
REPORT TITLE: Enhancing the Behavioural Supports Ontario Program in the Central West Region

FROM: Nancy Polsinelli, RD HBS Sc MPA, Commissioner of Health Services

RECOMMENDATION

- 1. That an enhanced model and provincial annualized base funding for provision and oversight of Long-Term Care Behavioural Supports Ontario (BSO) mobile and support services, as set out in the report of the Commissioner of Health Services, listed on the November 13, 2025, Regional Council agenda titled “Enhancing the Behavioural Supports Ontario Program in the Central West Region”, be endorsed; and**
- 2. That the 2025 Seniors Services operating budget be amended to include 5.2 new permanent full time equivalent staff and prorated funding of \$377,545, and future budgets include \$450,878 in additional annualized base funding from Ontario Health that, when added to current BSO lead agency funding (Resolution Number 2024-878), provides full FTE funding, with no net impact.**

REPORT HIGHLIGHTS

- Peel Region, as the lead agency for Central West Behavioural Supports Ontario (BSO), plays a leadership role in collaborative health system design, service coordination, and ensuring the effective use of BSO funding.
 - In collaboration with system partners, Peel Region is leading BSO program enhancements that improve resident care, increase service volumes, integrate care pathways, address equity, improve performance metrics, and enhance staff capacity.
 - A review of Central West Long-Term Care (LTC) BSO mobile services revealed that 40 per cent of allocated funding is chronically unspent, resulting in an ineffective program.
 - Peel Region has worked with Ontario Health Central Region (OH Central) and system partners on a funding reallocation plan to build an effective, sustainable service delivery model. OH Central has provided \$450,878 in reallocated annualized base BSO funding to Peel Region to support 5.2 full-time permanent FTE that, when added to current BSO lead agency funding, provides full FTE funding, with no net impact.
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DISCUSSION

1. Background

Behavioural Supports Ontario (BSO) provides behavioural health care services for older adults with, or at risk of, responsive behaviours/personal expressions associated with dementia, complex mental health, substance use and/or other neurological conditions.

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The need for specialized supports is significant. Our rapidly aging population comes with increasing care needs, including those associated with dementia and complex cognitive impairments. The Ministry of LTC estimates that 250,000 Ontarians live with dementia, with prevalence expected to increase to 430,000 by 2038. The Ministry also reports that 70% of LTC residents are living with dementia, with 75 per cent of them experiencing behavioural and psychological symptoms. It has become increasingly challenging for current resources to meet the needs of individuals and their care providers.

On November 7, 2024, Regional Council endorsed Peel Region as the new BSO Lead Agency for the Central West region (Report Title: Provincial Funding and Transition into the Behavioural Supports Ontario Lead Agency Role in the Central West Region). As lead agency, Peel Region plays a pivotal role in the design and delivery of coordinated behavioural supports across the health sector. Over the past year, Peel Region has worked with system partners to enhance the BSO program.

This report focuses on the positive quality of care impact for people in need of specialized behavioural support that will result from three program enhancements: Improved LTC BSO mobile services, establishment of an education and training strategy, and better-designed performance measurement.

2. Central West LTC BSO Mobile Services: Program Review

The BSO LTC mobile team brings advanced expertise and experience to support the increasing complexity of the resident population throughout Central West. The team is often referred to at an escalation point when strategies have been exhausted, and additional support is needed to mitigate risks and stabilize situations. The team works with existing LTC home BSO staff and interdisciplinary team to:

- Improve resident quality of life using non-pharmacological strategies and meaningful engagement activities.
- Reduce resident risks, 1:1 staffing needs, and emergency department transfers.
- Build staff capacity through modelling, mentoring and training.

a) Funding and Program Delivery Analysis

The Central West BSO program receives 1.4M for seventeen mobile positions spread across ten health service providers (HSPs), including Peel Manor. A review found that 40% of allocated funds are currently unspent due to:

- Insufficient funding per position resulting in recruitment and retention challenges.
- Implementation barriers related to labor relation issues or corporate direction.
- Disproportionate utilization of resources by funded HSPs for internal supports

These challenges have resulted in program instability, service inequity, and an overall inability to establish a coordinated approach to the delivery of high-quality timely care.

b) Building an Effective LTC BSO Mobile Team

The redesigned service delivery model demonstrates our role in working collaboratively with system partners to co-design and implement seamless and effective models of care. The plan will:

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- Reallocate funding to HSPs who are committed to ongoing collaboration, reducing the number of funded HSPs from ten to three. Peel Region, as one of the three HSPs, has received a funding letter from OH Central for \$450,879 to expand the mobile team and support the lead agency work (See Appendix I). A component of the reallocated funds will address funding shortfalls for specific positions.
- Build upon existing resources approved by Regional Council (most recent report: Provincial Funding for Additional Behavioural Supports Ontario Long Term Care Mobile Resources for the Central West Region, January 23, 2025) to create an interdisciplinary, integrated mobile team model. See Appendix II
- Allow Peel Region to work with our system partners to realize the following Quintuple Aim outcomes:

Quintuple Aim	Expected Outcomes of BSO LTC Mobile Service Delivery Model
Resident experience	<ul style="list-style-type: none"> • Improved access to care through a simplified referral pathway • Improved quality of care and enhanced staff/caregiver capacity
Better outcomes	<ul style="list-style-type: none"> • Anticipated service volume increase by two times (130 referrals per year to approximately 260) • Decrease in 1:1 staffing needs, emergency department visits, and hospital admissions through enhanced care plans • Improved health sector partnerships and engagement
Fiscal responsibility	<ul style="list-style-type: none"> • Judicious use of public investments • Stabilization of health human resources
Employee experience	<ul style="list-style-type: none"> • A multidisciplinary, collaborative approach where staff leverage and benefit from the unique clinical expertise of others
Health equity	<ul style="list-style-type: none"> • Accessible and equitable support available across the region

3. Building BSO Provider Capacity

OH Central provides each BSO region with funding for education, training and therapeutic supplies. In Central West, this funding was spread across three HSPs who were tasked with spending the funding appropriately and equitably. Peel Region identified challenges with this funding approach including:

- Lack of a systematic and collaborative planning framework.
- Insufficient lead agency oversight and awareness of funding utilization and tracking.
- Inefficient coordination and inequitable funding allocation.

As the lead agency, Peel Region is responsible for actively engaging partners in the allocation of BSO investments, ensuring staff complete core education programs, and planning regular education events that unite BSO teams across sectors. To this end, we worked with OH Central, in consultation with the three involved HSPs, to reallocate the funding to Peel Region effective April 1, 2025. This change ensures centralized and efficient oversight, collaborative and strategic planning, and equitable funding distribution.

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4. Revision of Performance Metrics and Data Collection Tools

A review of the Central West BSO metrics found deficiencies in data standardization, literacy, reliability and analytic capability. As the lead agency, Peel Region undertook an improvement initiative where:

- Metrics were revised to align to provincial BSO data requirements.
- Automated data collection tools were developed that improved efficiency by simplifying data collection and enhancing analytical capabilities.
- Data literacy and collection was improved through provider training and resources.

These performance enhancements allow for more robust, reliable data to measure program service delivery and outcomes and inform provincial and regional direction and initiatives.

RISK CONSIDERATIONS

As the funding from Ontario Health is annualized base funding which fully covers all staffing costs, there is minimal risks associated with accepting this funding through an amendment to the Service Accountability Agreement (LSAA) between The Regional Municipality of Peel and Ontario Health. As with any base funding provided by the Province through Ontario Health, the Region could be liable for employment cessation costs should Ontario Health change the funding formula without compensating the Region for such costs. In addition, there is a risk in future years that annual inflation of the staffing costs may not be fully covered if funding is not increased on an annual basis to account for inflation. Peel Region has maintained a positive and productive relationship with Ontario Health since the BSO Program's inception in 2012.

FINANCIAL IMPLICATIONS

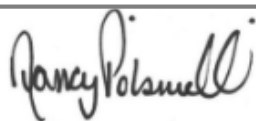
Ontario Health has provided Peel Region with \$377,545 in prorated funding for 2025 and \$450,878 in additional annualized base funding starting in 2026 to support BSO program delivery in the Central West region. This funding, along with current BSO lead agency funding (Resolution Number 2024-878), will cover the required program expenditures, including salary and benefits costs, for 5.2 new permanent full-time equivalent (FTE) when added to the 2025 budget. See Appendix III for position specifics. Peel will provide in-kind clinical, planning and oversight supports in alignment with existing health system responsibilities. The 2025 Seniors Services budget, and 2026 proposed operating budget, will be revised to include the permanent FTE, program costs and related funding, with no net tax levy impact.

APPENDICES

Appendix I – Funding Letter

Appendix II – Central West BSO LTC Mobile Team Model

Appendix III – Peel Region FTE and Position Details



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