



THE REGIONAL MUNICIPALITY OF NIAGARA
PUBLIC HEALTH & SOCIAL SERVICES COMMITTEE
AGENDA

PHSSC 7-2021

Tuesday, July 13, 2021

1:00 p.m.

Meeting will be held by electronic participation only

This electronic meeting can be viewed on Niagara Region's Website at:

<https://www.niagararegion.ca/government/council/>

Due to efforts to contain the spread of COVID-19 and to protect all individuals, the Council Chamber at Regional Headquarters will not be open to the public to attend Committee meetings until further notice. To view live stream meeting proceedings, visit:
[niagararegion.ca/government/council](https://www.niagararegion.ca/government/council/)

Pages

1. CALL TO ORDER

2. DISCLOSURES OF PECUNIARY INTEREST

3. PRESENTATIONS

4. DELEGATIONS

5. ITEMS FOR CONSIDERATION

5.1. PHD 7-2021

Approval of the 2020-2021 Public Health and Emergency Services
Program Audits

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6. CONSENT ITEMS FOR INFORMATION

6.1. COM 19-2021

Niagara Prosperity Initiative 2021 Update

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6.2. COM 20-2021

Bridge Housing Design Phase Operations

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6.3.	<u>COM-C 24-2021</u> Niagara Regional Housing 2020 Annual Report	62 - 64
6.4.	<u>COM-C 25-2021</u> Niagara Joins Built for Zero Veteran Cohort	65

7. OTHER BUSINESS

8. NEXT MEETING

The next meeting will be held on Tuesday, August 10, 2021 at 1:00 p.m.

9. ADJOURNMENT

If you require any accommodations for a disability in order to attend or participate in meetings or events, please contact the Accessibility Advisor at 905-980-6000 ext. 3252 (office), 289-929-8376 (cellphone) or accessibility@niagararegion.ca (email).

Subject: Approval of the 2020-2021 Public Health and Emergency Services Program Audits

Report to: Public Health and Social Services Committee

Report date: Tuesday, July 13, 2021

Recommendations

1. That the draft audited schedules of revenue and expenses for the following programs for the fiscal year ended March 31, 2021, **BE APPROVED**:
 - 1.1 Ambulance Communication Services (Appendix 1 to Report PHD 7-2021)
 - 1.2 Community Mental Health Program (Appendix 2 to Report PHD 7-2021)
 - 1.3 Infant and Child Development Services (“ICDS”) (Appendix 4 to Report PHD 7-2021)
 - 1.4 Healthy Babies, Healthy Children (“HBHC”) (Appendix 5 to Report PHD 7-2021);
2. That the annual reconciliation return for the Community Mental Health Program for the fiscal year ended March 31, 2021 (Appendix 3 to Report PHD 7-2021), **BE APPROVED**;
3. That staff **BE DIRECTED** to co-ordinate with the auditor to finalize the statements as presented; and
4. That Report PHD 7-2021 **BE FORWARDED** to the Region’s Audit Committee for information.

Key Facts

- The purpose of this report is to obtain approval of the audited schedules of revenues and expenses and annual reconciliation return in accordance with the provincial requirements.
- The Ministry submission deadline for the ICDS and HBHC programs are July 30, 2021. Arrangements have been made with the Ministry of Health and Ontario Health – West Region for the final audited statement submissions for the Ambulance Communication Services and Community Mental Health to be filed after the initial due date of June 30, 2021, upon final Council approval.
- As per Financial Reporting and Forecasting Policy (C-F-020), other financial statements or schedules performed for Ministry funding purposes, will be recommended for approval to Council by the standing Committee with oversight of the program. Upon approval by Council, the department Commissioner, or delegated authority, and the Treasurer will be authorized to sign the auditor’s representation

letter to obtain the auditor's signed report. The approved statements will then be forwarded to Audit Committee for information.

Financial Considerations

The schedules of revenue and expenses ("financial schedules") and annual reconciliation return have been prepared in compliance with legislation and in accordance with the requirements and policies stipulated by the corresponding Ministry.

Draft copies of the financial schedules and annual reconciliation return for the period ended March 31, 2021, are attached as Appendices 1 to 5 to Report PHD 7-2021.

The financial schedules are prepared specifically for the purposes of meeting the requirements as outlined in the service agreements with the respective funding Ministries. The financial schedules have been prepared in compliance with legislation and in accordance with the requirements and policies stipulated by the corresponding Ministry.

In previous years, the ICDS and HBHC programs' financial results had been reported to the Ministry using a December 31 year-end (for each year). In 2019, the Ministry provided direction that the financial schedules and the annual reconciliation return are to be reported as of March 31, to align with the reporting date of the Ministry. As a result of the reporting date change, the financial schedules for these programs contain 15 months of financial data for the comparative period of January 1, 2019 to March 31, 2020, with the current year reporting on 12 months of data with the fiscal year running April 1, 2020 to March 31, 2021.

The questionnaire for the HBHC program was included in the previous year's report and was approved by Council. The Ministry of Health has not provided this document to the Niagara Region at the time of this report and is not requesting it at this time; therefore, only the audited financial schedule is included in the report for this program. The completion of the questionnaire does not affect the audited financial schedule or results reported for the program.

The financial schedules for Public Health and Emergency Services Programs are a Ministry requirement as noted in the audit reports for each of the respective programs as follows:

Ambulance Communication Services:

“The accompanying schedule of the Program for the year ended March 31, 2021, is prepared, in all material respects, in accordance with the financial reporting provisions of the agreement between Her Majesty the Queen in Right on Ontario, as represented by the Minister of Health (formerly the Minister the Health and Long-Term Care) and the Regional Municipality of Niagara signed May 28, 2010 (the “guidelines”).”

“The schedule is prepared to assist the Region in complying with the guidelines. As a result, the schedule may not be suitable for another purpose.”

Community Mental Health Program:

“The accompanying schedule of the Program for the year ended March 31, 2021, is prepared, in all material respects, in accordance with the final reporting provision so the Multi-sector Service Accountability Agreement effective April 1, 2019, between Ontario Health – West Region (formerly the Hamilton Niagara Haldimand Brant Local Health Integration Network) and the Regional Municipality of Niagara – Mental Health and most recently amended March 31, 2020 (collectively, the “guidelines”).”

“The schedule is prepared to assist the Region in complying with the guidelines. As a result, the schedule may not be suitable for another purpose.”

Infant and Child Development Services:

“The accompanying schedule of the Program for the year ended March 31, 2021, is prepared, in all material respects, in accordance with the financial reporting provisions of the Ontario Transfer Payment Agreement effective April 1, 2020, between the Her Majesty the Queen in right of Ontario as represented by the Minister of Children, Community and Social Services and the Regional Municipality of Niagara (the “Guidelines”).”

“The schedule is prepared to assist the Program to comply with the financial reporting provisions of the Guidelines. As a result, the schedule may not be suitable for another purpose.”

Healthy Babies, Healthy Children:

“The accompanying schedule of the Program for the year ended March 31, 2021, is prepared, in all material respects, in accordance with the financial reporting provisions of the Ontario Transfer Payment Agreement effective April 1, 2020, between the Her

Majesty the Queen in right of Ontario as represented by the Minister of Children, Community and Social Services and the Regional Municipality of Niagara (the “Guidelines”).

“The schedule is prepared to assist the Program to comply with the financial reporting provisions of the Guidelines. As a result, the schedule may not be suitable for another purpose.”

Analysis

The audits of these Public Health and Emergency Services Programs were completed by the Region’s external auditors, Deloitte. The auditors have indicated that, based on their review, nothing has come to their attention that causes them to believe that this information is not, in all material respects, in accordance with the respective Ministry requirements identified.

The recommendation for approval of audited schedules performed for Ministry funding purposes rest with the Committee to which the department responsible for the funding reports. Upon approval by the Committee, these schedules are referred to Audit Committee for information. Then the department’s Commissioner and Treasurer will be authorized to sign the auditor’s representation letter to obtain the auditor’s signed report.

Below is a summary of the results of the audited financial schedules:

- Ambulance Communication Services – This program has no funds returnable for the reporting period ending March 31, 2021, as the Region has expended \$182,392 in excess of the provincial grant for the period.
- Community Mental Health Program – This program has no funds returnable for the reporting period ending March 31, 2021, as the Region has expended \$165,349 in excess of the provincial grant for the period.
- Infant and Child Development Services – This program has no funds returnable for the reporting period ending March 31, 2021, as the Region has expended all allocated funding.
- Healthy Babies, Healthy Children – This program has no funds returnable for the reporting period ending March 31, 2021, as the Region has expended all allocated funding.

These financial schedules are subject to minor wording changes once schedules are finalized.

Alternatives Reviewed

The audited financial schedules and annual reconciliation report are a Ministry requirement and therefore no alternatives are available.

Relationship to Council Strategic Priorities

Providing formal financial reporting to Council and the public supports the Council Strategic Priority of Sustainable and Engaging Government.

Other Pertinent Reports

None.

Prepared by:

Beth Brens, CPA, CA
Acting Associate Director, Reporting &
Analysis
Corporate Services

Recommended by:

M. Mustafa Hirji, MD MPH FRCPC
Medical Officer of Health &
Commissioner (Acting)
Public Health and Emergency Services

Submitted by:

Ron Tripp, P.Eng.
Acting Chief Administrative Officer

This report was prepared in consultation with Michael Leckey, Program Financial Specialist, and Amanda Fyfe, Program Financial Specialist.

Appendices

Appendix 1 Ambulance Communication Services – Schedule of Revenue and Expenses

Appendix 2 Community Mental Health Program – Schedule of Revenue and Expenses

Appendix 3 Community Mental Health Program – Annual Reconciliation Return

Appendix 4 Infant and Child Development Services – Schedule of Revenue and Expenses

Appendix 5 Healthy Babies, Healthy Children – Schedule of Revenue and Expenses

Schedule of revenues and
expenditures

The Regional Municipality of Niagara
Public Health Department
Ambulance Communications Service

March 31, 2021

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Independent Auditor's Report

To the Regional Municipality of Niagara and the Ontario Ministry of Health

Opinion

We have audited the accompanying schedule of revenues and expenditures of the Regional Municipality of Niagara (the "Region") Public Health Department – Ambulance Communications Service (the "Program"), for the year ended March 31, 2021 and notes to the schedule (collectively referred to as the "schedule").

In our opinion, the accompanying schedule of the Program for the year ended March 31, 2021 is prepared, in all material respects, in accordance with the financial reporting provisions of the agreement between the Her Majesty the Queen in Right of Ontario, as represented by the Minister of Health (formerly the Minister of Health and Long-Term Care) and the Regional Municipality of Niagara signed May 28, 2010 (the "guidelines").

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards ("Canadian GAAS"). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Schedule* section of our report. We are independent of the Region in accordance with the ethical requirements that are relevant to our audit of the schedule in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Emphasis of Matter - Basis of Accounting

We draw attention to Note 1 to the schedule, which describes the basis of accounting. The schedule is prepared to assist the Region in complying with the guidelines. As a result, the schedule may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

Responsibilities of Management and Those Charged with Governance for the Schedule

Management is responsible for the preparation of the schedule in accordance with the guidelines, and for such internal control as management determines is necessary to enable the preparation of the schedule that is free from material misstatement, whether due to fraud or error.

Those charged with governance are responsible for overseeing the Region's financial reporting process.

Auditor's Responsibilities for the Audit of the Schedule

Our objectives are to obtain reasonable assurance about whether the schedule is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian GAAS will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this schedule.

As part of an audit in accordance with Canadian GAAS, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the schedule, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Region's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates, if any, and related disclosures made by management.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Chartered Professional Accountants
Licensed Public Accountants
June 25, 2021

Draft

The Regional Municipality of Niagara Public Health Department
Ambulance Communications Service
Schedule of revenues and expenditures
Year ended March 31, 2021

	Notes	Budget \$	2021 Actual \$	2020 Actual \$
Revenues				
Provincial grant		6,828,370	6,981,919	6,196,294
Other income		10,000	8,295	8,505
		6,838,370	6,990,214	6,204,799
Expenditures				
Salaries and benefits				
Salaries and wages		4,498,250	4,624,013	4,209,239
Employee benefits		1,564,849	1,622,863	1,459,471
Transportation and communications		154,012	132,357	154,846
Services and rentals		222,620	279,496	244,415
Supplies and equipment		148,591	256,825	34,025
Administrative costs	2	250,048	268,105	287,310
Total expenditures		6,838,370	7,183,659	6,389,306
Ineligible administration costs	2	—	(11,053)	(15,252)
Total eligible expenditures		6,838,370	7,172,606	6,374,054
Excess of expenditures over revenues		—	(182,392)	(169,255)

The accompanying notes are an integral part of the Schedule.

1. Significant accounting policies

Basis for presentation

The schedule of revenues and expenditures is prepared in accordance with the agreement dated May 28, 2010 between the Ontario Ministry of Health and the Regional Municipality of Niagara.

The agreement requires the Schedule to be prepared in a manner consistent with generally accepted accounting principles ("GAAP"). Management of the Regional Municipality of Niagara Public Health Department has interpreted GAAP to be the recognition and measurement principles of the Canadian public sector accounting standards related specifically to revenues and expenditures, except that it does not provide for employee future benefits and does not capitalize and amortize tangible capital assets. Management has further interpreted that GAAP does not include the presentation principles or the presentation of all financial statements and note disclosures required by GAAP for a complete set of financial statements.

Revenues and expenditures

Revenues are reported on the accrual basis of accounting.

Expenditures are recorded if they are eligible for the program and incurred in the year.

Capital assets

Tangible capital assets acquired are reported as an expenditure, amortization is not recorded.

Employee future benefits

Employee future benefits are provided which will require funding in future periods. These benefits include sick leave, benefits under the Workplace Safety and Insurance Board ("WSIB") Act, and life insurance, extended health and dental benefits for early retirees. These benefits are recorded on a cash basis.

Use of estimates

Since precise determination of many assets and liabilities is dependent upon future events, the preparation of a periodic schedule involves the use of estimates and approximations. These have been made using careful judgements.

2. Administration costs

The program records direct operating expenditures to their respective activity. In addition, in 2013, the Region established its first consolidated allocation policy with a guiding principle of more closely aligning indirect costs with the support programs and services as defined by the Province of Ontario in the Financial Information Return (FIR). The new methodology allocates these indirect costs to end programs/services based on usage drivers.

Under this methodology, all departments providing program/service support functions will allocate their costs using drivers specific to each type of expense.

The Regional Municipality of Niagara Public Health Department
Ambulance Communications Service
Notes to the schedule of revenues and expenditures
March 31, 2021

2. Administration costs (continued)

Administration costs, which have been allocated, are:

	2021	2020
	\$	\$
Accounting services	6,049	6,492
Asset management services	1	—
Capital levy	5,921	10,252
Debt costs	5,132	4,999
Financial management	30,956	25,922
Human resources services	39,642	39,024
IT program support services and project costs	74,729	74,879
Land ambulance shared services	74,630	71,223
Legal services	2,348	1,404
Payroll services	26,583	49,525
Printing costs	36	192
Procurement services	2,120	3,317
Property management	(42)	81
	268,105	287,310

As per this program's funding agreement the following administration costs are considered ineligible and have been shown as a reduction of expense on the schedule of revenues and expenditures:

	2021	2020
	\$	\$
Capital levy	5,921	10,253
Debt costs	5,132	4,999
	11,053	15,252

3. Budget data

The budget data presented in the Schedule is based on the budget data submitted to the Ontario Ministry of Health.

Schedule of revenue and expenses
The Regional Municipality of Niagara
Public Health Department
Community Mental Health Program

March 31, 2021

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Independent Auditor's Report

To the Members of Council of the Regional Municipality of
Niagara and Ontario Health – West Region

Opinion

We have audited the accompanying schedule of revenue and expenses of the Regional Municipality of Niagara Public Health Department – Community Mental Health Program (the “Program”), for the year ended March 31, 2021 and notes to the schedule (collectively referred to as the “schedule”).

In our opinion, the accompanying schedule of the Program for the year ended March 31, 2021 is prepared, in all material respects, in accordance with the financial reporting provisions of the Multi-sector Service Accountability Agreement effective April 1, 2019 between Ontario Health – West Region (formerly the Hamilton Niagara Haldimand Brant Local Health Integration Network) and the Regional Municipality of Niagara – Mental Health and most recently amended March 31, 2020 (collectively, the “guidelines”).

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards (“Canadian GAAS”). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Schedule* section of our report. We are independent of the Region in accordance with the ethical requirements that are relevant to our audit of the schedule in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Emphasis of Matter - Basis of Accounting

We draw attention to Note 1 to the schedule, which describes the basis of accounting. The schedule is prepared to assist the Region in complying with the guidelines. As a result, the schedule may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

Responsibilities of Management and Those Charged with Governance for the Schedule

Management is responsible for the preparation of the schedule in accordance with the guidelines, and for such internal control as management determines is necessary to enable the preparation of the schedule that is free from material misstatement, whether due to fraud or error.

Those charged with governance are responsible for overseeing the Region's financial reporting process.

Auditor's Responsibilities for the Audit of the Schedule

Our objectives are to obtain reasonable assurance about whether the schedule is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian GAAS will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this schedule.

As part of an audit in accordance with Canadian GAAS, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the schedule, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Region's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates, if any, and related disclosures made by management.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Chartered Professional Accountants
Licensed Public Accountants
June 25, 2021

Draft

The Regional Municipality of Niagara Public Health Department
Community Mental Health Program
Schedule of revenue and expenses
Year ended March 31, 2021

	Notes	Budget \$	2021 Actual \$	2020 Actual \$
Revenue				
Province of Ontario Grants		6,540,441	6,560,037	6,461,065
Miscellaneous		1,000	12,196	4,637
		6,541,441	6,572,233	6,465,702
Expenses				
Compensation				
Salaries		4,987,437	5,040,681	4,704,113
Employee benefits		989,833	978,427	913,073
		5,977,270	6,019,108	5,617,186
Service costs				
Administration costs	3	39,500	380,442	501,707
Audit and other professional fees		2,901	3,078	7,143
Computer maintenance and supplies		4,850	5,724	27,152
Other expenses		45,119	94,248	154,200
Printing, postage, stationery and office supplies		11,100	18,235	16,809
Rent and property taxes		239,696	346,108	308,360
Staff education		16,800	76,796	82,531
Telephone		17,000	16,612	17,342
Travel		187,205	118,173	205,083
		564,171	1,059,416	1,320,327
Total expenses		6,541,441	7,078,524	6,937,513
Ineligible administration costs	3	—	340,942	462,207
Total eligible expenses		6,541,441	6,737,582	6,475,306
(Deficiency) excess expenses over revenue		—	(165,349)	(9,604)

The accompanying notes are an integral part of the Schedule.

1. Significant accounting policies

The schedule of revenue and expenses has been prepared for Ontario Health – West Region. The agreement requires the Schedule to be prepared in a manner consistent with generally accepted accounting principles ("GAAP"). Management of the Regional Municipality of Niagara has interpreted GAAP to be recognition and measurement principles in accordance with Canadian Public Sector Accounting Standards, except that it does not capitalize and amortize tangible capital assets. Management has further interpreted that GAAP does not include the presentation principles or the presentation of all financial statements and note disclosures required by GAAP for a complete set of financial statements.

Revenue and expense recognition

Revenue and expenses are reported on the accrual basis of accounting, with the exception of employee future benefits.

The accrual basis of accounting recognizes revenues as they become available and measurable, expenses are recognized as they are incurred and measurable as a result of receipt of goods or services and the creation of a legal obligation to pay.

Capital assets

Tangible capital assets acquired are reported as an expense, and amortization is not recorded.

Employee future benefits

Employee future benefits are provided which will require funding in future periods. These benefits include sick leave, benefits under the Workplace Safety and Insurance Board ("WSIB") Act, and life insurance, extended health and dental benefits for early retirees. These benefits are recorded on a cash basis.

Use of estimates

Since precise determination of many assets and liabilities is dependent upon future events, the preparation of a periodic schedule involves the use of estimates and approximations. These have been made using careful judgements.

2. Grant funding repayable

The grant repayable to the Province of Ontario is subject to audit verification by the Hamilton Niagara Haldimand Brant Local Health Integration Network. The grant repayable is non-interest bearing and is normally repaid in the subsequent year. The grant repayable balance at the end of the year is comprised of the unpaid grant repayable balance from prior years plus any current year excess of revenue over eligible expenditures excluding net book value associated with capital one-time funding.

	2021	2020
	\$	\$
Grant repayable, beginning of year	491,872	491,872
Amounts repaid during the year	(373,084)	—
Excess of revenue over eligible expenditures	—	—
Grant repayable, end of year	118,788	491,872

3. Administration costs

The program records direct operating expenses to their respective activity. In addition, since 2013, the Region established a consolidated cost allocation policy with a guiding principle of more closely aligning indirect costs with the support programs and services as defined by the Province of Ontario in the Financial Information Return (FIR). This methodology allocates these indirect costs to end programs/services based on usage drivers.

Under this methodology, all departments providing program/service support functions will allocate their costs using drivers specific to each type of expense.

Administration costs are comprised of the following charges:

	2021	2020
	\$	\$
Financial services	54,421	57,975
Human resource services	67,238	163,874
IT services	229,344	240,512
Debt charges	29,439	39,346
Total administration costs	380,442	501,707

As per direction from the funding body, administration costs are limited to \$39,500 (\$39,500 in 2020) and therefore administration costs in excess of the limit are considered ineligible and have been shown as a reduction of expense on the schedule of revenue and expenses.

	2021	2020
	\$	\$
Total administration costs	380,442	501,707
Less: administration cost limit	39,500	39,500
Total ineligible administration costs	340,942	462,207

Annual Reconciliation Report
The Regional Municipality of Niagara
Public Health Department
Community Mental Health Program

March 31, 2021

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Independent Auditor's Report

To the Members of Council of the Regional Municipality of
Niagara, Ontario Health – West Region and the Ontario Ministry of Health

Opinion

We have audited the accompanying schedules (ARRFin1 and ARRFin2) and the Proxy Pay Equity Reconciliation Report (excluding statistics and FTEs) of the Annual Reconciliation Report of the Regional Municipality of Niagara Public Health Department Community Mental Health Program (the "Program") for the year ended March 31, 2021 and note to the schedules (collectively referred to as the "schedules").

In our opinion, the accompanying schedules of the Program for the year ended March 31, 2021 have been prepared, in all material respects, in accordance with the financial reporting provisions in the guidelines in Chapters 3 and 4 of the Ontario Healthcare Reporting Standards and the Community Financial Policy (2016) issued by the Ontario Ministry of Health (the "guidelines").

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards ("Canadian GAAS"). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Schedules* section of our report. We are independent of the Region in accordance with the ethical requirements that are relevant to our audit of the schedule in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Emphasis of Matter - Basis of Accounting

We draw attention to Note 1 to the schedule, which describes the basis of accounting. The schedules are prepared to assist the Program in complying with the guidelines. As a result, the schedule may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

Responsibilities of Management and Those Charged with Governance for the Schedules

Management is responsible for the preparation of the schedules in accordance with the guidelines, and for such internal control as management determines is necessary to enable the preparation of the schedules that are free from material misstatement, whether due to fraud or error.

Those charged with governance are responsible for overseeing the Region's financial reporting process.

Auditor's Responsibilities for the Audit of the Schedules

Our objectives are to obtain reasonable assurance about whether the schedules are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian GAAS will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the schedules.

As part of an audit in accordance with Canadian GAAS, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the schedules, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Region's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates, if any, and related disclosures made by management.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Chartered Professional Accountants
Licensed Public Accountants
June 25, 2021

IFIS / Recipient #	100238
SRI Organization Code	473
Report Name	2020-21 Account Reconciliation Report
LHIN Name	Hamilton Niagara Haldimand Brant (Hnhb)
Service Provider Name	Community Mental Health Program
Service Provider Legal Name	Community Mental Health Program

Service Provider Address

Address 1	1815 Sir Isaac Brock Way
Address 2	0
City	Thorold
Postal Code	L2V 4T7

HSP Contact Name	Michael Leckey
HSP Contact Position	Program Financial Specialist
HSP Contact Phone Number	905-685-4225 x 7439
HSP Contact E-mail Address	michael.leckey@niagararegion.ca

TOTAL AGENCY

Form ARRfin 1- Total LHIN & Ministry Managed- Financial
Community Mental Health Program

		TOTAL HSP
TABLE G: Total Agency Reporting Summary by Fund Type (Total Agency Financials)	Line #	
Total Revenue Fund Type 1	115	-
Total Expenses Fund Type 1	116	-
Net Surplus/Deficit Fund Type 1 (Hospital)	117	-
Total Revenue Fund Type 2 (Above)	118	6,572,233
Total Expenses Fund Type 2 (Above)	119	6,737,582
Net Surplus/Deficit Fund Type 2 (Community Programs)	120	- 165,349
Total Revenue Fund Type 3	121	-
Total Expenses Fund Type 3	122	-
Net Surplus/Deficit Fund Type 3 (Other)	123	-
Total Revenue for the Provider	124	6,572,233
Total Expenses for the Provider	125	6,737,582
Net Surplus/Deficit	126	- 165,349

Form ARRfin2 - LHIN Managed Programs
Community Mental Health Program

		LHIN - CMHP1	
Table B	Line #	2020-21 Final	Comments (Max 255 Characters)
Funding Initiative		Select Funding Initiative (where applicable)	
LHIN Cash Flow:			
Funding - Local Health Integration Network (LHIN)	1	6,540,441	
Funding - Provincial MOHLTC	2	-	
Funding - LHIN One-Time	3	19,596	
Funding - Provincial MOHLTC One-Time	4	-	
Sessional fee funding - LHIN	5	-	
Sessional fee funding - MOHLTC	6	-	
Total LHIN/MOHLTC funding as per cash flow	7	6,560,037	
Service Recipient Revenue	8	-	
Recoveries from External/Internal Sources	9	-	
Donations	10	-	
Other Funding Sources and Other Revenue	11	12,196	
Other revenue adjustments (detailed comments required)	12	-	
Total revenue adjustments	13	12,196	
Total FUND TYPE 2 funding for settlement purposes	14	6,572,233	
Deferred LHIN/MMP funding used to purchase capitalized items in the current year (Enter as Negative Amount)	15	-	
Amortization of donation revenue and LHIN funding in the current fiscal year	16	-	
Other Adjustments including LHIN/MOHLTC recovery (detailed comments required)	18	-	
Total Revenue FUND TYPE 2	19	6,572,233	
EXPENSES- Fund Type 2			
Compensation			
Salaries and Wages (Worked + Benefit + Purchased)	20	4,263,226	
Benefit Contributions	21	961,875	
Employee Future Benefit Compensation	22	-	
Nurse Practitioner Remuneration	23	118,288	
Medical Staff Remuneration	24	715,219	
Sessional Fees	25	-	
Service Costs			
Med/Surgical Supplies and Drugs	26	-	
Supplies and Sundry Expenses (excl. Med/Surg Supplies & Drugs)	27	284,023	
Community One Time Expense	28	-	
Equipment Expenses	29	48,904	
Amortization on Major Equip and Software License and Fees	30	-	
Contracted Out Expense	31	18,833	
Buildings and Grounds Expenses	32	327,214	
Building Amortization	33	-	
TOTAL EXPENSES Fund Type 2	34	6,737,582	
Depreciation/Amortization of Capital Assets for the Program and Admin & Support	35	-	
Total Capitalized Purchases and Services in current year	36	-	
(CHC & Home Care purposes only) Inadmissible salary expenses	37	-	
(CHC & Home Care purposes only) Less: Other adjustments	38	-	
Total Expenses for Settlement Purposes	39	6,737,582	
Less sessional fee expenses (Enter as Negative Amount)	40	-	
Less one time expenses as per listing below (Negative sum of lin	42	- 19,596	
Total operating expenses for settlement purposes	43	6,717,986	
Operating Recovery	44	-	
Sessional Fee Recovery	45	-	
One Time Recovery	46	-	
Total Settlement Recovery	47	-	
TABLE C: One-Time Expenses		Comments (Max 255 Characters)	
Capitalized purchases from One Time funding Section C-1			
	48	-	
	49	-	
	50	-	
	51	-	
	52	-	
	53	-	
	54	-	
	55	-	
	56	-	
	57	-	
	58	-	
59	-		

Form ARRfin2 - LHIN Managed Programs
Community Mental Health Program

		LHIN - CMHP1	
	61		
	62	-	
Total One-time capitalized purchases from One-time funding	63	-	
Operating expenses from One Time Funding Section C-2			
	64	19,596	
	65	-	
	66	-	
	67	-	
	68	-	
	69	-	
	70	-	
	71	-	
	72	-	
	73	-	
	74	-	
	75	-	
	76	-	
77	-		
78	-		
Total One-time operating expenses from One-time funding	79	19,596	
TABLE D: Operating Expenses	Line #	2020-21 Final	Comments (Max 255 Characters)
Capitalized expenses Sourced from Operating Funding (Section D-1) (All capitalized items regardless of amount)			
	80	-	
	81	-	
	82	-	
	83	-	
	84	-	
	85	-	
	86	-	
	87	-	
	88	-	
	89	-	
	90	-	
	91	-	
	92	-	
93	-		
94	-		
Total Capitalized expenses from Operating Funding	95	-	
Non- capitalized one-time expenses > \$5,000 Sourced from Operating Funding (Section D-2)			
	96	-	
	97	-	
	98	-	
	99	-	
	100	-	
	101	-	
	102	-	
	103	-	
	104	-	
	105	-	
	106	-	
	107	-	
	108	-	
109	-		
110	-		
Total Non-Capitalized One-time expenses >\$5,000 from Operating Funding	111	-	
Total One Time Expenses	112	19,596	
TABLE F: Sessional Fees Summary (Enter the # of Sessions Delivered)			
# of Sessions Delivered (From Sessional Fees)	113	0	
Calculated Cost Per Session	114	0.00	

PROXY PAY EQUITY ANNUAL REPORT

This form is to be completed by transfer payment organizations who receive proxy pay equity funding from the Ministry of Health and Long-Term Care, pursuant to the April 23, 2003 Memorandum of Settlement. It must be completed on an annual basis until an organization no longer has a pay equity obligation.

SECTION 1: BASIC PROGRAM INFORMATION

Name of Agency: Community Mental Health Program

Vendor #: Reporting Period: from to

Contact Person: Phone:

SECTION 2: EXPENDITURE REPORT

Sources of Proxy Pay Equity Funds

Ministry of Health and Long-Term Care \$ A

Other (Specify)

TOTAL 0.00

Expenditures

Actual Proxy Pay Equity Expenses B

Surplus(Deficit) 0.00 A-B

Current Outstanding Liabilities

Total Number of Individuals Receiving Proxy Pay Equity

SECTION 3: CERTIFICATION

I, hereby certify that to the best of my knowledge the financial data is correct and it is reflected in the year-end settlement.

 Title:
(Signature of Health Service Provider Authority)

Certification by Provider Fiscal 2020-21

Having the authority to bind the Health Service Provider, we certify that the information provided in ARRFIn1, ARRFIn2 and ARRFIn3 are complete and accurate

Community Mental Health Program

N/A

Name of Signing Officer

Date

Signing Officer***

N/A

Title

N/A

Name of Signing Officer

Date

Signing Officer***

N/A

Title

*****I have the authority to bind the Health Service Provider**

1. Significant accounting policies

Basis of accounting

These Schedules have been prepared for the Ontario Ministry of Health and the Ontario Health – West Region. They are prepared in accordance with Canadian public sector accounting standards, except that it does not provide for employee future benefits and does not capitalize and amortize tangible capital assets. Since precise determination of many assets and liabilities is dependent upon future events, the preparation of periodic financial information necessarily involves the use of estimates and approximations. These have been made using careful judgments.

Revenues and expenses

Revenues and expenses are reported on the accrual basis of accounting, with the exception of employee future benefits below.

The accrual basis of accounting recognizes revenues as they become available and measurable, expenses are recognized as they are incurred and measurable as a result of receipt of goods or services and the creation of a legal obligation to pay.

Capital assets

Tangible capital assets acquired are reported as an expenditure, and amortization is not recorded.

Employee future benefits

Employee future benefits are provided which will require funding in future periods. These benefits include sick leave, benefits under the Workplace Safety and Insurance Board ("WSIB") Act, and life insurance, extended health and dental benefits for early retirees. These benefits are recorded on a cash basis.

Schedule of revenue and expenses

**The Regional Municipality of
Niagara Public Health Department**
Infant and Child Development Services

March 31, 2021



The Regional Municipality of Niagara Public Health Department

Infant and Child Development Services

March 31, 2021

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Independent Auditor's Report

To the Members of Council of the Regional Municipality of Niagara and the Ministry Children, Community and Social Services

Opinion

We have audited the accompanying schedule of revenue and expenses of the Regional Municipality of Niagara Public Health Department – Infant and Child Development Services (the "Program") for the year ended March 31, 2021 and notes to the schedule (collectively referred to as the "schedule").

In our opinion, the accompanying schedule of the Program for the year ended March 31, 2021 is prepared, in all material respects, in accordance with the financial reporting provisions of the Ontario Transfer Payment Agreement effective April 1, 2020, between the Her Majesty the Queen in right of Ontario as represented by the Minister of Children, Community and Social Services and the Regional Municipality of Niagara (the "Guidelines").

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards ("Canadian GAAS"). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Schedule* section of our report. We are independent of the Program in accordance with the ethical requirements that are relevant to our audit of the schedule in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Emphasis of Matter - Basis of Accounting

We draw attention to Note 1 to the schedule, which describes the basis of accounting. The schedule is prepared to assist the Program to comply with the financial reporting provisions of the Guidelines. As a result, the schedule may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

Responsibilities of Management and Those Charged with Governance for the Schedule

Management is responsible for the preparation of the schedule in accordance with the Guidelines, and for such internal control as management determines is necessary to enable the preparation of the schedule that is free from material misstatement, whether due to fraud or error.

Those charged with governance are responsible for overseeing the Region's financial reporting process.

Auditor's Responsibilities for the Audit of the Schedule

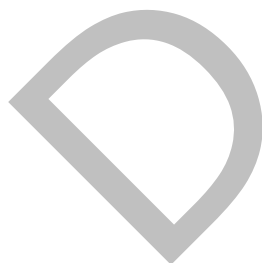
Our objectives are to obtain reasonable assurance about whether the schedule as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian GAAS will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this schedule.

As part of an audit in accordance with Canadian GAAS, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the schedule, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Region's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates, if any, and related disclosures made by management.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Chartered Professional Accountants
Licensed Public Accountants
_____, 2021



The Regional Municipality of Niagara

Public Health Department

Infant and Child Development Services

Schedule of revenue and expenses

Year ended March 31, 2021

	2020-21 Budget (12 months)	2020-21 Actual (12 months)	2019-20 Actual (15 months)
	\$	\$	\$
Revenue			
Province of Ontario - Service Contract	568,428	568,428	710,530
	568,428	568,428	710,530
Expenses			
Salaries	426,499	441,983	546,345
Benefits	106,625	114,030	133,264
	533,124	556,013	679,609
Other service costs			
Administration costs (Note 3)	33,636	19,589	36,180
Staff travel	22,000	2,151	20,910
Audit Services	1,378	2,761	3,333
Utilities and taxes	2,000	1,572	1,998
Supplies	3,500	162	1,845
IT licences and support	2,300	-	1,668
Staff training	2,500	5,634	726
Purchased services	1,320	135	225
Fees and dues	300	-	221
	68,934	32,004	67,106
Total expenses	602,058	588,017	746,715
Deficiency of revenue over expenses	(33,630)	(19,589)	(36,185)

The accompanying notes to the financial statements are an integral part of this financial statement.

The Regional Municipality of Niagara

Public Health Department

Infant and Child Development Services

Notes to the schedule of revenues and expenses

March 31, 2021

1. Significant accounting policies

This schedule has been prepared for the Ontario Ministry of Children, Community and Social Services. The agreement requires the schedule to be prepared in a manner consistent with generally accepted accounting principles ("GAAP"). Management of the Regional Municipality of Niagara has interpreted GAAP to be recognition and measurement principles in accordance with Canadian Public Sector Accounting Standards, except that it does not provide for employee future benefits and does not capitalize and amortize tangible capital assets. Management has further interpreted that GAAP does not include the presentation principles or the presentation of all financial statements and note disclosures required by GAAP for a complete set of financial statements.

Significant accounting policies are as follows

Revenue and expenses

Revenue and expenses are reported on the accrual basis of accounting, with the exception of employee future benefits below.

The accrual basis of accounting recognizes revenues are they become available and measurable, expenses are recognized as they are incurred and measurable as a result of receipt of goods or services and the creation of a legal obligation to pay.

Capital assets

The historical cost and accumulated depreciation of capital assets are not recorded. Capital assets acquired are reported as an expenditure and amortization is not recorded on the statement of revenue and expenditure and surplus.

Employee future benefits

Employee future benefits are provided which will require funding in future periods. These benefits include sick leave, benefits under the Workplace Safety and Insurance Board ("WSIB") Act, and life insurance, extended health and dental benefits for early retirees. These benefits are recorded on a cash basis.

2. Grant repayable

	2020-21	2019-20
	\$	\$
Grant repayable beginning of period	-	-
Excess of expenditures over revenue	19,589	36,185
Expenditures in excess of the budget	(19,589)	(36,185)
Grant repayable, end of period	-	-

The Regional Municipality of Niagara

Public Health Department

Infant and Child Development Services

Notes to the schedule of revenues and expenses

March 31, 2021

3. Administration costs

Administration costs are allocated under the indirect allocation methodology included in the cost allocation policy.

Under this methodology, all departments providing program/service support functions, as identified during the budget process, will allocate their costs using a basis that best match actual costs with the most appropriate beneficial recipient of the cost.

Administration costs are comprised of the following charges:

	2020-21 Budget (12 months)	2020-21 Actual (12 months)	2019-20 Actual (15 months)
	\$	\$	\$
Accounting services	1,321	835	1,213
Payroll services	10,409	3,372	9,404
Human resources services	6,597	4,705	7,271
IT program support services	12,241	8,642	13,277
Insurance costs	297	363	270
Printing costs	1,067	200	1,081
Capital financing	1,704	1,472	3,664
	33,636	19,589	36,180

4. Budget data

The budget data presented in the schedule is based on the budget data submitted to the Ontario Ministry of Children, Community and Social Services.

Schedule of revenue and expenses

**The Regional Municipality of Niagara
Public Health Department**
Healthy Babies, Healthy Children Program

March 31, 2021

The Regional Municipality of Niagara
Public Health Department
Healthy Babies, Healthy Children Program

March 31, 2021

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Draft

Independent Auditor's Report

To the Members of Council of the Regional Municipality of Niagara and Ontario Ministry of Children, Community and Social Services

Opinion

We have audited the accompanying schedule of revenue and expenses of the Regional Municipality of Niagara Public Health Department – Healthy Babies, Healthy Children Program (the “Program”) for the year ended March 31, 2021, and notes to the schedule (collectively referred to as the “schedule”).

In our opinion, the accompanying schedule of the Program for the year ended March 31, 2021 is prepared, in all material respects, in accordance with the financial reporting provisions of the Ontario Transfer Payment Agreement effective April 1, 2020, between the Her Majesty the Queen in right of Ontario as represented by the Minister of Children, Community and Social Services and the Regional Municipality of Niagara (the “Guidelines”).

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards (“Canadian GAAS”). Our responsibilities under those standards are further described in the *Auditor’s Responsibilities for the Audit of the Schedule* section of our report. We are independent of the Region in accordance with the ethical requirements that are relevant to our audit of the schedule in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Emphasis of Matter - Basis of Accounting

We draw attention to Note 1 to the schedule, which describes the basis of accounting. The schedule is prepared to assist the Program in complying with the financial reporting provisions of the Guidelines. As a result, the schedule may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

Responsibilities of Management and Those Charged with Governance for the Schedule

Management is responsible for the preparation of the schedule in accordance with the Guidelines, and for such internal control as management determines is necessary to enable the preparation of the schedule that is free from material misstatement, whether due to fraud or error.

Those charged with governance are responsible for overseeing the Region’s financial reporting process.

Auditor’s Responsibilities for the Audit of the Schedule

Our objectives are to obtain reasonable assurance about whether the schedule as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor’s report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian GAAS will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this schedule.

As part of an audit in accordance with Canadian GAAS, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the schedule, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Region's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates, if any, and related disclosures made by management.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Chartered Professional Accountants
Licensed Public Accountants
_____, 2021

The Regional Municipality of Niagara

Public Health Department

Healthy Babies, Healthy Children Program

Schedule of revenue and expenses

year ended March 31, 2021

	2020-21 Budget (12 months)	2020-21 Actual (12 months)	2019-20 Actual (15 months)
	\$	\$	\$
Revenue			
Ministry of Children, Community and Social Services Funding	2,362,755	2,362,755	3,084,194
Province of Ontario one-time grants	-	1,159	-
Other revenue	-	157	2,296
	2,362,755	2,364,071	3,086,490
Expenses			
Salaries and wages: unionized			
Public health nurses	1,115,928	1,125,821	1,454,834
Employee benefits	350,721	336,179	463,795
Lay home visitors	327,797	361,695	402,972
Clerical	105,602	101,011	129,588
WSIB	-	-	56
Salaries and wages: non-unionized			
Management	239,923	239,286	284,428
Administration ISCIS	71,788	63,965	85,348
Employee benefits	80,266	77,634	83,059
	2,292,025	2,305,591	2,904,080
Operating costs			
Administration costs (Note 3)	124,392	88,604	141,693
Travel - mileage	51,000	26,688	66,222
Professional development	4,000	6,392	100,213
Program supplies/resources	1,500	8,213	8,738
Telephone and communications	7,000	8,015	10,132
Office supplies	1,156	2,995	5,982
Audit fees	5,574	5,829	7,149
Cleaning allowance	500	350	760
	195,122	147,086	340,889
Total expenses	2,487,147	2,452,677	3,244,969
Deficiency of revenue over expenses	(124,392)	(88,606)	(158,479)

The accompanying notes to the financial statements are an integral part of this financial statement.

The Regional Municipality of Niagara

Public Health Department

Healthy Babies, Healthy Children Program

Notes to the schedule of revenue and expenses

March 31, 2021

1. Summary of significant accounting policies

Basis of accounting

This schedule has been prepared for the Ontario Ministry of Children, Community and Social Services. The agreement requires the schedule to be prepared in a manner consistent with generally accepted accounting principles ("GAAP"). Management of the Regional Municipality of Niagara has interpreted GAAP to be recognition and measurement principles in accordance with Canadian Public Sector Accounting Standards, except that it does not provide for employee future benefits and does not capitalize and amortize tangible capital assets. Management has further interpreted that GAAP does not include the presentation principles or the presentation of all financial statements and note disclosures required by GAAP for a complete set of financial statements.

Revenue and expenses

Revenue is reported on the accrual basis of accounting.

Expenses are recorded if they are eligible for the program and incurred in the period except for employee future benefits.

Capital assets

Tangible capital assets acquired are reported as expenses and amortization is not recorded.

Employee future benefits

Employee future benefits are provided which will require funding in future periods. These benefits include sick leave, benefits under the Workplace Safety and Insurance Board ("WSIB") Act, and life insurance, extended health and dental benefits for early retirees. These benefits are recorded on a cash basis.

Use of estimates

Since precise determination of many assets and liabilities is dependent upon future events, the preparation of a periodic schedule involves the use of estimates and approximations. These have been made using careful judgments.

Certain administrative expenses are allocated to the program based on usage drivers specific to each type of expenditure.

2. Grant receivable/repayable

The grant receivable/repayable to the Province of Ontario is subject to audit verification by the Ontario Ministry of Children, Community and Social Services. The grant receivable/repayable is non-interest bearing and is normally recovered/repaid in the subsequent year. The surplus repayable to the Province of Ontario for the year ended March 31, 2021 is \$nil (2019-20 - \$nil).

	2020-21	2019-20
	\$	\$
Grant receivable (repayable), beginning of period	-	-
Excess of expenditures over revenue	(88,606)	(158,479)
Expenditures in excess of the budget	88,606	158,479
Grant receivable (repayable), end of period	-	-

The Regional Municipality of Niagara

Public Health Department

Healthy Babies, Healthy Children Program

Notes to the schedule of revenue and expenses

March 31, 2021

3. Administration costs

	2020-21 Budget (12 months)	2020-21 Actual (12 months)	2019-20 Actual (15 months)
	\$	\$	\$
Accounting services	3,230	2,140	2,506
Payroll services	38,132	14,740	36,908
Human resources services	23,729	21,169	30,290
IT program support services	46,807	37,704	55,696
Insurance costs	1,156	1,400	933
Printing costs	4,662	3,118	1,808
Capital financing allocation	6,676	8,333	13,552
	124,392	88,604	141,693

4. Budget data

The budget data presented in the schedule is based on the budget data submitted to the Ontario Ministry of Children, Community and Social Services.

Subject: Niagara Prosperity Initiative 2021 Update

Report to: Public Health and Social Services Committee

Report date: Tuesday, July 13, 2021

Recommendations

1. That this report **BE RECEIVED** for information.

Key Facts

- The purpose of the report is to update committee on the 16 projects approved under the Niagara Prosperity Initiative (NPI) for June 2021 to August 2022.
- NPI focuses on neighbourhood-based interventions to help build capacity and improve the quality of life for residents living in poverty.
- Priorities for 2021 have been informed by impacts of the COVID-19 pandemic and as such, funding was targeted to identify needs in the areas of housing, health and domestic violence.
- NPI is a 100% levy funded program with a 2021 annual budget of \$1.25 million.
- In 2021, Brock University completed a three-year research project to review the impact of the NPI program.
- A comprehensive review of the analysis and recommendations outlined in “Connecting the Pieces: An Evaluation of the Niagara Prosperity Initiative and Call for a Broader Poverty Reduction Strategy for Niagara” is underway.
- Staff will present the report and staff recommendations including an approach for the future of NPI and a Niagara Poverty Reduction Strategy to Public Health and Social Services Committee (PHSSC) in September 2021.

Financial Considerations

While considering Community Services’ operating budget, Council reviews the investment of NPI funding annually. Since 2008, Regional Council has typically invested \$1.5 million annually toward increasing prosperity for Niagara residents living in poverty. In both 2020 and 2021, the investment was reduced to \$1.25 million in order to mitigate budget pressures in other areas. Each year, \$150,000 of the budgeted amount is allocated to the Convener (Niagara Community Foundation) and Secretariat (United Way Niagara) functions to support administration and stakeholder engagement associated with this initiative. Additionally, United Way Niagara reported \$44,938 in

unspent funding (including interest) from previous projects, resulting in a total project allocation of \$1,144,938, excluding administration. The total program cost for 2021 is within the 2021 approved budget. This funding does not include other additional non-mandatory levy contributions that council directs to other poverty reduction/alleviation efforts such as investments in homelessness services housing and discretionary benefits for social assistance recipients.

Analysis

NPI focuses on neighbourhood-based interventions and development to increase prosperity for Niagara residents living in poverty.

For 2021, NPI committed to providing supports to help communities rebuild and recover from the devastating impacts of COVID-19. The pandemic has exacerbated and amplified many of the issues caused by poverty. United Way Niagara and Niagara Regional staff reviewed local data, reports and spoke with experts in the community to help determine which areas of need required additional funding as a result of the pandemic. As an outcome of this review, the 2021 NPI Request for Proposals (RFP) targeted needs in the areas of housing, health and domestic violence.

1. **Housing** (improving housing stability through neighbourhood connectedness, enhancing the existing street outreach system, improving the health and well-being of individuals experiencing homelessness and expanding services that enable people to find and retain a home).
2. **Health** (expand access to free, quality mental health and addictions services, increase access to virtual or in-person addictions treatment, reduce isolation, increase access to dental health care, address the impacts of trauma, promote healthy child development and expand coordination across food bank programs).
3. **Domestic Violence** (expand crisis-based services that provide counselling and safety planning for women experiencing intimate partner violence, increase access to early intervention and family violence programs, increase access to virtual or in-person group and one-on-one counselling for those healing from the effects of violence and abuse).

The 2021 RFP was issued March 1st and closed April 2nd. Thirty-seven applications from thirty different agencies, with a total funding request of \$4,206,285 were received.

Niagara Region approves funding applications based on the recommendations of an independent review committee. Review committee members for 2021 included three Regional Councillors (B. Greenwood, L. Ip, L. Villella); two Niagara Region employees (Children's Services and Public Health); and seven members of the public including individuals with lived experience in poverty. Assessors reviewed each of their assigned proposals independently followed by group discussion on funding recommendations in three half-day meetings held in May 2021.

The criteria for assessment matched the proposal criteria and a list of review considerations were used to decide if the proposal was recommended or not recommended. After discussing all proposals, the group completed their final approvals and corresponding proposed budget recommendations. United Way Niagara finalized contracts based on these recommendations and a list of the approved projects by municipality is attached as Appendix 1.

Within the three streams of funding, eight projects are under Health, six projects are under Housing and two projects are under Domestic Violence.

Types of Projects	\$	%	# of Projects
Health – Mental Health/Addictions, Dental, Food	\$592,576	52%	8
Housing – Access, Outreach, Stability	\$400,154	35%	6
Domestic Violence – Early Intervention	\$152,208	13%	2
Total	\$1,144,938	100%	16

All sixteen projects will be funded to a maximum of 15 months with contracts ending August 30, 2022. Agencies have been advised that if they are unable to execute the project fully as a result of COVID-19, Niagara Region will recover unspent funds as soon as possible to ensure they can be redirected to urgent needs.

NPI Review

In 2018, Niagara Region's Social Assistance & Employment Opportunities (SAEO) division obtained funding of \$476,763 from the province's Local Poverty Reduction Fund (LPRF) for a three-year research project.

SAEO contracted with Brock University to complete the research. Brock University completed their review of NPI and the executive summary of the “Connecting the Pieces: An Evaluation of the Niagara Prosperity Initiative and Call for a Broader Poverty Reduction Strategy for Niagara” report was presented to PHSSC in March 2021. Within the executive summary, Brock proposed five recommendations to enhance Niagara Region’s response to poverty; develop a comprehensive poverty reduction strategy, increase investment, offer longer term and more deliberate funding, enhance research and design services for social inclusion aligned with poverty reduction priorities.

To support Niagara Region’s future responses to poverty, SAEO staff are working with Clarico Group Inc. to use the results of the Brock study to:

- Gain an understanding of the Region’s broader investments in poverty reduction;
- Propose an approach for the implementation of a broader Poverty Reduction strategy that would consider the investments into poverty reduction; and
- Propose to Council a new approach for NPI investments in the context of a broader Poverty Reduction strategy

The report will be presented at the September 2021 PHSSC meeting with the intent to implement Council-approved recommendations for NPI in 2022.

Alternatives Reviewed

Not applicable.

Relationship to Council Strategic Priorities

Investing funding and collaborative action in neighbourhoods in need supports Council’s strategic priority of Fostering an Environment for Economic Prosperity. Outcomes are realized by helping residents thrive through greater opportunities and relate to employment and improved community symptoms.

Other Pertinent Reports

COM 4 – 2021 Niagara Prosperity Initiative Review

COM 2 – 2021 Evaluation of 2108 Niagara Prosperity Initiatives Projects

COM 44-2011 Niagara Prosperity Initiative Update (Building a New Legacy: Building Prosperity by Improving the Quality of Neighbourhood Life)

COM 04-2008 A Legacy of Poverty Addressing Cycles of Poverty and the Impact on
Child Health in Niagara Region

Prepared by:

Lori Watson
Director
Community Services

Recommended by:

Adrienne Jugley, MSW, RSW, CHE
Commissioner
Community Services

Submitted by:

Ron Tripp, P.Eng.
Acting Chief Administrative Officer

This report was prepared in consultation with Marc Todd, Manager, Community Services.

Appendices

Appendix 1 List of approved 2021 NPI projects by agency & municipality

Appendix 1– 2021 Niagara Prosperity Initiatives

Regional

Agency	Project Name	Project Description	Funding Stream	Contract
Community Care St. Catharines and Thorold	Brushed Aside 2020	This program funds either the dental needs of individuals who are ineligible for publicly funded programs, or the unfunded portion of those who are eligible. Community Care is the lead agency working with five partners across Niagara. The maximum annual allotment per client is \$1,000.	Health - Dental	\$110,572
Gateway Residential & Community Support Services	Specialized Outreach – Niagara Assertive Street Outreach	This project will enhance the Niagara Assertive Street Outreach Team throughout the Niagara Region with the addition of two specialized outreach workers. The focus will be working with individuals living rough with a Dual Diagnosis and or Concurrent Disorder.	Housing - Outreach	\$72,214
Gillian's Place	Domestic Violence Response Initiative	This project is in collaboration with FACS Niagara and is designed to enhance services to families experiencing domestic violence who are also being served by child welfare.	Domestic Violence – Early Intervention	\$68,180
John Howard Society of Niagara	Navigating Harm Reduction Peer Outreach Program	This is a 10-week psychoeducational program designed to assist individuals who are struggling to maintain positive and pro-social relationships build practical skills to improve how they interact with others.	Domestic Violence – Early Intervention	\$84,028
Niagara Regional Native Centre	MNO Endayaan (The Good Home)	A project to enhance the Homeward Bound program by offering home supports that coincide with Indigenous pedagogies of holistic support.	Housing - Access/Find/Retain	\$78,500
Positive Living Niagara	Niagara Harm Reduction Peer Outreach Program	Peer workers will distribute harm reduction supplies and naloxone coupled with education to reduce infections, lower overdose rates and death.	Health - Mental Health / Addictions	\$42,988

Agency	Project Name	Project Description	Funding Stream	Contract
Project SHARE of Niagara Falls Inc.	Niagara Food Hub	This project will increase coordination among foodbanks to provide more essential food items like fresh protein to distribute to families who are living below the poverty line in Niagara.	Health- Food	\$28,996
Quest Community Health Centre	Niagara Homelessness Emergency Liaison & Peer Support	Individuals with lived experience of homelessness will provide counseling, assistance & referrals to community agencies to meet the needs of people experiencing homelessness who visit Emergency Departments (ED) in Niagara.	Health - Mental Health / Addictions	\$129,325
The RAFT	Landlords / Family Engagement	This project will further expand on the existing Landlord/Family Engagement program, initially a function of Youth Reconnect. Workers will help at risk youth acquire and/or maintain suitable market rent housing and family reunifications.	Housing - Access/Find/Retain	\$72,118

West Lincoln

Agency	Project Name	Project Description	Funding Stream	Contract
Links for Greener Learning	West Lincoln Community Care Housing Assistance	To provide housing cost relief to West Lincoln Community Care low income clients. This will help individuals meet their financial commitments, while providing the opportunity for goal setting and action plan development.	Housing - Access/ Find / Retain	\$45,000

St. Catharines

Agency	Project Name	Project Description	Funding Stream	Contract
Community Addiction Services of Niagara	Addiction Services in Women's Shelter Project	CASON will employ an Addiction Coach to work onsite with YWCA, Gillian's Place and Women's Place South Niagara participants who present addiction issues.	Health - Mental Health / Addictions	\$26,422

Agency	Project Name	Project Description	Funding Stream	Contract
YMCA of Niagara	YMCA Adventure Club	This is a program for children and families who are at-risk or in vulnerable situations and has been developed in response to the COVID-19 pandemic.	Health- Child	\$25,000
Westview Christian Fellowship	Westview Centre4Women	This project provides services in the sphere of housing and health in the Queenston Street and surrounding areas to women and families, dealing with issues of homelessness, addiction, sex trade / human trafficking, LGBTQ discrimination, and any other barriers preventing safe housing.	Housing - Stability	\$92,658

Welland

Agency	Project Name	Project Description	Funding Stream	Contract
Community Addiction Services of Niagara	Addiction Services in Women's Shelter Project	CASON will employ an Addiction Coach to work onsite with YWCA, Gillian's Place and Women's Place South Niagara participants who present addiction issues.	Health - Mental Health / Addictions	\$26,421
The Hope Centre	Return 2 Hope Counselling Services	A team of registered psychotherapists will provide supports to vulnerable members of the community to address adverse childhood trauma such as physical, emotional or sexual abuse which have been exacerbated with pandemic related anxiety and restrictions.	Health- Mental Health / Addictions	\$93,600
Welland Heritage Council and Multicultural Centre	Housing Coordinator	This project will serve newcomer clients with safe, secure, and clean emergency shelter apartments. Opportunities will be offered for select clients in the shelter to assist the Housing Coordinator with shelter tasks to gain Canadian work experience.	Housing - Stability	\$39,665

Niagara Falls

Agency	Project Name	Project Description	Funding Stream	Contract
Community Addiction Services of Niagara	Addiction Services in Women's Shelter Project	CASON will employ an Addiction Coach to work onsite with YWCA, Gillian's Place and Women's Place South Niagara participants who present addiction issues.	Health - Mental Health / Addictions	\$26,421
YMCA of Niagara	YMCA Adventure Club	This is a program for children and families who are at-risk or in vulnerable situations and has been developed in response to the COVID-19 pandemic.	Health- Child	\$25,000
Project SHARE of Niagara Falls Inc.	Dental Cleaning Program	This project will provide funding for dental cleaning for eligible adults who are living below the poverty line in Niagara Falls and without any dental coverage. This cleaning will increase their oral and overall health.	Health - Dental	\$57,830

Subject: Bridge Housing Design Phase Operations
Report to: Public Health and Social Services Committee
Report date: Tuesday, July 13, 2021

Recommendations

1. That this report **BE RECEIVED** for information.

Key Facts

- The purpose of this report is to provide an update to Council with regard to the planning for the new Bridge Housing facility.
- Bridge Housing is a leading edge, short term supportive housing program addressing the needs of clients who are chronically homeless and present with complex and multiple barriers.
- The facility is planned to include recuperative beds as part of the offering to support homeless individuals who require additional health care, but do not require hospitalization. The Region continues to work with a number of partners to determine who will operate or direct the work of these beds.
- Policies and procedures to optimize the outcomes of bridge housing remain in development with limited similar programs operating, and none in an Ontario context. Homelessness Services has been piloting many of the policies and concepts as part of the pilot project currently operating, with encouraging housing outcomes to date. OrgCode has offered to partner with the Region in the development of programming, policies and procedures, as well as evaluation methods to ensure best practices are developed/implemented and create the program expectations for this facility going forward.
- After a presentation with funded agencies, it was requested that the Region operate the asset during the design phase period. Once satisfied that programming, policies and procedures for Bridge Housing are established, and an operational plan and linkages are developed the recuperative beds, the Region will then procure an operator, and transition the operations to a third party supportive housing provider.

Financial Considerations

The annual estimate to operate the bridge housing asset is \$1 million. This estimate was provided in Confidential report COM-C 30-2020 NRH. As directed by council, Community Services has been advocating, and identifying the need for operating dollars to our upper tier government funders, and will continue to do so, in order to receive on-going and sustainable funding for this asset. It should be noted that several other municipalities, also leveraging one-time COVID funding to purchase properties for supportive housing, are making similar requests to the Provincial government for operating dollars. However, funding has not been secured at the time of writing this report. The 2021 budget was approved with planned base budget reductions to homelessness prevention programs and included a one-time allocation back to the homelessness program as the facility is not expected to be operational until December 31, 2021. If funding is not secured, the 2022 budget will continue to reflect the base budget reductions to prevention programs in order to operate the bridge housing asset as this is considered to be more impactful to the Region's objective to reduce chronic homelessness. The reductions will be made through program redesign and policy revisions. This includes revisions to the policies around housing stability plan and Niagara emergency energy fund programs, similar to other municipal counterparts.

Analysis

Bridge Housing is identified as a newer model of service intended for a population of chronically homeless clients with multiple and/or complex needs. Many of the clients participating in the current bridge housing pilot are living with mental illness, addictions and chronic health issues. This cohort of homeless clients are often identified as "hard to serve" or "service resistant". These individual adults are more likely to be overlooked, or under-served in any broader effort to assist homeless individuals to achieving permanent housing as there is little in the way of resources that would meet their needs. Bridge housing will provide a more appropriate service option for this group of people, known currently to consume a considerable volume of shelter services/bed days and community resources while "stuck" in a state of homelessness.

Bridge housing is an intensive support program, with shorter-term accommodation that closes the gap for chronically homeless individuals as they continue in their journey towards permanent housing. Clients are supported in a manner that addresses their complex needs, in an environment that allows for individually designed programming to assist them in achieving their housing goals. Staff will be on site 24/7 and will be dedicated to accelerating the securing of housing with supports or supportive housing

for the individual while concurrently providing intensive supports to allow people to live in a self-contained unit, much like they will experience when they move out of bridge housing. Service offerings will include mental health and addictions programming, securing identification and income, and case management as they continue to access the supports they need to ensure housing success,. Connecting participants to community-based resources including primary health care, trusteeships, peer support groups, socio-recreational activities, and life-skill training will support individuals as they prepare to move in to their permanent housing.

Community Services has been piloting elements of this program at the Housing Focused shelter pilot offered during the pandemic, supported with provincial COVID funding. To date this program has had 127 intakes, with 43 successful exits to permanent housing. The program has experienced 53 exits due to clients self discharging or being unsuccessful in the program. This demonstrates the continued need to redesign programming, policy and procedures, through a continuous improvement approach, to achieve maximum outcomes for this client group.

Based on the work currently being performed at the pilot, staff considered taking on the direct operations of the bridge housing project, to allow for time to further develop the programming, policy and procedures necessary to operate a successful program. At this juncture, staff determined that input from the homeless serving agencies of Niagara was integral to the decision to move forward with temporary direct operations during the design phase of the this program. Staff invited all funded agencies to a meeting to discuss the next steps of the Bridge Housing project and to receive their input on the temporarily continue with direct operations post pandemic, as the owners of the design phase. At the end of the presentation, and question and answer session, agencies were asked to vote anonymously on their support of the Region operating the facility for the design period. Community agencies were all in favour of the Region continuing this work with the exception of one.

With the support of the Community and the commitment and expertise of the Homeless staff, work has already begun on the necessary project planning, start up policies, procedures and human resources efforts to be prepared to commence operations in December of 2021.

This initial work also includes working with Reach Niagara and local health care providers including NHS, Niagara's Ontario Health team and the Niagara Falls CHC to confirm needs and develop program design for the recuperative beds within the same facility.

Homelessness Services is excited to share that Iain De Jong, CEO OrgCode has worked extensively with the Homelessness team during this initial work. As part of their interest in this Bridge Housing project, OrgCode has indicated a desire to partner with the Region on the development of programming, policy and procedures for operations, eligibility criteria and discharge from the program. In addition, the intent of OrgCode is once the work is complete, is to ensure that the final program will be identified as a Canadian best practice model and available to all interested jurisdictions. As part of the work to ensure the program is successful, OrgCode has offered support in the evaluation process during and at the conclusion of the design phase.

Staff are working collaboratively with Human Resources to establish a staffing model, job descriptions and job ratings for the new facility. All positions will be temporary, reflective of the temporary nature of these operations. Once more, the learnings of what expertise, training and certification of staff/positions will be shared with any future operator.

The design phase is anticipated to be complete after one to two years, at which time the Region will undertake a procurement process to establish a contract with a third party provider to assume the operations (similar to how the Region provides shelter and other supportive housing services). It is anticipated, the scope of work provided during the procurement process, will reflect the expected best practices, performance targets, policies and procedures established during the design phase to ensure that the continued operations reflect the success and unique opportunity of Bridge Housing in Niagara.

Alternatives Reviewed

Staff did consider moving immediately to a public procurement process to award the operations of the Bridge Housing program to a third party provider. However, as there was concern that the program and performance expectations are not completely confirmed, that most local providers indicated that they preferred temporary Regional operations, and that there is an opportunity to receive a high level of expertise during the design phase, staff are not recommending moving immediately to find a third party operator. It is important to be clear, however, that staff are not recommending that the facility is directly operated beyond the Design phase.

Relationship to Council Strategic Priorities

The Bridge Housing Program is a homelessness system service that supports the Council Priority of a Healthy and Vibrant Community and contributes to Council's direction to develop and implement an affordable housing strategy.

Other Pertinent Reports

- Confidential COM-C 30-2020 NRH

Prepared by:

Cathy Cousins, CPA, CA
Director Homelessness Services
Community Services

Recommended by:

Adrienne Jugley, MSW, RSW, CHE
Commissioner
Community Services

Submitted by:

Ron Tripp, P.Eng.
Acting Chief Administrative Officer

This report was reviewed by Lisa Castellen, Human Resources Consultant, Stephanie Muhic, Program Financial Specialist, Nicole Cortese, Supervisor, Shelter Operations and Margaret Penca, Manager Homelessness Services.

MEMORANDUM

COM-C 24-2021

Subject: Niagara Regional Housing 2020 Annual Report

Date: July 13, 2021

To: Public Health and Social Services Committee

From: Ann-Marie Norio, Regional Clerk

Further to correspondence dated June 11, 2021, received from Niagara Regional Housing (NRH), respecting the NRH 2020 Annual Report (attached as Appendix 1), NRH has prepared a video highlighting their 2020 accomplishments that can be viewed by copying the link provided below and pasting into your browser.

<https://www.youtube.com/watch?v=a8RKayj6iUg>

Respectfully submitted and signed by

Ann-Marie Norio
Regional Clerk



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Web site: www.nrh.ca

June 11, 2021

Ann-Marie Norio, Regional Clerk
Niagara Region
1815 Sir Isaac Brock Way
Thorold, ON L2V 4T7

Dear Ms. Norio,

In compliance with Section 11.3. of The Regional Municipality of Niagara/Niagara Regional Housing Operating Agreement, please see attached the NRH 2020 Annual Report on the Corporation's activities and achievements, consisting of a letter with an embedded short video report.

Your assistance is requested in moving report NRH 9-2021, the NRH 2020 Annual Report, through the Public Health & Social Services Committee to Regional Council for information.

Sincerely,

A handwritten signature in black ink, appearing to read "Walter Sendzik", with a long horizontal line extending to the right.

Councillor Walter Sendzik
Chair



ANNUAL REPORT 2020



Like so many organizations, Niagara Regional Housing (NRH) was challenged like never before in 2020. The global pandemic forced the shut down of many of the

supports and services that our clients depend upon to live healthy lives. Fortunately, staff were able to adapt service delivery without sacrificing the high quality of work to which NRH clients and stakeholders have become accustomed. As you will see in the NRH 2020 Annual Report video, NRH and our partners worked together to come up with creative solutions to help our clients through the unfamiliar and frightening year.

Recognizing that vulnerable populations were disproportionately affected by the pandemic, NRH worked tirelessly to minimize its

impact. Throughout the year, we continued to serve Niagara residents and support the construction of new affordable housing across the region. The Annual Report video highlights NRH's many accomplishments through this incredibly difficult year.

And now, we have begun to see light at the end of the tunnel for the pandemic and NRH is moving toward an even stronger relationship with Niagara Region with a new organizational model. I am confident that this will bring a renewed emphasis on the needs of our community and that NRH and Niagara Region will work together to be even more creative, adaptable and collaborative.

On behalf of the Board and Staff of NRH, I would like to thank all those who have been so dedicated to Community Housing in Niagara. We share the same goal to provide quality community housing opportunities for individuals and families across our region. I look forward to creating better futures together.

I hope you enjoy our [2020 Annual Report](#) video.

Sincerely,
Walter Sendzik | NRH Chair

MEMORANDUM

COM-C 25-2021

Subject: Niagara Joins Built for Zero Veteran Cohort

Date: July 13, 2021

To: Public Health & Social Services Committee

From: Adrienne Jugley, Commissioner, Community Services

It is with pleasure I can announce that in May 2021, Niagara was chosen to participate in the Built for Zero Canada (BFZ-C) Veterans cohort. Niagara now joins a core group of leading Canadian communities working to end veteran homelessness.

Niagara first joined BFZ-C in July of 2019. Built for Zero is a Canadian movement, led by the Canadian Alliance to End Homelessness, which supports participating communities to work toward an end to chronic and/or veteran homelessness. Communities are coached in the adoption of proven practices and strategies, targeted to their local context. When Niagara was first accepted into BFZ-C it was to advance its work on ending chronic homelessness. By joining the Veterans cohort, Niagara will now expand the use of BFZ-C's structured, data-driven approach and proven practices to drive continuous improvement to end veteran homelessness.

In 2020 Niagara's homeless serving system supported 26 people who identified as a veteran. In March 2021 there were ten individuals who identified as a veteran on Niagara's By Name List (BNL), with five of these individuals experiencing chronic homelessness. Participation in the BFZ-C Veterans cohort will provide an opportunity to further increase collaboration between Niagara's homeless serving system and key veteran service organizations, including the Royal Canadian Legion and Veterans Affairs Canada to better support this population.

For more information visit the [Built for Zero Canada website](https://bfzcanada.ca/) (<https://bfzcanada.ca/>).

Respectfully submitted and signed by,

Adrienne Jugley, MSW, RSW, CHE
Commissioner