Emergency Department Visits (LTC): For LTC, emergency department (ED) visits are tracked to measure whether ED visits were avoidable if care was obtained elsewhere. Based on 12-month data from 2020/2021, 13% of LTC residents had an ED visit that was potentially avoidable. To reduce this number, LTC homes will be implementing a tool that measures early detection of health decline in residents (called the Preview-ED Tool).

## **Awards and Achievements**

**CARF® Accreditation:** All five Adult Day Services programs and LTC homes have a CARF® International accreditation. CARF® International is an independent accrediting body of health and human services. Accreditation demonstrates that service providers meet a rigorous set of quality standards for their business and service delivery practices and demonstrate an ongoing commitment to quality improvement.

Community Response Table: Peel Region's Health Services and Human Services Departments formed a COVID-19 Regional Community Response Table (CRT) that included 190 Peel community-based organizations and stakeholders. This table aimed to collaborate with community organizations supporting vulnerable and at-risk populations such as seniors. The CRT continues to serve as a forum to support the coordination, information and resource-sharing, problem solving, and collaboration during the pandemic and recovery stages.

Seniors Collective: During the pandemic, the CRT's Seniors Collective sub-table was formed to better understand ways to reach isolated seniors in the community using system-wide approaches. This enabled sector-wide sharing, networking, problem solving, solution-development, and action planning. The Seniors Collective, in partnership with Volunteer MBC, hosted a five-part speaker series to support seniors during the pandemic for the not-for-profit sector.

**New Horizons Funding Grant:** The Region of Peel ADS program was awarded the New Horizons funding grant. This grant allowed clients to loan a tablet device to enable them to participate in virtual programs from the comfort and safety of their home. This initiative has reduced economic barriers to access and increase reach for clients in the community.

Best Practice Spotlight Organization: The Region of Peel Long Term Care (LTC) homes were one of the first to be designated as a Best Practice Spotlight Organization by the Registered Nurses Association of Ontario (RNAO). LTC is committed to implementing evidence-informed best practices throughout all five homes to enhance the quality of life for seniors. Over the years the interdisciplinary team has successfully implemented several Best Practice Guidelines and have trained many team members to be Best Practice Champions.

The Butterfly Model of Care: The Region of Peel was the first organization in Ontario to implement the emotion-based Butterfly model of care. Starting in 2017, Malton Village began implementing the model of care and was accredited in 2020 and again in 2022. Sheridan Villa began implementing the model in 2019 and was accredited in 2022.

As a leader in this model of care, the Region of Peel offered support to a network of long term care homes in Ontario in their implementation journey. This includes providing tours of the Region's Butterfly home areas, sharing experiences, and participating in cross-organization observations to assess the lived experience of people living with dementia.

## The 2023 -2026 Business Plan Outlook

## **Planning for the Future**

## **Enabling Seniors to Age in Place**

To effectively enable seniors to age in place, a sustainable approach to receiving coordinated, wraparound services is needed. Innovative solutions improve outcomes for clients, residents, caregivers, and families as well as reduce costs on public sector budgets. Investing in upstream services help reduce or delay the need for more costly services. This is achieved by collaborating across system partners, establishing integrated care, expanding 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. Priority must be placed on partnership with community organizations and others in the health care system to advance health equity, improve system integration and reach those in need. Collaboration will include work with the Ontario Health Teams, Community Response Table, and Peel Council on Aging.

# Supporting the mental health of the workforce

All homes and Adult Day Centres were successful in their application to Ontario Centres for Learning, Research and Innovation in Long-Term Care (CLRI) Workplace Mental Health Program.

This training and support program aims to develop a culture that promotes and protects the mental health of all team members and improves workforce productivity, recruitment, and retention.

## Implementing the Fixing Long-Term Care Act

The Fixing Long-Term Care Act, 2021 ("Act") and Ontario Regulation 246/22 came in effect on April 11, 2022. The new Act and regulations strengthen LTC service delivery with a focus on protecting residents' experience and quality of life. These changes focus on measures to improve staffing and accountability. The regulatory changes under the Act will also have considerable impacts on the Region's own service delivery and operational objectives. While the changes in the Act and regulations are extensive, there are several notable areas with the greatest operational impact for the Region. These include staffing requirements and increases to support direct hours of care, changes to compliance and enforcement, Infection Prevention and Control (IPAC) measures, quality improvement requirements, and requirements for medical directors.

## **Expanding 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:

**Expanding and sustaining the virtual ADS program:** To continue the successful support for virtual ADS programming, additional staff are needed to sustain operations and allow for greater program capacity for registered and waitlisted clients as in-person programming returns.

**Increasing LTC facility maintenance leadership:** This includes increasing leadership roles to oversee specific LTC homes in meeting Ministry requirements and increasing operational demands.

**Establishing workforce analysis support:** This role will provide data analysis to support ADS/LTC scheduling decisions and frontline performance management. This work involves conducting appropriate analyses to forecast future resource needs based on industry trends and best practices.

Implementing supports for the *Fixing Long-Term Care Act, 2021*: Increases to direct care staffing hours are needed to meet the provincial targets for nursing staff and allied health care professionals. Residents will receive 4 hours of direct nursing care and 36 minutes of allied health services daily.

## **Service Delivery**

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

In addition, the Respite Care Program at Peel Manor will provide temporary relief for caregivers to enable them to continue supporting their loved one 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 the Butterfly Model of Care at LTC and ADS:** The Region of Peel has been working to implement the emotion-based Butterfly model of care across its five LTC homes. This includes implementation of the Butterfly model on all home areas of Davis Centre, and expansion to the 4th floor at Sheridan Villa. Implementation of this model will begin at Tall Pines in 2022/23 and the new Peel Manor in 2023.

Securing approval and funding for Transitional Behavioural Support Unit (TBSU) at Peel Manor: The Region of Peel is working to secure funding through Ontario Health and Provincial approval for designation of a 29 bed TBSU pilot at Peel Manor. This model focuses on meeting the needs of seniors with advanced dementia who are experiencing expressive behaviors through targeted clinical care. The TBSU will also leverage the Butterfly model of care to provide personcentred care and ensure strong collaboration between the interdisciplinary team, family members, and the community.

## **Finding Efficiencies**

## **Continuous Improvement**

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

Highlights of the many projects and improvements underway include:

- Finding efficiencies in managing waitlists for the ADS and Respite Care Programs: This is achieved by increasing capacity of the ADS virtual programming across the five centres as well as increasing in-person programming and adding new respite care beds in Peel Manor.
- Implementing and reinforcing the Fixing Long-Term Care Act,
   2021: The application of the changes of the Fixing Long-Term Care Act,
   2021, have ensured practices and infrastructure are up to date with legislation. It has also highlighted the need for dedicated resources (including the implementation of a quality lead), to ensure service compliance in meeting the set standards of care.

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

- Quality Improvement Performance Measures tracking within
   ADS: The ADS programs track and monitor a series of metrics on a
   monthly and annual basis to manage performance, maintain
   funding, and inform decision-making to plan for opportunities for
   growth and innovation.
- Continuous Quality Improvement (CQI) Committees and annual Quality Improvement Reports at LTC: Each Long Term Care home has a CQI Committee in place that utilizes an interdisciplinary approach and best practice guidelines to maintain a structure that supports quality care and services, legislative requirements, CARF® Standards and best practices guidelines. Annual CQI reports are made publicly available to increase accountability of improvement initiatives implemented in the homes.

# **Transforming Our Business with Technology**

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

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

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

LTC 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 new IPAC and outbreak management software electronically captures important outbreak data. It can also be used to plot resident signs and symptoms on a digital floorplan allowing better visualization of outbreak patterns within the home. This application is an important tool that can support early detection of infections.

LTC 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.

LTC Biometrics Security System: The biometric security system restricts access to the medication room in LTC homes. This ensures medications are not misused, stolen, or diverted. Using a two-step process of biometric scan (fingerprint) and employee swipe card, only employees registered in the system have access to the medication rooms. This initiative is currently in place at Malton Village with plans to implement to all LTC homes.

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

The state of good repair budgeted for 2023 to 2032 is \$64 million and \$17 million for development charges (DC) projects. For 2023, an estimated \$10.0 million in state-of-good repair capital projects ensures the Region's long term care homes meet service levels and maintain infrastructure.

Highlights of the major state of good repair projects for the 2023 Capital Budget include:

**Davis Centre:** Nurse call system replacement (\$300K), drain and concrete replacement (\$185K).

**Malton Village:** Cooling tower and chiller replacement, project includes electrifying equipment in support of climate change (\$3.6M).

**Sheridan Villa:** Replacing exterior caulking walls to secure the building envelope and mitigate leakage (\$630K), resilient flooring replacement (\$220K) and, exterior concrete replacement and repairs (\$200K).

**Tall Pines:** Cooling tower and chiller replacement and a comprehensive upgrade. Project includes electrifying equipment in support of climate change (additional funds of \$1.6M requested).

Seniors Health and Wellness Village at Peel Manor (SHWV): This is a redevelopment of the existing long term care home and new service hub to be completed and occupied in 2023.

# **Proposed Operating Budget**

This part of the Business Plan sets out the financial resources required to deliver the proposed 2023-2026 Business Plan. Information is provided by major expenditure and revenue category as well as by program. The costs to maintain existing service levels and operationalize prior decisions are identified separately from proposed changes. The budget for 2022 was \$49.0 million and the proposed budget for 2023 is \$47.0 million.

## Net Expenditures: \$47.0 million (Total Expenditures: \$129.5 million)

Description	Proposed 2023 Budget	Approved 2022 Budget	\$ Change Over 2022	% Change Over 2022
Operating Costs	13,964	12,821	1,143	8.9%
	· ·	·		
Labour Costs	101,077	89,577	11,500	12.8%
Reserve Contributions	6,793	6,793	-	0%
Debt Charges	-	-	-	1
Grant Payments	-	-	-	-
Facility, IT, HR and other support costs	19,219	18,789	430	2.3%
Recoveries	(11,550)	(11,422)	128	1.1%
Total Expenditures	129,503	116,558	12,945	11.1%
Grants and Subsidies	58,552	45,143	13,409	29.7%
Supplementary Taxes	-	-	-	-
Fees and Service Charges	19,315	19,039	276	1.4%
Transfer from Development Charges	-	-	-	-
Contributions from Reserves	4,670	3,370	1,300	38.6%
Total Revenues	(82,538)	(67,552)	14,985	22.2%
Total Net Expenditure	\$46,965	\$49,006	\$(2,041)	(4.2)%

Note: May not add due to rounding

**2023 Operating Budget Pressures** 

\$'000	Total Expenditures	Total Revenue	Net Cost 2023 vs 2022	
2022 Revised Cost of Service	116,558	67,552	49,006	%
Cost of Living/Inflation	·		·	
Labour costs	2,962	242	2,720	
Goods and Services	1,572	-	1,572	
Base Subsidy/Recoveries				
Increase in Provincial funding		1,121	(1,121)	
Other Pressures <sup>1</sup>				
Permanent wage enhancement for Personal Support Workers (PSW)	2,847	2,847	-	
Base Budget Changes Subtotal	7,381	4,210	3,171	
Service Level Demand <sup>2</sup>				
Staffing to move towards 4-hours of care annual provincial target (37.5	3,856	9,688	(5,832)	
FTEs, Council report resolution #2022-594)			, ,	
Maintenance and Operations team leads (2 FTE)	237	-	237	
Business Analyst to support provincially mandated staffing levels (1.0	100	-	100	
FTE)				
Staffing to support the virtual Adult Day Services program (3.0 FTE)  Other Pressures <sup>3</sup>	283	-	283	
Staffing to support COVID-19 Response carried forward from 2022 (37 FTE, Council report resolution #2022-669) Temporary staffing and services to implement 1-year pilot for Adult Day Services and respite bed expansion starting July 1, 2023 funded from internal reserves including one-time implementation costs (Council report resolution #2021-397)	1,088	1,088	-	
Service Level Changes Subtotal	5,564	10,776	(5,212)	
Total 2023 Budget Change	12,945	14,985	(2,041)	
2023 Proposed Budget	129,503	82,538	46,965	(4.2%

Note: May not add up due to rounding

## **Operating budget pressure notes:**

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

• In April 2022, the Province announced a permanent wage enhancement (\$3/hour) for personal support workers. This amount reflects estimated costs for a full year and is expected to be fully funded by the Province.

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

- 4 hours of care and Allied Health Professionals As described in a Council Report titled "Ontario's Fixing Long-Term Care Act, 2021 and
  Ontario Regulation 246/22" dated June 23, 2022, staffing and related costs of 37.4 FTE are included in the proposed budget for 2023, to
  meet the annual provincial target. The funding is expected in the amount of \$9.688 million which will fully cover the 2023 proposed
  staffing. The remaining amount will also cover the Region's existing staffing to meet 2021/2022 provincial targets for all homes (except Tall
  Pines).
- Maintenance and Operations team lead This role will support two LTC homes in order to consistently meet Ministry requirements and
  operational demands. The amount reflects the staffing costs for 2 FTEs for the role.
- Business Analyst This position will support maintaining Ministry-mandated staffing levels and staffing plans across all five homes in alignment with three separate Collective Agreements. The amount reflects the staffing costs for 1 FTE for the role.
- Virtual Adult Day Services program During ADS in-person program closures due to COVID-19, virtual recreation programs were
  developed and were very successful. Virtual programs are expected to reach 500+ registered and waitlisted clients, create better
  admission transitions, and support LTC residents during outbreak isolation. The amount reflects the costs for 03 FTE Adult Day Assistants
  at three homes and related services.

#### Other Pressures<sup>3</sup>

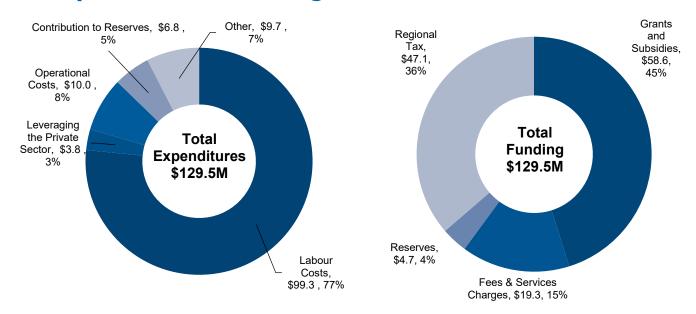
- COVID-related staffing As described in a Council report titled "Health Services Resourcing the Ongoing COVID-19 Response in 2023" dated July 7, 2022, 37 FTE staff are needed to continue to support COVID-19 response in 2023. The related staffing costs and related internal reserves funding is carried forward from 2022. Provincial funding for eligible expenses will be used if available in 2023 to offset the cost depending upon the amount of the funding.
- Expansion pilot Due to delays experienced in the completion of Seniors Health and Wellness Village, the Adult Day Services and respite beds expansion as approved by Council report resolution #2021-397, the commencement of the 1-year expansion pilot and one-time implementation costs are shifted to July 1, 2023.

## **Staffing Resources to Achieve Level of Service**

2022	2023	2024	2025	2026
835.6	879.1	918.5	918.5	918.5

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

## 2023 Total Expenditures & Funding Source (In \$M)



## **2023 Budget Risks**

- Impact of COVID-19 on operations will depend on the duration and severity of the pandemic.
- Development of Ontario Health Central Region and Ontario Health Teams is ongoing, which may impact the operating environment and related expenses, as well as funding for ADS. Details are currently unknown.
- System transformation across Community Support Services and ADS is underway in response to COVID-19. A hybrid ADS and Community Services model continues to evolve to provide in-person and virtual services to active and waitlisted clients and caregivers.
- The Province of Ontario recently announced significant changes to staffing for direct care and other areas of operations under the *Fixing Long-Term Care Act 2022*. There is uncertainty about the timing and extent of funding from the province. There is a risk the funding will not be provided to support implementation of the requirements. Service providers and LTC partners continue advocacy and lobbying efforts.
- Revision of Service Accountability Agreements to reflect changes in ADS and LTC service delivery is expected in 2022. Impact is currently
  unknown.

## 2024 - 2026 Operating Forecast

	Budget			Forecast							
	2022	2023		2022 2023		20	24	2025		2026	
	\$'000	\$'000	%	\$'000	%	\$'000	%	\$'000	%		
Total Expenditure	116,558	129,503	11.1%	134,610	3.9%	137,161	1.9%	140,618	2.5%		
Total Revenue	(67,552)	(82,538)	(22.2%)	(87,996)	(6.6%)	(89,163)	(1.3%)	(90,522)	(1.5%)		
Net Expenditure	49,006	46,965	(4.2%)	46,614	(0.7%)	47,998	3.0%	50,096	4.4%		

Note: May not add up due to rounding

- Forecast years' increases are related to maintaining base services
- 2024 forecast includes estimated staffing costs and related funding for 4 hours of care and Allied Health Professionals (Council report resolution #2022-594)
- 2024 forecast includes 2 FTEs for virtual Adult Day programming at Peel Manor and Davis Centre
- 2024 forecast includes the remaining portion after 2023 of staffing and services costs for 1-year Adult Day Service and respite bed expansion pilot at Seniors Health and Wellness Village commencing on July 1, 2023

# **Proposed Capital Budget**

Capital Budget: \$10.0 million (Ten Year Plan: \$143.2 million)

## **2023 Capital Budget Overview**

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

Capital Plan By Funding Source	Carry-forward from Prior Years (WIP) (\$'000)	2023 Capital Budget (\$'000)	Total Capital in 2023 (\$'000)
DC Growth	-	-	-
Externally Funded	-	-	-
Non-DC Internal	53,756	10,016	63,772
Total Expenditures	53,756	10,016	63,772
# of Projects	73	5	78

## **Existing Capital Projects - \$53.8M**

- \$35.7M Seniors Health and Wellness Village project
- \$3.2 M Peel Manor Facility Maintenance
- \$3.0 M Cooling/Chiller system project at Malton Village, Tall Pines, and Davis Centre
- \$1.9 M Beds, Lifts, or other equipment replacement for all five homes
- \$1.8 M Fire Panel/Elevator project at Sheridan Villa, Malton Village, Davis Centre, and Tall Pines

## 2023 Capital Budget - \$10.0M

#### **Key highlights:**

- \$3.6M Replacing Chilled Water Pumps at Malton Village and Tall Pines
- \$1.9M Replacing Metasys Building Automation System (BAS) at Malton Village and Tall Pines
- \$1.3M Replacing Floor Vinyl Sheet/Aluminum Windows/Doors/Cabinets at Malton Village, Tall Pines, Sheridan Villa, and Davis Centre
- \$0.7M Tall Pines Chiller System
- \$0.6M Replacing Exterior Caulking Walls at Sheridan Villa
- \$0.5M LTC Maintenance to address unplanned fluctuations in the state of good repair projects
- \$0.3M Replacing Nurse-call System at Davis Centre
- \$0.2M Replacing Kitchen Appliances at Sheridan Villa, Malton and Tall Pines

See Appendix I for details.

## **2023 Budget Risks**

None

## **Operating Impact of 2023 Capital Budget**

None

## **Proposed Capital Plan**

## 2023 - 2032 10-Year Capital Plan - \$143.2M

## **By Project Classification:**

State of Good Repair \$64M

DC Funded Growth \$17M

Non-DC Funded Growth & Other \$62.2M

#### **Key Highlights:**

- \$64M Projects in State of Good Repair including
  - \$7.0M Replace Vinyl Floor tile/Polyflor Sheet Flooring at Davis Centre, Malton Village and Tall Pines
  - \$5.2M Replacement Kitchen Appliance at Malton Village and Tall Pines
  - \$5.3M Replacement of washroom walls and vanities at Malton Village and Tall Pines
  - o \$5.0M for LTC Maintenance to address unplanned fluctuations in the state of good repair projects
  - \$4.0M Replacement Furnishings at Malton Village
  - \$3.6 M Replacement Chiller System at Malton Village
  - o \$2.8M Replace Aluminum Windows and Roof at Sheridan Villa
  - o \$2.2M Replacement of Fire Detection & Alarm Systems at Malton Village and Tall Pines
  - \$1.9M Replacement of Metasys Building Automation System (BAS) at Malton Village and Tall Pines
- \$17M DC Funded Growth Placeholder for the development of New Long Term Care Home in 2032
- \$43M Non-DC Funded Growth Placeholder for the development of New Long Term Care Home in 2032
- \$19.2M Other projects including
  - \$4M Replacement Furnishings at Malton Village
  - \$8.6M Replacement Kitchen Appliance at Malton Village, Tall Pines, Sheridan Villa, and Davis Centre
  - \$1.4M Painting at Sheridan Villa

See Appendix II for details.

Service : Seniors Services

Appendix I

## 2023 Financing Sources and Funding Status (\$'000)

		2023		
		Reserves &		
Total	Development	Reserve	External	
Expense	Charges	Funds	Funding	Debt Funding

<u>Project</u>	<u>Name</u>	Description			
235404	Sheridan Villa Maintenance & Equipment	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	1,343	1,343	
235405	Vera M Davis Maintenance & Equipment	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	1,490	1,490	
235406	Tall Pines Maintenance & Equipment	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	2,094	2,094	
235407	Malton Village Maintenance & Equipment	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	4,589	4,589	
235408	LTC Divisional Maintenance & Equipment	To budget for unplanned fluctuations experienced in budgeted SOGR projects in Long Term Care homes	500	500	
Seniors Services			10,016	10,016	

Service: Seniors Services Appendix II

2023 Ten Year Combined Capital Program (\$'000)

			2023	<u>2024</u>	<u>2025</u>	<u>2026</u>	<u>2027</u>	Yrs 6-10	Gross
<u>Project</u> 235404	Name Sheridan Villa Maintenance & Equipment	Description To address state of good repair or improvements required for building infrastructure or equipment to support direct care	1,343	872	170	902	2,518	8,614	14,419
235405	Vera M Davis Maintenance & Equipment	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	1,490	1,537	5	133	133	1,657	4,955
235406	Tall Pines Maintenance & Equipment	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	2,094	1,715	2,553	1,511	3,032	14,188	25,093
235407	Malton Village Maintenance & Equipment	To address state of good repair or improvements required for building infrastructure or equipment to support direct care	4,589	2,187	1,761	2,549	3,144	19,545	33,775
235408	LTC Divisional Maintenance & Equipment	To budget for unplanned fluctuations experienced in budgeted SOGR projects in Long Term Care homes	500	500	500	500	500	2,500	5,000
325402	Building (or Facility) for Development of New LTC Services	To address needs of growing frail senior population that new long term care services may need to be developed	0	0	0	0	0	60,000	60,000
Seniors Services			10,016	6,811	4,989	5,595	9,327	106,504	143,242

# **Budget Requests**

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

Proposed Initiative	Division	Budget Request #	FTEs Requested	Contract FTE Requested	Net Operating Impact \$	Capital \$
Virtual Adult Day Services	Seniors Services Development	16	3.0	0.0	283,200	0
Enhance Seniors' Support and Services	Seniors Services Development	17	2.0	0.0	237,000	0
Enhance Seniors' Support and Services	Seniors Services Development	18	1.0	0.0	100,000	0
TOTAL			6.0	0.0	620,200	0

**Budget Request #: 16** 

Proposed Initiative	Department	Division	Service Area
Virtual Adult Day Services	Health Services	Seniors Services Development	Seniors Services

## **Description of Budget Request**

During Adult Day Service (ADS) in-person program closures due to COVID-19, virtual recreation programs were developed and are very successful. Ontario Health (OH) is not providing funding for virtual recreation programs. As in-person ADS programs resume, virtual programing will cease due to lack of funding. Virtual programs reach 500 plus registered and waitlisted clients, create better admission transitions, and support Long Term Care (LTC) residents during outbreak isolation. We are looking for the Region to fund sustained operation.

## **Required Annual Operating Investment**

Impacts	2023	2024	2025	2026
	\$	\$	\$	\$
Gross Expenditures	283,200	198,000	-	-
Less: Internal and Capital Recovery	-	-	-	-
Total Expense	283,200	198,000	-	-
Reserves	-	-	-	-
External Funding	-	-	-	-
Other Revenue	-	-	-	-
Total Revenue	-	-	-	-
Net Impact -Tax	283,200	198,000	-	-
Net Impact - Utility Rate	-	-	-	-
FTEs	3.0	2.0	-	-
New Contracts	-	-	-	-

## **No Capital Investment Required**

### Why Staff Recommend this Initiative

The COVID-19 pandemic has given us the opportunity to expand our thinking around service delivery for Adult Day Services. With the current funding model, both in-person services and virtual services cannot both be maintained at a safe and optimal level. Funding this initiative will allow programs to continue to increase program capacity as we return to in-person programming, and also continue to provide virtual services and even expand virtual services moving forward.

## **Details of Service Change**

During the COVID-19 pandemic, in-person Adult Day Services temporarily closed. During this closure, a robust virtual recreation program delivery model was developed and implemented. It has proven to be very successful. This project will allow us to maintain and expand Virtual Adult Day Services program delivery as it is not currently funded by OH, and not sustainable as we increase our in-person capacity. Virtual Recreation programs have proven to provide support to clients that contribute to their ability to continue to live at home (73%) and help them maintain or improve their well-being (95%) and caregivers report that the virtual programming gives them an opportunity to have a break from their caregiving role (70%). Funding a cross-centre team to maintain the program will allow us to expand the virtual programming beyond our current clients (230) to all 500 plus waitlisted clients which reduces anxiety around in-person program admission and increases access to services. We can also reduce barriers to participation by offering loaned tablets from our technology lending program which ensures access to the program is equitable. We will also offer services to LTC residents during periods of isolation due to outbreaks in the homes, which was piloted in February 2022 and had positive outcomes. Staff will also be able to support caregiver education which will increase attendance and participation. Caregiver supports and education is a part of the Seniors Supports and Services Term of Council Priorities.

## **Service Impact**

Outcomes for the project can be aligned with Performance Management Plans to ensure ownership and help drive success. Targets for enhanced service delivery can be reviewed monthly or quarterly with the ADS Supervisor team and the ADS Virtual team to develop plans for improvement where needed. During the temporary in-person program closures, the team has already trialed the program delivery method and it has been proven to be extremely successful, so there are no concerns with achieving the outcomes moving forward. A robust foundation is already set. Client and caregiver satisfaction surveys have already been adjusted to capture performance and trending data related to the service outcome for ADS but specifically related to virtual programming. In 2021, the results showed 95% of clients participating in the virtual program and 90% of caregivers reported that the virtual services they receive contribute to their ability to continue to live at home.

## **Budget Request #: 17**

Proposed Initiative	Department	Division	Service Area
Enhance Seniors' Support and Services	Health Services	Seniors Services Development	Seniors Services

## **Description of Budget Request**

The request is two full time employees for the position of Team Lead, Maintenance + Operations in Long Term Care (LTC), reporting to the Facility Services Supervisors. Each position will support two LTC homes in order to consistently meet Ministry requirements and the operational demands.

## **Required Annual Operating Investment**

Impacts	2023 \$	2024 \$	2025 \$	2026 \$
Gross Expenditures	237,000	-	-	
Less: Internal and Capital Recovery	-	-	-	
Total Expense	237,000	-	-	
Reserves	-	-	-	
External Funding	-	-	-	
Other Revenue	-	-	-	
Total Revenue	-	-	-	
Net Impact -Tax	237,000	-	-	
Net Impact - Utility Rate	-	-	-	
FTEs	2.0	-	-	
New Contracts	-	-	-	

## **No Capital Investment Required**

## Why Staff Recommend this Initiative

Environmental Services in LTC is highly regulated. Compliance with the Act in the areas of infection prevention and control practices and emergency response exercises will be realized with the addition of these positions.

Compliance with O.Reg. 588/17 Asset Management will also be realized with increased Asset Maturity scores and incorporation of climate change measures.

### **Details of Service Change**

These positions will support the current and increasing workload in the facility maintenance area including: oversight of preventative and demand maintenance, guiding in-house unionized maintenance staff and contracted vendors, liaising with Real Property Asset Management (RPAM) to support capital infrastructure projects, on-going utilization of Maximo work order management system and ensuring climate change initiatives are operationalized.

Capital projects managed by RPAM require in-depth involvement by the home during planning and implementation because site staff have intimate knowledge of the facility and will ultimately operationalize changes.

Four homes range in age from 18 to 51 years old and in 2022, 27 capital projects are approved totaling \$3.6 million which may be delayed due to capacity issues.

With Team Leads taking on these responsibilities, the Facility Services Supervisors can fully manage the Facility and Environmental Services teams at each home. These teams consist of housekeepers, laundry aides and maintenance staff with an average of 34 employees per home. As well, more rigor can be put towards Ministry requirements and the increased workload resulting from the Fixing the Long Term Care Homes Act. (e.g., increased infection prevention and control requirements, audits, training, and reporting).

### **Service Impact**

The division of responsibilities between the Facility Services Supervisors and the Team Leads will support achieving the outcomes. The Facility Services Supervisors work on average 40 hours/month overtime while trying to meet the demands of facility and environmental services. Maintenance staff work overtime also to meet the demands (January - March 2022, maintenance incurred 30 hours/month at the Davis Centre). The overtime is not sustainable nor can be relied upon.

As well, they continue to struggle to ensure all mandated audits and inspections take place. Staff in LTC's Practice, Innovation and Education will put processes in place to monitor measurements and results.

## **Budget Request #: 18**

Proposed Initiative	Department	Division	Service Area
Enhance Seniors' Support and Services	Health Services	Seniors Services Development	Seniors Services

## **Description of Budget Request**

The request is for 1 full time employee for the position of Long Term Care (LTC) Business Analyst reporting to the Centralized Business Support Unit (CBSU) Manager. This position will support with maintaining Ministry mandated staffing levels and staffing plans across all 5 homes in alignment with 3 separate Collective Agreements.

## **Required Annual Operating Investment**

Impacts	2023 \$	2024 \$	2025 \$	2026 \$
Gross Expenditures	100,000	-	-	-
Less: Internal and Capital Recovery	-	-	-	-
Total Expense	100,000	-	-	-
Reserves	-	-	-	-
External Funding	-	-	-	-
Other Revenue	-	-	-	-
Total Revenue	-	-	-	-
Net Impact -Tax	100,000	-	-	-
Net Impact - Utility Rate	-	-	-	-
FTEs	1.0	-	-	-
New Contracts	-	-	-	-

## **No Capital Investment Required**

## Why Staff Recommend this Initiative

Residents living in Long Term Care will receive consistent quality care and services through ensuring adherence to the Ministry mandated staffing levels within the Fixing Long Term Care Act. The LTC Business Analyst will work closely with the management in the homes providing them with data and analysis to support their scheduling decisions and frontline performance management. Frontline staff will benefit from more effective schedules with less open shifts which will help reduce grievances.

## **Details of Service Change**

Staffing is regulated by the Ministry of Long Term Care through the newly introduced Fixing Long Term Care Act. In order to be compliant and efficient, the LTC Business Analyst position is required for effective staffing analysis, maintenance of the master staffing plan for each home, proactive planning and forecasting resource needs, utilizing accurate data, industry trends and best practices. The LTC Business Analyst will also collect, analyze and evaluate resource data through the creation of an evaluation framework and dashboard. Reports will be generated for use by the LTC Director, home-level leadership team, and Manager, CBSU for effective decision-making, support recruitment and retention of scarce resources, and attendance support strategies.

### **Service Impact**

A dedicated LTC Business Analyst will perform regular analysis to ensure schedules are balanced with the correct mix of staffing, reduce instances of understaffing to maintain adequate levels of care and services, reduce grievances, and minimize overtime. This position will work directly with the homes' leadership teams to analyze vacation and sick time trends that will allow for more accurate vacation allotments, and provide the data required for attendance support and management at the home level. This position will support the transition and operationalizing the Enterprise Resource Planning (ERP) program in LTC.