HALDIMAND COUNTY

Report GVL-03-2025 Direct Care Hours and Staffing Impacts



For Consideration by Council in Committee on June 17, 2025

Objective:

To update Council on efforts to increase staffing at Grandview Lodge to meet the legislated target of four hours of direct care per resident per day from 2021 to 2025. Also, to seek approval for a new Associate Director of Nursing position to support leadership, planning, and regulatory compliance.

Recommendations:

- 1. THAT Report GVL-03-2025 Direct Care Hours and Staffing Impacts be received;
- AND THAT a new staffing initiative for 1.0 FTE Associate Director of Nursing, in the amount of \$159,140, be approved immediately and incorporated into the 2026 Draft Tax Supported Operating Budget for future funding;
- 3. AND THAT capital purchases in the amount of \$5,000 related to new technology for the above FTE staffing initiative be approved, with an amendment to the 2025 Tax Supported Capital Budget.

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Approved: Cathy Case, Chief Administrative Officer

Executive Summary:

Grandview Lodge has made significant progress towards meeting Ontario's four-hour direct care standard in long-term care homes, by the end of 2025. A phased approach was executed under delegated authority, through Report GVL-06-2021, supported by provincial funding, to increase staffing levels across all care roles to the tune of a 59% increase in scheduled nursing hours. Related staffing changes in allied health and administration positions have also taken place during the 3 year implementation period. This has resulted in more personalized and timely care for residents; leading to better staff-to-resident ratios, enhanced resident care and improved safety, particularly through overnight shifts.

It is noted however, that with these changes there has been growing complexity of operations and additional strain on the leadership team – namely the nursing leaders who have remained unchanged as 2.0 FTE throughout these years. In other words, the current supervisory complement sees 2 individuals overseeing 120 direct care staff. To maintain compliance and sustain the quality of care delivery, while acknowledging the capacity issues within leadership, staff are recommending the immediate addition of a full-time Associate Director of Nursing bringing the team to 3.0 FTE Non-Union Supervisors within the nursing team. This role will help distribute leadership responsibilities more effectively, ensuring continued support for over 120 direct care staff and maintaining the high standards of care expected. The recommended position, with an annual cost of approximately \$159,140 and a one-time capital cost of \$5,000, is anticipated to cause minimal deficit in 2025 given the time of year and available gapping. Ongoing costs will be included in the 2026 draft tax supported operating budget with a slight impact to the 2026 tax levy.

Although this request for additional staffing is being made out of regular budget cycle, it reflects a proactive and necessary response to the evolving needs of long-term care, ensuring that Grandview Lodge remains a leader in resident-centered care while adequately supporting the staff who make it possible.

Background:

The Fixing Long-Term Care Act (FLTCA), enacted in 2021, mandates a focus on direct care hours for long-term care residents, aiming to reach an average of four hours per resident per day by end of 2025. This initiative is designed to enhance the quality of care by ensuring residents receive more personalized and timely attention from registered nurses, registered practical nurses, and personal support workers. The provincial government committed significant, phased-in funding to support this goal, including a historic \$1.82 billion province-wide investment in 2024–2025, as part of a broader \$4.9 billion plan over the full four years. Funds were allocated for recruitment, retention, training, and wage enhancements initiatives, to bolster staffing levels and improve care delivery.

In 2021, Report GVL-06-2021 Funding to Increase Staffing Levels in the Long-Term Care Sector was approved by Haldimand County Council, outlining a local strategy to upstaff nursing positions in anticipation of these mandates. This report outlined anticipated funding levels and delegated authority to staff to implemented an increase in nursing and allied health staffing, within funding allotments, to meet the new provincial benchmarks. In response, each operating budget since 2022 has included council-approved staffing increases within Grandview Lodge, with 2025 being the final phase for implementation.

Analysis:

Direct Care Hours

Grandview Lodge is well on its way to achieving the four-hour direct care provincial target, with the most recent increases to Personal Support Worker (PSW) hours being implemented in March, 2025. This report provides an update on the final stages of implementation, including the addition of specialized RPN and PSW positions, resulting in an expectation of meeting the full provincial initiative by the end of 2025.

Table 1 illustrates the current direct care staffing complement from 2021 to 2025 noting the final phase is subject to implementation in September of 2025. Over this period, Grandview has seen new or changed positions across all areas of direct care, including Registered Nurse (RN) Charge Nurse, Registered Practical Nurse (RPN), RPN Quality Assurance (QA) Nurse, RPN Team Lead, and Personal Support Worker (PSW).

Position	Direct Care Hrs / Day 2021	Direct Care Hrs / Day 2025	Total Increase / (Decrease)
RN Charge Nurse	22.50	22.50	-
RPN QA Nurse	5.70	5.70	-
RPN Team Leads	52.50	80.00	27.50
*RPN Responsive Behaviour	-	8.00	8.00
PSW	239.25	352.00	112.27
*PSW Restorative	-	32.00	32.00

Table 1: Progression of Direct Care Hours from 2021 to 2025

Position	Direct Care Hrs / Day 2021	Direct Care Hrs / Day 2025	Total Increase / (Decrease)
*PSW Float Line	-	8.00	8.00
Total Hours	319.95	508.20	188.25
Hours Per Resident	2.50	3.97	1.47

* **Note:** These positions are part of the second phase not yet implemented and are anticipated to be in place by the end of 2025. For clarity, our current 2025 hours per resident per day is 3.6 hours per day.

The resulting staff to resident ratio, per shift, in 2021 compared to 2025 is represented in Table 2 below. By increasing the number of direct care staff/hours, the number of residents that each employee is responsible for in a shift is reduced, allowing for more personalized care per resident.

Table 2: Anticipated 2025 Staff to Resident Ratio per Shift Compared to 2021

Position / Shift	2021 Resident Ratio	2025 Resident Ratio
PSW – Day	1:8	1:6
PSW – Afternoon (2025 includes 1 float line)	1:10	1:8
PSW – Night	1:32	1:16
RPN – Day	1:43	1:32
RPN – Afternoon (2025 includes Responsive Behaviour RPN)	1:43	1:26
RPN – Night	1:64	1:64
RN – All shifts	1:128	1:128

Related Staffing / Scope Impacts

It is recognized that other, non-direct care, positions have been introduced or impacted over the past 3 years to effectively respond to the significant changes in nursing/direct care hours as well as the enhanced requirement of FLTCA and the increasing expectations of the Province. To assist Council in their review of the current staffing impacts, the following summarizes changes seen in recent years.

Scheduling Support Team

In 2022, the scheduling team at Grandview Lodge expanded from one to two full-time positions, to meet the increased work demands as well as take on significant payroll entry duties, previously done by the Administrative Assistant. These changes were driven by the significant increase in front-line staffing hours and positions, as well as the need to realign scheduling responsibilities previously handled by the RN outside of the scheduler's regular hours. These duties have now been appropriately transitioned to the dedicated scheduling team. Additionally, scheduler coverage has been extended from the traditional Monday–Friday schedule to a full 7-day/week model. Schedulers now provide support from 0500-1800, including weekends. To further strengthen the team, the Nursing Clerk assists with scheduling every other weekend and serves as a backup when needed. Funding of these changes were approved through prior year operating budget initiatives.

Infection Prevention & Control (IPAC) Lead

Although not initially related to direct care hours, the IPAC Lead position was created, and funded by the Province of Ontario in 2022, in response to new provincial requirements following the COVID-19

pandemic At that time, the Ministry of Long-Term Care mandated that all long-term care homes must have a dedicated, trained IPAC Lead to oversee and coordinate infection control programs, ensure compliance with best practices, and provide ongoing education to staff. This role has become essential in supporting nursing staff through the increased workload associated with infection prevention and control protocols. Reporting to the Director of Nursing, the IPAC Lead works alongside direct care positions in promoting resident safety, minimizing the risk of outbreaks, and strengthening the home's overall preparedness and response to infectious threats.

Social Service Worker

The Ministry of Long Term Care and Accreditation Canada have increasingly recommended including Social Workers as key members of the care team, due to growing complexity of resident needs, particularly in areas like mental health, emotional and behavioural supports, family communication, and end-of-life care. In 2024, Grandview Lodge added a Social Service Worker position, reporting to the Director of Nursing, recognizing the vital need for this role. The position is fully funded through the Ministry's Allied Health envelope which supports non-nursing professionals. By using this funding, Grandview Lodge has strengthened its focus on person-centered care and better supports residents through a wide range of challenges.

Nurse Practitioner

In October 2022, the Ontario government announced a significant investment into hiring additional nurse practitioners (NPs) in long-term care (LTC) homes. This initiative aims to enhance the quality of care for residents by integrating NPs into the care teams and funds a significant portion of related salary, benefits, and overhead costs. Council approved the introduction of a NP as part of the 2024 operating budget for Grandview Lodge; reporting to the Director of Nursing, a NP will strengthen the home's ability to deliver comprehensive, resident-centered care through on site medical assessments, support of staff and communication with families. Grandview Lodge is actively recruiting for a Nurse Practitioner, but has not yet been successful in filling the position.

Administrative Team

With the addition of a full-time scheduler, duties related to payroll preparation were removed from the Administrative Assistant to the Administrator, and moved to the scheduling office to align with the scheduling positions. This change has resulted in more support to the Administrator.

The Administrative Assistant, Leadership position continues to support all 6 Supervisors. At times, both Administrative Assistant positions share the workload amongst all the leaders in the home as the workload is increasing.

In 2025, a new staffing initiative was approved to increase the Accounts Clerk position from permanent part-time to permanent full-time due to the growing complexity of admissions and discharges, particularly with regard to finances. There is an increase in workload for managing the financial obligations of both residents and Grandview Lodge. With the rise in admissions turnover rate, the financial demands associated with each admission and discharge have also increased. The increased hours for the Accounts Clerk position was fully covered by the additional funding from the Ministry of Long-Term Care (MLTC) related to the Other Accommodation (OA) envelope. The required furniture and equipment cost was previously incorporated into the relevant cost centers, as these items were accounted for as a part-time position.

The Nursing Clerk and the Resident Services Clerk positions remain unchanged.

Overall, the total increase in administrative staff, previously approved through regular budgeting processes has been 1.4 FTE.

Leadership

In 2022 a departmental realignment was implemented transferring oversight of the Housekeeping and Laundry departments from the Supervisor of Facility Operations, to the two Supervisor, Dietary Services positions, one full-time and one part-time position. With the added responsibilities of housekeeping and laundry, the part-time Supervisor, Dietary Services position was increased to full-time and re-titled to the Supervisor, Dietary, Housekeeping & Laundry Services, a net increase of .4 FTE.

The realignment of responsibilities allowed the Supervisor, Facility Operations to provide more effective oversight to the maintenance team, and address the growing demands of capital projects, particularly those related to the aging infrastructure of the Grandview Lodge building.

The .4 FTE increase has been the only increase to leadership since all of the additional direct care hours and related staffing impacts have been in put in place.

Remaining Gaps and Challenges

The introduction of FLTCA and the target of four hours of direct care, per resident, per day has had an incredible, positive impact on the residents of Grandview Lodge. To date, we have seen success in achieving a better staff-to-resident ratio, allowing for more individualized attention. Additional time spent with residents has improved the quality of care and enhanced resident satisfaction. Furthermore, increased staffing levels have contributed to improved safety for both staff and residents, particularly noticeable during the night shift.

These changes have also brought forth additional challenges, particularly as it relates to leadership and administration staff who are now responsible for significantly more staff, enhanced provincial expectations and a changing work environment. The following summarize the main challenges for Grandview Lodge's leadership team:

- **59% increase in direct care hours by the end of 2025**, requiring significant staffing adjustments, increased oversight, and support from leadership and HR.
- A 104% increase in modified work hours from 2023 to 2024 has added considerable strain on scheduling, HR, and leadership, who must support staff reintegration through early intervention and modified duties planning. Although this number may not decline with increased staffing levels, the workload involved in managing modified work remains very high. Continued proactive workforce management, addressing underlying causes of staff injuries and fatigue, is essential, requiring strong collaboration between HR and leadership to sustain a healthy workforce.
- Addition of key roles—Infection Prevention and Control (IPAC) Lead, Social Service Worker, and Nurse Practitioner (NP)—which have/will enhance care but has also expanded leadership responsibilities and administrative coordination.
- Significant increase in Ministry long-term care inspections, now occurring every three months
 instead of 1-2 times per year. While Grandview has always aimed to fully comply with legislation
 and therefore ready to respond to heightened scrutiny, we do acknowledge the added workload
 of attending to more frequent inspectors, such as gathering the backup information, sitting in
 interviews, developing briefing notes, etc. Each inspection can span a couple of days to a few
 weeks and involve varying degrees of on-site participation.
- Continuous recruitment efforts through internal and external job postings to meet growing staffing demands and comply with staffing standards. New hires require a sufficient degree of orientation and training from existing leadership and staff.

- Leadership must stay informed and coordinate onboarding related to **evolving immigration laws and workforce programs**, such as the PSW Incentive Program and Internationally Educated Nurses (IEN) initiative, to attract and retain qualified staff.
- Increasing workforce diversity, equity, and inclusion (DEI) brings valuable perspectives but also challenges like cultural misunderstandings, communication barriers and unconscious bias. There is an immediate need for DEI training, clearer policies, and leadership practices that foster a respectful, inclusive environment where all staff feel valued and empowered. Grandview Lodge remains committed to fostering open communication, promoting equity, and creating a positive, supportive workplace culture.

Proposed Solution

While not all of the issues identified can be immediately addressed, staff believe the crux of the issue is too wide of a span of control for the direct care supervisors, namely the DON and ADON, to possibly provide effective and supportive supervision for 120 direct reports. For clarity, these two positions are responsible for the oversight of all PSWs, registered nursing staff, allied healthcare specialists (IPAC and RAI Coordinators, Quality Assurance Nurse), NP, and the scheduling team – the area that has experienced the most significant growth through the changes outlined in this report.

The position of Associate Director of Nursing (ADON) was first introduced in 2018, through a provincial funding opportunity for registered nurses and has been successful in providing targeted program oversight, as well as direct supervision for nursing staff. It is recommended that an additional, permanent full-time ADON be added to the leadership team complement, immediately. By introducing a second ADON, the leadership workload can be more effectively distributed between the current ADON and the Director of Nursing (DON), ensuring appropriate coverage, improved operational efficiency, and the ability to meet increasing demands within the department.

Financial/Legal Implications:

Staff were provided delegated authority through Report GVL-06-2021 to receive and utilize Provincial funding for the purposes of increasing direct care staffing hours and enhanced allied health costs. Accordingly, all costs associated with the changes to date, have been made within the approved annual operating budgets. Once the target is reached and the full funding is used, staff will continue to monitor and report any needed changes through the regular budgeting process.

Additionally, Grandview Lodge receives annual operating funding from the Ministry of Long-Term Care, allocated through various envelopes with specific spending guidelines. As noted in Report GVL-04-2024, the Ministry provided a 6.6% increase in 2024 – an exceptionally high adjustment compared to previous years. This increase was carried forward into the 2025 budget, without any specific offsetting expense and therefore applied broadly to offset the municipal tax levy, contributing to a modest 1.55% increase in the division's overall 2025 operating budget.

Recently, Ministry operating funding was estimated at a 2% increase for 2025—exactly as budgeted—meaning there is no additional impact on the municipal tax levy this year, unless changes are announced.

During budget development, staffing needs were identified; however, full implementation of direct care and allied health enhancements, as well as their impacts on administration and leadership, had not yet been finalized. Rather than request resources prematurely, staff committed to conducting a full analysis of staffing impacts and service gaps. That review is now complete. As outlined in this report, staff are requesting the addition of one full-time equivalent (1.0 FTE) Assistant Director of Nursing (ADON) position to support direct care and operational needs. As this staffing request is being recommended outside of the annual Tax Supported Operating Budget process, the additional staffing and costs will not go through the internal budget review, rating and evaluation process. This process evaluates all staffing requests across the organization and evaluates the relative priority and anticipated costs associated with each request compared to a total annual budgeted allocation. As there are limited funds available for new staffing requests, inevitably, all requests cannot be accommodated and must be re-evaluated in future budget years. For this reason, typically in-year staffing request are limited to circumstances where non-tax related funds become available or there are emergency or risk related operational concerns. However, as the report indicates, the significant increase in staffing at Grandview Lodge has left a critical need for more supervisory resources in the nursing department to address the two supervisors who are currently overseeing approximately 120 staff directly.

Based on standard budgeting assumptions, adding a permanent full-time ADON would require an annual operating budget of approximately \$159,140. If approved, recruitment would begin immediately, resulting in unbudgeted costs in 2025. However, given the costs in 2025 are only for part of the year and due to existing gapping from staff turnover and leaves of absence, it is anticipated that the potential overall deficit will be minimal. Any resulting surplus/deficit will form part of the overall 2025 Tax Supported Operating surplus/deficit.

This annual cost, along with applicable inflation, will be incorporated into the Draft 2026 Tax-Supported Operating Budget with an associated impact on the 2026 tax levy.

In addition, a one-time capital cost of \$5,000 is required for a new computer and a mobile phone for the new ADON role. The resulting amendment to the 2025 Tax-Supported Capital Budget would be required, funded from the Capital Replacement Reserve - Information Technology.

Stakeholder Impacts:

The key stakeholders related to the direct hours of care and related staffing impacts are the residents of Grandview Lodge. They have and will continue to benefit from the increased hours of care per day. Although there are current challenges to recruitment in health care and long term care, Grandview Lodge has taken every step to engage in all available funding for educational opportunities and incentives to recruit and retain staff.

Report Impacts:

Agreement: No By-law: No Budget Amendment: Yes Policy: No

References:

- 1. <u>GVL-06-2021 Funding to Increase Staffing Levels in the Long-Term Care Home Sector</u>
- 2. GVL-04-2024 Grandview Lodge Ministry of Long-Term Care Funding

Attachments:

None.