Appendix A – Canada-Manitoba Early Learning and Child Care Infrastructure Fund Action Plan

Canada-Manitoba Early Learning and Child Care Infrastructure Fund Action Plan: 2024 to 2025 through 2025 to 2026

Government of Manitoba

Department of Education and Early Childhood Learning

Section 1: INTRODUCTION

Summary of Initiatives Under Access Pillar

Under the Canada-Wide Early Learning and Child Care (CW-ELCC) Agreement, Manitoba committed to creating 23,000 new affordable child care spaces by 2026; as of March 2024, more than 8,500 spaces for children under the age of seven have been opened or committed as part of upcoming capital projects. While Manitoba continues towards its target, additional investments for child care spaces will continue to prioritize communities where the demand for child care is high yet access to affordable child care is limited. This includes rural and remote regions of Manitoba, and high-cost urban neighbourhoods that serve low-income families, with a focus on families facing the greatest barriers to access, such as racialized groups, First Nations, Métis and Inuit people, Official Language Minority communities, newcomers, as well as parents, caregivers, children with disabilities, and families requiring care during non-standard hours. Manitoba's 2023-24 to 2025-26 CW-ELCC Action Plan identifies three program areas that make child care more accessible for Manitobans:

- Capital Development
- Expansion Spaces
- Operating Grant for New Spaces

Table A: Access Investments under Canada-Manitoba Canada-Wide ELCC Action Plans 2023-2026

Program Initiative	Indicators	Targets	Fiscal year	Funding
Capital Development	Number of additional child care spaces for ages 0-6 initiated for development through capital development.	822 spaces	2023 - 2024	\$62.5M
		1,144 spaces	2024 - 2025	\$65.25M
		3,453 spaces	2025 - 2026	\$95.25M
Expansion Spaces	Number of additional child care spaces for ages 0-6 opened through expansion of existing spaces without capital.	1,642 expansion spaces	2023 - 2024	N/A (included in Operating Grant for new
		5,482 expansion spaces	2024 - 2025	
		6,121 expansion spaces	2025 - 2026	spaces)
Operating Grant for New Spaces	Number of new child care spaces for children ages 0-6 now receiving operating funding since 2017 (cumulative).	5,259 new spaces receiving operating grants	2023 - 2024	\$19.6M
		10,058 new spaces receiving operating grants	2024 - 2025	\$40.45M
		23,933 new spaces receiving operating grants	2025 - 2026	\$97.2M

Manitoba supports increased access to affordable child care by way of new operating grant funding for expansion spaces at existing non-profit facilities, and through capital grants to construct new centres. In Manitoba, 95% of all child care facilities are non-profit operators, with for-profit operators accounting for the remaining 5%. Because Manitoba entered into the CW-ELCC with such a significant proportion of its facilities already being funded, non-profit facilities,

to expand access to child care, Manitoba had to make significant investments in capital development to physically create new spaces. Manitoba expanded its partnerships in its capital program to connect with more public sector bodies to support this growth.

Manitoba's Existing Capital Child Care Programs

Prior to entering into the CW-ELCC Agreement, Manitoba provided capital grant funding under two streams:

- Early Learning and Child Care Building Fund, which provides community-based nonprofit organizations with capital grant funding toward a portion of their construction costs to create new child care spaces.
- The Child Care in Schools Policy enacted through The Public Schools Act, which requires all new schools and those undergoing a major renovation to consider the provision of new purpose-built child care spaces.

Since signing the CW-ELCC Agreement, Manitoba has expanded its capital child care program through a number of public sector partnerships to support expansion in areas with a high demand for child care. These projects work to address service gaps across the province, while recognizing the social, gendered, and economic benefit of available child care and its impact on other vulnerable sectors.

Municipal and Indigenous Governing Bodies

Manitoba's CW-ELCC Action Plan for 2021-2022 to 2022-2023 introduced the Ready-To-Move (RTM) Child Care Project in partnership with municipalities and First Nations to deliver child care in underserved communities with a demonstrated need based on their current demographics and projected population growth. These partnerships aid communities in economic advancement by supporting parents to maintain/gain employment and incentivize the establishment of businesses that have access to a local labour-force.

Post-Secondary Child Care Expansion Project

Manitoba's 2023-2024 to 2025-2026 CW-ELCC Action Plan outlined the Post-Secondary Child Care Expansion Project, which aims to increase the number of child care spaces located at post-secondary institutions across Manitoba. These projects prioritize access to care for students and faculty members. Co-locating child care services on campus encourages parents to enroll in, or complete, post-secondary education or vocational programing to assist with meeting provincial labour market needs, providing an immediate return on investment for the local and national economies.

School-Based Child Care Expansion Project

Building on the success of Manitoba's Child Care in Schools Policy, Manitoba's 2023-2024 to 2025-2026 CW-ELCC Action Plan also introduced the School-Based Child Care Expansion Project, which will create more than 2,600 spaces for children under seven at public schools in 19 school divisions across Manitoba. Through provincial investments, an estimated 500 new school-age spaces will also be created as shared spaces within schools. The School-Based

Expansion Project leverages the opportunity to use surplus property or building space to create new child care spaces, allowing more families to enroll in their catchment schools and supporting sustainable communities.

Child Care Renovation Expansion Grant

Acknowledging the expertise and dedication of existing child care operators, Manitoba introduced the Child Care Renovation Expansion Grant in its current three-year Action Plan to increase access to high-quality child care centres for families. The grant provides existing operators with capital grant funding of up to \$2M to create new child care spaces within their existing child care facility.

Manitoba's Child Care Infrastructure Funding Plan

Funding provided through the Canada-Manitoba Early Learning and Child Care Infrastructure Funding Annex will be directed to further benefit priority areas and underserved communities through the establishment of new public partnerships with Regional Health Authorities (RHAs) and health care facilities. These partnerships will expand child care services with a particular focus on flexible child care programming, including extended hour (care outside of normal hours, which include evenings, overnight and weekends) and casual care options. The need for flexible child care options is great, particularly for low-income families, lone-parent families and for families with parents who work shift-work and non-standard hours. The COVID-19 pandemic highlighted an increased need for these types of services, which are currently offered but in a limited manner in Manitoba with only 3 per cent of funded licensed facilities offering extended hour care. Twelve per cent of the population in Manitoba works in health care, which often requires shift work. Through this investment, child care will become more accessible and enable families to access licensed care during the hours that meet the demands of their employment.

Demographics of children and families most likely to face barriers accessing child care

Manitoba is a diverse and young province, with 18.8% of the population under the age of 15 years old and 6% of the population under the age of 5. The majority of Manitobans (more than 55%) live in the urban areas surrounding the cities of Winnipeg and Brandon, while 38% of Manitobans live outside of urban centers and 7% of Manitobans live in Northern Manitoba. The largest ethnic groups in Manitoba are English, German, Scottish, and Ukrainian. Twenty-two per cent of Manitobans belong to a racialized minority group; with the most common minority groups being Filipino, South Asian, Chinese, Black, Latino, and Arab. Manitoba has a strong tradition of welcoming new refugees and has historically welcomed the largest number of refugees per capita of any province in Canada.

Manitoba also has a diverse population of Indigenous peoples that make up nearly 17% of the total population, including First Nations (56.9%), Métis (40.8%) and Inuit (0.35%). The Indigenous population in Manitoba is proportionally younger than the non-Indigenous population. Indigenous children under the age of 15 represent 30.3% of the total Indigenous population. Where non-Indigenous children under the age of 15 make up 16.5% of the non-Indigenous population.

Similar to all jurisdictions throughout the country, the need for access to affordable child care is great for all Manitoba families. However, low-income families, Indigenous, Francophone, racialized families, lone-parent families, newcomers, families living in rural and northern Manitoba and families working non-standard hours face the greatest barriers to accessing child care.

To identify the areas of the province with the highest need for child care, Manitoba's Early Learning and Child Care division partnered with the Manitoba Bureau of Statistics to develop a Child Care Demand Modelling tool that uses Statistic Canada data for measuring the demand for child care. The Child Care Demand Modelling tool has been used to support decision making in capital and space expansion initiatives to ensure investments are directed at communities with a demonstrated need and those which are underserved.

The Child Care Demand Model is separated into two indices, gathered by Manitoba Bureau of Statistics, representing the population growth and proportion of underserved communities in relation to the rest of the province. The first indicator represents population growth factors, including number of children, utilization of existing facilities and current child care coverage in a demographic region. The second indicator represents demographic characteristics of the population, including the proportion of Indigenous and Francophone populations, immigrants, visible minorities, income and presence of single parents. An overall weighted index score graded 1.00 or higher represents high child care demand, 0.85 – 1.00 representing moderate to high child care demand, and <0.85 representing low to moderate child care demand. Manitoba's ELCC Infrastructure Fund will support projects in underserved communities where there are high demands for child care, coupled with a strategic approach to increasing retention in Manitoba's health care sector, in part through the provision of extended hours and flexible options for care.

Description of infrastructure and space creation challenges

Manitoba's early learning and child care landscape consists predominantly of non-profit operators, with only a small per cent of for-profit centres. Non-profit operators face several challenges when planning infrastructure and space creation projects. The greatest challenges are access to capital funding and financing options, and seeking an affordable, appropriate, and suitable location. Many non-profit operators struggle with securing a construction loan or mortgage from banks and financial institutions and require additional funding supports to take on a capital project.

Manitoba's partnerships with RHAs and health care facilities will support the health sector in developing on-site child care, which will be operated by third-party non-profit providers. This approach also allows Manitoba to leverage existing physical space provided by the RHAs to develop child care centers that will benefit the community/ neighbourhood at large as well as hospital staff, particularly low-income earners working non-standard hours (i.e. health care aides, housekeeping staff, laundry attendants and dietary aides). These workers often face the greatest challenges with accessing quality child care that is affordable and aligns with their work schedules. The availability of child care in hospitals will have an expansive impact on the social determinants of health for those using this service, particularly hospital staff, patients and those in the surrounding community. The availability of high quality, affordable child care in health

care settings allows staff to return to work sooner after maternity and/or parental leave. In particular, on-site child care in hospitals provides accessible reliable and flexible care for those working extended and/or non-standard hours. Overall, on-site child care will positively impact parents' ability to return to work or earn a higher wage, which further influences their income, employment, social connections and social supports.

Section 2 CHILD CARE EXPANSION PROJECTS IN HEALTH CARE FACILITIES

Manitoba's ELCC Infrastructure Funding will support the creation of child care spaces at three health care facilities, creating approximately 324 new spaces in both Winnipeg and Brandon. These facilities will offer families extended and flexible child care options. Recognizing that the need for child care extends beyond families employed at the health care facility where the centres are being developed, Manitoba will work closely with its partners in the design of programming to ensure families living in the surrounding neighbourhoods will be able to access the new child care spaces being created.

While consulting with RHAs, it was noted that employees, particularly low-income earners who work non-standard hours (i.e. health care aids, housekeepers, laundry attendants and dietary aids), often face the greatest challenges with accessing quality child care as they require affordable care that aligns with work schedules outside of normal business hours. Additionally, across Canada, 40 per cent of physicians are caregivers of children under 18 compared to only 22 per cent of the general population being caregivers of children under 15. Physicians who are caregivers of children report higher rates of burnout and depression, and burnout and lack of access to child care being associated with intent to leave or reduce hours. The COVID-19 pandemic illustrated that a lack of child care causes working women to stay home more frequently compared to working men, as child care responsibilities are more likely to default on mothers than fathers. In Manitoba, women make up over three guarters (77.2%) of the health care workforce. With the health care sector being an industry disproportionately populated by women, onsite child care centers greatly benefit mothers working in health care settings. Challenges with finding a child care space not only impact parents' ability to return to work, but also consequentially has a greater affect on Manitobans access to quality health care due to a reduced and overworked health care workforce. Access to child care in the workplace allows for an easier transition as parents return from parental leave and children adapt to a new routine.

Manitoba's Approach to Child Care Expansion Projects in Heath Care

Manitoba has taken a strategic approach to capital expansion and has been developing programs that enhance fiscal efficiency by supporting multiple priority areas and objectives. To ensure the funding provided through the ELCC Infrastructure Fund are used effectively, Manitoba will take a whole-of-government approach that allows Manitoba to strategically leverage funds to prioritize child care space expansion projects in communities where the demands for child care are high while also addressing other government priorities. The partnership with RHAs and non-profit child care operators in the development of these onsite child care centers represents the province's commitment to increasing access to child care for underserved communities/families, while also supporting recruitment and retention for the health care sector.

In Manitoba, RHAs are responsible for the delivery and administration of provincially funded health services for a specific region and are accountable to the Minister of Health. ELCC Infrastructure Funding will be provided to RHAs and partners to support the cost of feasibility studies, design, construction, and/or renovation of the child care centres in exchange for space/ land, building support services (maintenance and repair) and free rent for the child care operator for a minimum of 25 years. A Financial Assistance Agreement (FAA) between project partners and the province will outline the parameters of the agreement, project scope and policy, as well as responsibilities of each party. The facility will become an asset of the health entity once developed and open. A Senior Project Manager from the Province will be assigned to work with the RHA to ensure that the new facility meets licencing compliance standards to ensure funding flow and to keep the project on track. Each facility will receive start-up and operating grant funding to support the ongoing costs of the child care centre, as set out in Manitoba's Child Care Regulation. Start-up funding is a one-time grant provided to purchase materials needed for new child care spaces. Generally, annual operating grant funding is primarily used for programming and staff wages, with remaining funding being used for lease costs or administrative fees. The 25-year rent-free model implemented through the Infrastructure Fund allows operators to further invest in quality enhancement and competitive wages for staff. This investment maintains the facility as a public asset long-term and ensures the sustainability of child care availability.

Acknowledging that it may take years or decades to fully understand the long-term outcomes of families supported by the Canada-Wide ELCC System, a funding requirement for these projects is that the RHA and health care facilities provide reports to the department detailing immediate impacts of the investment. Reporting parameters will be outlined in the FAA. RHAs will also issue a Request for Proposal to select a third-party non-profit child care operator to oversee the operations of the center. The operator will be responsible for staff recruitment and hiring, equipment/offices expenses, providing child care, child enrollment, and the day-to-day operations of the center.

Some proposed projects may require a feasibility study prior to design development to ensure optimal location and utility. Feasibility studies inform scope of work and refine project costs by providing a schematic design and a comprehensive list of project requirements with a cost estimate of no more than a 15% design allowance, delivered through a Class D estimate. The floor plans will be reviewed by the department to ensure they meet licensing and compliance regulations. Feasibility studies will be funded through the ELCC Infrastructure Fund Action Plan.

Cost estimates for the proposed projects are based on class D site plans and design estimates, taking into account the market value of labour and materials, as well as predicted cost increases within the trades sector. For previous initiatives, Manitoba benefited from a high volume of builds through a modular construction approach that leverages bulk purchases of material, coordination of trades, and process efficiencies, allowing for reduced costs. Due to the location and number of capital projects under the ELCC Infrastructure Fund, along with particular design requirements for health care facilities, the province is unable to leverage the same cost savings. As the projects are located onsite at hospitals, it is anticipated that the facilities' increased need for access and security to allow for operation for extended hours may impact the cost.

Table B: Targets and Indicators for Child Care Expansion Projects in Heath Care

Result Target	Output Indicators ¹	Fiscal year	Funding
Over 320 child care spaces for ages 0-6 are developed on health care campuses through capital investment	 Identification of high needs communities, inclusive of significant recruitment and retention needs Identification of capital health care projects Feasibility studies, scoping, design and class D estimates 	2024 – 2025	\$6,540,000
	 Class C, B and A estimates Construction of child care centres Initiating licensing process 	2025 - 2026	\$20,070,000

Prairie Mountain Health

Brandon Regional Health Centre

In collaboration with Prairie Mountain Health, Manitoba will allocate funding over two years, to build a 140-space child care center located in the Brandon Regional Heath Center. This child care center will service families living in East Brandon and hospital employees. Brandon is a fast-growing city with a population of about 51,300 people, with 18% of the population under the age of 15 years old and a median age of 35.5.

Brandon Regional Health Centre is a hospital located in the city of Brandon and is one of 20 hospitals operated by Prairie Mountain Health. The Brandon Regional Health Centre is the largest hospital in the Westman Region with over 1,800 employees providing services to the residents in the city of Brandon and surrounding rural communities. An employee survey conducted by the Health Centre in January 2024 found that 20% of their employees respondents (368 employees) have at least one child under the age of 6, and nearly 10% of their employees respondents (170 employees) have a child on a waitlist for child care.

Winnipeg Regional Health Authority

St. Boniface Hospital

Within the city of Winnipeg and in the neighbourhood of Saint Boniface, Manitoba will partner with the Winnipeg Regional Health Authority (WRHA) to build a 104-space French-language or

¹ As these are multi-year capital projects, output indicators in 2024-2025 and 2025-2026 are based on key construction milestones with indicators on inclusion commitments under the Infrastructure Funding Agreement to be reported in future years when spaces are fully licensed.

bilingual service child care center in St. Boniface Hospital, over the span of two years. Saint Boniface is the centre of the Franco-Manitoban community in Winnipeg, which is the largest francophone community in Western Canada. This child care facility will serve the residents of Saint Boniface and the staff of St. Boniface Hospital.

St. Boniface Hospital is one of two hospitals in Winnipeg with a mandate to deliver French-language health care services and is one of two hospitals who does not have an on-site child care center in the city. This on-site child care centre will be available to the community, over 3,500 hospital staff and more than 190 researchers and support personnel working at St. Boniface Hospital's Albrechsten Research Center. The development of the child care center and the creation of extended-hours spaces will help with the recruitment and retention of French-speaking health care employees.

Riverview Health Centre

Manitoba will partner with Inspired by Wonder Inc., an existing child care operator, and Riverview Health Center to develop an on- site child care center located at Riverview Health Center. This project will be delivered as an Early Learning and Child Care Building Fund initiative, in which up to 60% of grant funding to support the development of the child care spaces will be provided through the ELCC Infrastructure Fund, and Riverview Health Center Foundation will fund the remaining (40%) cost of the build. This funding model was selected by the operator and health centre due to the type of expansion and materials selected, which exceeded the funding allowances set in place for other projects, such as providing funds for non-licensable space. The project is scheduled to create a total of 80 spaces (16 infant spaces and 64 preschool spaces), with a focus on providing child care for children with additional support needs. Inspired by Wonder strives to be an inclusive child care program, with programing, materials and equipment able to adapt to meet the needs of all children participating.

Riverview Health Centre is a 387-bed community hospital that specializes in rehabilitation, palliative care, and long-term care. The community hospital employs over 900 full-time and part-time health care staff. Riverview Health Centre's fully owned complex is on City of Winnipeg leased land and operates under a service purchase agreement with the Winnipeg Regional Health Authority.

This child care development will be Inspired by Wonder Inc.'s third facility. Inspired by Wonder Inc. currently offers child care programming that is inclusive of children of all abilities. Their program is designed to be easily adaptable to meet the needs of all children; similar programming will be implemented in the Riverview Health Centre facility. The new child care centre will include a gross motor room and a low stimulation room for children with additional emotional/behavioural needs. The partners also plan to explore opportunities to develop intergenerational programing, where the children attending the child care center will participate in programs alongside the residents of the health center.

Section C SUMMARY TABLES

Table E: Overview of Infrastructure Fund Action Plan Projects

Overview of Projects						
Project	Spaces	Demographic Served	Overall Weighted Index			
Prairie Mountain Health – Brandon Regional Health Centre	140	Low income Racialized Indigenous Lone-Parent Francophone Newcomer Families working non-standard hours	1.04			
Winnipeg Regional Health Authority – Saint Boniface Hospital	104	Low income Racialized Indigenous Lone-Parent Francophone Newcomer Families working non-standard hours	0.92			
Winnipeg Regional Health Authority – Riverview Health Centre	80	Low income Racialized Indigenous Lone-Parent Families working non-standard hours	0.75*			
TOTAL	324 spaces	-	-			

^{*}The demand for child care in the neighbor of Riverview is moderate however the facility will be servicing families outside of the area with its specialized programing.

Table F: Infrastructure Fund Action Plan Financial Summary

PROJECTS	2024 to 2025	2025 to 2026	
Prairie Mountain Health- Brandon Regional Health Centre			
Winnipeg Regional Health Authority – Saint Boniface Hospital	\$6,540,000	\$20,070,000	
Winnipeg Regional Health Authority – Riverview Health Centre			
GRAND TOTAL	\$6,540,000	\$20,070,000 ²	
FEDERAL ALLOCATION	\$7,328,772	\$9,481,570	
PREVIOUS YEAR CARRY FOWARD	\$4,099,575 ¹	\$ 4,888,347	
TOTAL FUNDING FOR THE FISCAL YEAR	\$11,428,347	\$14,369,917	

¹Funding from 2023-2024 was all carried forward to 2024-2025 ² Funding from the fourth year of the Infrastructure Fund will be used to cover the overage in 2025-