

**Policy: 2023-24 Resident Health and Well-Being Program
Funding Policy**

Date: April 2023

1.0 Introduction

The well-being of long-term care (LTC) residents was significantly impacted by the COVID-19 pandemic and general visitors were barred or limited during most waves due to transmission and protective measures.

The Resident Health and Well-Being (RHWB) Program, launched by the Ministry of Long-Term Care (“the Ministry”) letter dated December 16, 2022, which was accompanied by the 2022-23 Resident Health and Well-Being Program Funding Policy (“2022-23 Policy”), is intended to enhance resident access to social support services provided by Registered Social Workers (RSWs), Social Service Workers (SSWs) and other Allied Health Professionals (AHPs) to increase overall health, well-being and quality of life in LTC homes.

To support this program, the Ministry is providing up to \$19,963,600 over three years to LTC homes across the province to provide health and well-being social support services to LTC residents and/or their families/caregivers by expanding access to RSWs, SSWs and other eligible AHPs as follows:

- \$6,523,200 in 2022-23;
- \$6,653,700 in 2023-24; and
- \$6,786,700 in 2024-25.

This funding is separate from and in addition to the AHP Staffing Supplement funding currently being provided to LTC homes to increase direct hours of care for residents as part of the government’s [“A better place to live, a better place to work: Ontario’s long-term care staffing plan”](#) (“Staffing Plan”) and *Fixing Long-Term Care Act, 2021* (FLTCA).

Effective January 1, 2023 to March 31, 2023, RHWB funding was provided to eligible LTC homes under the above-mentioned December 16, 2022 Ministry letter and the 2022-23 Policy.

RHWB funding for 2023-24 is subject to this 2023-24 Resident Health and Well-Being Program Funding Policy (this “Policy”). Under this Policy, effective April 1, 2023, to support the continuation of increasing the provision of social support services as part of the RHWB Program, LTC home licensees will receive a fixed monthly allocation of \$7.24 per bed, per month for this fiscal year (2023-24) through the Resident Health and Well-Being Fund, subject to the terms of this Policy and other applicable conditions.

1.1 Purpose

This Policy outlines the terms and conditions of the funding provided to LTC home licensees to continue enhancing resident health and well-being via increasing access to social support services effective April 1, 2023, to the end of this fiscal year (March 31, 2024). LTC home licensees will enhance access to social support services provided by RSWs, SSWs and other AHPs, working towards a best practice minimum of 30 minutes of care per resident every four weeks.

2.0 Recipient Eligibility Criteria and Definitions

- 2.1 Existing non-profit (including municipal) and for-profit LTC operators licensed or approved to operate a LTC home under FLTCA and *Ontario Regulation 246/22* (“the Regulation”) which are a party to a Letter of Agreement for Minister Direct Funding to Long-Term Care Homes (DFA) with the Ministry are eligible to receive this funding.
- 2.2 A registered social worker is an individual who possesses a certificate of registration for social work with the Ontario College of Social Workers and Social Service Workers (OCSWSSW) and is registered under the *Social Work and Social Service Work Act, 1998*. A registered social worker is responsible for assisting clients to achieve optimal psychosocial and social functioning and can provide a specific diagnosis to a client.
- 2.3 A social service worker is an individual who possesses a certificate of registration for social service work with the OCSWSSW and is registered under the *Social Work and Social Service Work Act, 1998*. A social service worker is responsible only for helping clients with their social functioning and cannot provide a specific diagnosis to a client.
- 2.4 Other AHPs (in addition to RSWs and SSWs) that provide social support services related to enhancing resident health and well-being are eligible to use the Resident Health and Well-Being Fund. Examples of eligible AHPs include, though are not limited to:
 - a. Physiotherapist
 - b. Mental Health Professional
 - c. Restorative Aide / Lead (Rehab/Therapy Aide) for supporting the Restorative Care Program
 - d. Occupational Therapist
 - e. Speech-Language Therapist
 - f. Activity Director / Activity Assistant and designated staff who provide assistance and support to participate in the Recreational and Social Programs
 - g. Health Care Attendant / Aide
 - h. Resident Service Aide / Resident Support Personnel
 - i. Dietician (Dietitian time in accordance with the Ministry’s current directives under the Program and Support Services (PSS) envelope)
 - j. Religious and Spiritual Practice related positions (e.g., Chaplain, Pastoral Care)
 - k. Assistant Director of Care / Nurse Manager

- l. Attending Nurse Practitioner
- m. Nurse Practitioner
- n. Clinical Manager
- o. Clinical Nurse Specialist / Nurse Clinician
- p. Director of Care
- q. Infection Control Lead
- r. Physician Assistant
- s. Other applicable PSS and Nursing and Personal Care funded roles / positions designated to help residents improve or maintain their ability to perform activities of daily living.

Note: This list is subject to change, at the sole direction of the Ministry, according to data collected through the mandatory and quarterly LTC Staffing Data Collection (Staffing Survey) and feedback from the sector.

3.0 Funding Methodology and Payment

- 3.1 Funding will be administered in accordance with this Policy and the applicable DFA between the Ministry and the Licensee/Approved Operator.
- 3.2 For the funding period April 1, 2023 to March 31, 2024, funding will continue to be allocated on a per bed, per month basis based on the number of eligible operational beds calculated as of December 2022, as determined by the Ministry, subject to terms and conditions set out in this Policy.

The following types of beds are excluded from this funding:

- The Elder Care Capital Assistance Program (ELDCAP) beds;
- Beds in abeyance; and
- Beds classified as 3rd or above beds in ward rooms that are not occupied as reported by the LTC home licensees as of November 2022.

Note: The two types of beds noted below were ineligible for the RHWB Program funding in 2022-23, however, these beds are now eligible for funding effective April 1, 2023:

- All beds with a Temporary License operated only as “interim beds” as defined in the Regulation that were solely funded by Ontario Health under the respective Accountability Agreement; and
- Convalescent Care beds that were solely funded by Ontario Health.

- 3.3 Funding under this Policy will be provided to eligible LTC home licensees starting April 1, 2023 through twelve fixed monthly installments, paid through the regular monthly payment schedule. As such, the funding will continue to flow through the following distinct protected funding line:

Funding Line	Resident Health and Well-Being Fund
Per Bed, Per Month Allocation	\$7.24 (Applicable for 12 months: April 1, 2023 - March 31, 2024)

- 3.4 Funding will not be otherwise adjusted for occupancy throughout the year or at the time of reconciliation for fiscal year 2023-24.
- 3.5 The Ministry will conduct periodic review of new and/or redeveloped beds as they become operational and adjust funding accordingly.
- 3.6 Funding provided to homes for the April 1, 2023 to March 31, 2024 period must be used for eligible expenditures by March 31, 2024.

4.0 Out-Year Notional Allocation

- 4.1 The chart below depicts the projected out-year allocation. LTC home licensees may use this to inform planning. The notional allocation is subject to applicable further approvals, including, but not limited to, ward bed occupancy, current bed count (excluding beds in abeyance) and scheduled new beds expected to come online and other unforeseen events. The Ministry will communicate the precise RHWB funding amount for 2024-25 at the beginning of the next fiscal year.

RHWB Out-Year Notional Allocation	
	2024-25
Annual Funding	\$6,786,700
Notional Monthly Allocation Range Per Bed, Per Month	\$6.72 - \$7.42

5.0 Eligible Expenses for Resident Health and Well-Being Funding

- 5.1 The RHWB funding will be restricted to expenses that are eligible expenditures under s. 5.2 and are expended for the purpose of hiring and/or retaining RSWs, SSWs and other AHPs to enhance access to social support services, working towards a best practice minimum of 30 minutes of care per resident every four weeks.
- 5.2 RHWB eligible expenditures shall fall into one or more of the following:
 - a. Salaries, wages and benefits, including overtime of RSWs, SSWs and other AHPs hired to provide social support services for residents.
 - b. Salaries and wages to top up hours for existing staff (RSWs, SSWs, other AHPs) to convert part-time to full-time positions to provide social support services for residents.
 - c. Salaries and wages related to the purpose of increasing wages for existing staff (RSWs, SSWs, other AHPs).
 - d. Part-time hours and overtime hours performed by RSWs, SSWs and other AHPs to provide social support services for residents.

- e. Salaries, wages and benefits for RSWs, SSWs and other AHPs recruited from a third-party placement agency or independently contracted to provide social support services for residents.
- f. Orientation and onboarding time for RSWs, SSWs and other AHPs to provide social support services for residents.

5.3 Ineligible expenditures include the following:

- a. Any retroactive expenses related to recruitment cost and salaries for the period prior to April 1, 2023.
- b. Salaries, wages and benefits of LTC home staff who do not provide social support services to residents in their capacity as a RSW, SSW or AHP (see list in s. 2.0) as part of their regular tasks.
- c. Professional fees/government fees, preparation of work permits, housing, flights to and from Canada and health insurance.
- d. Operating and administrative costs related to recruitment of RSWs, SSWs or AHPs hired for this program.
- e. Education and training related benefits, including education allowances, education fund and education leave.
- f. Supplies and equipment.
- g. Administrative supplies and office equipment (e.g., paper, toner, fax, phones, printer, photocopier, etc.).

6.0 Mandatory Reporting and Accountability Requirements

- 6.1 The LTC home licensees shall only use this RHWB funding for eligible expenditures outlined in s. 5.2, for the purposes set out in s. 5.1, and subject to the exclusions in s. 5.3.
- 6.2 The LTC home licensees shall report expenditures pertaining to the “Resident Health and Well-Being Fund” on a separate line in Section I, Part A of the licensee’s Long-Term Care Home Annual Report (Annual Report) for a defined 12-month period, in accordance with the form and manner set out in the *Long-Term Care Home Annual Report Technical Instructions and Guidelines*.
- 6.3 For the 2023 calendar year, LTC homes licensees shall report the “Resident Health and Well-Being Fund” expenditures for the period of April to December 2023 in the 2023 Annual Report. For the 2024 calendar year, LTC homes licensees shall report expenditures for the period of January to March 2024 in the 2024 Annual Report. In the 2024 Reconciliation, the Ministry will match the RHWB funding provided to the LTC home licensees for the period of April 2023 to March 2024 against the April 2023 to March 2024 expenditures reported in the 2023 and 2024 Annual Report.
- 6.4 The LTC home licensees shall create and maintain records, for the period from April 1, 2023 to March 31, 2024, and report to the Ministry on the use of RHWB funds in accordance with the requirements set out in this Policy.
- 6.5 The LTC home licensees shall not redirect unused RHWB funds to any of the level-of-care envelopes. Unused funds shall be returned to the Ministry.

- 6.6 The LTC home licensees shall provide program status updates upon request from the Ministry from time to time, in form and content as directed by the Ministry, including information about the use of funds related to the hiring and/or recruitment of eligible staff for the purpose of working towards the best practice minimum of 30 minutes of care per resident every four weeks.
- 6.7 The LTC home licensees shall comply with the mandatory and quarterly reporting requirements of the LTC Staffing Data Collection as communicated by the Ministry.
- 6.8 The LTC home licensees shall comply with any further reporting instructions provided by the Ministry relating to the format and content of the reports, and/or evaluation of the program.
- 6.9 The LTC home licensees shall comply with the requirements under FLTCA, the Regulation, the DFA, and any other applicable agreements, policies, procedures, and laws.