



ECKLER

Ontario Community Health Compensation Market Salary Review

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Executive Summary

On behalf of Eckler, we are pleased to provide the results of the Ontario Community Health Compensation Market study. Eckler was engaged by 10 provincial associations who jointly collaborated on this compensation study.



The purpose of the study was to conduct a market review of benchmark jobs that are universal across several organizations. The study is similar to previous studies undertaken as individual associations, or by smaller collaborations but is expanded to include significantly more participants and many more jobs and information on human resources (HR) trends.

With Eckler facilitating the process, the associations provided representative members to form a Compensation Working Group. This group met regularly and provided information for consolidation to identify the 79 benchmark roles for the market survey, in addition to providing feedback to develop the survey questionnaire. The questionnaire focuses on hot topics such as labour market challenges and the impact of COVID-19 on organizations, in addition to salary trends/forecasts and typical benefit provisions.

The survey provides a broad spectrum of job data to assist each association, and their membership, determine their relative level of compensation competitiveness in addition to providing the context that the questionnaire provides.

The survey was launched in March 2023 and 362 organizations provided completed survey materials to inform this report. The report is divided into two parts:

Part A – Study Report (this document)

- This report contains all the information collected from the market surveys including profile of participants (**Appendix A**) and responses to inquiries such as HR trends, salary movement and talent management challenges. Additional research and context, such as information from various collective bargaining agreements and HR trend surveys is also included.
- In addition, a summary of methodology, definitions and statistical references used for reporting are provided.
- A provincial compensation grid (further described below) is provided that considers the available compensation information and relativity between roles, as well as provides guidance for market exceptions and suggested compensation administration. Further, implementation considerations for the provincial grid are provided.

Part B – Benchmark Job Tables (provided as a separate file)

- To better enable compensation analysis, we have provided all job data in a separate MS Excel based file.
- This file enables the report users to select which benchmark jobs they would like to review and customize (where data are sufficient in sample size) their market.

For more than a decade, several associations have collaborated to harmonize compensation and adopted a provincial grid to guide decision making for compensation. Where possible, organizations have adopted the compensation grid and are then inline with other organizations in the association. The design principals of the grid consider a rate for groups of jobs of similar scope (i.e., a band of jobs of similar size), and maintains compensation differentials between levels which avoids compression and provides pay progression through an organization.

The provincial grid was last updated in 2017 following a market study conducted for Alliance for Healthier Communities, Association of Family Health Teams of Ontario, and the Nurse Practitioners Association of Ontario. Using the market median (50th percentile) results of the survey for the benchmark jobs as well as other compensation data from published sources such as additional survey data, collective bargaining agreement rates, and publicly disclosed compensation data, Eckler has calculated an update to the existing provincial compensation grid. Some roles have previously been identified as market exceptions where circumstances of the labour market indicate the need to temporarily adopt a different rate to enable recruitment/retention of talent. A refreshed analysis on market exceptions was completed and new exception jobs have been identified and revised rates have been calculated.

To enable broader use of the provincial grid, the compensation working group identified roles utilized in the survey were also slotted into the grid. While the grid does enable broad guidance in a “one grid fits most” approach, adoption for leadership roles requires additional consideration for organization size as benchmark roles in Band 9 (supervisory / leadership) and above begin to be impacted more by organization size / job design. Similarly, many organizations may have hybrid jobs or roles that are bigger/smaller than the benchmark roles but similarly titled and may need to slot roles differently based upon their organizational design.

Generally, the current compensation practices of the association membership are below the grid rates. To adopt the grid universally will take time to implement and requires additional compensation funding.

Terms and Definitions

Statistics

Information surveyed is provided in aggregated form only to ensure that (1) data for individual organizations or incumbents is not disclosed and (2) to ensure a statistically relevant sample. Eckler requires a minimum number of observations to publish compensation statistics as follows:

Median: Also referred to as the 50th percentile, if all observations were sorted and listed from highest/largest to lowest/smallest, 50% of the observations would fall above this value and 50% would fall below. A minimum of 4 data observations are required to report median.

Average: The arithmetic mean of all values, calculated by adding up all the values and dividing by the number of observations. A minimum of 3 data observations are required to report average.

Other percentiles: Provide information about the distribution of the data and help determine where your organization falls amongst the market data.

- **90th percentile:** If all observations were sorted and listed from highest/largest to lowest/smallest, 10% of the observations would fall above the 90th percentile and 90% would fall below. A minimum of 12 data observations are required to report P90.
- **75th percentile:** If all observations were sorted and listed from highest/largest to lowest/smallest, 25% of the observations would fall above this value and 75% would fall below. A minimum of 8 data observations are required to report P75.
- **25th percentile:** If all observations were sorted and listed from highest/largest to lowest/smallest, 75% of the observations would fall above this value and 25% would fall below. A minimum of 8 data observations are required to report P25.
- **10th percentile:** If all observations were sorted and listed from highest/largest to lowest/smallest, 90% of the observations would fall above this value and 10% would fall below. A minimum of 12 data observations are required to report P10.

Compensation Elements

Actual compensation data is collected to capture the real compensation data in the market; all participants were asked to provide data as of March 1, 2023.

Actual Base Salary: This is the annualized amount paid for work performed on a regular, ongoing basis that the incumbent received. It does NOT include variable bonus or incentive payments, sales commissions, shift premiums, or overtime payments.

Actual Incentive or Bonus Paid: This is any variable, incentive, bonus, or lump sum payment received in addition to base salary that the incumbent received.

Design compensation is collected to capture the overall perspective of the market with respect to intended compensation for fully qualified, solidly performing individuals as well as a range around this which includes the lowest paid and highest paid values a position can have.

Salary Range Minimum: The lowest salary/rate that the organization is prepared to pay for an incumbent in the position. May be the starting salary for inexperienced/non-qualified hire or first step where step rates are utilized.

Job Rate / Control Point: Typically, the midpoint of the salary range, intended to reflect the salary the organization is prepared to pay for sustained competent performance by a fully trained / qualified incumbent - a solid performer. This may be the job rate / top step in many systems.

Salary Range Maximum: The highest point in the salary range (or step progression). Note - this may be the same as "job rate" for many organizations that do not have room for "high performers" built into a salary structure.

Short Term Incentive Target: Target bonus is the level of award (either a % of salary or a fixed dollar amount) that an employee in this position would expect to receive if all organization/corporate, team and individual performance goals (and/or quality standards) are "met". Short term incentives plans may be "discretionary" where there are no target bonus rates and pay outs are not guaranteed and are at the discretion of Executives / the Board and additional fund availability.

Aggregated statistics are compiled by summing compensation elements.

Total Cash Actual: The sum of Actual Base Salary and Actual Incentive. Where a role is not provided with an incentive, Total Cash Actual is equal to Actual Base Salary.

Total Cash at Target: The sum of Actual Salary and Short-Term Incentive Target.

Total Cash Design: The sum of Job Rate/ Control Point and Short-Term Incentive Target. Where a role is not provided with an incentive, Total Cash Design is equal to Job Rate / Control Point.

General HR Terms

Agencies/outsourcing: Organizations that match employers to employees by recruiting employees for businesses that are seeking to fill certain positions.

Benefits: Various types of non-wage compensation and perks provided to employees in addition to their normal wages or salaries. May include health insurance, life insurance, retirement plans, and paid time off.

Market exceptions: Roles that are paid a premium in the market compared to their internal value as determined by their evaluation and salary level/band. As a result, organizations need to implement different salary ranges for these roles in order to attract and retain talent.

On-call pay: Compensation received for being available to work on short notice.

Overtime pay: Compensation received for working beyond standard hours of work.

Salary differentials: A premium paid to employees that meet certain criteria such as having specific skills/credentials, working in unfavourable environments, working in specific locations, etc.

Salary levels/bands: A structure used to differentiate salary ranges in an organization, where each salary level/band groups jobs of similar size/scope/complexity.

Time in lieu: Time off from work granted for working beyond standard hours of work.

Turnover: The act of replacing an employee with a new employee. May be due to termination, resignation, retirement, etc.

Vacancy: An unfilled position within an organization for which the employer is looking to hire.

Wage Grid: A schedule of salary rates for levels/bands, where each level/band has a minimum rate and maximum rate.

Other Terms

Francophone: Speaking French as the main or first language.

High-risk sites: Site where the physical setting, population complexity, environment, and/or population needs present challenges.

Northern sites: Typically considered anything north of the 60th parallel.

Acronyms

CBA: Collective bargaining agreement – A legal contract between an employer and a union representing the employees as a result of a negotiation process between the parties regarding topics such as wages, hours, and terms and conditions of employment.

EAP: Employee Assistance Program – Typically offers free and confidential support programs for employees including assessments, short-term counseling, referrals, follow-up services, etc.

ERI: Economic Research Institute – A market data source used for determining the wage recommendations.

FLSA: French Language Services Act – Legislation that gives a person the right to communicate in French with, and to receive available services in French from, any head or central office of a government agency or institution of the Legislature and has the same right in respect of any other office of such agency or institution that is located in or serves a designated area.

FTE: Full-time equivalent – Measures how many total full-time employees or part-time employees add up to full-time employees. For example, if an organization considers 40 hours per week as full-time and there are four employees who work 10 hours each per week, the hours for those four employees add up together to make 1.0 FTE.

MOH: Ministry of Health and Long-Term Care – A ministry of the Government of Ontario that mandated to provide the right care in the right place, deliver faster access to care, and hire more healthcare workers. The MOH wage rates were established as base wage rates provided to interdisciplinary providers in primary care teams via government funding.

OHA: Ontario Hospital Association – A market data source used for determining the wage recommendations.

Survey Process

Custom Survey Development

The custom survey was developed over a period of several weeks in collaboration with the compensation working group. A survey questionnaire was developed considering what information the membership of the working group would find useful. The survey questionnaire collects data on:

- Participant Profile – to provide organization information, including size (budget, FTE count) and type, as well as location, to better contextualize the responses.
- HR Trends – what strategies have been adopted in the past few years to combat labour shortages or other talent challenges, as well as the impact of compensation restraints in addition to operating in a pandemic environment (COVID-19).
- Salary Projections – the most current and next expected compensation adjustments.
- Talent Challenges – what barriers organizations face; turnover statistics and what strategies are being adopted to improve attraction and retention and engage employees.
- Benefits/Pension – what is commonly provided, and at what cost. In addition to benefits and pensions prevalence information, professional development and training budget information was requested.

Each association also identified jobs to include in the survey and provided job description documentation for each benchmark job, generally using previous survey/benchmark definitions. Job specifications were consolidated by Eckler to create the benchmark job definitions which include:

- Typical title & common alternative titles
- Representative duties/responsibilities of the role
- Typical qualifications/experiential requirements
- Any specific modifiers/considerations for the role, such as how to differentiate between levels of roles, and how to use the quality of match for specific licenses/designations

The benchmark jobs are grouped as follows. The benchmark job definitions are also provided in **Appendix B**.

Table 1.1 – Job Groupings

Job Grouping	Number of Benchmark Jobs (N=79)	Group Definition
Leadership / Executive Manager	4	Top jobs in the organization and their direct reports.
Corporate Services	3	Managerial roles within an organization; but not at the executive/leadership level.
Indigenous Roles	15	Roles that are common for provision of corporate services and found in many organizations – e.g., administrative support, IT, HR.
Regulated Profession	14	Roles which are focused on providing healthcare through an Indigenous lens.
Clinical/Service/Program Delivery	17	Roles that are regulated by a professional college or association.
Clinical/Service/Program Support	15	Roles that provide direct delivery of clinical/service/programs but are not regulated professions.
Clinical/Service/Program Support	11	Roles that provide support for the delivery of clinical/service/programs.

Invited Participants

The survey package, inclusive of the questionnaire portion and benchmark job data sheet, was sent to all members of each provincial association to participate in the survey and contribute to a robust data set.

In addition, the survey was also sent to organizations which are not members of the provincial associations to provide additional data and context. This includes public health units, children’s treatment centres, municipal governments, school boards, midwifery groups, and other organizations providing community health services that are not part of a provincial association. In addition, for-profit organizations that provide related services and are competitors for similarly skilled staff were also invited.

In addition to invited survey participants, Eckler aggregated job data with researched national data and other survey information. Additional details on supplementary data are in **Appendix C**.

HR Trends

Talent Challenges

Generally, the labour market is considered to be “tight”; Statistics Canada data shows unemployment has tracked below 5.5% for the past 10 months, indicating that those who opt to participate in the workforce are quickly finding employment.

Anecdotally, over the last year, many of our clients have indicated that it has become harder to recruit employees, candidates are often fielding multiple offers, and retention is a more difficult challenge with overall turnover increasing. For some hot skill jobs employers have experienced multiple incumbent turnover within the span of a year. 342 organizations in the survey sample provided their turnover rate for the past 12 months, and the average turnover is 17% with median turnover indicated at 15%.

Organizations were asked what positions, or skills, were the most difficult to recruit for. Organizations are having difficulty recruiting Personal Support Workers, Psychotherapists, Mental Health Counsellors, Social Workers, Addiction Workers, Housing Support Workers, Child and Youth Workers, Occupational Therapists, finance roles, and administrative roles in addition to all levels of nursing roles. These roles are particularly difficult to recruit when they are part-time positions. Skills that are difficult to find include required certifications, candidates willing to do shift work, language requirements, and leadership skills.

Augmenting the talent challenge for many is the exodus of skilled talent in the workplace. 339 organizations in the survey sample indicated that the percentage of staff that would be eligible, or are eligible, for retirement within 24 months is 4% at median and 7% on average.

Organizations indicated the biggest challenges for talent management, providing responses to each applicable category. The most common challenges cited are compensation, lack of local professional talent, and lack of growth opportunities / career development. Specific to some roles, organizations are also not able to provide long term commitment due to program funding and renew contracts on a yearly basis; this uncertainty provides a retention and recruitment challenge. Where organizations responded “Other”, additional challenges specified included cost of living, lack of housing, and lack of public transit where the sites are located.

Table 2.1 – Talent Management Challenges

Challenge	Yes % (N = 341)
Compensation (higher salaries elsewhere)	93.8%
Lack of professional talent locally	61.9%
Lack of growth opportunity / career development (either perceived or real)	52.8%
Requirement to be in person / not remote or hybrid role	40.5%
Location (rurality)	38.4%
Utilized as a ‘starter’ organization – incumbents typically leave in < 3 years	37.0%
Sites located in population that is considered high risk/high complexity is a deterrent	24.3%
Lack of pension / retirement provisions	22.6%
Other	18.2%
Location (northern)	14.7%
Francophone requirement	13.2%
Sites located in environmental high-risk area is a barrier / deterrent	11.1%
Location (high risk)	9.7%

Of the organizations that identified as francophone designated under the French Language Services Act, 52% indicated that the francophone requirement poses a challenge for talent management. Of the organizations that have northern sites, 83% indicated that the northern location poses a challenge for talent management. Of the organizations that are in high-risk locations, 23% indicated that the high-risk location poses a challenge for talent management.

Agency / Outsourcing

Roles that have commonly been filled by external agency staff include Personal Support Workers and Nurses, though some organizations have utilized agency staff for reception roles and other administrative positions.

The median differential between standard rates of pay and external agency rates of pay ranges is 30% and the average is 41%.

Sixty-nine (69) organizations report that on average, 14% of staff are external agency staff to account for labour shortfall.

Additional challenges with utilizing an external agency workforce include agencies prioritizing hospitals over other facilities, tension between regular staff and agency staff due to perceived uneven distribution of workload and discrepancy in pay, lack of quality staff coming from agencies, coordinating with the agencies for training, and an increase in incident reports.

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Wage Recommendations

History

The 10 associations that collaborated on this survey have separately previously conducted similar market studies to assess the competitiveness of the salaries provided by their members.

The Primary Care associations have worked with consulting firms several times over the last 20+ years to conduct market studies on healthcare jobs in Ontario, in attempt to bring the salary structure into closer alignment with current market practices. The 2009 study was run with the Alliance for Healthier Communities to create a common salary structure for primary care organizations. A study was completed again in 2012/2013, this time in partnership with the Alliance for Healthier Communities, the Association of Family Health Teams of Ontario, and the Nurse Practitioners' Association of Ontario, to update the common salary structure, and most recently in 2017/2018. See **Appendix B** for a summary of the recommended rates for the last three studies.

In 2017, Addictions & Mental Health Ontario, Canadian Mental Health Association Ontario, Children's Mental Health Ontario, and Family Service Ontario also collaborated on a survey of compensation practices in Ontario community mental health and addictions associations. See **Appendix B** for a summary of the median of the salary range maximum for each of the roles in that survey.

2023 Recommendation Development

The 2023 market study leveraged the 13 pay levels/bands that were originally established for the Primary Care sector to enable movement towards one common wage grid. The Primary Care benchmark jobs that were previously evaluated to determine which salary level/band they belong in based upon job content (i.e., skill, effort, responsibility, and typical working conditions) were assumed to still be placed in the appropriate salary level/band. The 2023 market survey expanded upon the Primary Care benchmark jobs, to include roles from home and community care, long-term care, and mental health and addictions. These additional roles were slotted into the 13 pre-existing primary care pay bands, based on job description, skillset, and education. The historically evaluated roles and the newly slotted roles can be found in **Appendix C**. Organizations which have roles that are not surveyed jobs or are hybrid jobs or modified versions of the benchmark jobs should carefully assess the role and select the salary level/band of best fit based upon similar job scope.

Research was conducted to shed light on compensation rates among other organizations, who generally compete for talent that work in community healthcare. This research included collective bargaining agreements in the healthcare and education sectors (see list in **Appendix A**), Ontario Hospital Association (OHA) survey data, and Economic Research Institute (ERI) survey data. The data aggregated from collective bargaining agreements, OHA, and ERI were used to develop the recommended wage rates.

For the Ontario Hospital Association data, the "less than \$25M" operating budget data was primarily used, where there was sufficient data which comprises smaller community hospitals and excludes large multi site hospitals and academic hospitals. This data segment is most comparable to the participants of the 2023 custom survey. The "all Ontario" OHA data was also considered when developing the recommendations. For most of the non-management benchmark roles, the difference in the two OHA data cuts is insignificant and any exceptions are noted and discussed in this report. Compensation for management and leadership roles varies more based on organizations size and is discussed in further detail in the next section. Overall,

the “less than \$25M” operating budget data ranges from 29% lower than the custom survey results to 74% higher, and the “all Ontario” data ranges from 13% lower to 97% higher.

The recommendations presented are the maximum salaries, or job rate, for each band. The recommendations represent reasonable and consistent alignment with the current market and consider all benchmark jobs within the salary level/band. There are some roles that are considered to be market exceptions, and the research conducted for this study indicated that there are now additional roles that have emerged with notable market premiums. Additional detail on the determination of the exceptions is further addressed in the “Market Exceptions & Bands Analysis Details” section.

Each salary level/band in the structure has a range of pay opportunity with a minimum salary and a maximum salary. The maximum salary for each band is often referred to as the job rate. The job rate represents the salary that an organization is prepared to pay a fully trained incumbent with fully competent performance. Salary maximums are typically developed to align with the target statistic of the market of comparison in order to offer a selected salary level in the market. The target statistic for the community health roles is the market median – the point at which half of the market would pay more than, and half the market would pay less than.

When determining the updated grid recommendations, a key focus was on salary level/band 8, which is where most of the regulated profession roles fall. From there, we moved up and down the salary levels/bands, considering the market data and using the external research to inform the recommendations. In addition to survey data, effort was made to maintain the previously established progression of pay between the salary levels/bands as closely as possible. Caution is recommended for salary levels/bands 11 and above (typically executive) where the compensation data should be viewed carefully and may need to be adjusted for job scope / organization size and complexity.

2023 Wage Rate Recommendations

The table below shows a 6-step wage grid to accommodate for tenure and performance. The minimum wage is set at 80% of the maximum and is intended to represent the rate for a new hire entering that salary level/band. Each organization may customize the number of steps and minimum rate they wish to administer for their staff.

Table 3.1 – Recommended Wage Grid

Provincial Salary Level/ Band	Benchmark Jobs	Minimum	Step 2	Step 3	Step 4	Step 5	Maximum
13	Executive Director / CEO / NP Lead	\$135,800	\$142,600	\$149,400	\$156,200	\$163,000	\$169,800
12	<i>No benchmark jobs in Band 12</i>	\$117,100	\$123,000	\$128,800	\$134,700	\$140,500	\$146,400
11	Director – Corporate, Operations Director Director – Clinical / Programming / Mental Health / Service / Care Director / Nursing / Personal Care / Medical Care Administrator (LTC)	\$101,800	\$106,900	\$112,000	\$117,100	\$122,200	\$127,300
10	Manager – Corporate / Corporate Services Manager – Clinical / Program Traditional Healer	\$88,600	\$93,000	\$97,400	\$101,900	\$106,300	\$110,700
10*	Nurse Practitioner (NP) Psychologist	\$114,200	\$119,900	\$125,600	\$131,300	\$137,000	\$142,700
9	Supervisor - Clinical / Programming / Mental Health / Service Director Community Health Planner Quality/Decision Improvement Specialist/Lead	\$77,000	\$80,900	\$84,700	\$88,600	\$92,400	\$96,300
9*	Pharmacist	\$88,800	\$93,200	\$97,700	\$102,100	\$106,600	\$111,000

Provincial Salary Level/ Band	Benchmark Jobs	Minimum	Step 2	Step 3	Step 4	Step 5	Maximum
8	Registered Dietitian Occupational Therapist Speech Pathologist Respiratory Therapist Chiropodist Health Promoter Data Management Coordinator Systems Administrator Fundraising Manager Diversity, Equity & Inclusion Specialist HR Generalist (Strategic Business Partner) Case Manager Therapist (Therapist, MSW) Kinesiologist Chiropractor	\$68,200	\$71,600	\$75,000	\$78,400	\$81,800	\$85,200
8*	Registered Nurse (RN) Social Worker (MSW) Physiotherapist Physician Assistant	\$77,100	\$81,000	\$84,800	\$88,700	\$92,500	\$96,400
7	IT Technician HR Generalist (Generalist) Site Service/Program Coordinator	\$60,900	\$63,900	\$67,000	\$70,000	\$73,100	\$76,100

Provincial Salary Level/ Band	Benchmark Jobs	Minimum	Step 2	Step 3	Step 4	Step 5	Maximum
6	Executive Assistant Office Administrator Counsellor Community Health Worker Volunteer Coordinator/ Administrator Foot Care Specialist	\$54,900	\$57,600	\$60,400	\$63,100	\$65,900	\$68,600
5	Administrative Assistant Bookkeeper Registered Practical Nurse (RPN) HR Generalist (Transactional Focus) Care Navigators Community Ambassadors Recreation Therapist Child and Youth Worker (Residential / Day Treatment / Community) Addiction Service Worker Housing Support Worker	\$49,400	\$51,900	\$54,400	\$56,800	\$59,300	\$61,800

Provincial Salary Level/ Band	Benchmark Jobs	Minimum	Step 2	Step 3	Step 4	Step 5	Maximum
4	Personal Support Worker Recreationist / Program Activationist Attendant Care Court Support Worker Intake Coordinator Administrative Assistant to Manager/Director Level	\$44,600	\$46,800	\$49,000	\$51,300	\$53,500	\$55,700
3	Clinical Assistant Medical Secretary Overnight Attendant/Worker Peer Support Worker	\$40,200	\$42,200	\$44,200	\$46,200	\$48,200	\$50,200
2	Receptionist Food Services Worker / Cook Driver	\$36,200	\$38,000	\$39,800	\$41,600	\$43,400	\$45,200
1	Maintenance Worker Housekeeper	\$32,900	\$34,500	\$36,200	\$37,800	\$39,500	\$41,100

*Denotes a market exception salary level/band.

The below table shows the 2023 recommended rates compared to the salary range maximums provided in the survey by the members of the 10 associations. The competitive recommended rates are on average 12.1% higher than the current salary range maximum from the survey results. The table also shows the current Ministry of Health (MOH) rates for interdisciplinary providers compared to the 2023 recommended rates. The MOH rates were established as base wage rates provided to interdisciplinary providers in Primary Care teams via government funding. Because these rates were established in the Primary Care sector, not all jobs surveyed have MOH rates.

Table 3.2 – Recommendation Comparisons

Provincial Salary Level/ Band	Benchmark Job Title	2023 Recommended Maximum Rate	2023 Survey Salary Maximum	2023 Recommended Rate vs. Survey Maximum	MOH Rate	2023 Recommended Rate vs. MOH Rate
13	Executive Director / CEO / NP Lead	\$169,800	\$130,000	30.6%	\$106,852	58.9%

Provincial Salary Level/ Band	Benchmark Job Title	2023 Recommended Maximum Rate	2023 Survey Salary Maximum	2023 Recommended Rate vs. Survey Maximum	MOH Rate	2023 Recommended Rate vs. MOH Rate	
11	Director – Corporate, Operations Director	\$127,300	\$117,600	8.2%	\$92,472	37.7%	
	Director – Clinical / Programming / Mental Health / Service / Care Director / Nursing / Personal Care / Medical Care	\$127,300	\$113,500	12.2%	\$92,472	37.7%	
	Administrator (LTC)	\$127,300	\$127,300	0.0%			
10	Manager – Corporate / Corporate Services	\$110,700	\$92,900	19.2%	\$80,238	38.0%	
	Manager - Clinical/Program Traditional Healer	\$110,700	\$88,300	25.4%	\$80,238	38.0%	
	Nurse Practitioner (NP)*	\$142,700	\$122,200	16.8%	\$122,178	16.8%	
	Psychologist*	\$142,700	\$123,600	15.5%	\$122,178	16.8%	
	Supervisor - Clinical / Programming / Mental Health / Service Director	\$96,300	\$76,800	25.4%	\$81,233	18.5%	
9	Community Health Planner	\$96,300	\$74,100	30.0%	\$81,233	18.5%	
	Quality/Decision Improvement Specialist/Lead	\$96,300	\$80,100	20.2%	\$80,076	20.3%	
	Pharmacist*	\$111,000	\$97,300	14.1%	\$97,292	14.1%	
	Registered Dietitian	\$85,200	\$74,900	13.8%	\$74,148	14.9%	
8	Occupational Therapist	\$85,200	\$74,800	13.9%	\$74,148	14.9%	
	Speech Pathologist	\$85,200	\$80,000	6.5%	\$74,148	14.9%	
	Respiratory Therapist	\$85,200	\$75,900	12.3%	\$74,148	14.9%	
	Chiropractist	\$85,200	\$76,100	12.0%	\$74,148	14.9%	
	Health Promoter	\$85,200	\$74,100	15.0%	\$74,148	14.9%	
	Data Management Coordinator	\$85,200	\$73,300	16.2%	\$74,148	14.9%	
	Systems Administrator	\$85,200	\$72,200	18.0%			
	Fundraising Manager	\$85,200	\$81,700	4.3%			
	Diversity, Equity & Inclusion Specialist	\$85,200	\$105,000	-18.9%			
	Human Resources Generalist (Strategic Business Partner)	\$85,200	\$80,100	6.4%			
	Case Manager	\$85,200	\$60,000	42.0%	\$74,148	14.9%	
	Therapist (Therapist, MSW)	\$85,200	\$74,100	15.0%			
	Kinesiologist	\$85,200	\$74,100	15.0%	\$74,148	14.9%	
	Chiropractor	\$85,200	\$80,200	6.2%	\$83,742	1.7%	
	Registered Nurse (RN)*	\$96,400	\$76,700	25.7%	\$74,148	30.0%	
	Social worker (MSW)*	\$96,400	\$74,100	30.1%	\$74,148	30.0%	
	Physiotherapist*	\$96,400	\$80,200	20.2%	\$80,175	20.2%	
	Physician Assistant*	\$96,400	\$84,500	14.1%	\$80,175	20.2%	
	7	IT Technician	\$76,100	\$65,500	16.2%	\$66,184	15.0%
		Human Resources Generalist (Generalist)	\$76,100	\$70,800	7.5%		
Site Service/Program Coordinator		\$76,100	\$58,000	31.2%	\$74,148	2.6%	
6	Executive Assistant	\$68,600	\$63,100	8.7%	\$58,656	17.0%	

Provincial Salary Level/ Band	Benchmark Job Title	2023 Recommended Maximum Rate	2023 Survey Salary Maximum	2023 Recommended Rate vs. Survey Maximum	MOH Rate	2023 Recommended Rate vs. MOH Rate
	Office Administrator	\$68,600	\$58,700	16.9%	\$58,656	17.0%
	Counsellor	\$68,600	\$59,500	15.3%	\$59,612	15.1%
	Community Health Worker	\$68,600	\$59,600	15.1%	\$59,612	15.1%
	Volunteer Coordinator/Administrator	\$68,600	\$57,900	18.5%	\$58,656	17.0%
	Foot Care Specialist (not a Chiropractist)	\$68,600	\$56,900	20.6%		
5	Administrative Assistant	\$61,800	\$51,800	19.3%	\$52,568	17.6%
	Bookkeeper	\$61,800	\$58,500	5.6%	\$52,568	17.6%
	Registered Practical Nurse (RPN)	\$61,800	\$57,100	8.2%	\$53,159	16.3%
	Human Resources Generalist (Transactional Focus)	\$61,800	\$58,700	5.3%		
	Care Navigators	\$61,800	\$56,000	10.4%		
	Community Ambassadors	\$61,800	\$57,900	6.7%		
	Recreation Therapist	\$61,800	\$56,400	9.6%		
	Child and Youth Worker (Residential / Day Treatment / Community)	\$61,800	\$55,000	12.4%	\$59,612	3.7%
	Addiction Service Worker	\$61,800	\$63,100	-2.1%		
	Housing Support Worker	\$61,800	\$57,800	6.9%		
4	Personal Support Worker	\$55,700	\$46,800	19.0%		
	Recreationist / Program Activationist	\$55,700	\$49,000	13.7%		
	Attendant Care	\$55,700	\$49,900	11.6%		
	Court Support Worker	\$55,700	\$62,800	-11.3%		
	Intake Coordinator	\$55,700	\$57,100	-2.5%		
	Administrative Assistant to Manager/Director Level	\$55,700	\$53,100	4.9%	\$52,568	6.0%
3	Clinical Assistant	\$50,200	\$48,800	2.9%	\$42,519	18.1%
	Medical Secretary	\$50,200	\$46,000	9.1%	\$42,519	18.1%
	Overnight Attendant/Worker	\$50,200	\$45,300	10.8%		
	Peer Support Worker	\$50,200	\$48,900	2.7%		
2	Receptionist	\$45,200	\$42,900	5.4%	\$42,519	6.3%
	Food Services Worker / Cook	\$45,200	\$45,100	0.2%		
	Driver	\$45,200	\$40,000	13.0%		
1	Maintenance Worker	\$41,100	\$49,300	-16.6%	\$36,889	11.4%
	Housekeeper	\$41,100	\$42,700	-3.7%		

*Denotes a role that has been identified as a market exception.

For organizations that are not planning to implement the recommended provincial structure, the below table includes comparables from large unions, MOH rates, and survey salary levels for some non-management roles. Where available, for each of the benchmark roles in the survey, the table shows the median salary range maximum from the custom survey, as well as external data researched from collective bargaining agreements from OPSEU, COPE, Unifor, CLAC, ONA, CAPA, and AMAPCEO. The MOH rates are also shown with the percent difference between the survey and external data rates, and the current MOH rates. Additional data regarding quality of match and other market percentiles are provided in the job tables separate report.

Table 3.3 – Survey and External Data

Benchmark Job Title	2023 Survey Maximum Salary	External Data	MOH Rates	Percent Differences from MOH to Survey and External Rates
Addiction Service Worker	\$63,100			
Administrative Assistant	\$51,800	COPE: \$51,324	\$52,568	Survey: -1.46% COPE: -2.37%
Administrative Assistant to Manager/Director Level	\$53,100	COPE: \$51,324	\$52,568	Survey: 1.01% COPE: -2.37%
Attendant Care	\$49,900	OPSEU: \$49,394		
Bookkeeper	\$58,500	OPSEU: \$49,238 COPE: \$51,324	\$52,568	Survey: 11.28% OPSEU: -6.33% COPE: -2.37%
Care Navigators	\$56,000			
Case Manager	\$60,000	OPSEU: \$74,900	\$74,148	Survey: -19.08% OPSEU: 1.01%
Child and Youth Worker (Residential / Day Treatment / Community)	\$55,000	OPSEU: \$71,546	\$59,612	Survey: -7.74% OPSEU: 20.02%
Chiroprapist	\$76,100		\$74,148	Survey: 2.63%
Chiropractor	\$80,200		\$83,742	Survey: -4.23%
Clinical Assistant	\$48,800	OPSEU: \$52,806	\$42,519	Survey: 14.77% OPSEU: 24.19%
Community Ambassadors	\$57,900			
Community Health Planner	\$74,100		\$81,233	Survey: -8.78%
Community Health Worker	\$59,600		\$59,612	Survey: -0.02%
Counsellor	\$59,500		\$59,612	Survey: -0.19%
Court Support Worker	\$62,800			
Cultural Artists	*			
Cultural Safety Curriculum Developer	*			
Cultural Safety Trainer	*			
Culture-Based Midwife and Traditional Delivery Supports	*			
Data Management Coordinator	\$73,300		\$74,148	Survey: -1.14%
Diversity, Equity & Inclusion Specialist	\$105,000			
Driver	\$40,000	OPSEU: \$51,558		
Executive Assistant	\$63,100		\$58,656	Survey: 7.58%
Food Services Worker / Cook	\$45,100	OPSEU: \$58,052 COPE: \$42,881 Unifor: \$55,458		
Foot Care Specialist	\$56,900			
Fundraising Manager	\$81,700			
Health Promoter	\$74,100		\$74,148	Survey: -0.06%
Housekeeper	\$42,700	COPE: \$45,981		
Housing Support Worker	\$57,800			
Human Resources Generalist (Generalist)	\$70,800			
Human Resources Generalist (Strategic Business Partner)	\$80,100			
Human Resources Generalist (Transactional Focus)	\$58,700			
Indigenous Patient Navigator	*			
Indigenous Trauma-Informed Specialists	*			

Benchmark Job Title	2023 Survey Maximum Salary	External Data	MOH Rates	Percent Differences from MOH to Survey and External Rates
Intake Coordinator	\$57,100	OPSEU: \$64,662 COPE: \$51,324 CLAC: \$46,157		
IT Technician	\$65,500	COPE: \$53,099	\$66,184	Survey: -1.03% COPE: -19.77%
Kinesiologist	\$74,100		\$74,148	Survey: -0.06%
Knowledge Keeper	*			
Land-Based Programmer	*			
Language Holder and Keeper	*			
Maintenance Worker	\$49,300	OPSEU: \$50,915 COPE: \$51,324 Unifor: \$50,973	\$36,889	Survey: 33.64% OPSEU: 38.02% COPE: 39.13% Unifor: 38.18%
Medical Secretary	\$46,000	OPSEU: \$53,430	\$42,519	Survey: 8.19% OPSEU: 25.66%
Natural Helpers (Aunties and Uncles)	*			
Nurse Practitioner (NP)	\$122,200		\$122,178	Survey: 0.02%
Occupational Therapist	\$74,800	OPSEU: \$86,814	\$74,148	Survey: 0.88% OPSEU: 1708%
Office Administrator	\$58,700	OPSEU: \$72,365 COPE: \$47,444	\$58,656	Survey: 0.08% OPSEU: 23.41% COPE: -19.11%
Overnight Attendant/Worker	\$45,300			
Peer Support Worker	\$48,900	OPSEU: \$68,348		
Personal Support Worker	\$46,800	OPSEU: \$47,580 CLAC: \$46,371		
Pharmacist	\$97,300	OPSEU: \$110,975	\$97,292	Survey: 0.01% OPSEU: 14.06%
Physician Assistant	\$84,500	OPSEU: \$91,748 CAPA: \$123,101	\$80,175	Survey: 5.39% OPSEU: 14.43% CAPA: 53.54%
Physiotherapist	\$80,200	OPSEU: \$94,244	\$80,175	Survey: 0.03% OPSEU: 17.55%
Psychologist	\$123,600	OPSEU: \$128,544	\$122,178	Survey: 1.16% OPSEU: 5.21%
Quality / Decision Improvement Specialist/Lead	\$80,100		\$80,076	Survey: 0.03%
Receptionist	\$42,900	OPSEU: \$53,021 COPE: \$49,511 Unifor: \$46,859	\$42,519	Survey: 0.90% OPSEU: 24.70% COPE: 16.44% Unifor: 10.21%
Recreation Therapist	\$56,400	OPSEU: \$71,546		
Recreationist / Program Activationist	\$49,000	OPSEU: \$51,558 CLAC: \$49,043		
Registered Dietitian	\$74,900		\$74,148	Survey: 1.01%
Registered Nurse (RN)	\$76,700	OPSEU: \$95,589 ONA: \$110,291	\$74,148	Survey: 3.44% OPSEU: 28.92% ONA: 48.74%

Benchmark Job Title	2023 Survey Maximum Salary	External Data	MOH Rates	Percent Differences from MOH to Survey and External Rates
Registered Practical Nurse (RPN)	\$57,100	OPSEU: \$66,125 COPE: \$62,244 CLAC: \$60,509 Unifor: \$62,537	\$53,159	Survey: 7.41% OPSEU: 24.39% COPE: 17.09% CLAC: 13.83% Unifor: 17.64%
Respiratory Therapist	\$75,900	OPSEU: \$88,706	\$74,148	Survey: 2.36% OPSEU: 19.63%
Site Service / Program Coordinator	\$58,000	COPE: \$51,324	\$74,148	Survey: -21.78% COPE: -30.78%
Social Worker (MSW)	\$74,100	OPSEU: \$99,645	\$74,148	Survey: -0.06% OPSEU: 34.39%
Speech Pathologist	\$80,000		\$74,148	Survey: 7.89%
Spiritual Advisors	\$76,600	AMAPCEO: \$84,215		
Systems Administrator	\$72,200			
Therapist (Therapist, MSW)	\$74,100	OPSEU: \$94,244		
Traditional Healer	\$79,000		\$82,000	Survey: -3.66%
Traditional Helpers	\$60,700			
Traditional Medicine Keeper and Knowledge Teacher	*			
Volunteer Coordinator/Administrator	\$57,900		\$58,656	Survey: -1.29%

*Insufficient data to report

The compensation of management and leadership roles is more dependent on the size (operating budget) of organizations, than it is for individual contributor roles. The below table shows the survey median results for salary maximum for management and leadership roles by operating budget bucket.

Table 3.4 – Management and Leadership Roles by Operating Budget

Benchmark Job Title	2023 All Orgs Survey Maximum Median	Less than \$1.5M	\$1.5M to \$2.9M	\$3M to \$4.9M	\$5M to \$9.9M	\$10M to \$19.9M	\$20M or More
Executive Director / CEO / NP Lead	\$130,000	\$93,900	\$110,000	\$125,000	\$135,000	\$152,300	\$199,500
Director – Corporate, Operations Director	\$117,600	\$97,900	\$91,900	\$103,000	\$103,400	\$112,200	\$147,100
Director – Clinical / Programming / Mental Health / Service / Care Director / Nursing / Personal Care / Medical Care	\$113,500	\$72,300	\$85,100	\$100,600	\$106,300	\$113,200	\$127,300
Administrator (LTC)	\$127,300	*	*	*	*	\$107,400	\$130,000

Benchmark Job Title	2023 All Orgs Survey Maximum Median	Less than \$1.5M	\$1.5M to \$2.9M	\$3M to \$4.9M	\$5M to \$9.9M	\$10M to \$19.9M	\$20M or More
Manager – Corporate / Corporate Services	\$92,900	\$82,000	\$84,100	\$82,300	\$90,000	\$89,000	\$106,700
Manager - Clinical/Program	\$88,300	\$80,000	\$74,300	\$83,900	\$87,100	\$87,400	\$90,600
Supervisor - Clinical / Programming / Mental Health / Service Director	\$76,800	\$73,700	\$70,800	\$78,700	\$79,300	\$76,700	\$81,200

**Insufficient data to report*

Market Exceptions & Band Analysis Details

Market exceptions are roles that are paid a premium in the market compared to their internal value as determined by their evaluation and salary level/band. As a result, organizations need to implement different salary ranges for these roles in order to attract and retain talent. Provincial salary levels/bands 9 and 10 have historically had market exception roles. Detail for specific salary level/band analysis, and, where market exceptions are required are detailed below.

With respect to market exceptions, typically within 5% is a reasonable differential and not significant enough to adopt an exception. When multiple data points suggest a higher wage is needed, we have considered the exception role and reviewed the survey data, bargaining rates, OHA and ERI data to support the recommendation.

Historically, there have not been any market exceptions for salary level/band 8. However, we are recommending that the positions of Registered Nurse, Social Worker, Physiotherapist, and Physician Assistant become market exceptions. Salary level/band 8 has a recommended rate of \$85,200 and the exception rate recommended is \$96,400, a premium of \$11,200 or 13%. The OPSEU rates for Registered Nurses, Social Workers, Physiotherapists, and Physician Assistant are \$95,589, \$99,645, \$94,244, and \$91,748 respectively. OHA and ERI data are also in line with the recommendation with market data that is more than 5% above the \$85,200 standard. For other roles in salary level/band 8, Occupational Therapist and Respiratory Therapists, OPSEU rates are \$86,814 and \$88,706, respectively. From the OHA data, the “all Ontario” data cut is higher than the “less than \$25 million” data cut by 34% for Data Management Coordinators, and 11% for Chiropractors.

It is important to note that even if the exception rate is utilized for the position of Registered Nurse, the rate will still lag ONA’s announcement for Registered Nurses of \$110,291 by 2024. If there are significant talent challenges maintaining RN staff, organizations may consider treating Registered Nurse compensation separately in order to compete with ONA rates. This is particularly true if an organization would be able to recruit staff members at rate that is higher than the recommended exception rate, but not as high as would be paid to staff with agency RNs. In addition, RNs may be able to receive higher levels of pay out of province which could be a draw on available talent further confirming the need for the premium; out of province compensation context is provided (see: Provincial / Territorial Differentials section).

The recommendations for salary levels/bands 9 to 13 are supported by data from ERI and maintained the progressions between salary level/band maximums previously established. The market exception in salary level/band 9 is the Pharmacist role, which has been an exception since 2012. The salary level/band standard is \$96,300 and the recommended exception rate is \$111,000, a premium of \$14,700 or 15%. The OPSEU rate for Pharmacists is \$110,975 and the OHA data supports our recommendation. The ERI data for Pharmacists skews even higher. Pharmacist compensation may be challenging given many opportunities in the private sector, in addition to recent changes in the profession with an expanded scope of practice in Ontario.

Salary level/band 10 has a standard of \$110,700 and an exception rate of \$142,700, a premium of \$32,000 or 29%. The market exception roles in salary level/band 10 are the Nurse Practitioner and Psychologist. Market data does not show compensation in excess of the existing exception rate; therefore, we are recommending maintaining the same rate as recommended in 2017. Previously, the Nurse Practitioner role was determined to be comparable to the Psychologist roles from a job evaluation perspective, and therefore the value of the roles was also seen as comparable, so their salary ranges are linked. For the purposes of this study, we assumed that this is still the case and treated the positions the same.

For the remaining salary levels/bands, no market exceptions were identified.

- For salary level/band 7, the OHA data segment of “less than \$25M” operating budget is aligned with the recommended band maximum. However, the “all Ontario” data is approximately 20% higher, indicating some larger hospitals may be difficult to compete with at this rate.
- For the salary level/band 6 Administrator role, the OPSEU rate is \$72,365. Data from ERI and the OHA data segment of “less than \$25M” operating budget also support the band 6 recommendation. The OHA “all Ontario” data cut pays 3%-28% higher, or 17% on average, than the “less than \$25 million” operating budget data segment for benchmark jobs in this band.
- For salary level/band 5, the OPSEU, COPE, CLAC, and Unifor rates for Registered Practical Nurses are \$66,125, \$62,244, \$60,509, and \$62,537, respectively. These were the primary sources used for the salary level/band 5 recommendation.
- For salary level/band 3, the OPSEU rates for Clinical Assistants and Medical Secretaries are \$52,806 and \$53,430 respectively and data from OHA and ERI for these roles also support our recommendation.
- For salary level/band 2, the OPSEU, COPE, and Unifor rates for Receptionists are \$53,021, \$49,511, and \$46,859, respectively. The OHA data is in line with the union rates for this role and ERI skews slightly lower.

Differentials for Organization Parameters

The median salary range maximum was examined for organizations that met certain parameters to determine if those parameters result in salary premiums in the market, on average. Based upon the current compensation data, there is overall not a significant differential for Indigenous organizations, the French Language Services Act (FLSA), complex working environments, or rural/remote locations. The table below provides the adjustments as per the market data averages which are only a few percentage points. The market data did not show any differential for rural/remote locations. It is important to note that many of the challenges noted by the survey participants cited the current compensation practices are insufficient to recruit and retain staff, particularly when there are additional challenges such as remote locations.

Organizations may need to consider additional compensation than the existing market practice and should also consider other forms of compensation which may be more directly related to the challenges. For example, where rural locations are challenging due to lack of transit is remote work available or can a travel allowance be considered, which enhance the value to the employee in less, or no travel time, or subsidy of travel costs to perform their role if/when they need to be on-site or providing direct services. Similarly, if the cost-of-living differentials is considered the grid may be adjusted by a different factor if there is a clear rationale for this (in addition to the funding to do so).

Table 3.5 – Organization Parameter Differentials

Provincial Salary Level/Band	Adjusted for Indigenous Organizations (+1.5%) ¹	Adjusted for FLSA Designation (+0.8%) ¹	Adjusted for High Risk / Vulnerable Populations (+0.5%) ¹
13	\$172,300	\$171,200	\$170,600
12	\$148,600	\$147,600	\$147,100
11	\$129,200	\$128,300	\$127,900
10	\$112,400	\$111,600	\$111,300
10*	\$144,800	\$143,800	\$143,400
9	\$97,700	\$97,100	\$96,800
9*	\$112,700	\$111,900	\$111,600
8	\$86,500	\$85,900	\$85,600
8*	\$97,800	\$97,200	\$96,900
7	\$77,200	\$76,700	\$76,500
6	\$69,600	\$69,100	\$68,900
5	\$62,700	\$62,300	\$62,100
4	\$56,500	\$56,100	\$56,000
3	\$51,000	\$50,600	\$50,500
2	\$45,900	\$45,600	\$45,400
1	\$41,700	\$41,400	\$41,300

*Denotes a level with a role for which a market exception was identified.

Note 1: The differentials were determined by comparing median salary range maximum of the organizations that met these parameters to the median salary range maximum of the all organizations results to determine if those parameters resulted in salary premiums in the market, on average.

Provincial / Territorial Differentials

Through this study, the associations expressed that not only are they losing employees to other organizations in Ontario with more competitive wages, they are now also seeing employees moving to other provinces and territories, citing higher salaries. Though developing national recommendations are out of scope for this study, some additional research was compiled to assess how highly populated roles are paid in different provinces/territories. Using the Job Bank on the Government of Canada website, the below differentials detail how some positions are paid in other provinces/territories compared to Ontario. The higher the percentage, the higher the compensation rate provided above Ontario’s reported data. While this data shows a contrast of reported compensation for these positions, the comparison does not factor in other influencing context such as the cost of living in the alternative locations.

Table 3.6 – Provincial / Territorial Differentials

	Registered Practical Nurse	Registered Nurse	Nurse Practitioner	Social Worker	Registered Dietitian	Personal Support Worker
Nunavut	*	40.0%	*	*	*	31.6%

	Registered Practical Nurse	Registered Nurse	Nurse Practitioner	Social Worker	Registered Dietitian	Personal Support Worker
Northwest Territories	43.3%	28.8%	*	35.7%	*	7.9%
Yukon	6.8%	25.9%	*	13.7%	*	30.7%
Saskatchewan	22.0%	15.6%	*	5.8%	11.1%	0.0%
British Columbia	3.0%	7.9%	1.8%	11.4%	10.1%	10.5%
Alberta	-1.2%	15.6%	-15.2%	5.8%	25.0%	-5.3%
Newfoundland and Labrador	-6.0%	4.9%	-8.6%	7.1%	7.4%	-12.9%
Nova Scotia	-9.2%	0.2%	-6.9%	-0.7%	5.9%	-5.3%
Prince Edward Island	-10.2%	2.8%	*	0.0%	-11.5%	2.6%
Manitoba	1.4%	7.9%	-12.7%	-2.8%	-0.8%	-21.1%
Quebec	-12.5%	-4.9%	-19.2%	-2.5%	2.7%	-9.1%
New Brunswick	-15.9%	1.7%	-8.6%	-3.1%	2.1%	-22.1%

*Insufficient data to report

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Salary Administration

Various parts of the healthcare industry have seen significant increases to compensation since last year. The members that participated in this survey provided commentary on what they are seeing and hearing regarding these increases that are inconsistent across associations and regions. For example, within the same association, some members provided salary increases of up to 5-6% to their staff, while other member organizations were not able to provide any salary increases. Emergency medical services have seen increases up to 8% and roles in hospitals up to 5%. CUPE published a statement in June 2023 about Ontario hospital workers receiving a 6.25% wage increase, plus additional incentives for Registered Practical Nurses¹. Ontario Nurses Association recently awarded a cumulative increase of 11% over two years as a result of arbitration decisions.

Organizations were asked how they adjusted salary ranges and actual salaries in 2021 and 2022, and forecasted salaries for 2023. It is important to note that 64% of organizations indicated that their compensation decisions were severely limited by the legislated compensation restraint (Bill 124) which held maximum increases of 1% annually. Most commonly, the moderation period was April 2020 to March 2023. Only 26% of organizations are expecting additional increase requests or retroactive compensations adjustments due to Bill 124 appeal status. Of the organizations that are expecting this, they typically commented that they have been notified by their unions that they are re-opening compensation discussions in the collective agreements. They also noted that many non-unionized employees are asking for salary reviews and/or leaving the organization due to lack of increases.

Organizations were asked if salary ranges and/or actual salary increases were affected by COVID-19. 24% of respondents indicated that COVID-19 did impact increases. Of the organizations that were affected, when no increases were given during COVID-19, it was generally due to budget constraints and lack of increases to base funding. Several organizations also expressed that COVID-19 made it more difficult to find talent and fill roles, resulting in them having to increase salaries for those roles. This is in direct contrast with several salary trend surveys that were conducted last year that indicated that organizations were adjusting compensation closer to 4%, with several organizations budgeting for multiple increases during the year to help combat the impact of inflation and enable the retention of talent. Eckler's 2024 Compensation Planning Survey Report reveals that organizations in the broader healthcare industry in Canada gave salary increases of 3.5% in 2023, and Not-for-Profits increased salaries by an average of 4.6%. The Ontario average (across industries) was 4.2%. Organizations in the broader healthcare industry in Canada are forecasting salary increases of 2.9% in 2024 and Not-for-Profits are forecasting an average of 3.4%. The Ontario average (across industries) is 3.7%. In 2023, 33% of respondents reported having provided off-cycle increases.

For both clinical and non-clinical roles, organizations were asked if they adopted any pay premiums. 28% of organizations adopted pay premiums for clinical roles, most commonly the \$5,000 Temporary Retention Incentive for Nurses in 2022 and \$3.00/hour wage enhancements to Personal Support Workers starting in 2020. Pay premiums typically were not adopted for non-regulated and non-clinical roles.

1. Source: <https://cupe.ca/arbitrator-awards-45000-ontario-hospital-workers-625-wage-increase-registered-practical-nurses-get>

Compensation Adjustments – Average Salary Range Increase

Compensation ranges, also known as frameworks or salary structures, are the guidelines by which companies administer compensation. They may be single job rates, step rate systems, or salary ranges or broadbands. Typically, compensation ranges are adjusted for some economic factor such as inflation on a regular basis (annually or less).

Table 4.1 – Average Salary Range Increases

Year	2021 (N = 255)	2022 (N = 255)	2023 (N = 251)
Executive	0.90%	1.10%	2.44%
Management	0.96%	1.13%	2.44%
Staff	1.02%	1.22%	2.51%
Union	0.49%	0.40%	1.50%

The most common month of adjustments is April. The above table reflects the results of organizations that participated directly in the survey. 15 collective bargaining agreements were also reviewed and the average range adjustments for those unions was 2.95% for 2023.

Compensation Adjustments – Average Actual Salary Increase

Actual compensation, or salaries paid, is the actual amount paid to employees within the role. The actual compensation of an incumbent is typically within a salary range or steps commensurate with tenure, experience and often, performance.

Table 4.2 – Average Actual Salary Increases

Year	2021 (N = 252)	2022 (N = 250)	2023 (N = 244)
Executive	0.91%	1.02%	1.40%
Management	0.96%	1.11%	1.46%
Staff	1.09%	1.26%	1.53%
Union	0.51%	0.48%	0.55%

The most common month of adjustments is April. Data are inclusive of all compensation adjustments impacted by Bill 124 compensation moderation and should be considered conservative with several organizations indicating there is an expectation of retroactive compensation adjustments that may occur.

Market movement – secondary source data

In addition to survey participant data, Eckler has compiled market movement information utilizing collective bargaining agreements from OPSEU, ONA, ETFO, and OSSTF for specific roles. Again, it is important to note that some collective bargaining agreements were impacted by Bill 124 (salary moderation period capping adjustments at 1% annually) and may receive retroactive adjustments, or potentially larger increases in the coming negotiations.

OPSEU compensation trend

The table below provides the compensation increases for selected positions over the past 5 years. The average annual movement is approximately 1.75%. Overall, compensation has increased by 6.8% for all positions except for the psychologist, which has increased 7.7%.

Table 4.3 – OPSEU Compensation Increases

Position	OPSEU Maximum Hourly Wage Rate (\$)					Total Increase
	2018	2019	2020	2021	2022	
Respiratory Therapist	42.65	43.25	44.01	44.78	45.56	6.82%
Dietitian	41.83	42.41	43.15	43.91	44.68	6.81%
Kinesiologist	41.83	42.41	43.15	43.91	44.68	6.81%
Pharmacist	53.15	53.89	54.83	55.79	56.77	6.81%
Psychologist	65.17	66.63	67.80	68.98	70.19	7.70%
Occupational Therapist	45.13	45.76	46.56	47.38	48.20	6.80%
Physiotherapist	45.13	45.76	46.56	47.38	48.20	6.80%
MSW	47.71	48.38	49.23	50.09	50.96	6.81%
Speech Pathologist	47.71	48.38	49.23	50.09	50.96	6.81%
Average Movement (All Roles)		1.49%	1.75%	1.75%	1.74%	6.94%

ONA compensation trend

Table 4.4 – ONA Compensation Increases

Position	ONA Maximum Hourly Wage Rate (\$)								
	2018	2019	2020	2021	2022	2023 ¹	2023 ²	2024 ²	2024 ³
Registered Nurse	46.76	47.57	48.05	49.37	50.85	52.53	54.37	56.00	56.56
Annual Adjustment Percentage		1.73%	1.01%	2.75%	3.00%	3.30%	3.50%	3.00%	1.00%

Note 1: 2023 maximum rate from the interest arbitration decision.

Note 2: 2023 and 2024 maximum rates from the draft collective agreement that expires March 31, 2025.

Note 3: 2024 maximum rate including the 1% in lieu effective April 1, 2024, from the interest arbitration decision.

Utilizing the ONA central agreement, the Registered Nurse position compensation rate is provided for a period of 7 years, with the adjustment percentage per year calculated below. The rate provided is the rate for the 8-year step on the compensation grid. Overall, compensation will change nearly 21% over the 7-year period. It is important to note that the 2023 and 2024 adjustments or 11% over 2 years are a result of arbitration decisions.

Early Childhood Educators compensation trend

Table 4.5 – ECE Compensation Increases

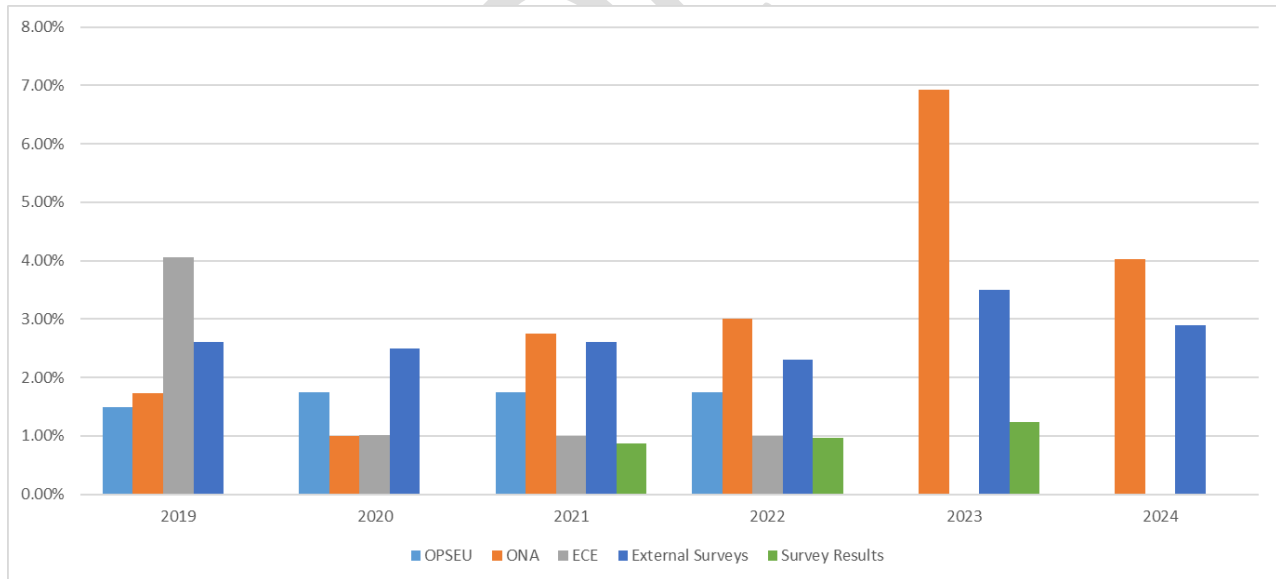
Collective Bargaining Agreement	Early Childhood Educator Maximum Hourly Wage Rate (\$)				
	2018	2019	2020	2021	2022
ETFO / Durham District School Board	26.66	27.74	28.02	28.30	28.58
OSSTF / Algoma District School Board	26.66	27.74	28.02	28.30	28.58
OSSTF / Renfrew County District School Board	26.66	27.74	28.02	28.30	28.58
Annual Adjustment Percentage¹		4.05%	1.01%	1.00%	0.99%

Note 1: Early Childhood Educators negotiations were impacted by Bill 124.

Compensation trend comparison

The graph below illustrates the average year-over-year salary increases for both external sources from collective bargaining agreements and salary planning surveys, as well as the results of this survey. The “External Surveys” data for 2019-2021 is sourced from The Conference Board and reflects the “all industry” national average. The “External Surveys” data for 2022-2024 is from Eckler’s Compensation Planning Report and reflects the healthcare industry average.

Chart 4.1 – Compensation Trends



The impact of salary moderation is clearly seen in the survey participants, as well as collective bargaining agreement data. External surveys, which have broader participation groups and the ONA agreement, which was determined by arbitration, show a significant uptick in salary adjustment in 2022 and onwards. Additional organizations, and collective bargaining units, have signalled their intent to challenge the compensation moderation periods and are likely to have higher increases soon.

Survey participants are currently forecasting just above 1% compensation changes for 2023, despite high inflationary rates, and a competitive labour market (i.e., low unemployment rates). If organizations are not

able to adjust wages soon it is likely that competing for talent will become even more difficult. In 2020 inflation was 0.7% but sharply swung up to 6.8% in 2022 according to the Consumer Price Index (Statistics Canada). Inflation in 2021 was 3.4%.

Policies

Standard Hours of Work (Annualized)

Table 4.6 – Standard Hours of Work

Statistic	Executive	Management	Staff	Union
Average	1922	1908	1910	1915
P25 – P75	1820 – 1950	1820 – 1950	1820 – 1950	1820 – 1950
Most Common	1820	1820	1820	1820

Most survey respondents range between 1820 and 1950 hours annually, or a 35- or 37.5-hour work week.

Where organizations reported differences in standard hours, typically union staff are different than non-union staff due to collective agreements. Organizations with more than one union reported differences in annual hours between the different collective agreements. Another common difference in hours identified was higher hours for executives than the rest of the employee population. In a small number of cases, the hours vary by position (in particular, Nurses and Personal Support Workers), program area, or location.

Overtime Policy / On Call Details

Organizations provided additional context with respect to providing overtime and on call pay for employees.

- Executives and Managers are commonly eligible for time in lieu.
 - Overtime is provided by only 6% of organizations to Executives and 10% of organizations to Managers. Where it is provided, it is typically provided at over 44 hours per week at a rate of 1.5x salary.
 - Time in Lieu is provided by 51% of organizations to Executives and 62% of organizations to Managers. Where it is provided, it is typically at over 37.5 hours per week at a rate of 1x salary.
- Staff are more commonly eligible for time in lieu than overtime.
 - Overtime is provided by 41% of organizations to Staff. Where overtime is provided, it is typically provided at over 44 hours per week at a rate of 1.5x salary.
 - Time in Lieu is provided by 81% of organizations to Staff. Where time in lieu is provided, it is typically provided at over 35 hours per week at a rate of 1x salary.
- Overtime and time in lieu are both common for Unionized roles.
 - Overtime is provided by 73% of organizations to Unionized roles. Where overtime is provided, it is typically provided at over 44 hours per week at a rate of 1.5x salary.
 - Time in Lieu is provided by 56% of organizations to Unionized roles. Where time in lieu is provided, it is typically at over 35 hours per week at a rate of 1x salary.

Generally, time in lieu policies provide compensation for time as soon as standard hours are exceeded whereas overtime policies have a higher number of hours threshold before a higher rate of compensation (1.5x) is provided.

COVID-19 & Market Pressure Strategies

Organizations were asked what strategies were utilized to combat the labour challenges faced since the onset of the COVID-19 pandemic, and, if those strategies were temporary measures or have become continuous measures. The following options were provided in addition to an “other” category and the prevalence of “yes” responses overall is provided.

Table 4.7 – Market Pressure Strategies

Market Pressure Strategy (N = 341)	Tactic Used: Yes %	Temporary Measure %	Continuous Measure %
Remote/hybrid work where possible offered	75%	29%	71%
Additional use of external agency staff	35%	34%	66%
Extended vacation (periodically offering additional vacation, for example 1 week additional at 5 years)	31%	11%	90%
Changes in policies to be more employee favored (i.e., increase paid time off policies or provide enriched benefits)	31%	15%	85%
Increase or introduce employee wellness allowances / increase benefits or introduce new benefits	31%	21%	79%
Adopt flexible scheduling (i.e., 4 days / 10 hours as an option instead of 5 days at 8 hours)	29%	14%	86%
Base salary freeze	28%	41%	59%
Retention Awards	27%	51%	49%
Negotiating vacation – providing higher levels of service recognition / offering a better paid time off than standard	23%	15%	85%
Pay premiums / hazard pay	21%	67%	33%
One-time top ups (divvying up any surplus funds at the end of the year amongst staff)	20%	64%	36%
Permanent position elimination/termination	16%	21%	79%
Stipends, home allowances or other compensation allowances where remote/hybrid work possible	15%	54%	46%
Optional leave	14%	73%	27%
Referral bonuses (incentives for existing employees to refer others into the organization)	13%	17%	83%
Wage top-ups – one-time adjustments to combat high inflation/market pressure	13%	65%	35%
Temporary layoff/furlough	11%	92%	8%
Adopt a 4-day work week (reduced time <i>without</i> reduction of compensation)	5%	17%	83%
Signing bonuses (lump sum guaranteed value, typically at time of joining the organization)	5%	63%	38%
Work-sharing program	4%	23%	77%
Temporary pay reduction (hours/duties also reduced)	3%	90%	10%
Early retirement provision (optional or mandatory)	2%	43%	57%
Temporary pay reduction (no hours/duties adjustment)	0.3%	*	*
Other	4%	69%	31%

*Insufficient data to report

Details are provided for the following commonly utilized tactics:

- The most utilized tactic was offering remote or hybrid work where possible, which is a measure that continues to be in place in most organizations that offered it. Hybrid models are generally being used for management and non-clinical staff, and clinical staff where they can provide virtual care or virtual programs based on appropriateness and client preferences, instead of only offering in-person programs.
- Usage of external agency staff is continuously implemented to address the shortage of capable candidates for specific roles, such as Personal Support Worker, administrative positions, and Nurses. Agencies were also used to find staff for vaccination clinics during the COVID-19 pandemic. This is aligned with referencing findings for hospitals in Ontario where in 2020 31 hospitals regularly utilized agency nurses, and in 2022 at least 77 hospitals reported utilizing agency nurses, or in hours – 449,608 up to 1,183,358.¹
- Extended vacation was implemented permanently in some cases as a retention policy in lieu of being able to give salary increases. Several organizations also noted that vacation policies have been revamped in recent years to provide higher levels of entitlements with less years of experience or to include some additional personal wellness days with time off policies.
- Changes in policies to be more employee-favoured included increasing the number of sick/personal/flex/training/wellness days, adding birthdays off, allowing vacation carryover, and paying out unused vacation days. Specific paid “COVID-19 days” were implemented by several organizations.
- Employee wellness allowances and benefits included introducing wellness apps, increasing the value of wellness benefit, or providing a wellness allowance, implementing Employee Assistance Programs (EAP), and providing wellness activities and sessions during work time. Mental health supports in the form of training and enhanced benefit definition (inclusion into paramedical benefits) also were included in overall wellness considerations.
- Of the organizations that replied “Other”, details included providing an incentive to provide relief staff during holidays, introducing paid internship programs, allowing staff to hold two part-time positions, providing benefits from employment start date instead of after a probationary period, and providing coupons for food delivery services.

Note 1: From the interest arbitration award, page 7 <https://www.ona.org/wp-content/uploads/participating-hospitals-ona-2023-hospital-decision.pdf>

Benefits & Retirement Provisions

Benefits & Retirement – Prevalence of Plans

Organizations were asked if they provided the following benefits and/or retirement provisions for their staff. The percentage responding “yes” is provided for each.

Table 5.1 – Benefits Plans Prevalence

Employee Category	Benefits	Benefits (Flexible)	Pension: Defined Benefit	Pension: Defined Contribution	Savings plan (RRSP, RFSAs or MPP)	Savings plans: Other
Executive (N = 353)	97.5%	20.4%	52.4%	22.4%	38.2%	4.5%
Management (N = 323)	99.1%	17.0%	52.6%	22.9%	37.8%	4.3%
Staff (N = 354)	97.2%	18.4%	53.1%	22.6%	37.9%	5.1%
Union (N = 124)	95.2%	12.1%	51.6%	30.6%	32.3%	4.0%

Where a defined benefit plan is provided, HOOPP is the most provided multi-employer plan at 74.3% of organizations. Where “other” was indicated, common responses included Multi-Sector Pension Plan, College of Applied Arts and Technology Pension Plan, Canada Life Pension Plan, Nursing Homes and Related Industries Pension Plan, and Ottawa Community Agencies Pension Plan.

Benefits Cost

Organizations provided the average cost of benefits and pension programs as a percentage of total budget. While costs have not generally been very different, many organizations noted that benefits plans have been amended to include more employee items such as expanded paramedical or additional sick / wellness days provided (which would be considered a direct ‘cost’ typically).

Table 5.2 – Benefits Cost

Percentile / Statistic	Average Cost of Benefits & Pension
75th	22.5%
50th	20.0%
25th	13.0%
Average	17.8%
Number of Responses	290

Training & Development Investment

Organizations provided details with respect to their training and development programs/budgets. 341 organizations provided a response.

Table 5.3 – Training & Development Programs

Employee Category	Membership / Association Fee Coverage ¹ Yes %	Certifications / Training to Maintain Designation (All) Yes %	Professional Development Opportunities (Career Growth / Open Training) Yes %
Executive	38.7%	39.0%	90.9%
Management	32.9%	39.4%	91.9%
Staff – Clinical	27.4%	43.7%	88.0%
Staff – Non-Clinical	15.2%	30.7%	89.0%
Union	17.4%	27.3%	76.0%

Note 1: Community Health Centres cannot pay for association fees per the Service Accountability Agreement.

Organizations indicate the overall budget (as a \$ or % of payroll) allocated to training is typically \$20,000 or 1% of payroll, with an average maximum rate per employee of \$974, based upon a sample of 177 organizations responding.

114 organizations indicated a maximum time that could be provided to staff for the purposes of professional development and/or training, with the range being 7 to 120 hours per year and an average of 49 hours per year.

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Areas for Future Studies/Reviews

Continued Monitoring of Market Exceptions

Generally, in most organizations there are few positions that are considered “market exceptions”. It is important for there to be policies in place on the administration of market exception salaries, and a plan in place to evaluate their ongoing implementation and treatment. Market exceptions roles should be reviewed periodically and regularly to see if they should continue to be treated as exceptions or if the market has returned to “normal” wage levels and they can be administered within the standard salary structure.

Management and Leadership Levels

Management and leadership roles can vary significantly across organizations depending on the size of the organization, scope of the role, and other factors, even with the same job title. Given the diversity in size of organizations, it is recommended that leadership levels should be reviewed to determine if the existing structure adequately recognizes the range in size and complexity. Particularly for the CEO / Executive Director position, one consistent rate for all organizations would oversimplify the market given the range of operating budgets, number of employees, etc.

The comparison of the 2023 recommended maximum rates to the MOH funded rates shows the largest gap for the CEO / Executive Director role, but also a significant lag for all other leadership and management positions (salary levels/bands 10 and above). These gaps will continue to pose a challenge for recruitment and retention at these levels and the market gap is exacerbated where the organizations are larger/more complex, and the scope of the top job increases.

It is recommended that a review of leadership and management positions is undertaken to determine if the existing structure is robust enough to capture the different sizes of leadership roles, and the corresponding compensation. Previous studies have developed Executive Director compensation which factored in various adjustments for complexity / scope, which can be leveraged as well.

Evaluating Additional Roles

It is recommended that all roles which were reviewed and have a definition of the role agreed upon that have not already been evaluated, are reviewed, evaluated, and formally classified on the common grading structure in order to move towards more consistent salaries for these roles in Ontario. This will ensure that all positions are appropriately placed on the common grading structure in addition to providing more reference jobs to align with for organizations that have roles that are not standard benchmark roles. As positions change and evolve, their benchmark definitions should be updated, and banding classifications should be validated, and internal relativity should be maintained to ensure internal equity.

Investigating Cross-Province Turnover

The sponsoring associations should continue to monitor recruitment and retention challenges, including a possible emerging trend of employees moving out of Ontario for opportunities in other provinces and territories. This may be due to higher compensation, but also may be explained by other factors, such as

cost of living, perceived quality of life, etc. If this trend continues, we recommend a national study takes place to determine if higher salaries should be implemented to be more competitive nation-wide.

Investigating Work Structure

In addition, work context such as hours of work, vacation time, ability to work in remote or hybrid setting can also be very impactful. With limited budget, many organizations have adopted other ways to enhance the employee offering to support recruitment and retention efforts. Since 2020 additional focus on benefits offerings and wellness have increased, and organizations have strived to provide work-life flexibility – particularly when facing challenges from staff due to illness, or additional caregiver time needed.

As organizations adjust to the COVID19 pandemic becoming endemic (hopefully), HR strategies adopted due to the pandemic shift may become permanent and competing with remote/hybrid workforces and adjusting for service delivery to be virtual where possible may lead to new potential staffing models and different jobs and/or job design.

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Appendix A: Profile of Participants

Overall, 362 of the invited organizations provided data to the custom survey. The profile of the participants is summarized in the data tables below, and a full list of all participants is provided. Where data are augmented by additional survey sources, this is indicated in the job data tables.

Profile of Participants – Type

The data table below provides responses for type of organization. It is important to note that organizations could select multiple responses and may span several types, so responses will not sum to the total participant number or 100%.

Type	# of Respondents	% of Respondents
Aboriginal Health Access Centre	4	1.1%
Children's Treatment Centre	5	1.4%
Community Child & Youth Mental Health	44	12.2%
Community Family Health Teams	10	2.8%
Community Health Centre	65	18.0%
Community Mental Health & Addictions	73	20.2%
Community Support Services (CSS)	111	30.7%
Family Health Team	76	21.0%
Family Service Agency	25	6.9%
Home Care	22	6.1%
Hospital	1	0.3%
Independent Living	22	6.1%
Indigenous Health	5	1.4%
Long Term Care Home (LTC)	31	8.6%
Nurse Practitioner Led Clinic (NPLC)	19	5.2%
Public Health Unit	2	0.6%
Union	17	4.7%
Other ¹	41	11.3%

Note 1: Participants who selected “other” include support services for acquired brain injuries, developmental services, supportive housing, women’s services organizations, and municipal governments.

Profile of Participants - Size

Budget: Organizations were requested to provide their annual budgets; this data includes only the survey participant responses. Statistics on budget are provided in the table below. The average budget is greater than the 75th percentile due to a relatively small number of participants with large budgets, including 9 organizations with budgets greater than \$100,000,000.

Percentile / Statistic	Budget (\$ millions)
90 th	26.1
75 th	13.0
50 th	4.5
25 th	2.0
10 th	1.0
Average	16.2
Number of Responses	337

Employee size: organizations were requested to provide their employee statistics both by full time equivalency as well as broken down by employee status. The aggregated information of the participants is provided below, excluding 0s. The average is greater than the 75th percentile due to a relatively small number of participants with large employee sizes, including 7 organizations with more than 1000 FTE.

Percentile / Statistic	FTE (full time equivalent)	Full Time	Part Time	Casual	Contract / Seasonal	Union FTE	Non-Union FTE
75th	117.0	90.0	28.0	31.5	15.0	152.3	63.5
50th	45.7	33.0	10.0	12.0	5.0	78.0	29.0
25th	20.1	14.0	4.0	3.0	2.0	30.8	14.0
Average	125.8	84.4	36.4	37.8	16.7	148.8	78.2
Number of Responses	345	329	313	171	123	111	342

In addition, organizations provided information with respect to the number of current vacancies.

Percentile / Statistic	P75	P50	P25	Average	Number of responses
Vacancy Rate	10.3%	5.0%	0.0%	8.2%	350

The average vacancy rate is 8.2% and vacancies impact organizations across regions, company type, budget, and employee size.

Volunteering support: organizations were requested to provide information with respect to the number of volunteers as well as the annual number of volunteer hours that the organization is fortunate to be in receipt of on an annual basis. 196 (54%) organizations provided information on their volunteers, reflected in the table below. The average number of hours per volunteer is 444.8 hours per year or 8.6 hours per week.

Percentile / Statistic	Number of Volunteers	Volunteer Hours
75th	110.8	19,838.0
50th	44.0	6,078.0
25th	12.8	2,014.0
Average	117.7	44,479.4
Number of Responses	196	175

Number of Sites (if multisite): where an organization operates multiple sites, a breakdown of the number of sites / type of sites by location was requested. Overall, 205 organizations, or 57%, have multiple sites and contribute to the responses summarized in the table below.

Percentile / Statistic	Northern Sites	Rural Sites	Remote Sites	Urban Sites
75th	6	4	2	6
50th	2	2	2	4
25th	1	1	1	2
Average	4	3	2	6
Number of Responses	43	110	9	132

Span of service: where applicable, organizations provided the number of clients/patients served, in addition to the number of rostered patients and number of affiliated physicians.

Percentile / Statistic	Number of Clients/Patients Served	Number of Rostered Patients ¹	Number of Affiliated Physicians ¹
75 th	11,881	21,321	18
50 th	4,784	7,780	7
25 th	1,500	3,201	3
Average	9,512	18,424	18
Number of Responses	306	106	107

Note 1: Typically, only Family Health Teams, Nurse Practitioner Clinics and Indigenous Primary Care organizations will have rostered patients and affiliated physicians. Community Health Centres also register clients and refer to these clients as “ongoing primary care clients”. Primary care practitioners are responsible for a panel of clients that is different than the total active clients served at a Community Health Centre, which includes all groups of clients.

Profile of Participants - Location

The survey was sent to mostly Ontario based organizations, though several other organizations were identified and invited to participate. Only two participants are headquartered outside of Ontario – one in British Columbia and another in Alberta. In addition, for those organizations operating in Ontario, respondents were requested to indicate which areas, as per Ontario Health’s current geographic division of Ontario, they operate in and/or provide services within. The data table below provides all responses; it is important to note that organizations could select multiple responses and organizations may span multiple operating area geographies, so responses will not sum to the total participant number or 100%.

Operating Area	Ontario Health Estimated Population & Definition	# of Respondents	% of Respondents
Ontario Health – North East	Approximately 557,000 people who live in largely rural communities. The largest urban community in the region is Sudbury with a population of 165,958. This Region covers 30.6% of Ontario’s land mass.	37	10.2%
Ontario Health – North West	Approximately 233,000 people who live in largely rural communities. This Region covers 58% of Ontario’s land mass.	22	6.1%
Ontario Health - Central	Over five million people who reside in both fast-growing and diverse communities from Mississauga to Huntsville and Orangeville to Markham.	78	21.5%
Ontario Health – East	Nearly 3.7 million people who live in diverse urban and rural communities, from Pickering to Deep River to Hawkesbury.	102	28.2%
Ontario Health – Toronto	Approximately 1.4 million residents, plus thousands of people from across the province who access specialized health care services within the City of Toronto.	54	14.9%

Operating Area	Ontario Health Estimated Population & Definition	# of Respondents	% of Respondents
Ontario Health – West	Over 4 million people who live in diverse urban and rural communities, from Waterloo to Windsor and Tobermory to Niagara Falls.	103	28.5%

Profile of Participants – Designations

Organizations were asked to confirm their official status with respect to the following categories indicating “Yes” or “No”.

Designation	% Yes (N = 346)
Francophone Designated under the French Language Services Act (FLSA)	% Yes Fully – 8.4% % Yes Partially – 9.8%
Indigenous-Led Organization	3.5%
Charitable Organization	58.4%
Designated Not-for-Profit	89.6%
Formal Academic Designation (for family health teams)	6.5%

Profile of Participants – Funding Source

Organizations were asked to confirm their funding sources; it is important to note that some organizations are funded from a variety of sources and are counted for each funding source indicated. As a result, statistics will not sum to the total participant number or 100%.

Funding Source	# of “Yes” Respondents	% Yes
Ministry – Federal	52	14.4%
Ministry – Provincial	258	71.3%
Municipality	99	27.3%
Ontario Health	211	58.3%
Grant	148	40.9%
Fundraising	150	41.4%
Other	112	30.9%

Other responses included: client / direct bill fees or fees for service, foundations, United Way, contracted services, rental income, and third-party contracts. Note that some organization types, including community health centres, cannot collect any fees.

Profile of Participants – Organization Environment

Specific Challenges	# of “Yes” respondents (N = 343)	% Yes
Sites considered high risk	113	32.9%
Physical settings / population complexities pose a barrier to recruitment	178	51.9%

Organizations that indicated that they have sites that are considered high risk or have barriers provided the following common challenges:

- Working with complex health needs of population: frail seniors/adults, mental health and addiction, marginalized/vulnerable, chronic illness.
- Serving populations with high rates of homelessness, socio-economic barriers, with language barriers.
- Rural/Remote/northern settings without public transportation, or with lack of housing options.
- Requirement to travel to sites; seasonal challenges aggravate this extremely in some areas.
- Safety concerns (client aggression, violence and working in isolation).
- Facilities pose challenges (i.e., site location in high-risk area or site itself is lacking).
- Congregate living settings and shelters pose additional challenges.

Profile of Participants – Gender

Community Health organizations have a significant predominance of female staff. This is aligned with the broader healthcare organizations in Ontario. Many hospitals also have predominantly female staff.

Gender	% of Total (N = 295)
% identifying as male	15.5%
% identifying as female	84.0%
% identifying as nonbinary or other ¹	0.5%

Note 1: Other is inclusive of: female (transgender), genderqueer, gender non-conforming, intersex, male (transgender), two-Spirit, more than 1 gender, questioning & other.

List of Custom Survey Participants

Abiona Centre
 Access Alliance Multicultural Health & Community Services
 Access Independent Living Services
 Acclaim Health
 Algonquin Family Health Team
 Algonquins of Pikwakanagan First Nation
 Alternatives for Youth
 Alzheimer Society Southwest Partners
 Amethyst Women's Addiction Centre
 Amherstburg Family Health Team
 Anishnawbe Health Toronto
 Aphasia Institute
 Arnprior Regional Health
 Associated Youth Services of Peel
 Athens District Family Health Team
 Aurora-Newmarket Family Health Team
 BANYAN Community Services
 Barrie & Community Family Health Team
 Barrie Community Health Centre
 Barry's Bay and Area Senior Citizens Home Support Services
 Belleville and Quinte West Community Health Centre
 Belleville Nurse Practitioner-Led Clinic
 Bellwoods Centres for Community Living Inc
 Beth Donovan Hospice
 Better Living
 Blue Sky Family Health Team
 Brain Injury Services
 Brain Injury Services of Northern Ontario
 Brock Community Health Centre
 Bruyère Continuing Care
 Caledon Community Services
 Caledon Meals on Wheels
 Camino Wellbeing + Mental Health
 Canadian Mental Health Association - Cochrane Timiskaming
 Canadian Mental Health Association - Toronto Branch
 Canadian Mental Health Association – Windsor Essex County
 Canadian Mental Health Association Algoma
 Canadian Mental Health Association Fort Frances Branch
 Canadian Mental Health Association Haliburton, Kawartha, Pine Ridge
 Canadian Mental Health Association Peel Dufferin
 Canadian Mental Health Association Toronto
 Canadian Mental Health Association, Kenora
 Canadian Mental Health Association, Muskoka-Parry Sound
 Canadian Mental Health Association, Niagara
 Canadian Mental Health Association, North Bay and District
 Canadian Mental Health Association, Simcoe County Branch
 Canadian Mental Health Association, Thunder Bay Branch
 Canadian Mental Health Association-Sudbury/Manitoulin
 Capreol Nurse Practitioner-Led Clinic
 CARE North Hastings
 Carea Community Health Centre
 Carebridge Community Support
 Carefirst Family Health Team
 Carefirst Seniors and Community Services Association
 Carefor Health & Community Services
 Carlington Community Health Centre
 Catholic Family Services of Simcoe County
 Catholic Family Services of Toronto
 Central Community Health Centre
 Central Hastings Family Health Team
 Central Lambton Family Health Team
 Centre de Sante Communautaire CHIGAMIK Community Health Centre
 Centre de santé communautaire de Kapuskasing et région
 Centre de santé communautaire de l'Estrie
 Centre de santé communautaire du Témiskaming
 Centre de santé communautaire Hamilton Niagara Inc
 Centre de Santé Univi Health Centre
 Centre for Family Medicine Family Health Team
 Centre Francophone Du Grand Toronto
 Centre of Arthritis Excellence
 Centres D'Accueil Heritage
 Centretown Community Health Centre
 Chatham-Kent Community Health Centres
 Chatham-Kent Family Health Team
 CHATS–Community & Home Assistance to Seniors
 Cheshire Homes (Hastings-Prince Edward) Inc
 Cheshire Independent Living Services
 Circle of Care
 City of Greater Sudbury
 City of Kawartha Lakes Family Health Team
 City of Lakes Family Health Team
 Clarence-Rockland Family Health Team
 CMHA Champlain East
 CMHA Halton
 CMHA Hastings Prince Edward Addictions and Mental Health Services
 CMHA York and South Simcoe
 Cochrane Family Health Team
 Community Care City of Kawartha Lakes
 Community Care Durham

Community Care for South Hastings
 Community Care Northumberland
 Community Counselling and Resource Centre
 Community Counselling Centre of Nipissing
 Community Family Services of Ontario
 COMMUNITY HEALTH CENTRES OF
 NORTHUMBERLAND
 Community Services for Independence North
 West
 Community Support Centre of Essex County
 Community Support Services of Niagara
 Compass Boussole Akii-Izhinoogan
 Compass Community Health.xls
 ConnectWell Community Health
 ConnexOntario Health Services Information
 Cottage Country Family Health Team
 Couchiching Family Health Team
 Counselling Centre of East Algoma
 Country Roads Community Health Centre
 Credit Valley Family Health Team
 Crest Support Services (Meadowcrest) Inc
 Crossroads Centre Inc
 Crossroads Children's Mental Health Centre
 Crosstown Family Health Team
 Dale Brain Injury Services Inc
 Dave Smith Youth Treatment Centre
 De dwa da dahs nyes Aboriginal Health Centre
 District of Kenora Homes and Community
 Support Services
 Dufferin Area Family Health Team
 Dundas County Hospice
 Dundas Manor
 Durham Family Court Clinic
 East End Community Health Centre
 East Wellington Community Services
 East Wellington Family Health Team
 Eastern Ottawa Resource Centre
 Eastholme, East District of Parry Sound Home for
 the Aged
 Eganville & District Seniors
 Emery Keelesdale NPLC
 ESS Support Services
 Essex County Nurse Practitioner Led Clinic
 (Essex, Amherstburg, Drouillard)
 EveryMind Mental Health Services
 Family Service Thames Valley
 Family Service Toronto
 Family Services of Greater Vancouver
 Family Services of Peel
 Family Services Ottawa
 Family Services Windsor-Essex
 FIREFLY
 Flemingdon Health Centre
 Fort Frances Family Health Team
 Four Counties Addiction Services Team
 Four Counties Family Health Team
 Frontenac Youth Services
 Gateway Community Health Centre
 Georgian Bay Family Health Team
 Georgian Nurse Practitioner-Led Clinic
 Georgina Nurse Practitioner-Led Clinic
 Gizhewaadiziwin Health Access Centre
 Glengarry Nurse Practitioner-Led Clinic
 Good Shepherd Hamilton
 Grand Bend Area Community Health Centre
 Grandview Lodge (Haldimand County)
 Great Northern Family Health Team
 Greenbelt Family Health Team
 Greenstone Family Health Team
 Guelph Community Health Centre
 Haileybury Family Health Team
 Haldimand Family Health Team
 Haldimand-Norfolk REACH
 Halton Hills Family Health Team
 Hamilton Family Health Team
 Hamilton Health Sciences
 Hanover Family Health Team
 Harrow Health Centre Family Health Team
 Head Injury Rehabilitation Ontario
 Health Zone Nurse Practitioner-Led Clinic
 Hillel Lodge
 Home and Community Support Services of Grey-
 Bruce
 Hope Place Centres
 House of Sophrosyne
 Huronia Nurse Practitioner-Led Clinic
 ICAN - Independence Centre and Network
 Independent Living Services Simcoe County
 Indus Community Services
 Ingersoll Nurse Practitioner Led Clinic
 Iroquois Falls Family Health Team
 Jewish Family and Child Service
 Jewish Family Services
 Kawartha North Family Health Team
 Kawartha Participation Projects
 Kensington Health
 Kinark Child and Family Services
 Kincardine Family Health Team
 Kingston Community Health Centres
 Kingston Family Health Team
 Kitchener Downtown Community Health Centre
 Lakehead Nurse Practitioner-Led Clinic
 Lakeshore Community NPLC
 Lakeview Family Health Team
 Lambton Elderly Outreach
 Lanark, Leeds and Grenville Addictions and
 Mental Health
 Land O'Lakes Community Services
 Langs
 Le CAP - Centre d'appui et de prévention
 Listowel-Wingham and Area Family Health Team
 LOFT Community Services
 London Family Health Team
 London InterCommunity Health Centre

Lumenus Community Services
 Lutherwood
 Maltby Centre
 Manitoulin Central Family Health Team
 Maple Family Health Team
 Marathon Family Health Team
 March of Dimes Canada
 Markham Family Health Team
 Martindale Place
 Maxville Manor
 McCormick Care Group
 Meals on Wheels London
 Merrymount Family Support & Crisis Centre
 MICBA Forum Italia Community Services
 Minto-Mapleton Family Health Team
 Misiway Milopemahtesewin Community Health Centre
 Mon Sheong Foundation
 Montfort Renaissance
 Mount Forest Family Health Team
 Niagara Falls Community Health Centre
 Niagara Ina Grafton Gage Village
 Niagara North Family Health Team
 North Bay Indigenous Hub - Giiwedno Mshkikiwigamig
 North Lambton Community Health Centre
 North Muskoka Nurse Practitioner-Led Clinic
 NORTH PEEL Family Health Team
 North Shore Family Health Team Corp
 North Shore Health Network
 North York Family Health Team
 North York Seniors Centre
 Northeastern Manitoulin Family Health Team
 NorWest Community Health Centres
 Nucleus Independent Living
 One Care Home and Community Support Services
 Orchard View Apartments
 Ottawa West Community Support
 Oxford County Community Health Centre
 PACE Independent Living
 Parry Sound Family Health Team
 Pathways Alcohol and Drug Treatment Services
 Peel Addiction Assessment and Referral Centre
 Peel Senior Link
 Peninsula Family Health Team
 Peterborough Family Health Team
 Pine River Institute
 Pinecrest-Queensway Community Health Centre
 Porchlight Counselling and Addiction Services
 Portage Medical Family Health Team
 Powassan & Area Family Health Team
 Prince Edward Family Health Team
 Providence Manor
 Punjabi Community Health Services
 Queen's Family Health Team
 Quest Community Health Centre

Rapids Family Health Team
 Ray of Hope
 Regent Park Community Health Centre
 Regional Municipality of Niagara
 Renascent Lillian & Don Wright Family Health Centre
 Rexdale Community Health Centre
 Richview Community Care Services Corporation
 Rideauwood Addiction and Family Services
 Rural Frontenac Community Services
 Salvation Army Ottawa Grace Manor
 Sandy Hill Community Health Centre
 Scarborough Centre for Healthy Communities
 Seaway Valley Community Health Centre
 Senior Persons Living Connected
 Seniors Community Services
 Seniors Life Enhancement Centres
 Seven South Street Treatment Centre
 SHALEM MENTAL HEALTH NETWORK
 Shalom Counselling Services
 Shalom Manor Long Term Care Home
 Sharbot Lake Family Health Team
 Shepherd Village
 SickKids CCMH
 Simcoe Muskoka Family Connexions
 Slovenian Linden Foundation o/a Dom Lipa
 Smiths Falls Nurse Practitioner-Led Clinic
 Somerset West Community Health Centre
 South East Grey Community Health Center
 South East Toronto Family Health Team
 South Georgian Bay Community Health Centre
 South Riverdale Community Health Centre
 South-East Ottawa Community Health Centre
 Southlake Academic Family Health Team
 Southwest Ontario Aboriginal Health Access Centre
 Spinal Cord Injury Ontario
 Spruce Lodge Home for the Aged
 St. Joseph at Fleming
 St. Joseph Lifecare
 St. Matthew's Bracondale House
 St. Michael's Homes
 STAR Family Health Team
 Stonegate Community Health Centre
 Stonehenge Therapeutic Community
 Strides Toronto
 Sudbury District Nurse Practitioner Clinics
 Summerville Family Health Team
 Sunnyside Seniors' Services
 Sunset Country Family Health Team
 Taddle Creek Family Health Team
 Temagami Family Health Team
 The Corporation of the County of Grey
 The Corporation of the County of Lambton
 The County of Lennox & Addington - The John M. Parrott Centre

The Dementia Society of Ottawa and Renfrew County
The Elliott Community
The Family Centre
The Good Companions
The Neighbourhood Group Community Services
The Olde Forge Community Resource Centre
The Prince Edward County Community Care for Seniors Association
The United Counties of Leeds and Grenville
Thrive Counselling Services Halton Inc
Thrive Group
Thunder Bay Counselling
Thunder Bay District Health Unit
Tilbury District Family Health Team
Tillsonburg & District Multi-Service Centre
Timmins Academic Family Health Team
Timmins Family Counselling Center
Toronto Finnish-Canadian Seniors Centre
TransCare Community Support Services
Tsi Kanonhkwatsheriyo Indigenous Interprofessional Primary Care Team
Turning Point Youth Services
Twin Bridges Nurse Practitioner-Led Clinic
Unison Health and Community Services
United Counties of Leeds and Grenville
Upper Canada Family Health Team
Upper Grand Family Health Team
VHA Health & Home Support
VHA Home HealthCare
Vibrant Health Care
Victorian Order of Nurses for Canada - Ontario Branch

Villa Colombo Homes for The Aged Inc
Village Family Health Team
Vista Centre Brain Injury Services (VCBIS)
Waasegiizhig Nanaandawe'iyewigamig
Wasauksing First Nation
Waterloo Region Nurse Practitioner Led Clinic
Wawa Family Health Team
WellFort Community Health Services
Wellkin Child & Youth Mental Wellness
Wendat Community Programs
West Champlain Family Health Team
West Durham Family Health Team
West Elgin Community Health Centre
West Neighbourhood House
WEST NIPISSING COMMUNITY HEALTH CENTRE
West Parry Sound District Community Support Services
West Parry Sound Health Centre Rural Nurse Practitioner-Led Clinic
Western Ottawa Community Resource Centre
Westover Treatment Centre
Willowbridge Community Services
Windsor Essex Community Health Centre
Windsor Family Health Team
Women's Health in Women's Hands Community Health Centre
WoodGreen Community Services
Woodingford Lodge
Woolwich Community Health Centre
Woolwich Counselling Centre
Yee Hong Centre for Geriatric Care
York Support Services Network
Youth Services Bureau of Ottawa

Additional Data Sources

Information from the below collective bargaining agreements were used throughout the report to supplement the results from the survey:

- Association of Management, Administrative and Professional Crown Employees of Ontario
- Canadian Union of Public Employees
- Christian Labour Association of Canada
- Elementary Teachers' Federation of Ontario
- Grand River Valley Health Care Workers Union
- Health Care and Service Workers Union
- Niagara Health Care and Service Workers Union
- Ontario Nurses' Association
- Ontario Public Service Employees Union
- Ontario Secondary School Teachers' Federation
- Service Employees International Union
- Southwestern Ontario Health Care and Service Workers Union
- The Canadian Office and Professional Employees Union
- Unifor
- United Food and Commercial Workers Canada

Other sources use for context data in this report include:

- Eckler's 2023 Compensation Planning Survey Report
- Economic Research Institute's Salary Assessor
- Ontario Hospital Association compensation survey data
- Ontario Ministry of Health and Long-Term Care wage rates
- Government of Canada – Job Bank
- Statistics Canada – Labour Force Survey, Consumer Price Index
- Ontario Public Sector Salary Disclosure

Appendix B: Wage Recommendation History and Analysis

Primary Care

Primary Care Historical Recommendations

The below table summarizes the recommended rates for the last three Primary Care studies.

Provincial Salary Level/ Band	Benchmark Jobs	2009 Recommended Maximum Rate ³	2013 Recommended Maximum Rate ³	2017 Recommended Maximum Rate ⁴
13	Executive Director / CEO / NP Lead	\$145,000	\$150,500	\$158,025
12	<i>No benchmark jobs in Band 12</i>	\$123,000	\$129,700	\$136,185
11	Director – Corporate, Operations Director Director – Clinical / Programming / Mental Health / Service / Care Director / Nursing / Personal Care / Medical Care	\$106,500	\$112,800	\$118,440
10	Manager – Corporate / Corporate Services Manager – Clinical / Program Traditional Healer	\$92,200	\$98,100	\$103,005
10 ¹	Nurse Practitioner (NP) Psychologist	-	\$135,916	\$142,712
9	Supervisor - Clinical / Programming / Mental Health / Service Director Community Health Planner	\$80,000	\$85,300	\$89,565
9 ²	Pharmacist	-	\$93,500	\$98,175
8	Registered Nurse (RN) Social Worker (MSW) Registered Dietitian Physiotherapist Occupational Therapist Speech Pathologist Respiratory Therapist Chiropractist Health Promoter Data Management Coordinator	\$69,100	\$75,500	\$79,275
7	IT Technician	\$62,900	\$67,400	\$70,770

Provincial Salary Level/ Band	Benchmark Jobs	2009 Recommended Maximum Rate ³	2013 Recommended Maximum Rate ³	2017 Recommended Maximum Rate ⁴
6	Executive Assistant Office Administrator Counsellor Community Health Worker Volunteer Coordinator / Administrator	\$57,100	\$60,700	\$63,735
5	Administrative Assistant Bookkeeper Registered Practical Nurse (RPN)	\$52,000	\$54,400	\$57,120
4	<i>No benchmark jobs in Band 4</i>	\$47,250	\$48,800	\$51,240
3	Clinical Assistant Medical Secretary	\$43,000	\$44,000	\$46,200
2	Receptionist	\$39,050	\$39,600	\$41,580
1	Maintenance Worker	\$35,500	\$36,000	\$37,800

Note 1: The 2013 recommendations determined through a market study that roles should be deemed “market exceptions”. These roles have salary premiums in the market compared to the other jobs in the same pay band, due to a temporary shortage in the labour market. The exceptions in salary level/band 10 are the Psychologist and Nurse Practitioner (set at equivalent exception rates) and the recommendation was to review these roles periodically to determine when the market premium amount should be changed (or removed).

Note 2: The market exception in salary level/band 9 is the Pharmacist.

Note 3: The 2009 and 2013 recommended rates were determined by a market study of a selected group of organizations in addition to considering known rates paid to positions as published by collective bargaining agreements.

Note 4: The 2017 rates considered typical market movement since 2013 adjusted the rates by a consistent 5% across the entire grid.

2023 Survey Results Compared to 2017 Primary Care Recommended Rates

The 2023 survey results show that the median level, organizations are not currently compensating staff at the 2017 recommend rates. Organizations cited a lack of funding such that salaries could not be moved in substantive ways. The 50th percentile survey results are lagging the 2017 recommendations by more than 5% on average and are lagging the 2013 recommendations for a significant number of jobs, by 1% on average. That is, more than half of the membership organizations are paying below the 2013 recommended rates. The below table shows the median of the reported salary maximums from the 2023 survey, compared to the 2017 recommendations.

Provincial Salary Level/Band	Survey Job	2023 Survey Salary Maximum P50	2017 Recommended Maximum Rate	2023 Survey Results vs. 2017 Recommendation
13	Executive Director / CEO / NP Lead ¹	\$130,000	\$158,025	-17.7%
11	Director – Corporate, Operations Director	\$117,600	\$118,440	-0.7%

Provincial Salary Level/Band	Survey Job	2023 Survey Salary Maximum P50	2017 Recommended Maximum Rate	2023 Survey Results vs. 2017 Recommendation
	Director – Clinical / Programming / Mental Health / Service / Care Director / Nursing / Personal Care / Medical Care	\$113,500	\$118,440	-4.2%
10	Manager – Corporate / Corporate Services	\$92,900	\$103,005	-9.8%
	Manager – Clinical / Program	\$88,300	\$103,005	-14.3%
	Traditional Healer	\$79,000	\$103,005	-23.3%
	Nurse Practitioner (NP)*	\$122,200	\$142,712	-14.4%
	Psychologist*	\$123,600	\$142,712	-13.4%
9	Supervisor - Clinical / Programming / Mental Health / Service Director	\$76,800	\$89,565	-14.3%
	Community Health Planner	\$74,100	\$89,565	-17.3%
	Pharmacist*	\$97,300	\$98,175	-0.9%
8	Registered Dietitian	\$74,900	\$79,275	-5.5%
	Occupational Therapist	\$74,800	\$79,275	-5.6%
	Speech Pathologist	\$80,000	\$79,275	0.9%
	Respiratory Therapist	\$75,900	\$79,275	-4.3%
	Chiropodist	\$76,100	\$79,275	-4.0%
	Health Promoter	\$74,100	\$79,275	-6.5%
	Data Management Coordinator	\$73,300	\$79,275	-7.5%
	Registered Nurse (RN)*	\$76,700	\$79,275	-3.2%
	Social Worker (MSW)*	\$74,100	\$79,275	-6.5%
	Physiotherapist*	\$80,200	\$79,275	1.2%
7	IT Technician	\$65,500	\$70,770	-7.4%
6	Executive Assistant	\$63,100	\$63,735	-1.0%
	Office Administrator	\$58,700	\$63,735	-7.9%
	Counsellor	\$59,500	\$63,735	-6.6%
	Community Health Worker	\$59,600	\$63,735	-6.5%
	Volunteer Coordinator / Administrator	\$57,900	\$63,735	-9.2%
5	Administrative Assistant	\$51,800	\$57,120	-9.3%
	Bookkeeper	\$58,500	\$57,120	2.4%
	Registered Practical Nurse (RPN)	\$57,100	\$57,120	0.0%
3	Clinical Assistant	\$48,800	\$46,200	5.6%
	Medical Secretary	\$46,000	\$46,200	-0.4%
2	Receptionist	\$42,900	\$41,580	3.2%
1	Maintenance Worker	\$49,300	\$37,800	30.4%

*Denotes a role for which a market exception was identified.

Note 1: Nurse Practitioner-Led Clinics typically receive the funding to pay NP Leads the Nurse Practitioner rate of \$122,200 plus a \$10,000 stipend.

2023 Recommended Rates Compared to 2017 Primary Care Recommended Rates

Based upon data from the survey, as well as additional researched compensation data, the recommended grid increases the 2017 rates by 0% - 8.7%, though some market exception rates are larger (up to 21.6%). The below table shows the percent increases from the 2017 recommendations.

Provincial Salary Level/Band	Survey Job	2023 Recommended Maximum Rate	2017 Recommended Maximum Rate	Percent Increase
13	Executive Director / CEO / NP Lead	\$169,800	\$158,025	7.5%
11	Director – Corporate, Operations Director	\$127,300	\$118,440	7.5%
	Director – Clinical / Programming / Mental Health / Service / Care Director / Nursing / Personal Care / Medical Care	\$127,300	\$118,440	7.5%
10	Manager – Corporate / Corporate Services	\$110,700	\$103,005	7.5%
	Manager – Clinical / Program	\$110,700	\$103,005	7.5%
	Traditional Healer	\$110,700	\$103,005	7.5%
	Nurse Practitioner (NP)*	\$142,700	\$142,712	0.0%
	Psychologist*	\$142,700	\$142,712	0.0%
9	Supervisor - Clinical / Programming / Mental Health / Service Director	\$96,300	\$89,565	7.5%
	Community Health Planner	\$96,300	\$89,565	7.5%
	Pharmacist*	\$111,000	\$98,175	13.1%
8	Registered Dietitian	\$85,200	\$79,275	7.5%
	Occupational Therapist	\$85,200	\$79,275	7.5%
	Speech Pathologist	\$85,200	\$79,275	7.5%
	Respiratory Therapist	\$85,200	\$79,275	7.5%
	Chiropodist	\$85,200	\$79,275	7.5%
	Health Promoter	\$85,200	\$79,275	7.5%
	Data Management Coordinator	\$85,200	\$79,275	7.5%
	Registered Nurse (RN)*	\$96,400	\$79,275	21.6%
	Social Worker (MSW)*	\$96,400	\$79,275	21.6%
	Physiotherapist*	\$96,400	\$79,275	21.6%
7	IT Technician	\$76,100	\$70,770	7.5%
6	Executive Assistant	\$68,600	\$63,735	7.6%
	Office Administrator	\$68,600	\$63,735	7.6%
	Counsellor	\$68,600	\$63,735	7.6%
	Community Health Worker	\$68,600	\$63,735	7.6%
	Volunteer Coordinator / Administrator	\$68,600	\$63,735	7.6%
5	Administrative Assistant	\$61,800	\$57,120	8.2%
	Bookkeeper	\$61,800	\$57,120	8.2%
	Registered Practical Nurse (RPN)	\$61,800	\$57,120	8.2%
3	Clinical Assistant	\$50,200	\$46,200	8.7%

Provincial Salary Level/Band	Survey Job	2023 Recommended Maximum Rate	2017 Recommended Maximum Rate	Percent Increase
	Medical Secretary	\$50,200	\$46,200	8.7%
2	Receptionist	\$45,200	\$41,580	8.7%
1	Maintenance Worker	\$41,100	\$37,800	8.7%

*Denotes a role for which a market exception was identified.

The adjusted rates for the “smaller” roles are increased moderately more than senior level roles; this additional consideration may be helpful considering high rates of inflation where lower paid staff are more likely to be impacted by rising prices. While this decreases the pay progression within the structure mildly it is unlikely to create compression circumstances as there is still a good band to band gap maintained.

Community Mental Health and Addictions Associations

The below table summarizes the median of the salary range maximum for each of the roles in the 2017 Ontario community mental health and addictions associations survey.

Ontario Community Mental Health & Addictions Survey Job	2017 Salary Range Maximum Median
Chief Executive Officer	\$114,044
Top Finance and Administration	\$92,208
Director of Program Services / Clinical Services	\$94,203
Senior Finance/Accounting	\$75,213
Financial Administrator	\$51,520
Top Human Resources	\$83,636
Human Resources Generalist	\$59,787
Top Communications / Public Relations	\$75,710
Top Fund Development Executive	\$73,477
Administrative Support I	\$54,600
Administrative Support II	\$47,310
Administrative Support III	\$41,623
Manager of Research / Evaluation / Performance / Quality Improvement	\$80,451
Senior Manager / Program Manager	\$80,614
Program Coordinator/Supervisor	\$68,000
Food Services Manager	\$43,833
Mental Health & Addictions Clinician / Family Therapist	\$65,424
Mental Health & Addictions Counselor	\$55,219
Psychologist	\$91,697
Case Manager (Level 2)	\$58,614
Case Manager (Level 1)	\$54,137
Case Worker	\$49,405
Child and Youth Worker	\$49,992
Social Support/Service Worker	\$49,564
Overnight Residential Child & Youth Worker	\$39,239
Court Support Worker	\$60,798
Housing Support Worker	\$51,581
Peer Support Worker	\$45,206
Registered Nurse	\$69,906
Registered Practical Nurse	\$57,233
Nurse Practitioner	\$96,612

Ontario Community Mental Health & Addictions Survey Job	2017 Salary Range Maximum Median
Public Educator	\$58,071

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Appendix C: Provincial Grid – Slotting Jobs

The table below provides the jobs that originally formed the provincial grid, evaluated to determine which pay band they belong in based upon job content (i.e., skill, effort, responsibility, and typical working conditions). With the expanded scope of services and additional membership organizations, more common roles were reviewed as part of the survey process. An approximate levelling of those new roles, based upon whole job slotting in contrast to the benchmark roles, is provided below.

Provincial Salary Level/ Band	Benchmark Roles Historically Evaluated	Slotted Roles
13	Executive Director / CEO / NP Lead	
12	<i>No benchmark jobs in Band 12</i>	
11	Director – Corporate, Operations Director Director – Clinical / Programming / Mental Health / Service / Care Director / Nursing / Personal Care / Medical Care	Administrator (LTC)
10	Manager – Corporate / Corporate Services Manager – Clinical / Program Traditional Healer Nurse Practitioner (NP)* Psychologist*	
9	Supervisor - Clinical / Programming / Mental Health / Service Director Community Health Planner Pharmacist*	Quality/Decision Improvement Specialist / Lead
8	Registered Nurse (RN) Social Worker (MSW) Registered Dietitian Physiotherapist Occupational Therapist Speech Pathologist Respiratory Therapist Chiropract Health Promoter Data Management Coordinator	Systems Administrator Fundraising Manager Diversity, Equity & Inclusion Specialist HR Generalist (Strategic Business Partner) Case Manager Therapist (Therapist, MSW) Physician Assistant Kinesiologist Chiropractor
7	IT Technician	HR Generalist (Generalist) Site Service/Program Coordinator
6	Executive Assistant Office Administrator Counsellor Community Health Worker Volunteer Coordinator / Administrator	Foot Care Specialist (not a Chiropract)

Provincial Salary Level/ Band	Benchmark Roles Historically Evaluated	Slotted Roles
5	Administrative Assistant Bookkeeper Registered Practical Nurse (RPN)	HR Generalist (Transactional Focus) Care Navigators Community Ambassadors Recreation Therapist Data Management Coordinator Child and Youth Worker (Residential / Day Treatment / Community) Addiction Service Worker Housing Support Worker
4	<i>No benchmark jobs in Band 4</i>	Personal Support Worker Recreationist/Program Activationist Attendant Care Court Support Worker Intake Coordinator Administrative Assistant to Manager/Director Level
3	Clinical Assistant Medical Secretary	Overnight Attendant/Worker Volunteer Coordinator / Administrator Peer Support Worker
2	Receptionist	Food Services Worker / Cook Driver
1	Maintenance Worker	Housekeeper

** Denotes a role for which a market exception was identified.*

The following roles were reviewed in the market but not slotted into the provincial grid:

- Traditional Helpers
- Spiritual Advisors
- Natural Helpers (Aunties and Uncles)
- Knowledge Keeper or Traditional Knowledge Keeper
- Cultural Artists (language, regalia making, music, arts, storytelling, crafts, etc.)
- Land-based Programmer
- Traditional Medicine Keeper and Knowledge Teacher
- Language Holder and Keeper
- Cultural Safety Trainer
- Cultural Safety Curriculum Developer
- Indigenous Trauma-Informed Specialists
- Culture-based Midwife and Traditional Delivery Supports
- Indigenous Patient Navigator

Appendix D: Benchmark Jobs

Benchmark jobs are presented in the following format:

Benchmark Job Title	Alternative Titles	Job Description / Duties	Typical requirements / Qualifications
The title of the benchmark job	Other titles that may be used commonly in the market for the job.	A short profile providing example job duties, responsibilities, or accountabilities. Reporting relationships are also noted.	Typical years of experience and type of experience are provided. Where a role has minimum required qualifications or licensing/regulation/certification required, this has also been listed.

The survey included 79 benchmark jobs grouped as follows, and the job descriptors are provided in order of the job groupings.

Job Grouping	Number of Benchmark Jobs (N=79)	Group Definition
Leadership / Executive	4	Top job in the organization and their direct reports.
Manager	3	Managerial roles within an organization; but not at the executive/leadership level.
Corporate Services	15	Roles that are common for provision of corporate services and found in many organizations – e.g., administrative support, IT, HR.
Indigenous Roles	14	Roles which are focused on providing healthcare through an Indigenous lens.
Regulated Profession	17	Roles that are regulated by a professional college or association.
Clinical/Service/Program Delivery	15	Roles that provide direct delivery of clinical/service/programs but are not regulated professions.
Clinical/Service/Program Support	15	Roles that provide support for the delivery of clinical/service/programs.

Leadership / Executive

Benchmark Job Title	Alternative Titles	Job Description / Duties	Typical requirements / Qualifications
Executive Director / CEO / NP Lead	President, Chief Executive Officer	Reporting to the Board of Directors / Council, this role is fully accountable for the organization's mission, strategy, and operations. The "top job" in an organization.	10+ years experience, leadership experience Post secondary school diploma. Frequently Masters level or significant leadership experience.
Director – Corporate, Operations Director¹	Executive or Sr. Director, Vice President, Chief, Administrative Lead	Reporting directly to the "top job" in the organization, this is a role that has top accountability for specific portfolios within the organization. Jobs for this match should be focused on corporate services – for example: develop, implement, and monitor an area of responsibility, leading staff in administrative functions.	7+ years experience, leadership experience Post secondary school diploma.
Director – Clinical / Programming / Mental Health / Service / Care Director / Nursing / Personal Care / Medical Care²	Executive or Sr. Director, Vice President, Chief	Reporting directly to the "top job" in the organization, this is a role that has top accountability for specific portfolios within the organization. Jobs for this match are clinically focused – for example: clinical programming development, planning and procedure development through delivery planning, team development and implementation and performance assessment.	7+ years experience, leadership experience Post secondary school diploma. Frequently Masters level and/or regulated professional.
Administrator (LTC)		Typically reporting to a managing director or CEO, this role oversees the operations of a site including resident care, programs, services, environmental, building maintenance and fiscal performance. Responsible for ensuring delivery of programs	3+ years of experience in addition to post secondary degree/diploma in relevant field and completion of/enrollment in long-term care home administration of management that is a minimum of 100 hours in instruction time. Successful completion of the Long-

		and services in a safe and respectful environment for residents and staff, while managing within budgetary requirements. Leads teams and engages with staff, families, residents, and management.	Term Care home Administrator / management course (for Ontario based organizations, to meet FLTCA 2021 requirements for Administrator).
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Note 1: For these roles, participants were also requested to provide the portfolio(s) of responsibility. For example: Finance, corporate services, IT, HR, etc.

Note 2: For these roles, participants were also requested to provide the portfolio(s)/program(s) of responsibility. For example: nursing, program delivery, etc.

Manager

Benchmark Job Title	Alternative Titles	Job Description / Duties	Typical requirements / Qualifications
Manager – Corporate / Corporate Services¹	[Area] Manager or Manager, [Area] Example: IT Manager, HR Manager, Finance Manager, Environmental Services Supervisor	Responsible for a distinct area of corporate services within the organization. Delegates work and oversees staff to ensure functional area performance, ensuring effective use of resources for overall effective operations of the organization.	3+ years experience Post secondary school diploma.
Manager – Clinical / Program²	Program Manager, Clinical Manager	Responsible for a distinct area of clinical services or program delivery. Delegates work and oversees staff to ensure functional area performance, ensuring effective use of resources and meeting the needs of clients. Collaborates/coordinates resources to facilitate the delivery of programs and ensures evaluation of programs.	3+ years experience Masters level degrees or equivalency.
Supervisor – Clinical / Programming / Mental Health / Service Director	Lead / Program Supervisor	This position reports to a more senior role and is the position to whom most paid direct service workers / clinically focused staff or individual contributors will report.	2+ years experience Masters level degrees or equivalency.

		They may or may not perform direct client services in their role, but typically will be responsible for leading others including supervision, development, and evaluation, and being a liaison between management and direct service staff. Duties will include program evaluation, coordination of administrative functions, participating in budget development, monitoring, and overseeing direct delivery of services and leading staff.	
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Note 1: For these roles, participants were also requested to provide the portfolio(s) of responsibility. For example: Finance, corporate services, IT, HR, etc.

Note 2: For these roles, participants were also requested to provide the portfolio(s)/program(s) of responsibility. For example: nursing, program delivery, etc.

Corporate Services

Benchmark Job Title	Alternative Titles	Job Description / Duties	Typical requirements / Qualifications
Receptionist		<p>Manages the organization’s lobby area, greets, and directs visitors (e.g., clients, caregivers, vendors, and visitors).</p> <ul style="list-style-type: none"> • Handles incoming calls. • Performs general administrative duties (i.e., word processing, data entry and internet research tasks). • Maintains appointments and supports document management. 	<p>Office experience; proficiency in typing and use of computers. Secondary school diploma</p>
Administrative Assistant to Manager/Director Level	Administrative Assistant / Secretary	<p>Performs full clerical, administrative and general office duties involving typing, record and file maintenance, document creation, mail distribution, and telephone reception.</p> <p>Provides secretarial services to middle/upper-level management.</p>	<p>Office experience; proficiency in typing and use of computers. Secondary school diploma.</p>
Administrative Assistant	Sr. Administrative Assistant	<p>Provides administrative support functions and maintains various office systems.</p> <ul style="list-style-type: none"> • Maintains administrative systems supporting corporate service functions. 	<p>Office experience; proficiency in typing and use of computers. Secondary school diploma.</p>

		<ul style="list-style-type: none"> • Maintain resources, equipment, and supplies management systems. • Coordinates facility management, reception, and secretarial support. 	
Executive Assistant		<p>Performs administrative duties for one or more executive management positions / Board.</p> <ul style="list-style-type: none"> • Triages correspondence. • Prepares draft reports, correspondence, analyses. • Manages calendars/schedules. • Prepares agendas, minutes, and packages for leadership/Board meetings. <p>May guide other support staff or manage projects.</p>	<p>Office experience; proficiency in typing and use of computers.</p> <p>Typically, 3+ years general administration experience at minimum</p> <p>Secondary school diploma.</p>
Bookkeeper	Accounting/ Finance Clerk	<p>Provides bookkeeping functions and assists in maintaining the organization's financial management systems.</p> <ul style="list-style-type: none"> • Maintains records of transactions and prepares financial reports. • Assists in the preparation of budgets and supports annual audit processes. • Performs clerical support duties. 	<p>Secondary school diploma with additional training in bookkeeping and/or basic accounting</p> <p>Typically, 2+ years experience</p>
Office Administrator	Office Manager	<p>Coordinates the provision of corporate support services and oversees various office systems.</p> <ul style="list-style-type: none"> • Coordinates provision/distribution of corporate support services. • Supervises administrative/clerical staff. • Ensures building/equipment maintenance and security; administers leases and contracts. • Purchases equipment, services, and supplies, and maintains inventory. <p>Coordinates occupational health and safety programs, HR, and IT systems.</p>	<p>Typically, 3+ years general administration experience at minimum</p> <p>Secondary school diploma</p>
Maintenance Worker	Facilities Support	<p>Provides general preventative maintenance and repair functions for an organization's facilities/sites.</p> <ul style="list-style-type: none"> • Performs general preventative facility maintenance and repair duties. • Maintains inventory of maintenance and cleaning supplies and equipment. 	<p>3+ years in general maintenance</p>

		<ul style="list-style-type: none"> • Ensures regular testing of emergency and other building systems. 	
Food services worker/cook		<p>Prepares and delivers food trays, following specific menu guidelines and preparation instructions.</p> <ul style="list-style-type: none"> • Portions and places food servings on plates and trays, serves patrons/clients. • Prepares food items such as sandwiches, salads, soups, and beverages. • Places items such as eating utensils, napkins, and condiments on trays. • Washes dishes and cleans work area, tables, cabinets, and ovens. 	<p>Food safety certification.</p> <p>For LTC to comply with FLTCA: Has chef training or culinary management diploma/certificate or equivalent; or certificate of qualification in the trade of Cook or Institutional Cook; or post secondary diploma in food and nutrition management or completion of Food Service Worker Program.</p>
IT Technician	IT Coordinator, IT Support / Helpdesk	<p>Provides IT support and solutions to staff, and ensures the functionality of hardware, software, and data.</p> <ul style="list-style-type: none"> • Develops, facilitates, and maintains training for IT users. • Assists staff in troubleshooting computer applications. • Maintains and upgrades hardware and software; makes recommendations for IT hardware/software investment for internal efficiency as well as alignment with community/primary care partners/other healthcare networks. • Ensures proper security measures are in place to safeguard computer assets and electronic data, including management of backup, storage, and retrieval functions. • Manages the Local Area Network by conducting server maintenance, and tuning; administers all communication equipment (e.g., router, gateway connectivity, etc.). 	<p>Post secondary education in computer science, engineering, or computer networking.</p> <p>3+ years experience in the IT field, preferably within the health setting with familiarity with electronic medical records applications</p> <p>Demonstrated experience with trouble shooting IT issues such as networking, or hardware configuration.</p> <p>Current knowledge in operating systems, hardware, and software relevant to the organization.</p>
Systems Administrator	IT Business Partner, IT Lead, Network Specialist	<p>Oversees the IT functional are for the organization, providing IT support and solutions to staff, and ensuring the functionality of hardware, software, and data as well as organization network architecture and security.</p>	<p>Post secondary education in computer science, engineering, or computer networking.</p> <p>5+ years experience in the IT field, preferably within the health setting with familiarity with electronic medical records applications.</p>

		<ul style="list-style-type: none"> • Ensures training and development as well as risk management polices are in place; may lead an IT technician/help desk support staff. • Maintains organization network, ensuring data security and architecture alignment with community/primary care partners/other healthcare networks. • Leads system development overseeing continuous improvement and introduction of any new software, hardware, applications, or network systems; assess costs, benefits, and future utility of changes. 	
Fundraising Manager¹	Manager or Lead, Fundraising May also be termed “Development” or “Resource Development.”	The most senior position responsible for meeting the fundraising goals of the organization, typically reporting to an executive level role. Builds relationships with businesses, community groups and the public to secure additional funding or support to augment the ability to provide services. <ul style="list-style-type: none"> • Leads fund development, planning and executing campaigns to raise funds, or gifts in kind. 	Relevant degree Preferred: membership within Association of Fundraising professionals.
Diversity, Equity & Inclusion Specialist	Diversity Lead, Equity, Diversity & Inclusion Lead	Responsible for leading the organization’s positioning in delivering diversity, equity, and inclusion programs internally and ensuring delivery of equity-informed services to communities/clients. <ul style="list-style-type: none"> • Develops, implements, and evaluates the organization’s DEI strategy. • Provides leadership, training, guidance expertise in DEI (including human rights, anti-racism, and accessibility); continually builds awareness. • Develops/amends policies to ensure support for DEI principles within an organization. 	3+ years of experience in diversity, equity & inclusion, and leading transformational change. Post-secondary degree in related field.
Human Resources Generalist (Transactional Focus)²	HR Administrator, HR Coordinator, Generalist	Reporting to a manager/director level role, this position focuses on the delivery of HR services. HR areas may include recruitment, selection, training, development, compensation, labour relations, policy development, benefits and	2 – 3 years of experience in addition to a post secondary school diploma. Transactional HR support or 2-3 HR functions.
Human Resources Generalist (Generalist)²	HR Coordinator, HR Generalist		HR Generalist or 3+ HR functions. Typically, 3-5 years experience.

Human Resources Generalist (Strategic Business Partner)²	HR Generalist, HR Consultant, HR Business Partner	pension planning and administration, performance management and employee relations.	HR Business Partner (strategic support) or 4+ HR functions. Typically, 5+ years experience.
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Note 1: For this role, to provide a sense of magnitude, participants were asked to provide the annual fund-raising goals for the role.

Note 2: For the HR roles, three related levels of work are provided for participants to best match their HR staff to the most accurate level of responsibility.

Indigenous Roles

Indigenous roles were defined with more detailed job description / responsibilities. As requirements / knowledge and skill acquisition is not typically gained in academic institutions, this descriptive element was not provided for these roles.

Benchmark Job Title	Job Description / Duties
Traditional Healer	<p>Uses Ancestral practices and knowledge to promote physical, emotional, and spiritual well-being. Traditional healers are often seen as spiritual leaders and play a critical role in maintaining the health and well-being of Indigenous communities.</p> <ul style="list-style-type: none"> • Practices traditional healing techniques, such as herbal remedies, and spiritual guidance. • Collaborates with community members and other healthcare providers to provide holistic care. • Mentors and trains the next generation of Traditional Healers. • Shares traditional knowledge and practices with community members to promote self-care and preventative health measures. • Participates in community events and ceremonies to provide spiritual guidance and support. • Develops educational resources and programs to promote Indigenous healing practices and knowledge.
Traditional Helpers	<p>A person who provides support and assistance to Indigenous individuals, families, and communities, using traditional knowledge, practices, and beliefs. Traditional Helpers may play various roles, including spiritual guidance, counselling, mentorship, and support for healing from trauma.</p> <ul style="list-style-type: none"> • Provides spiritual guidance and counselling to Indigenous individuals, families, and communities. • Shares traditional knowledge, practices, and beliefs to support healing and growth. • Mentors and helps Indigenous individuals and families as they navigate life challenges. • Works with Indigenous communities to preserve and revitalize traditional culture and practices. • Provides support and assistance to Indigenous individuals and families experiencing trauma or struggling with mental health issues. • Collaborates with health care providers, social services, and other organizations to support the holistic well-being of Indigenous individuals and communities.
Spiritual Advisors	<p>Provides spiritual guidance and support to Indigenous individuals, families, and communities based on Indigenous spiritual beliefs and practices. Indigenous Spiritual Advisors may play a key role in preserving and revitalizing traditional Indigenous spiritual practices and beliefs.</p> <ul style="list-style-type: none"> • Provides spiritual guidance and counselling to Indigenous individuals and communities based on Indigenous spiritual beliefs and practices. • Offers support and guidance in navigating life challenges from an Indigenous spiritual perspective.

	<ul style="list-style-type: none"> • Leads Indigenous spiritual practices, such as smudging, drumming, and other traditional ceremonies. • Provides support for Indigenous individuals and communities facing crisis or loss. • Collaborates with Indigenous communities and organizations to preserve and revitalize traditional Indigenous spiritual practices and beliefs. • Provides education and training on Indigenous spiritual practices and beliefs to Indigenous individuals and communities, as well as to non-Indigenous organizations and providers.
<p>Natural Helpers (Aunties and Uncles)</p>	<p>Members of an Indigenous community who provide informal support and guidance to others. They may play various roles, including providing emotional support, offering advice and wisdom, and serving as role models and mentors. In many Indigenous communities, Natural Helpers are respected members of the community who have a wealth of knowledge and experience to share. They may have a particular area of expertise, such as traditional healing practices, or offer a listening ear and a supportive presence to those in need.</p> <p>The role of Natural Helpers is often informal. It may include supporting families, youth, and elders and providing guidance and support to those struggling with mental health, substance use, or other challenges. They may also provide support and mentorship to individuals looking to reconnect with their culture or community.</p> <p>The role of Natural Helpers is highly valued in Indigenous communities, as they provide a crucial source of support and guidance to those in need. By sharing their knowledge, wisdom, and experience, natural helpers help to build resilience and strong, connected communities.</p>
<p>Knowledge Keeper</p> <p><i>or</i></p> <p>Traditional Knowledge Keeper</p>	<p>An Indigenous person who holds and preserves the traditional knowledge, stories, and practices of their community. They play a critical role in maintaining cultural continuity and ensuring that traditional knowledge is passed down from generation to generation.</p> <ul style="list-style-type: none"> • Maintains and shares traditional knowledge through storytelling, song, dance, and other cultural practices. • Collaborates with Elders, cultural artists, and other community members to preserve and promote Indigenous culture and traditions. • Participates in community events and ceremonies to share traditional knowledge and practices. • Mentors and trains the next generation of Knowledge Keepers. • Participates in research projects and initiatives to ensure that traditional knowledge is respected and used appropriately. • Develops educational resources and programs to promote Indigenous cultural knowledge and practices.
<p>Cultural Artists (language, regalia making, music, arts, storytelling, crafts, etc.)</p>	<p>An Indigenous artist who creates work that reflects and celebrates their cultural heritage and traditions. This may include various artistic forms, including visual arts, dance, music, theatre, and storytelling.</p> <p>Cultural Artists play an important role in preserving and promoting Indigenous culture, and their work often reflects essential aspects of Indigenous history, traditions, and spirituality. Their art may also address contemporary issues affecting Indigenous peoples and communities, such as reconciliation, self-determination, and decolonization.</p> <p>Cultural Artists may work in various settings, including museums, galleries, cultural centers, schools, and community organizations. They may also work independently, creating and sharing their work through multiple platforms and channels. By creating and sharing their work, Cultural Artists help to build cultural understanding and raise awareness of Indigenous cultures and traditions. They also play a critical role in supporting revitalizing Indigenous cultural practices and preserving Indigenous cultural heritage for future generations.</p>
<p>Land-based Programmer</p>	<p>Implements programs and activities rooted in a specific community's cultural and ecological traditions on their ancestral lands. These programs often aim to revitalize traditional ways of life and deepen connections between people and the environment.</p>

	The activities range from cultural practices and ceremonies to environmental restoration and conservation to sustainable resource management.
Traditional Medicine Keeper and Knowledge Teacher	<p>Expert in preserving and practicing traditional healing methods and knowledge in a specific cultural context. Responsible for maintaining and sharing their community's traditional medical practices and beliefs. They may use a variety of natural remedies and healing techniques passed down through generations. In some cultures, Traditional Medicine Keepers also play a role in spiritual healing and connecting individuals with their ancestors and the spiritual world. Traditional Medicine Keepers are considered important cultural figures and are often held in high esteem by their communities. They may also act as cultural advisors, providing guidance and support on various community health and well-being issues. Some traditional medicine keepers also work with contemporary health practitioners to integrate traditional healing practices into modern healthcare systems. In many cultures, the role of Traditional Medicine Keeper is passed down through families and is considered a sacred responsibility.</p>
Language Holder and Keeper	<p>Expert in preserving and sharing their traditional language. They are crucial in transmitting language and cultural knowledge to future generations and preserving their cultural heritage. Indigenous languages hold important cultural, spiritual, and historical significance, and their preservation is essential for maintaining the cultural identity and connections to land, community, and ancestors. Indigenous language holders and keepers work to revive, revitalize, and carry their language and may provide language classes, resources, and support to community members. Indigenous Language Holders and Keepers play a critical role in preserving their communities' language and cultural heritage and working to pass it on to future generations. In addition to language preservation, Indigenous Language Holders and Keepers may also play a role in cultural revitalization efforts, connecting community members to their ancestral lands and traditions. They may also participate in community gatherings, cultural ceremonies, and other events to share their knowledge and language with others. The role of Indigenous Language Holder and Keeper is often passed down through families and is considered a sacred responsibility. By preserving their language, Indigenous Language Holders and Keepers are preserving their community's cultural identity and history and ensuring its survival for generations to come.</p>
Cultural Safety Trainer	<p>Provides training and education on cultural safety to healthcare providers and organizations. Cultural safety training aims to increase cultural competency and understanding among healthcare providers and to promote culturally safe and respectful care for Indigenous patients.</p> <ul style="list-style-type: none"> • Delivers cultural safety training and education to healthcare providers and organizations. • Develops educational materials and resources to support cultural safety training and education. • Facilitates discussions and workshops on cultural safety and cultural humility. • Provides guidance and support to healthcare organizations as they work to implement culturally safe practices and policies. • Collaborates with Indigenous communities and organizations to ensure that cultural safety training is culturally appropriate and relevant. • Evaluates the impact of cultural safety training on healthcare providers and organizations.
Cultural Safety Curriculum Developer	<p>Designs and develops cultural safety training programs and curricula for healthcare providers and organizations. Cultural safety curriculum development is critical to promoting culturally safe and respectful care for Indigenous patients in healthcare settings.</p> <ul style="list-style-type: none"> • Designs and develops cultural safety training programs and curricula for healthcare providers and organizations. • Collaborates with Indigenous communities and organizations to ensure that cultural safety curriculum is culturally appropriate

	<p>and relevant.</p> <ul style="list-style-type: none"> • Develops educational materials and resources to support cultural safety training and education. • Reviews and updates cultural safety curricula on an ongoing basis to reflect current practices and best practices in cultural safety. • Provides guidance and support to healthcare organizations as they work to implement culturally safe practices and policies. • Evaluates the impact of cultural safety training programs and curricula on healthcare providers and organizations.
<p>Indigenous Trauma-Informed Specialists</p>	<p>Applies a trauma-informed approach to their work with Indigenous communities while also incorporating an understanding of Indigenous peoples' unique historical and cultural experiences. They recognize the effects of colonization, residential schools, and other traumatic events on Indigenous communities and aim to provide culturally safe and appropriate support. An Indigenous Trauma-Informed Specialist may work in various fields, such as mental health, social work, education, or community development, and may provide individual or group therapy, community outreach, or training and education on trauma-informed practices. They strive to empower Indigenous individuals and communities to heal from trauma's effects and build future resilience.</p> <p>An Indigenous Trauma-Informed Specialist recognizes the importance of cultural identity and connection to land and community in the healing process. They may incorporate traditional healing practices and ceremonies and work with Elders and Knowledge Keepers to provide a holistic approach to healing. An Indigenous Trauma-Informed Specialist may also play a role in addressing systemic issues, such as the over-representation of Indigenous peoples in the criminal justice system and child welfare, and work to promote cultural safety and anti-racism in their communities. Considering the historical and ongoing effects of colonization and systemic oppression, an Indigenous trauma-informed specialist works towards creating a more equitable and healing future for Indigenous communities.</p>
<p>Culture-based Midwife and Traditional Delivery Supports</p>	<p>Incorporates Indigenous cultural practices and traditions into their work with expectant mothers and families. They aim to provide holistic and culturally appropriate care that supports the well-being of mothers, babies, and families.</p> <p>In many Indigenous communities, midwifery has a long history as a traditional and respected profession. A cultural-based midwife may work with Traditional Birth Attendants, Elders, and Knowledge Keepers to provide various services, including prenatal care, birth support, and postpartum care.</p> <p>In addition to providing medical care, a Cultural-Based Midwife may incorporate traditional healing practices, such as herbal remedies, massage, and ceremony, into their work. They may also provide support for families to make informed decisions about their care and help to connect them with community resources and support.</p> <p>In some communities, a cultural-based midwife may also work to support the revitalization of Indigenous midwifery practices and raise awareness about cultural-based care's importance. By incorporating cultural practices and traditions into their work, a cultural-based midwife supports the well-being of Indigenous mothers, babies, and families and helps preserve their community's cultural heritage.</p>
<p>Indigenous Patient Navigator</p>	<p>Provides support and guidance to Indigenous patients and their families as they navigate the healthcare system. The primary role of an Indigenous Patient Navigator is to assist patients in receiving the highest quality care possible by advocating on their behalf and ensuring that their cultural needs and rights are met. This may involve connecting patients with appropriate support and building strong relationships with Indigenous communities and organizations.</p> <p>The Indigenous Patient Navigator is knowledgeable about Indigenous cultures and traditions and is committed to cultural sensitivity and respect. They stay informed of healthcare policies and regulations and work to advocate for changes that will benefit Indigenous patients and their families.</p>

The goal of an Indigenous Patient Navigator is to help remove barriers to care for Indigenous patients, ensuring they receive the care they need in a culturally appropriate and sensitive manner.

Regulated Profession

Benchmark Job Title	Alternative Titles	Job Description / Duties	Typical requirements / Qualifications
Registered Practical Nurse (RPN)		Provides nursing services for individuals, families, communities and groups, delivers health education programs and provides consultative nursing services to promote maintain and restore patient health. <ul style="list-style-type: none"> • Collaborates with an interdisciplinary team of professionals. 	Certification as a Registered Practical Nurse Current registration with the College of Nurses in Ontario
Registered Nurse (RN)		Provides direct client support, nursing care and educational programs and performs necessary clinical functions to facilitate the delivery of comprehensive primary health care. <ul style="list-style-type: none"> • Provides professional nursing services for individuals, families, communities, and groups, delivers health education programs, and provides consultative nursing services to promote maintain and restore patient/client health. • Collaborates with an interdisciplinary team of professionals. 	BScN or equivalent combination of education and experience Current Registration with the College of Nurses of Ontario
Nurse Practitioner (NP)		Responsible for managing, directing, and providing comprehensive health care for clients. Oversees provision of clinical services. <ul style="list-style-type: none"> • Provides a variety of functions including assessment and diagnosis, clinical therapeutics, health promotion and disease, family education and support, program development and planning and administrative responsibilities to support the delivery of services. • Collaborates with an interdisciplinary team of professionals. 	Masters level degree in Nursing along with successful completion of an educational program for Nurse Practitioners (or legacy Baccalaureate) Registration in the Extended Class with the College of Nurses of Ontario.
Social Worker (MSW) *excludes roles also	Registered Social Worker	Provides assessment and evidence informed treatment - social casework, case management, counselling, crisis assessment/intervention,	Masters in social work

<p>performing psychotherapy; for roles inclusive of psychotherapy</p>		<p>individual family, treatment planning and group work services to clients.</p> <ul style="list-style-type: none"> • Acts as a client advocate to ensure that clients receive community supports, health, social and recreational services. • Compiles information on community resources and facilitates access to them by liaisons with community groups. • Provides social support services to clients. 	<p>Current registration with the College of Social Workers and Social Service Workers.</p> <p><i>Note: if BSW, participants were asked to indicate “-“on the job data collection to indicate a smaller job match.</i></p>
<p>Therapist (Therapist, MSW) inclusive of psychotherapy</p>	<p>Registered / Clinical Psychotherapist, Psychotherapist, Individual / Couple / Family / Child and Youth Therapist</p> <p>*Note: this role should be predominately providing therapy / psychotherapy services</p>	<p>Provides evidence-based therapeutic interventions with regards to individual, couple, family, or group, applying appropriate psychotherapy models (i.e., talk based therapy) and performing controlled acts of psychotherapy. Psychotherapy models include but are not limited to:</p> <ul style="list-style-type: none"> • Cognitive-behavioural therapy (CBT) • Experiential and Humanistic therapies • Interpersonal therapy (IPT) • Psychodynamic therapy • Dialectical behaviour therapy (DBT) • Solution-focused therapy • Somatic therapies 	<p>Typically, a health care professional in addition to being registered with a regulated professional College.</p> <p>For example:</p> <ul style="list-style-type: none"> • College of Registered Psychotherapists of Ontario • College of Nurses of Ontario • Ontario College of Social Workers and Social Service Workers
<p>Psychologist</p>		<p>Provides consultation and direction to primary health care professionals with regards to client mental health and education, in addition to providing direct clinical care/counselling.</p> <ul style="list-style-type: none"> • Engages clients in individual psychotherapy to treat psychological disorders and acute symptoms of distress; includes assessment, diagnosis, and treatment. May be provided to individual, family or group and include behaviour modification programs. • Administers psychometric tests, scores results, writes psychological reports and provides feedback to clients and their families. • Collaborates with others to develop and 	<p>Ph.D. in clinical psychology</p> <p>Licensed member of the College of Psychologists of Ontario, or other equivalent provincial regulatory body</p> <p>5+ years experience in clinical psychology & providing direct patient care.</p>

		<p>implement treatment and intervention programs.</p> <ul style="list-style-type: none"> • May be responsible for program development and management or direction of research projects. 	
Registered Dietitian		<p>Plans and directs the nutritional care of clients and participates in health education programs to promote better nutrition.</p> <ul style="list-style-type: none"> • Assesses client nutrition needs and develops, implements, and evaluates interprofessional primary care-based nutrition programs. May include, responding to cases of diabetes, weight management, hyperlipidemia, impaired glucose tolerance, irritable bowel syndrome, food allergies. • Assesses client nutritional status by gaining an understanding of food habits or preferences (socio-economic, psychosocial, and cultural background) and clinical profile. Monitors client progress. • Assists clients/community in making healthy food choices by developing nutritional plans, advocating nutritional best practices, incorporating all the above factors in oral and written form as well as participating in outreach and education programs. 	<p>Relevant degree and experience in clinical counselling and nutrition</p> <p>Current registration with the College of Dietitians of Ontario and Dietitians of Canada.</p>
Pharmacist		<p>Practices client-centred care to achieve optimal drug therapy outcomes and provides information and training as a specialist in evidence-based pharmaceutical information.</p> <ul style="list-style-type: none"> • Performs pharmacy services aligned with established legislation, standards of practice, Code of Ethics, policy, and guidelines. 	<p>Pharmacy degree from an accredited university and Certification of the Ontario College of Pharmacy, or other equivalent provincial regulatory body</p> <p>3+ years experience in hospital or primary health setting.</p>
Physician Assistant		<p>Works with supervising physician and team of multi-disciplinary health providers, provides direct client care.</p> <ul style="list-style-type: none"> • Orders/administers diagnostic tests and complete preliminary diagnostics. 	<p>Graduate of an accredited physician assistant education program</p> <p>Registered with the Canadian Association of Physician Assistants</p>

		<ul style="list-style-type: none"> • Completes physical assessments, formulates treatment plans, and performs diagnostic procedures as directed. May also perform therapeutic procedures (i.e., injections, wound care, infection management, etc.). • Supports medical record keeping. • Provides education to clients/caregivers, including review of prescribed therapeutic regimens. 	Certified by the Physician Assistant Certification Council of Canada.
Physiotherapist		<p>Provides physiotherapy functions and participates in the development, implementation, monitoring and evaluation of programs and services for individuals, families, and the community.</p> <ul style="list-style-type: none"> • Performs assessment, treatment, health education/counselling and other physiotherapy activities according to the College of Physiotherapists of Ontario. • Ensures physiotherapy areas, resources, materials, and equipment are maintained. 	<p>Undergraduate degree in physiotherapy from a recognized university</p> <p>Registration with the College of Physiotherapists of Ontario, or other equivalent provincial regulatory body.</p>
Occupational Therapist		<p>Provides occupational therapy functions and participates in the development, implementation, monitoring and evaluation of programs and services for individuals, families, and the community.</p> <ul style="list-style-type: none"> • Performs assessment, treatment, health education/counselling and other occupational therapy activities according to the College of Occupational Therapists of Ontario. • Ensures occupational therapy areas, resources, materials, and equipment are maintained. 	<p>Undergraduate degree in occupational therapy from a recognized university</p> <p>Registration with the College of Occupational Therapists of Ontario, or other equivalent provincial regulatory body.</p>
Kinesiologist		<p>Assesses, treats, educates, and manages of clients requiring therapeutic intervention, in accordance with professional standards.</p> <ul style="list-style-type: none"> • Responsible for the assessment of clients, establishment and ongoing evaluation of treatment programs including job coaching, goal 	<p>Undergraduate degree in from a recognized university</p> <p>Registered Kinesiologist in good standing with the College of Kinesiologists of Ontario or other equivalent provincial regulatory body.</p>

		<p>setting, work hardening and return to work programs.</p> <ul style="list-style-type: none"> • Responsible for completing ergonomic assessments and job demands analyses. • Communicates with community partners as it pertains to client care. 	
Chiropractor		<p>Diagnoses and treats musculoskeletal conditions of spinal column and extremities to prevent disease and correct abnormalities of body believed to be caused by interference with nervous system.</p> <ul style="list-style-type: none"> • Evaluates patients, performing examinations to determine nature and extent of disorder. • Administers diagnostic procedures including physical, neurologic, and orthopedic examinations, laboratory tests, and other procedures, using x-ray machine, proctoscope, electrocardiograph, otoscope, and other instruments and equipment. • Adjusts and manipulates spinal column and other extremities to align, or correct abnormalities caused by neurologic and kinetic articular dysfunction. 	<p>Completion of a Doctor of Chiropractic Degree Current Registration with the College of Chiropractors of Ontario.</p>
Speech Pathologist		<p>Provides speech and language therapy functions and participates in the development, implementation, monitoring and evaluation of programs and services for individuals, families, and the community.</p> <ul style="list-style-type: none"> • Performs assessment, treatment, health education/counselling and other speech and language therapy activities according to the College of Audiologists and Speech-Language Pathologists of Ontario. • Ensures speech and language therapy areas, resources, materials, and equipment are maintained. 	<p>Graduate degree in speech-language pathology from a recognized university Registration with the College of Audiologists and Speech-Language Pathologists of Ontario, or other equivalent provincial regulatory body.</p>

<p>Respiratory Therapist</p>		<p>Provides services to individuals with Chronic Obstructive Pulmonary Disease (COPD) and other chronic conditions as a member of the care delivery team.</p> <ul style="list-style-type: none"> • Assesses and treats clients in collaboration with interprofessional team, or by information obtained through physician / laboratory reports / health records, providing comprehensive care. • May make referrals and contribute to chart documentation and/or suggest modifications to patient care plans. • Provides health education / counselling to individuals and groups; facilitates other clinical activities in relation to respiratory care and/or chronic disease management; may be in conjunction with health educators/community partners. • Provides expertise in initiation and application of oxygen therapies, delivery of medication by inhalation and respiratory diagnostic services. 	<p>Undergraduate degree from a recognized university or combination of diploma and relevant courses/training</p> <p>Member in good standing and current certificate of competence from the College of Respiratory Therapists of Ontario in addition to basic (Cardiopulmonary resuscitation) CPR certification in addition to Advanced Cardiovascular Life Support (ACLS) certification</p>
<p>Chiropodist</p>		<p>Provides comprehensive diagnosis and treatment of foot disorders and mechanical problems of lower limbs.</p> <ul style="list-style-type: none"> • Maximizes the functioning and independence of clients by treating and preventing disease, dysfunctions, or disorders of the foot by therapeutic, orthotic, or palliative means. • Facilitates client participating in care plans, focusing on improving mobility, enhancing independence and management of disease. • Ensures ongoing foot care by monitoring client progress on a regular basis and provides information to other staff and agencies. • May prescribe medications, administer injections, and perform soft tissue procedures. 	<p>Relevant degree/diploma in addition to current general certificate with the College of Chiropodists of Ontario, or other equivalent provincial regulatory body.</p>
<p>Foot Care Specialist (*Not a Chiropodist)</p>		<p>Provides foot assessment and treatment for common foot ailments, providing direct client</p>	<p>Certification as a Registered Practical Nurse</p>

		<p>care.</p> <ul style="list-style-type: none"> • Provides treatment various foot ailments such as onychomycosis (tinea unguium), corn, callouses and provides preventative support. • Understands compounding health issues such as diabetes, mellitus, and arthritis and how it may impact patient abilities and care needs. 	<p>Current registration with the College of Nurses in Ontario.</p>
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Clinical/Service/Program Delivery

Benchmark Job Title	Alternative Titles	Job Description / Duties	Typical requirements / Qualifications
Counsellor	Addictions Counsellor, Group Counsellor, Settlement Counsellor, Employment Counsellor, Social Service Worker	<p>Provides individual counselling and treatment planning in consultation with other staff for persons using the organization.</p> <ul style="list-style-type: none"> • Assesses client status; gains understanding of socio-economic position, psychological outlook, housing, financial and legal needs. • Assists in locating required community resources by liaising with community groups and other health/social service agencies to provide referral information; acts as a case coordinator to align available resources. • Ensures comprehensive treatment for patients/clients by providing individual/family counselling and, when necessary, referring them to other professionals. • May focus on specific needs such as facilitating newcomer settlement and integrating into society or conducting vocational assessments to support entering the labour force. 	<p>2-4 years experience in a community-based human service organization</p> <p>Degree or diploma in a health, social science discipline, adult education, or communication</p> <p>Understanding of community resources. Ability to deal effectively with crises.</p>
Personal Support Worker		<p>Provides homemaking and personal support services, either on site or in client home.</p> <ul style="list-style-type: none"> • Provides direct support to clients to enable safe and independent living as possible. • Supports performing light exercise and assists with mobility. 	<p>Completion of the Personal Support Worker (PSW) Program or equivalent experience</p> <p>Note: this role is an unregulated health worker.</p> <p>Specific to LTC: PSW program meeting Ministry standards which includes 600 hours</p>

			counting class and practical experience time.
Community Health Planner		<p>Supports senior management in the coordination of strategic planning, evaluation and research that supports capability to influence and respond to systematic changes within the health and social services system. Acts as a champion for evidence-based planning in clinical and administrative programs.</p> <ul style="list-style-type: none"> • Scans, tracks, and analyzes systemic issues which impact primary care and aids in the development of new and/or adapted programs and services to address gaps in primary care. • Monitors health and social services sectors at the local, regional, provincial, and federal levels with respect to new directions, policies shifts and restructuring. Identifies emerging policy issues at a strategic level and provides analysis and recommendations to senior management. • Analyzes information and develops reports to support organization-wide staff planning and resources, typically focuses on mid-range planning (i.e., 3-5 years) with input to annual operating plans. May develop and maintain accountability frameworks. • Coordinates organization evaluation and research to assess organization programs and develops opportunities to enhance the health of the community. May work with a data management coordinator for the purpose of planning and evaluation to improve client health and health systems. 	<p>Master's degree in planning, Health Administration, Health Promotion of Medical Informatics field; or equivalent combination of training experience; typically, 5 years at minimum</p> <p>Demonstrated skill in report and funding proposal writing, with capacity to present data analysis and interpretation within reports.</p> <p>Experience in the healthcare sector with demonstrated knowledge in understanding strategic planning and program evaluation.</p>
Health Promoter	Health Educator, Public Educator	Coordinates, implements and oversees the health education/promotion programs and facilitates the integration of a health education / mental health education/promotion focus on organization activities.	<p>Experience and knowledge of health promotion and education, community organizing techniques, group facilitation, social marketing and program design and evaluation.</p> <p>Post-graduate degree in health, social</p>

		<ul style="list-style-type: none"> • Recommends and implements programs which meet identified needs by establishing terms of reference, identifying priority populations, gathering, and analyzing information and presenting a plan of action. • Assists in the development of funding proposals and health education/promotion activities. • Participates in planning, implementation and outreach activities for various target groups and conducts systematic ongoing evaluations of projects. • Prepares reports and make recommendations related to health education/promotion. • Liaises with community/primary care groups and other agencies to provide referral information. 	<p>science, adult education, or a related discipline.</p>
Community Health Worker		<p>Assists in planning and implementing of health programs and furthers the work of the Centre/organization/site (not a Registered Nurse).</p> <ul style="list-style-type: none"> • Identifies programs and resources needed to support activities by developing and maintaining formal and informal community networks. • Participates in the planning and development of programs by conducting needs assessments and outreach. • Assists in the implementation and participates in the delivery, evaluation, and maintenance of education/promotion health programs. • Encourages community participation in programs and identifies health and social needs. • Establishes links with other community groups to identify opportunities for collaboration in program and service delivery, provides information to and assists clients in articulating and advocating for health and related services. 	<p>Thorough knowledge of, and proficiency in, community development activities</p> <p>2+ years experience in a community-based human service organization</p> <p>Baccalaureate degree in a health or social science discipline or a combination of some post secondary education and significant experience in community development and/or health promotion.</p>
Care Navigators	APSW (Adult Protection Service Workers), System Navigators, Client Navigator	Development and delivery of health information / program specific information through client/patient education and support, engaging with key stakeholders such as staff, residents,	Thorough knowledge of, and proficiency in, community development activities

		<p>families, and care providers to increase program uptake.</p> <ul style="list-style-type: none"> • Plans outreach activities, integrating health promotion/protection/prevention messaging. Leads information sessions. • Collaborates with the community, assisting individuals in taking responsibility for maintaining and improving health. • Provides individual support as individuals/groups navigate the system; acts as a point of contact and works with onsite partners and may support preliminary intake/assessment. 	<p>2+ years experience in a community-based human service organization</p>
Community Ambassadors		<p>Engages with residents within the community, to be a liaison between agencies, residents, and local service providers, to support growth and development of communities.</p> <ul style="list-style-type: none"> • Works closely with network of local service providers, understanding sources of support to provide information and help navigate and connect community members with services/support. • Engages with newcomers, racialized and/or vulnerable populations to provide frontline services and outreach. • May perform wellness check in calls, host face to face or virtual interactions, provide 	<p>Knowledge of community development with the ability to understand and respond to changing community needs, outreach experience.</p>
Case Manager	Service Coordinator	<p>Provides comprehensive review of needs of an individual to ensure appropriate services are provided; often by referrals and coordinating care, by assessing and creating a wholistic care plan.</p> <p>This may include community treatment, rehabilitation, and support to clients by providing a continuum of functions, including outreach, support plans, advocacy, symptom management, counseling / family support and crisis intervention.</p>	<p>Relevant post secondary education, typically:</p> <ul style="list-style-type: none"> • BSW or equivalent • Case management diploma • Nursing • OT • BA in Health • College Diploma
Recreationist/Program Activationist	Recreation Programmer, Recreation Assistant, Tenant Activities	<p>Plans, implements, monitors, and evaluates social, recreational, restorative and activation programs for clients considering specific challenges and</p>	<p>Experience in a service role; ability to interact empathetically with clients.</p>

<p>Note: Not a Recreation Therapist</p>	<p>Coordinator, Social Activities Programmer</p>	<p>accommodations needed. Example: older, frail, with Alzheimer's, dementia, neuro a-typical, or physical accommodation for disability required.</p> <ul style="list-style-type: none"> • May set up calendar of events and work with others to determine program needs, and then facilitates and oversees the activities. Promotes activities. • Considers outings, speakers, events, clubs, or other activities that can increase well-being 	<p>Relevant education preferred (i.e., Recreation Leadership or Activation).</p> <p>For LTC Sector to comply with FLTCA: enrollment/completion of post secondary diploma/degree in relevant field from community college or university.</p>
<p>Addiction Service Worker</p>	<p>Withdrawal Management / Addictions Worker</p>	<p>Provides a comprehensive range of withdrawal management and support services directly to clients.</p> <ul style="list-style-type: none"> • Provides screening/assessment, case management, counselling, support, education, and follow-up care. • May include working with clients requiring methadone. • Liaises with district/regional health care services facilitating referrals to appropriate addictions and mental health treatment programs. 	<p>Post secondary education in health or social services with specialization in addictions.</p>
<p>Child and Youth Worker (Residential / Day Treatment / Community)</p>		<p>Under direction and as part of a clinical team, provides counseling, casework, group work, advocacy, consultation, education and/or community development to assist children youth in residential settings, agency, school, childcare, in-home and/or to their families.</p> <ul style="list-style-type: none"> • Works directly with children and youth who may be vulnerable and/or at risk. Delivers both individual and group support. • Ensures safe, comfortable, and welcoming environment and provides age-appropriate activities with adaptations as needed. 	<p>Post secondary education (Child and Youth Worker or equivalent, 3-year college program).</p>
<p>Overnight Attendant/Worker</p>		<p>Maintains security and safety in a residence during regular sleeping hours.</p> <ul style="list-style-type: none"> • Typically, will have minimal contact with clients except in the event of fire or another catastrophe. • Carries out routine inspection during the shift, performs such minimal housekeeping duties as 	

		<p>may be assigned, in conformity with current phytosanitary conditions.</p> <ul style="list-style-type: none"> • May prepares meals. 	
Court Support Worker		<p>Responsible for supporting and advocating for individuals involved in the criminal justice and family court systems that have a need for support (e.g., mental illness, addiction, victims of crime, youth, and adult offenders).</p> <ul style="list-style-type: none"> • Works closely with the Crown Attorney’s Office, Counsel, police, corrections, and community service agencies to provide linkages to treatment and support. 	<p>Relevant degree or diploma</p> <p>Thorough understanding of legal processes to assist others.</p>
Housing Support Worker	Housing Help Coordinator, Housing Resource Intake	<p>Responsible for providing housing support to clients by assessing an individual’s housing and support needs, providing for these needs, and recruiting and screening property owners for private accommodation and/or accommodations that may be owned by the organization/agency.</p> <ul style="list-style-type: none"> • Completes intake work; screens for eligibility and assess needs. • Provides internal/external referrals. • Compiles lists of local rental housing vacancies; matches needs to clients and/or provides information to housing counsellors / counsellors. • May assist individuals to access basic needs (i.e., food, clothing), secure income support (i.e., OW, ODSP), secure housing, provide third party mediation between clients/landlords and support application completion (i.e., rental applications). 	<p>Relevant degree or diploma</p> <p>2+ years experience working in housing or social services with knowledge of local housing and social service systems, in addition to Residential Tenancies Act.</p>
Recreation Therapist	Therapeutic Recreation Programmer	<p>Plans/leads the life skill and recreation programs, based upon individual client/groups needs and goals.</p> <ul style="list-style-type: none"> • Assesses needs, goals strengths and abilities and applies professional knowledge and creativity to develop and implement suitable programs, adjusting for any client barriers. • Works collaboratively in with others such as physical therapy and occupational therapy in a multidisciplinary team to develop holistic 	<p>Relevant education in applicable field such as recreational therapy, gerontology, or health studies</p>

therapeutic plans and provides education about therapeutic movement and recreation and how to best incorporate into client plans.
 Example: may develop therapeutic recreation/leisure programs that support independence of frail seniors, while considering the adjustments required to apply the program for individuals who may be cognitively impaired.

Clinical/Service/Program Support

Benchmark Job Title	Alternative Titles	Job Description / Duties	Typical requirements / Qualifications
Clinical Assistant		<p>Provides support services for teams to ensure efficient operations of the clinical programs.</p> <ul style="list-style-type: none"> • Ensures proper set up of exam rooms, maintaining clean and sterile environment and maintaining medical equipment. • Assists with appointment scheduling and client flow. • Provides administrative support including medical supply inventory and billing data entry. 	<p>Medical, clinic or laboratory office experience; proficiency in typing and use of computers. Secondary school diploma.</p>
Medical Secretary	Clinical Secretary	<p>Operates and maintains appointment, chart management and third-party billing systems and provides clerical/administrative support and reception functions.</p> <ul style="list-style-type: none"> • Schedules client/specialists and diagnostic testing. Maintains appointment scheduling and resource/referral director. • Prepares/maintains/updates/tracks file charts manually and electronically. • Prepares reference/consultation letters. • Performs third party billing. • Prepares examination rooms, maintains inventory. • Performs reception duties. 	<p>Health setting office experience; proficiency in typing and use of computers. Secondary school diploma; preferably Medical Secretary certificate.</p>
Volunteer Coordinator / Administrator		<p>Manages/coordinates volunteers within the organization.</p> <ul style="list-style-type: none"> • Recruits, retains and orients/trains volunteers 	<p>Post secondary school education preferred; knowledge of volunteerism (1+ year of experience).</p>

		<p>and tracking (i.e., time logs, availability).</p> <ul style="list-style-type: none"> • May conduct needs assessments to identify where volunteers would be of most use. • Organizes volunteer recognition programs. 	
Data Management Coordinator	RAI (Resident Assessment Instrument) Coordinator	<p>Provides data support and data management functions of the organization.</p> <ul style="list-style-type: none"> • Develops and implements systems and protocols to support the complete and accurate entry of data. Identifies, tracks, corrects, and prevents errors to ensure high quality data. • Produces information to support management decision making by developing, generating, analyzing, and interpreting data reports. • Maximizes efficient functioning and utilization of the data system, leverages software vendors and IT support resources. • Acts as the prime contact for resolving and escalating data support issues. 	<p>Post secondary education in relevant discipline with thorough knowledge/proficiency in use of computers and database and/or data management programs.</p> <p>3+ years experience.</p>
Quality/Decision Improvement Specialist / Lead	Decision Support Specialist, Quality Improvement and Information, Quality & Decision Support Specialist, Performance Lead, Health Performance Analyst, Quality & Evaluation Lead	<p>Provides leadership to projects responsible for process/quality improvement and provides monitoring oversight (clinical trials/research, patient-based research, regulatory support, education), to support quality assurance and regulatory compliance as well as enable continuous improvement.</p> <ul style="list-style-type: none"> • Conducts risk assessments / process studies, routine and directed audits including privacy reviews. Reviews any incidents, conducting debriefs and root cause analyses. Seeks to increase data quality and improve the flow and use of information. • Develops review processes or measurement frameworks to assess quality and compliance considering regulatory requirements and any other legislative requirements; supporting the development of new policy and procedures to improve consistency, quality and reduce risks. • Prepares quality and safety; provides quality 	<p>Post secondary education in relevant discipline with thorough knowledge of how to conduct monitoring, audit, and inspection activities for the purposes of quality & improvement.</p> <p>Example: statistics, health sciences, information management</p> <p>3+ years experience; proficiency in quantitative analysis.</p>

		<p>analyses to enable improvement.</p> <ul style="list-style-type: none"> • Supports leadership in reporting quality improvement goals / developing analytical tools for reporting; often supporting capacity building. • May work with others; sharing data and consolidating information with other databases to enable more data standardization, extraction, and analytics. 	
Peer Support Worker	Peer Worker, Support Worker	<p>Works with individuals who are experiencing need. May be focused on short term needs or ongoing support services.</p> <p>Examples: mental health crisis, addictions, harm reduction, ongoing programming (i.e., diabetes management)</p> <ul style="list-style-type: none"> • Engages individuals experiencing a crisis to develop tools and resources to manage their crisis effectively, develop strategies that assist them to prevent further crisis and establish personal goals that move them towards Recovery. 	<p>Lived experience.</p> <p>Optional Qualification: Peer Support Certification.</p>
Attendant Care	Respite Worker	<p>Provides homemaking and personal support services to people with physical or developmental disability who require assistance with the activities of daily living.</p>	<p>Unregulated health worker: commonly PSW program training preferred or DSW.</p>
Intake Coordinator		<p>Manages all aspects of the client intake process including collecting appropriate client information from referral sources, establishing, and maintaining positive relationships with clients and referral sources and responding to client requests and concerns.</p> <ul style="list-style-type: none"> • Completes intake forms/questionnaires to better assess new client needs. • Provides information about programs and facilities 	<p>Thorough knowledge of programs available to provide support within facility and referrals available.</p> <p>Experience in a service role; ability to interact empathetically with new</p>
Site Service/Program Coordinator	Daily Service / Program Coordinator, Scheduler	<p>Oversees the daily operation and administration of program(s) including organizing, staffing, scheduling, and coordinating program activities. This position does not have any direct supervisory responsibility.</p>	<p>Relevant degree</p> <p>Thorough understanding of facility logistics and program requirements.</p>

		<ul style="list-style-type: none"> • Supports the need to reschedule activities based upon daily availability of staff and facility resources. • Communicates programming changes to staff and clients/residents. 	
Driver		Provides safe, reliable, and timely transportation to clients/seniors according to an assigned schedule in a vehicle provided by the organization.	<p>G class license</p> <p>Note: if other license should be matched higher (+) on the job data sheet. Example: Class F (includes 15 passenger van or up to 24 passengers non school bus)</p>
Housekeeper	Housekeeping Aide	<p>Reporting to a managerial level role, this role is responsible for providing a variety of housekeeping duties to ensure the site/centre/facility is maintained in a safe, clean, and sanitary conditions.</p> <ul style="list-style-type: none"> • Cleans rooms, including flooring, furniture, and equipment. Includes sweeping, vacuuming, dusting, wiping surfaces. • Cleans and disinfects sinks, toilets, telephones, and other high touch areas. • Collection and disposal of garbage. • Replenishes supplies. • Escalates maintenance concerns (i.e., low on supplies, furniture damage, or other concerns). 	<p>Preference to previous housekeeping experience and completion of secondary school; but is not required.</p> <p>Note: This role within a long-term care environment is required to have a bachelor's degree as per the Fixing Long Term Care Act.</p>

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Appendix E: Methodology and Statistics

To formulate the information in this report, Eckler collected data, conducted quality assurance, and aggregated information to publish statistics.

Job Match Data

Data was collected by the provincial association's sponsored custom compensation survey and integrated with reliable information from other proprietary Eckler custom surveys, client data, publicly available disclosed data, published compensation surveys and collective bargaining agreements.

Participants matched their jobs to the benchmark job profiles and provided data for each position, where applicable. For each position where an organization submitted more than one match, each unique data point was reviewed to ensure that all matches were accurate and should all be included. If all are valid, then each unique data point was used for that organization.

For selected roles, data from the survey were augmented utilizing various data sources determined to be reliable by both Eckler, as well as the compensation working group. Additional data sources include:

- Market data as provided by Eckler, via other client work or custom surveys conducted.
- Collective bargaining agreements – Eckler also was able to source data from several bargaining units that were applicable to many of the benchmark jobs to aggregate into the information. Further, information regarding salary movement and forecast where available through the negotiated agreements was included in salary trend information.
- Public Sector Salary Disclosure – limited use, only where data could be validated for long-time incumbents over multiple year disclosure or multiple incumbents in position validating a compensation range maximum or validated with published job postings.
- Published compensation data such as organization job postings with salary range data provided and sufficient job details to match to survey model job.

Information Surveyed – Definitions

For collecting compensation data, Eckler provided definitions for various compensation elements which form both compensation design – the intended range of pay for a position as well as actual compensation – what an incumbent is currently being paid in the role.

Compensation data were reviewed, and any anomalies within the data were clarified with survey participants. Where data were questioned and clarification was not available, or circumstances are such that the data is correct but unique for specific reason to the organization or incumbent and would skew the data, data was not included in the final dataset.

Space was provided for additional comments with respect to the reported data for the role as well to ensure participants were able to provide any important context to the data of special circumstances that would influence the pay for an incumbent or position.

Job Information

The following information was collected to ensure / report:

- A good match to the benchmark role; typically, this would be a reasonable match to the title as well as ensuring that the quality of match is provided.
- Quality of Match is also utilized in publishing the survey data to advise on any skew in the sample to a smaller or larger role. Where roles are larger and this is due to additional certifications, any trend information could then be published if this was common in the market to identify skill/knowledge required for some identified roles.
- Standard reporting – by having hours of work we can adjust compensation reporting to be hourly or annual.
- Number of incumbents provides us with a better sense of if jobs are multi-incumbent within organizations or single incumbent roles.
- Union, On-call, and Overtime questions aggregate to then provide the overall perspective of type of compensation this role is typically eligible for, and, if they are within a bargaining unit or not.

Data Collection Field	Instructions
Job Title within your Organization	Record the title used in your organization for the position you have matched to the benchmark.
Portfolio	<i>For levelled roles only</i> - i.e., Director / Manager / Supervisor - we recognize the variety of ways areas of responsibility, or portfolios, can be placed together. We will strive to report both level of compensation and any trends if enough data are provided for specific roles. For example: Director of Finance, or Director of Finance and IT - can both be matched to the director role, but the portfolios should be specified in this column.
Quality of Match	<p>Your assessment of the "size" (scope/complexity) of the job in your organization versus the benchmark job (based on the description of responsibilities and qualifications provided).</p> <p>+ The position in your organization has greater scope and/or complexity than the benchmark. Typically, the job would be perceived as at least 15% larger and/or have higher levels of qualifications than specified.</p> <p>= The position in your organization is of similar scope and/or complexity as the benchmark. Typically, the job would be perceived as within +/- 15% of the benchmark.</p> <p>- The position in your organization has smaller scope and/or complexity than the benchmark. Typically, the job would be perceived as at least 15% smaller (i.e., less</p>

	than 85% of the scope/complexity of the benchmark) and/or have lower levels of qualifications than specified.
Additional Certifications	Where your role has additional certifications required; please provide this information. The qualifications should be required by the role, not a preferred hiring criterion only.
Work Location	Record the postal code of the work location for this position.
Standard Hours of Work	Record the standard hours of work for this role (weekly).
Number of Incumbents	"Record the number of incumbents in the position you have matched. If more than one, be sure to provide the average compensation for all incumbents in the role.
Union	"Y" for yes should be input if the role is part of a bargaining unit / covered by a collective agreement. Otherwise, N for No.
OT Eligible	"Y" for yes should be input if the role is eligible for overtime compensation. Otherwise, N for No.
On Call Eligible	"Y" for yes should be input if the role is eligible for additional compensation via on call payments (i.e., pay for the potential for being called into work during off period as well as compensation when called in). Otherwise, N for No.

Actual Compensation

Actual compensation data is collected to capture the real compensation data in the market; all participants were asked to provide data as of March 1, 2023.

Data Collection Field	Instructions
Actual Compensation (Base)	This is the annualized amount paid for work performed on a regular, ongoing basis that the incumbent received. It does NOT include variable bonus or incentive payments, sales commissions, shift premiums, or overtime payments. Record on an annual basis, as at March 1, 2023. If you are reporting multiple incumbents, provide an average of all incumbents.
Actual Incentive or Bonus Paid	This is any variable, incentive, bonus, or lump sum payment received in addition to base salary that the incumbent received. Record on an annual basis, as at March 1, 2023. If you are reporting multiple incumbents, provide average of all incumbents.

Compensation Design

Design compensation is collected to capture the overall perspective of the market with respect to intended compensation for fully qualified, solidly performing individuals as well as a range around this which

includes the lowest paid and highest paid values a position can have. From collecting design compensation data, we can contrast this with actual compensation data and determine any anomalies or trends in the market information.

Data Collection Field	Instructions
Salary Range	
Minimum	The lowest salary/rate that the organization is prepared to pay for an incumbent in the position. May be the starting salary for inexperienced/non-qualified hire or first step where step rates are utilized.
Job Rate / Control Point	Typically, the midpoint of the salary range, intended to reflect the salary the organization is prepared to pay for sustained competent performance by a fully trained / qualified incumbent - a solid performer. This may be the job rate / top step in many systems.
Maximum	The highest point in the salary range (or step progression). Note - this may be the same as "job rate" for many organizations that do not have room for "high performers" built into a salary structure.
Salary Admin - Steps / Ranges or Other?	Specify how you administer compensation for this role - salary range, step rates, single job rates or other? If other, please provide additional details in comments.
Short Term Incentive	
Eligible (Y/N)	Is the position typically eligible to participate an incentive program?
Target (%) Or Target (\$)	<p>"For either % of \$: If the position is eligible, and there is a specific amount of incentive for the role, record the target bonus rate for the position.</p> <p>Target bonus is the level of award (either a % of salary or a fixed dollar amount) that an employee in this position would expect to receive if all organization/corporate, team and individual performance goals (and/or quality standards) are ""met.""</p> <p>Example: This rate/amount is often communicated to employees as part of the incentive/bonus plan design, e.g., ""the target bonus for jobs in grade/band 6 is 8% of salary"" or ""the target bonus for jobs in grade/band 6 is \$3,000 annually""</p>
Discretionary	If the bonus plan is "discretionary", record the amount in this column. Discretionary plans have no target bonus rate and pay out at the end of the year at the discretion of Executive / Board and/or due to additional fund availability - but are not guaranteed / expected income.

Aggregated Statistics

Aggregated statistics are compiled by summing compensation elements; specifically, Eckler has prepared two aggregated statistics which provide a more holistic view of an incumbent’s annual compensation.

- Total Cash at Target: Actual Salary + Incentive Target
- Total Cash Design: Salary Control Point or Job Rate + Incentive Target

Where a role is not provided with an incentive, Total Cash at Target is equal to Actual Salary / Total Cash Design is equal to the Salary Control Point or Job Rate.

Statistics & Minimum Data Requirements

Information surveyed is provided in aggregated form only to ensure that (1) data for individual organizations or incumbents is not disclosed and (2) to ensure a statistically relevant sample. Eckler requires a minimum number of observations to publish compensation statistics as follows:

Statistic	Definition	Minimum Number of Data Observations
P90	90th percentile If all observations were sorted and listed from highest/largest to lowest/smallest, 10% of the observations would fall above the 90th percentile and 90% would fall below.	12
P75	75th percentile If all observations were sorted and listed from highest/largest to lowest/smallest, 25% of the observations would fall above this value and 75% would fall below.	8
P50	50 th percentile, also referred to as “median” If all observations were sorted and listed from highest/largest to lowest/smallest, 50% of the observations would fall above this value and 50% would fall below.	4
P25	25th percentile If all observations were sorted and listed from highest/largest to lowest/smallest, 75% of the observations would fall above this value and 25% would fall below.	8
P10	10th percentile If all observations were sorted and listed from highest/largest to lowest/smallest, 90% of the observations would fall above this value and 10% would fall below.	12

Average	Average The arithmetic mean of all values, calculated by adding up all the values and dividing by the number of observations.	3
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Appendix F: About Eckler

About Eckler

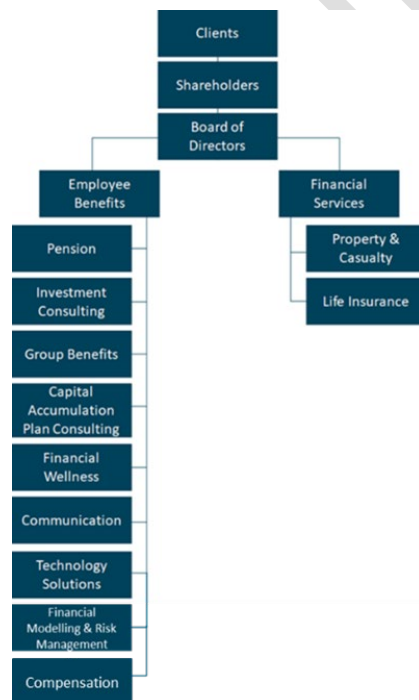
Established in 1927, Eckler Ltd. is one of the longest-established and most respected consulting and actuarial practices in Canada. With over 300 employees, we are the largest independent benefits and pensions consulting firm in the country. Our head office is located in Toronto, with additional offices in Winnipeg, Vancouver, Montreal, Quebec City, and Halifax; and two offices in the Caribbean (Jamaica and Barbados). In November 2021, Eckler was recognized by Waterstone Human Capital as one of Canada’s Most Admired Corporate Cultures for 2021. We have once again been awarded this honour in 2022. Eckler have always been guided by our democratic culture of trust and commitment to purpose.

We have evolved from a strictly actuarial firm to a fully integrated consulting practice, offering a complete range of employee benefit services including group benefits consulting, investment consulting, asset/liability modelling, technology solutions, communication and change management consulting, defined contribution plan consulting, compensation consulting, as well as financial wellbeing education.

We are a privately-owned company with Principal Shareholders who are actively involved in our consulting practice. Each Shareholder owns an equal number of shares in the firm, which ensures a highly democratic and equitable distribution of authority and responsibility. This operational structure helps us to maintain a strong entrepreneurial culture while ensuring stability.

Eckler has a unique organizational structure that consists of two distinct business units:

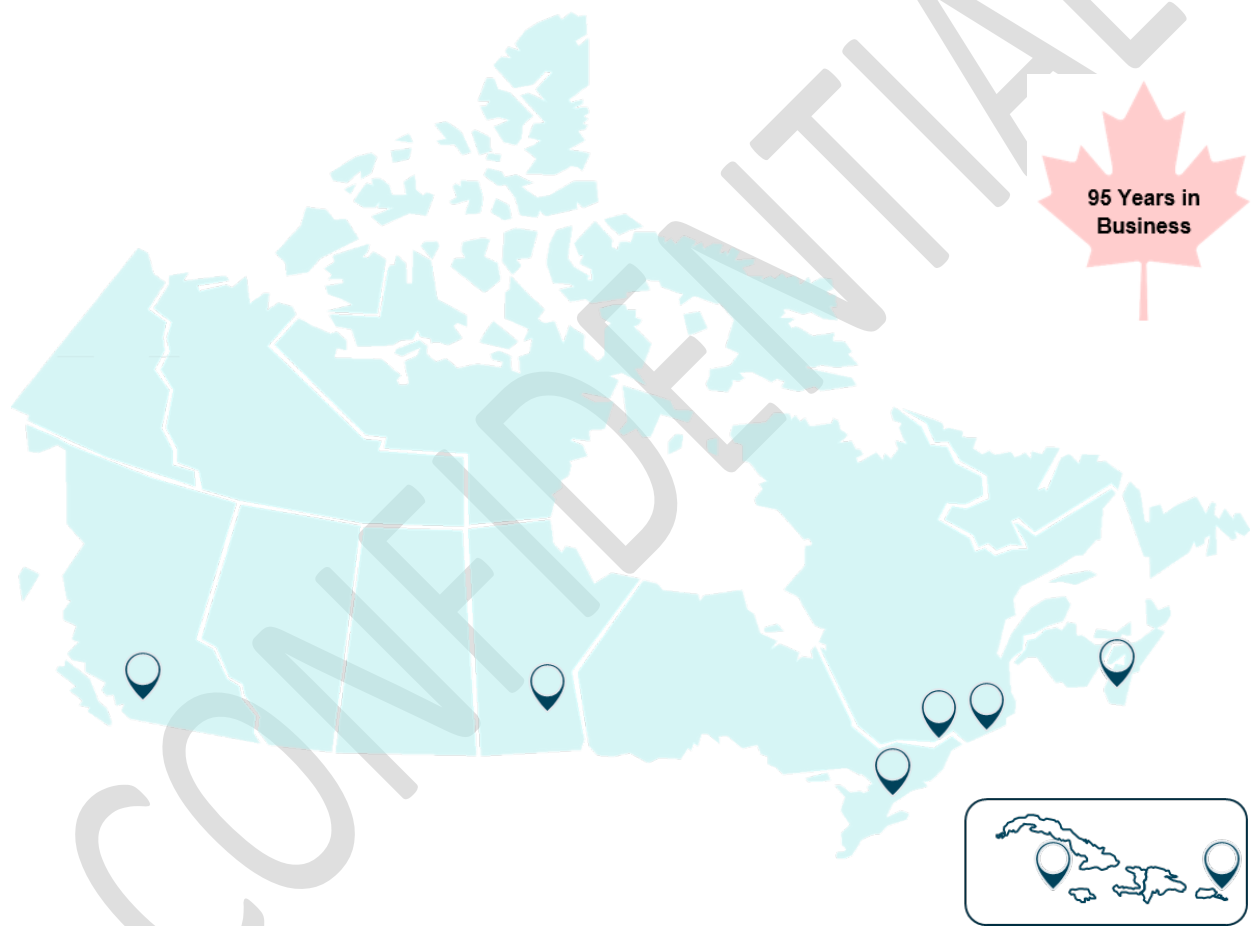
- Employee benefits which provides consulting services primarily to sponsors of pension and benefits plans; and
- Financial services, which consults primarily to insurance and other financial services companies.



Partnering with organizations from coast to coast and in the Caribbean – our team are accredited industry experts that bring relevant and real-life experience working across diverse industries. Our compliment of staff ensures we can leverage the right level of skill set, accompanied by multi-sector perspectives, ensuring your business and workforce maintains its competitive edge. We value who you are, what you believe in and the operating context you wish to thrive and excel in.

Our head office is in Toronto, with additional offices in Vancouver, Winnipeg, Montreal, Quebec City, and Halifax; and two offices in the Caribbean (Jamaica and Barbados).

As compensation experts, we support organizations by offering pragmatic solutions and data driven perspectives towards designing the optimum total rewards strategy. Our professionals are sought-after for their conscientious approach to seek business and total rewards alignment.



Need more information about Eckler or have a question about this report?

Contact compconsulting@eckler.ca and an Eckler colleague will respond to you.

Report Limitations

This report has been prepared by Eckler Ltd. (“Eckler”) for the individuals and organizations who provided responses to the Ontario Community Health Market Survey, including the 10 provincial associations forming the Compensation Working Group (the “Participants”) and is meant for their exclusive use and must be used solely for the purpose of measuring and monitoring compensation and total rewards trends, challenges and risks (the “Purpose”).

It must not be used for any other purpose, recited, referred to, published, quoted, replicated, reproduced or modified (in whole or in part) except as required by law or regulatory obligation, without Eckler’s prior written, express consent. The sole exception is that Participants may draw upon the results in this report to inform how they will advocate for increases to funded rates, but without creating any duty or liability on the part of Eckler. Prior to Participants utilizing the results of this report in accordance with the foregoing exception, any third parties must be informed that the results of the report that are referred to are confidential and must not be disclosed to any other party.

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