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

PHSSC 3-2019
Tuesday, March 19, 2019
1:00 p.m.
Council Chamber
Niagara Region Headquarters, Campbell West
1815 Sir Isaac Brock Way, Thorold, ON

Pages

1. CALL TO ORDER

2. DISCLOSURES OF PECUNIARY INTEREST

3. PRESENTATIONS

4. DELEGATIONS

5. ITEMS FOR CONSIDERATION

6. **CONSENT ITEMS FOR INFORMATION**

7. **OTHER BUSINESS**

8. **CLOSED SESSION**
   There are no closed session items.

9. **NEXT MEETING**
   The next meeting will be held on Tuesday, April 16, 2019 at 1:00 p.m. in the
   Council Chamber, Regional Headquarters.

10. **ADJOURNMENT**

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

Trennum, Matthew

From:	PF-Mailbox-01
Sent:	Sunday, March 3, 2019 2:46 PM
To:	Lotimer, Kelly; Norio, Ann-Marie; Trennum, Matthew
Subject:	FW: Online Form - Request to Speak at a Standing Committee

From: Niagara Region Website
Sent: Sunday, 03 March 2019 14:46:16 (UTC-05:00) Eastern Time (US & Canada)
To: Clerks
Subject: Online Form - Request to Speak at a Standing Committee

Request to Speak at a Standing Committee

To reply, copy the email address from below and put into 'To'. (if resident entered their email address)

Name
Steven Soos

Address
█████████

City
Welland

Postal
████

Phone
██████

Email
███████████████

Organization

standing committee
Public Health and Social Services Committee

Presentation Topic
Missing Person's- Call for Regionalized Support

Presentation includes slides
No

Previously presented topic
No

Presenation Details
The deputation that I am requesting is in connection to on-going events in the Niagara-area in relation to missing persons and the call to increase supports for them, and their families. In 2016, Steven Soos and the family of Ashley Simpson successfully lobbied Niagara Regional Council to request the government make changes to the ESA provincially and the E/I federally to provide more supports to the families of missing loved ones. The motion at the Region passed with unanimously; and some strides have been made to legislation since then; however there is still more to do. What this deputation is proposing is that Niagara Regional PH/SS Committee investigate the hiring of Missing Person's Coordinators at the Regional-level. The committee must consider this, before it is brought to the attention of Regional Council, as the position would be an entity of the Social Services Department. A full presentation with comprehensive arguments will be provided by the depute upon acceptance of this request. Please note this is a non-agenda item, which is why more than 14-days notice is being provided. Kindest regards, and thank-you for your consideration- Steven Soos.

Video Consent
Yes

Niagara //// Region

Subject: Mutual Assistance Agreement for Emergency Management

Report to: Public Health and Social Services Committee

Report date: Tuesday, March 19, 2019

Recommendations

1. That Regional Council **APPROVE** entry into the Mutual Assistance Agreement as an equal partner with the 12 local area municipalities to facilitate necessary assistance required during an emergency situation.

2. That the Chief Administrative Officer **BE AUTHORIZED** to execute the mutual assistance agreement and any ancillary documents on behalf of The Regional Municipality of Niagara.

Key Facts

- In Niagara, there is a long history of municipalities helping each other in times of need. However, to ensure that appropriate provisions are in place to allow cross-jurisdictional emergency support, a mutual assistance agreement between Niagara's municipalities, including the Regional Municipality, is required.

- This assistance specifically includes personnel and equipment above and outside of normal services provided to the local municipalities directly or through a two-tier delivery model on any normal daily basis.

- Approval of the Mutual Assistance Agreement enhances the Region's ability to respond to an emergency or disaster situation, thereby reducing the impact on the community.

Financial Considerations

This report will not, in itself, propose any new financial implications for the Niagara Region. However, within the Mutual Assistance Agreement template would be the ability for a municipality to recover the cost of providing assistance if requested.

Analysis

The Mutual Assistance Agreement is proposed to be permissive in nature and non-binding. It serves to protect staff and municipal legal interests when requested and to help their communities during times of need. This agreement does not in itself replace any existing Fire Services Mutual/Automatic Aid Plan. Rather it builds on the same spirit of cooperation to better facilitate assistance where practical and appropriate. When an

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emergency exists, regional and municipal employees as well as partner agencies take such action(s) under emergency management plans as may be required to protect the health, safety, welfare and property of the community. The ability to allow for cross-jurisdictional emergency support between Niagara's municipalities and the Region will strengthen the ability to provide critical services and resources to residents during challenging circumstances.

Based upon the Fire Mutual Aid Agreement, this new Mutual Assistance Agreement addresses the sharing of personnel, equipment and services as required to ensure the delivery of essential services in an emergency situation (e.g. natural disaster). In some instances, this "sharing" of resources was already being done but no formal agreement was in place. Without an agreement in place, municipalities were left open to risk for any injuries or damages.

In 2012, a working group made up of CAO's, human resource specialists and emergency management personnel was assembled to develop a project proposal, agreement template and operating guidelines for mutual assistance. The proposal and template was presented to the Niagara CAO's in September 2012 and approval in principle was given to allow further development.

This agreement has recently been vetted through the Niagara Region Legal Division as well as reviewed by the 12 Municipal Community Emergency Management Coordinators. The resulting agreement, when enacted, would allow any municipality needing assistance to make an appeal to neighbouring municipalities for assistance. That request for support would be made by the CAO of the municipality requesting assistance to the CAO of the municipality being requested to provide assistance.

The agreement is written to be permissive in nature yet non-binding and is empowered by the *Emergency Management and Civil Protection Act* as follows:

> *The Council of a municipality may make an agreement with the Council of any other municipality or with any persons for the provision of any personnel, service, equipment or material during an emergency. R.S.O. 1990, c. E.9, s. 13 (3); 1999, c. 12, Sched. P, s. 9.*

A municipality that signs into the agreement is not obligated to provide assistance if requested. Their ability to assist or not assist would be determined by the municipality at that time. Under the agreement, assistance would be provided based upon a number of conditions, including but not limited to the municipality's requirement to ensure essential services in their own jurisdiction. This agreement is meant to be proactive instead of reactive, to protect the safety of staff, municipal assets and ensure that communities do not put themselves at risk by helping neighbours during their time of need. Therefore, by signing into the agreement the municipality benefits from having legal, cost recovery and other risk management issues detailed and agreed upon in advance.

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The agreement documents will be provided to the Community Emergency Management Coordinators (CEMC's) in each of the 12 local area municipalities to present to their Council following approval by Regional Council. The goal is for completion of the formal, region-wide agreement in time for Emergency Preparedness Week in May 2019 where the announcement would be made publicly.

Alternatives Reviewed

The Emergency Management program is constantly assessing priorities and best methodologies for service delivery. The Mutual Assistance Agreement will assist in further strengthening the working relationship and sharing of resources in and amongst the region and 12 lower area municipalities.

Relationship to Council Strategic Priorities

Approval of the Mutual Assistance Agreement enhances the Region's ability to respond to an emergency or disaster situation, thereby reducing the impact on the community, while supporting the strategic priorities of Council.

Other Pertinent Reports

No other pertinent reports.

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Prepared by: **Recommended by:**
Kevin Smith   M. Mustafa Hirji, MD, MPH, FRCPC
Chief, Niagara Emergency Medical   Medical Officer of Health &
Services & Director, Emergency   Commissioner (Acting)
Services   Public Health & Emergency Services

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Submitted by:
Ron Tripp, P.Eng.
Acting Chief Administrative Officer

This report was prepared in consultation with Cathy McGrath, Emergency Management Program Specialist, and reviewed by Kevin Smith, Chief, Niagara Emergency Medical Services.

Subject: EMS Response Time Performance Plan

Report to: Public Health & Social Services Committee

Report date: Tuesday, March 19, 2019

Recommendations

1. That Council **APPROVE** the Response Time Performance Plan (RTPP) changes outlined in this document.

Key Facts

- The purpose of this report is to describe recommended changes to the EMS Response Time Performance Plan (RTPP).
- The revised RTPP is supported by the implementation of a new Clinical Response Plan (CRP) as well as the integration of the Emergency Communications Nurse System (ECNS).
- From 2007 to 2016 Niagara was the municipality with the largest growth in EMS calls in Ontario, at 55.6% almost double the Provincial growth of 30%.
- Increased call volume growth has resulted in Niagara EMS being challenged in its ability to provide sustainable response time reliability for Niagara.
- This will continue without a system-wide change to the delivery of services or a large infusion of resources. Council has directed a new approach rather than continuously adding resources.
- Over a year-long process, EMS has studied current 911 calls, studied the science and evidence around which calls need a response at what speed, identified alternate care pathways for persons not needing immediate response, and developed a Clinical Response Plan in alignment with this science and evidence.
- A revised Response Time Performance Plan is proposed that would incorporate this Clinical Response Plan, both delivering more tailored health care to 911 callers, while also relieving financial sustainability pressures on land ambulances.

Financial Considerations

The service and call response changes outlined in this report can be fully implemented within the approved 2019 levy operating budget. Economic evaluation will help guide staff in a sustainability plan for this work, which will form part of our 2020 budget submission. The System Transformation Project, which includes the revised RTPP, is to facilitate a more clinically focused and cost-effective mobile integrated health system to improve patient access to appropriate health resources and lessen future burden on the levy.

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Analysis

As discussed in PHD 17-2017, Niagara EMS call volume increases since 2011 have significantly deviated from historical trends, and have exceeded both staff and previous consultant predictions (Figure 1). In fact, from 2007 to 2016 Niagara was the municipality with the largest growth in EMS calls in Ontario, at 55.6% almost double the Provincial growth of 30% (MOHLTC 2018). In 2016, at Council's direction, consulting firm Pomax provided an updated forecast on call volume expectations for the next 10 years; the projection, based on previous years' growth, can be seen in figure 1.

EMS Call Volume Projected vs Actual

Legend:
- Projected (IBI)
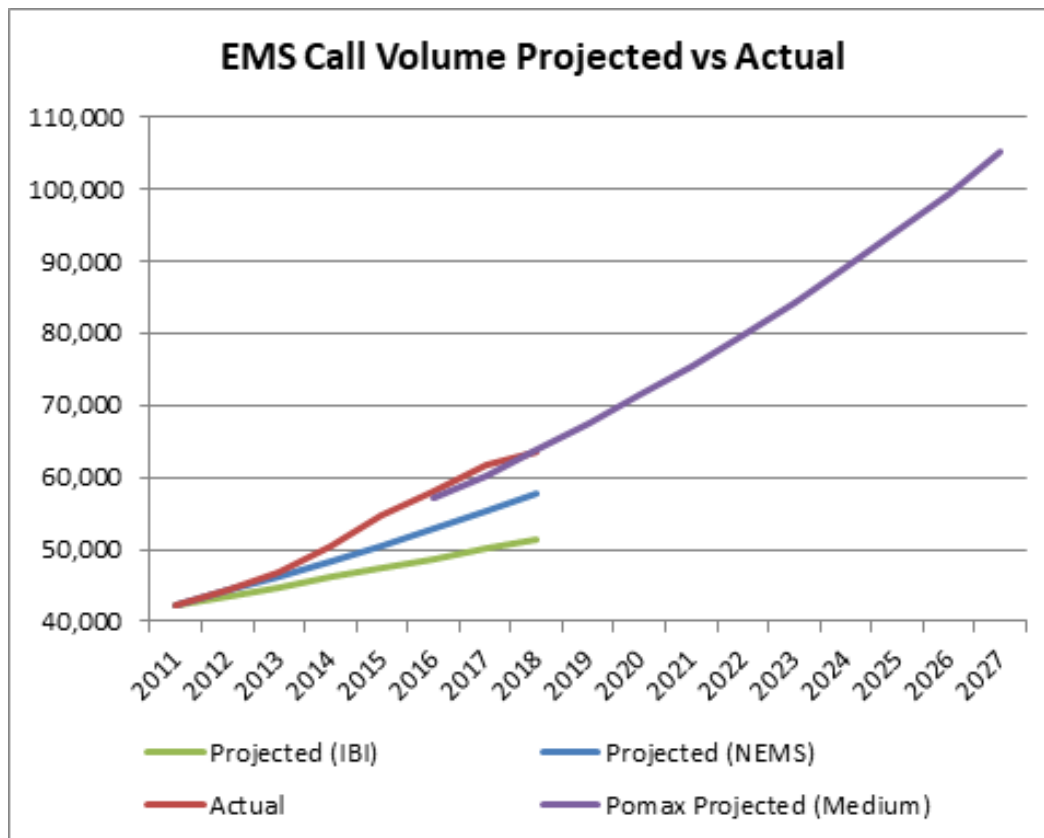- Projected (NEMS)
- Actual
- Pomax Projected (Medium)

Figure 1 Call volume growth projections since 2011, comparing actual vs. NEMS vs consultant (IBI) predictions. Increase of 21,024 calls/year since 2011 represents a 49.7% increase in call volume. Resource increase during the same period was 25%.

It is apparent that conventional approaches to the delivery of unscheduled health care must be challenged to provide sustainable approaches to quality patient care. In its current state, based on Pomax's recommended ratios of ambulance resources and call volume, the system is short two ambulances and one supervisor (PHD 05-2017). This does not include other factors such as offload delays and is based on call volume growth only. Previous Councils have challenged staff with the direction not simply to follow traditional EMS service models but actively to look for innovative ways to deliver

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mobile health services that are not only more efficient but also better meet the needs of patients.

In PHD 17-2017, staff outlined a number of measures that had been implemented, and introduced several more that were to be completed as part of an EMS System Transformation. Many of those measures, which are described in more detail in Appendix 4, have since been implemented.

While data analysis (including an economic evaluation conducted with the Centre for Healthcare Economics and Policy Analysis at McMaster University) of the impact of these changes is ongoing, it should be noted that 2018 call growth was just 2.5%, well below the 6.6% yearly average from 2011-2017. The impact on the 'curve' can be seen in figures one and two. This is the first sign that the efforts undertaken within the System Transformation Project may finally 'bend the curve' of significant EMS volume growth while benefitting patients with care more targeted to their true needs at the same time.
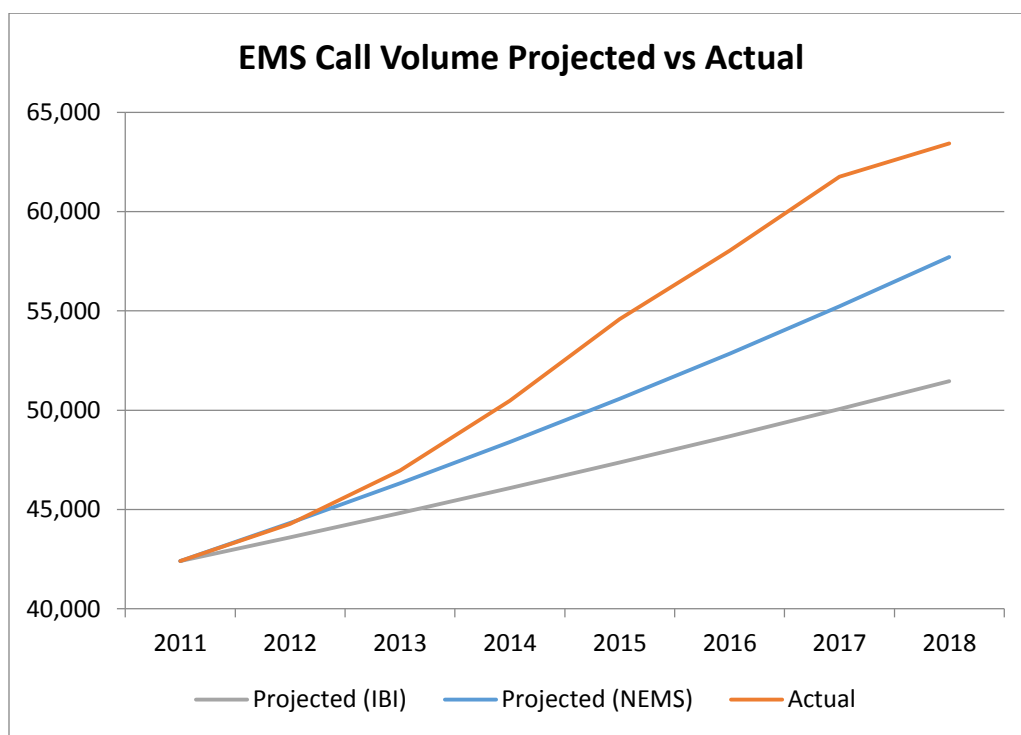

Figure 2, call volume projections vs actual 2011-2018

However, while call growth was reduced last year, it was not yet brought into line with economic and population growth which would be the true measure of sustainability. Therefore, a primary change in the Response Time Performance Plan is recommended to further enhance sustainability and safety by the efficient use of resources that better meets the needs of patients.

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Response Time Performance Plan

The *Ambulance Act* Ontario Regulation 257/00 states under Section 23:

> *(2) No later than October 1 in each year after 2011, every upper-tier municipality and every delivery agent responsible under the Act for ensuring the proper provision of land ambulance services shall establish, for land ambulance service operators selected by the upper-tier municipality or delivery agent in accordance with the Act, a performance plan for the next calendar year respecting response times. O. Reg. 267/08, s. 1 (2); O. Reg. 368/10, s. 1 (1).*
>
> *(3) An upper-tier municipality or delivery agent to which subsection (2) applies shall ensure that the plan established under that subsection sets response time targets for responses to notices respecting patients categorized as Canadian Triage Acuity Scale ("CTAS") 1, 2, 3, 4 and 5, and that such targets are set for each land ambulance service operator selected by the upper-tier municipality or delivery agent in accordance with the Act. O. Reg. 267/08, s. 1 (2).*
>
> *(4) An upper-tier municipality or delivery agent to which subsection (2) applies shall ensure that throughout the year the plan established under that subsection is continuously maintained, enforced and evaluated and, where necessary, updated, whether in whole or in part. O. Reg. 267/08, s. 1 (2).*

Pursuant to this, Niagara Region is responsible to establish and maintain these performance targets in a manner that best meets the needs of the community. The current targets were developed in 2011 using the actual performance at that time as the benchmark, with an intent to maintain that base level of service into the future. In the following years, call volume escalated at unpredicted rates resulting in a deficit of necessary resources to maintain this performance. The result has been an inability for the Service to meet the performance targets (Table 1) despite the continuous addition of resources in an attempt to keep pace with volume demands.

CTAS Return	2018 Year % Compliance	2017 Year % Compliance	2016 Year % Compliance	2015 Year % Compliance	Target Time	% of Target
1 CTAS Level 1	76.23%	76.92%	75.37%	77.15%	8:00	80
2 CTAS Level 2	81.75%	82.48%	83.58%	84.73%	11:00	90
3 CTAS Level 3	82.70%	85.41%	88.77%	89.91%	15:00	90
4 CTAS Level 4	89.38%	91.93%	95.34%	94.77%	20:00	90
5 CTAS Level 5	98.80%	98.98%	99.29%	99.59%	30:00	90
1 (SCA)	59.25%	60.64%	52.16%	57.72%	6:00	55

Table 1 Response Time Performance Plan and Results, 2015-2018. The results demonstrate an undesirable inversion whereby targets are met for low priority non-emergent calls but not met for time critical emergent calls.

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According to the CTAS scale, level 1 are the most acute patients and they become progressively less acute until level 5. As seen in Table 1, response time reliability for the most critical patients is not being met. In fact, the outcome performance of the current system is inverted in that the system overachieves in meeting the response time targets for low acuity patients. To flip this around, increased capacity may be found in finding alternate response options for the lower acuity patients thereby increasing resource availability and response time reliability for the most serious patients.

Niagara EMS staff have therefore reviewed response times in association with a clinical response plan which provides a more efficient and effective model that better matches responses to identified patient need based on clinical evidence. The following changes are being recommended accordingly.

Response Time Reliability

Currently, Niagara EMS responds to approximately 41% of all 911 incidents with lights and siren, as potential 'time-critical' responses. Lights & siren responses could be significantly reduced by a more evidence-based response that limits lights and siren/time critical responses to those call types where clinical science shows that outcomes depend on speed of response. This would preserve resources for true life threatening/time sensitive emergencies. Some modelling in European EMS systems suggests that the true need for lights & sirens response, based on medical literature studying the impact of time on patient outcomes, may be as low as 10% of responses. This change in response urgency could impact up to 20,000 calls (up to 30% of EMS call volume based on 2018 figures), that are currently classified as time-critical, allowing greater flexibility of resources to ensure adequate resources to address those calls identified as time dependant. British Columbia Emergency Health Services has also recently moved to a clinical response plan in 2018.

Clinical Response Plan (CRP)

Over the course of 2018, Niagara EMS, working under the guidance of our Medical Director, has completed significant work with internal staff, local medical experts representing a number of specialties, and university researchers to develop changes to the Niagara EMS response plan based on evidence of outcomes linked to timeliness of response. Academic assistance was especially helpful with conducting reviews of current medical literature as well as the completion and analysis of a public consultation survey over the summer/fall months. This survey validated that the public is receptive to a system that will better meet their needs through a variety of healthcare pathways. The result of this work is a response plan that is focused on time where time is critically important, and is focused on appropriate patient-centred resources and carefully targeted patient care where this is more important than time. The resultant proposed plan is found in Appendix 1.

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The CTAS scale discussed earlier is used by emergency departments to evaluate a patient's acuity level and direct timely care. Paramedics also assign CTAS scores to their patients. While time is de-emphasized in the lower CTAS levels, the time parameters noted in the RTPP have been developed with the CTAS methodologies concerning acuity and time-to-treatment in mind. The intent, as always, is to service all calls as quickly as feasible, while managing system resource availability and surge capacity. To this point, the conventional definition of "response time" is modified within the CRP. A "response" is not always measured by the time in which an ambulance arrives at a scene, but rather the point in time in which the most appropriate healthcare pathway is initiated. In some cases, that might not result in an ambulance responding if an ambulance is not the most appropriate means of providing care.

Correspondingly, as part of this model, quality of service delivery will be measured based on impact on patient outcomes, rather than time to respond. Where medical evidence deems time to be critical, as in cardiac arrest, choking, and other time-based emergencies, response time and time to definitive care will be primary measures. Where other factors, such as the type of care provided, the assignment of the correct care resource, or arrival at the appropriate care destination are more important, these will form the basis of system performance measurement. These measures will now be clinically focused, rather than operationally focused. In this way, outcomes rather than processes will drive the clinical focus of this response model.

Additional Mitigation Strategies Pending

As a complement to the System Transformation Project, the following additional measures are currently in development for implementation:

Emergency Communication Nurse System (ECNS)

The Omega Study was undertaken by Niagara EMS (2011-2016) to explore the safety and efficacy of implementing an Emergency Communication Nurse (ECN) within the Niagara Ambulance Communications Centre (dispatch) to conduct secondary triage for select low acuity 911 calls. These are patients calling 911 for non-emergent unscheduled health care needs. Utilizing an internationally recognized and validated algorithm to further triage these patients, the objective of the study was to identify those callers whose health needs may be met by providing advice on the 911 call or recommending alternate, more appropriate medical care thereby eliminating the need for an ambulance response. The study identified specific call/patient types that could be managed without undue risk using means other than an ambulance response. Successful implementation of ECNS is part of the comprehensive Clinical Response Plan and is complemented with the integration of the new Mobile Integrated Health (MIH) teams to realize full benefit. Target date for implementation is June 3, 2019.

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Tiered Response

The adoption of the Clinical Response Plan will modify the tiered response of allied agencies, primarily the municipal fire services. Resource allocation to medical responses will be based on clinical requirements of the patient and the clinical intervention to be provided by the responding agency. Currently Niagara EMS tiers fire services within four classifications. These classifications are designed for each of the 12 local fire services to determine which category best reflects their level of service (i.e. full-time versus volunteer-based). Fire services combined respond alongside EMS to approximately 25% of all EMS calls.

While these response classifications are not expected to change at this time, the number of calls that meet a tier criteria will likely be reduced. This will reduce burden on local area municipalities by reducing the frequency of fire services being sent on medical calls. This will also provide increased capacity for other fire type responses or other priorities as determined by local area municipalities.

Police Calls Response Strategy

EMS responded to 5006 incidents in 2018 that originated with police. This represents 8% of EMS incidents for the year. There was no EMS transport in 76% of these calls; many resulted in "no patient found" or patient refusal situations. Many of these calls are dispatched on a higher priority level than the medical triage system typically would assign, based on the difficulty of getting information to accurately triage these calls. For those that were transported by EMS, only 5.7% were consider high acuity (CTAS 1 or 2). Given the very low transport rates and the low acuity of the vast majority of those transported, eliminating this policy and responding as per standard Medical Priority Dispatch System (MPDS) triaging would positively affect the EMS system by allowing greater flexibility for resource utilization without artificially inflating priority of response. This process would also better identify those high acuity patients.

Alternatives Reviewed

One alternative to the proposed ongoing transformation is to remain "status quo" with no further investment in EMS resources. In this scenario, response times for all patients, critical or not, would continue to rise as call volumes rise and the incidence of episodic ambulance shortages (code orange, code red) would increase. This is not recommended, as it would lead to worsening outcomes for patients and increasing risk of litigation.

Another alternative is to continue with traditional land ambulance operations, but to add the resources at the rate prescribed by Pomax in their 2017 review (Appendix 4 and PHD 05-2017). In this model, in keeping with the 'medium growth' scenario, an

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additional two ambulances, and one supervisor (23 FTE) are required immediately, with another 10.8 FTE for 2020 and 13.6 FTE for 2021. This investment would be utilized within a very traditional "call and transport" EMS model (i.e. ambulances dispatched to all calls within arbitrary time parameters rather than acuity of need of patients) and frequent resource pressures without any demonstrable benefit to patient outcomes. This option is not recommended given it would put unnecessary burden on the levy budget, and it is also not consistent with past direction by Regional Council.

Relationship to Council Strategic Priorities

The changes to the EMS system outlined in this report will improve patient care by more appropriately rationalizing limited EMS resources while also better integrating EMS within the broader healthcare spectrum. This will improve patient care by providing the care appropriate to the circumstance in an appropriate amount of time, and improving the availability of resources to respond to emergencies when time has a critical impact on patient outcome.

Other Pertinent Reports

PHD 17- 2014 - EMS System Performance Sustainability
PHD 17- 2015 - EMS System Performance Sustainability
PHD 05- 2016 - Niagara EMS Master Plan
PHD 08- 2016 - Master Plan Award of RFP
PHD 19- 2016 - Niagara EMS Mobile Integrated Health Community Paramedic Update
PHD 21- 2016 - 2016 Update to EMS System Performance Sustainability
PHD 05-2017 - Niagara Emergency Medical Services (NEMS) Pomax Master Plan Review
PHD 17-2017 - Niagara Emergency Medical Services System Design Changes
PHD 19-2017 - NEMS Resource Investment

Ministry of Health and Long-Term Care (2018). *Ontario's Emergency Health Services: Sector Overview.* Health Analytics Branch, Health System Information Management Division.

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Prepared by:
Kevin Smith, Chief, Niagara Emergency
Medical Services & Director, Emergency
Services

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

Submitted by:
Ron Tripp, P.Eng.
Acting Chief Administrative Officer

Appendices

Appendix 1   Clinical Response Plan
Appendix 2   Response Time Performance Plan (Current and Proposed)
Appendix 3   Pomax Resource Table
Appendix 4   Mitigating Strategies Implemented in 2018

Appendix 1: Proposed Clinical Response Plan

Priority	Time Dependency	Determinant Level Typically Includes*	Resource/Response Plan Could Include*	Alternative Response Options*
1	Critical Immediate Lights/Sirens	Echo, Delta	PCP Transport Unit MIH Teams Allied Agencies Citizen Response	ACP Transport Unit
2	Emergent Lights/Sirens--discretionary	Delta, Charlie	ACP Transport Unit	PCP Transport Unit
3	Urgent No Lights/Sirens	Charlie, Bravo	PCP Transport Unit MIH Unit	ACP Transport Unit MIH Unit
4	Less Urgent No Lights/Sirens	Bravo, Alpha	MIH Unit	PCP Transport Unit
5	Non Urgent No Lights/Sirens	Bravo, Alpha, Omega	Clinical Advisor MIH Unit	PCP Transport Unit
* While this provides a guideline, response priority could vary by individual determinant, assessment of skills demand and previous outcome data				

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Appendix 2: Response Time Performance Plan (Current and Proposed)

<u>Current</u> Land Ambulance (does not include dispatch time):

CTAS	Target time*	% of target**
Sudden Cardiac Arrest	6	55
1	8	80
2	11	90
3	15	90
4	20	90
5	30	90

*Target time: the amount of time (minutes) from paramedic notification (T2) until on scene (T4)
** % of target: percentage of time the target time will be achieved

<u>Current</u> Dispatch:

Patient Acuity Level	Response Time (T0 - T2) in seconds	Targeted % of the Time
SCA	120	90
CTAS 1	120	90
CTAS 2	120	75

<u>Proposed</u> Land Ambulance (CTAS 3, 4 and 5 inclusive of dispatch time):

CTAS	Target time*	% of target**
Sudden Cardiac Arrest	6	55
1	8	80
2	15	90
3	30	90
4	60	90
5	120	90

*Target time: the amount of time (minutes) from paramedic notification (T2) until on scene (T4) or alternate decision point for care
** % of target: percentage of time the target time will be achieved

<u>Proposed</u> Dispatch:

Patient Acuity Level	Response Time (T0 - T2) in seconds	Targeted % of the Time
SCA	120	90
CTAS 1	120	90
CTAS 2	120	75

Appendix 3: POMAX Ambulance and Paramedic Requirement Model

Table 33: Ambulance and Paramedic Requirement Models - 10-year Time Frame

Paramedic Enhancements Levels	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	Totals
Low Growth Model 3.6% - Ambulances	2		1			1		1		1		1	7
Paramedic FTE	21.6		10.8			10.8		10.8		10.8		10.8	75.6
Supervisors		1.4		1.4		1.4			1.4		1.4		7
Emergency Response Units		1		1		1			1		1		5
Medium Growth Model 5.7% - Ambulances	2		1		1	1		2	1	1	1	1	11
Paramedic FTE	21.6		10.8		10.8	10.8		21.6	10.8	10.8	10.8	10.8	118.8
Supervisors		1.4		1.4		2.8		1.4	1.4		1.4		9.8
Emergency Response Units		1		1		2		1	1		2		8
High Growth Model 8.5% - Ambulances	2	1	1	1	1	1	2	2	1	2	2	2	18
Paramedic FTE	21.6	10.8	10.8	10.8	10.8	10.8	21.6	21.6	10.8	21.6	21.6	21.6	194.4
Supervisors		1.4		1.4		1.4		2.8		2.8		2.8	12.6
Emergency Response Units		1		1		1		2		2		2	9
Patient Based Model Ambulances	2					1					1		4
Paramedic FTE	21.6					10.8					10.8		43.2
Supervisors		1.4					1.4				1.4		4.2
Emergency Response Units		1					1				1		3

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Appendix 4: Mitigation Strategies Implemented in 2018

- 911 'Unknown' Calls—EMS reduced call volume by approximately 2.4% (1540 calls) in 2018 by eliminating responses to 911 'unknown' calls. These are calls where there is no voice contact with a caller, and often turn out to be inadvertent calls, phone line issues, or police-related matters. EMS now responds only if a need is validated by the police, or if a patient is confirmed at the scene (i.e. by Fire or call back). It should be noted that some local fire services have chosen a similar approach to "unknown" calls.

- Mental Health Calls—Approximately 6-7% of EMS call volume consists of calls where the primary problem is mental illness- or addictions-related. In July of 2018, and with the assistance of partner agencies, Niagara EMS launched the Mental Health and Addictions Response Team (MHART). This team consists of a Paramedic with additional training deployed with a mental health nurse, in a non-ambulance response vehicle. MHART responds to low acuity mental health calls as well as providing follow up after EMS overdose responses where the patient refuses transport after treatment. This program has been very successful, responding to 207 calls for mental health in the latter months of 2018. Niagara EMS has seen a 5% reduction overall of mental health transports to hospital emergency departments despite a 7% increase in mental health calls coming into our communication center in 2018. Analysis is ongoing to determine the influence of this team on this reduction.

- Falls/Lift Assists—in 2018, EMS responded to 7,790 calls to 911 for falls (12% of EMS call volume). Many of these calls were for 'lift assists' (where the patient identifies no injuries but wishes EMS to lift patient from floor) or from repeat callers. Since July of 2018, Niagara EMS launched the Falls Intervention Team (FIT). A Paramedic and an Occupational Therapist deploy together in a non-ambulance response vehicle. The FIT team has responded to 111 calls for falls in the latter half of 2018. In between the actual 911 calls for falls, this team proactively goes out to visit frequent fallers to provide assessment and support to prevent a future falls. For 2018, there was no increase in calls for falls over previous year, and a 2% decrease in transports to ED. The 0% increase in falls is unusual (the previous year we saw an increase of 9% in incidents) and may be related to proactively engaging with our frequent fallers and connecting them to additional supports. Analysis to determine the influence of this team on repeat falls is ongoing.

  Additionally, this team is working with long-term care facilities to find innovative ways to decrease the reliance on EMS for assistance with patients who have fallen in a long-term care home environment where there is no identified need for medical intervention.

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- 'Low Acuity'/Unscheduled Non-emergency Calls—in 2018, EMS responded to 5,246 low priority calls for 'general illness' (8% of EMS call volume). In July of 2018, Niagara EMS launched the Community Assessment and Referral Team (CARE Team). These are Paramedics with additional skills work alone in a non-ambulance response vehicle, responding to low acuity/low priority 'sick' type calls. This Paramedic is occasionally accompanied by a discharge planner, and has access to a 'fast track' resource coordinator within the Local Health Integration Network (LHIN). The teams have collectively responded to 741 calls to 911. These non-acute calls held steady for 2018; however, there was an overall decrease in transports to ED of 6% for this cohort. This team provides these patients connections to community resources. A more in-depth analysis is underway to determine the impact of this team on repeat callers.

Subject: Group Purchasing Services for Food and Related Supplies

Report to: Public Health and Social Services Committee

Report date: Tuesday, March 19, 2019

Recommendations

1. That Complete Purchasing Services Inc. (CPSI) **BE APPROVED** as the single source purchasing agent for group purchasing services for food and related supplies for the dietary programs at the Niagara Region Seniors Services Long-Term Care (LTC) homes for a period of four years; and

2. That the vendors used in conjunction with the Complete Purchasing Services Inc. group purchasing program for food and related supplies for the dietary programs at the Niagara Region Long-Term Care homes **BE APPROVED** as single source vendors.

Key Facts

- The Ministry of Health and Long-Term Care (MOHLTC) provides $9.54 per resident per day to provide residents of Long-Term Care homes three meals and snacks daily in accordance with the Canada Food Guide and for each resident's dietary and texture restrictions and preferences.
- Niagara Region's Long-Term Care homes have a long-standing practice of using Complete Purchasing Services Inc., a group purchasing service, to procure food and supplies for dietary services.
- Complete Purchasing Services Inc. has a Canada wide buying power of $850 million dollars, which enables the Long-Term Care homes to obtain competitive pricing such that meals and snacks can be provided within the available funding level.
- Niagara Region's Procurement Policy By-Law, Section 18 – Single Source Purchases, provides for the recommendation of a single source vendor for the supply of a particular good and / or service when it is more cost effective or beneficial for the Region.
- While this agreement provides Niagara Region Seniors Services preferred pricing for certain suppliers, it does not restrict the Long-Term Care homes from procuring food and food related supplies from other vendors if lower prices are available.

Financial Considerations

Food and related supplies are purchased within the allocated operating budget at each Regional Long-Term Care Home. The cost of food and related supplies purchased in 2018 through CPSI purchasing service was $3,501,889.52.

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Food purchases exceeding $9.54 per resident per day create a financial pressure on the tax levy as this is a stand-alone funding envelope from the MOHLTC.

Along with the competitive pricing received from CPSI, Seniors Services receives a 0.5% volume incentive rebate on all purchases from vendors under CPSI.

Analysis

Complete Purchasing Services Inc. has been the endorsed purchasing group of AdvantAge[1] Ontario for over 25 years. Municipal members of AdvantAge Ontario who use CPSI include the City of Hamilton, City of London, City of Ottawa, Region of Peel, County of Simcoe, Region of Waterloo and York Region. CPSI leverages their considerable market presence and negotiates with a range of suppliers, both manufacturers and distributers, to obtain best pricing and value. The company tenders with 400 manufacturers through over 75 distributors to establish national and regional contracts. Products available are specifically suited to a Long-Term Care environment ensuring compliance with the standards and regulations set out by the MOHLTC.

Niagara Region Seniors Services would not have the same purchasing power if it negotiated alone due to volumes purchased. Using the Complete Purchasing Services Inc. negotiated pricing, Seniors Services purchase food services supplies through ten major distributors including: Sysco Southwestern Ontario, GFS Ontario, Agropur Cooperative (Division Natrel), Canada Bread Company Ltd, Flanagan Food Service, HD Supply Canada Inc., FM, Hubert Distributing Company Inc., MIP Inc., PPG Architectural Coating, Thermopatch (Canada) Inc.

The purchasing arrangement has allowed Niagara Region LTC homes to control food costs while maintaining the quality of resident meals.

CPSI provides value-added services in the following areas:

Risk Management
- All approved food vendors are Hazard Analysis and Critical Control Point (HACCP) or ISO certified.
- Only federally inspected meat suppliers are used.
- There is a stringent re-call system.
- There is a system of distribution inspections and audits.

Support Tools
- Tools are available to support consistent menus and "shopping lists" across the LTC homes.

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[1] AdvantAge is an association for not-for-profit Long-Term Care homes and services for seniors in Ontario.

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- An on-line web-enabled menu management and production program that allows customization of menus to meet resident preferences is available. The program includes LTC specific menus, recipes, therapeutic guidelines and nutrient and costing information.
- An on-line web-enabled ordering and inventory management system is provided.
- Access to education resources is provided.
- Quarterly purchasing reviews are available that provide opportunities for savings by way of recommended alternatives of current purchases that are offered by other suppliers at a lower rate.

Access to Local Products
- CPSI offers a variety of products that have been locally sourced. Local is defined as per the Foodland Ontario Guidelines (i.e. products must be 100% born, raised, grown, slaughtered, processed and packaged in Ontario). As an example, Seniors Services purchases many food products through Gordon Food Services (GFS) who supports over 80 growers and producers in Ontario.

Alternatives Reviewed

There are two potential alternatives to using Complete Purchasing Services Inc. that staff reviewed:

Option One
Niagara Region Seniors Services staff, with the assistance of Procurement staff, could work to obtain similar ranges of suitable vendors and pricing. However staff have noted the following:

Financial implications: Competitive pricing would be limited to the extent of the Niagara Region purchasing volume ($3.5 million) versus the $850 million purchasing power of a larger purchasing group. Also value-added services provided by CPSI would be expensive to purchase outside of a purchasing group.

Staffing implications: Replacing the services of CPSI would require staff to develop terms of reference and standards for contracts, contract administration and management of multiple vendors. These additional activities would be a significant pressure on existing staff resources.

Option Two
Niagara Region Seniors Services staff, with the assistance of Procurement staff, could issue an RFP to identify other alternate group purchasing options targeting Long-Term Care in the market place.

Financial Implications: Complete Purchasing Services Inc. is the highest volume purchasing agent targeting Long-Term Care products and services (e.g. products that

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support "home cooking", specialty products including tube feed options, texture modified diet products etc.). Alternate options in the market place target different aspects of the food and related purchases market (i.e. acute care, hospitality industry). The value-added services provided through the agreement also target those services of highest value to the Long-Term care sector (i.e. risk management, support tools that align with the Long-Term Care Homes Act and the regulations under the Act). Under the current agreement, the agreement fee has been waived for Niagara Region and as such we can access the benefit of volume based pricing and sector specific value-added services at no cost. We can opt out of the Agreement at any time.

Staffing Implications: Issuing an RFP for alternate purchasing options would require staff to develop a comprehensive document and complete a detailed process without a clear indication that there are alternate preferable options on the market. If a decision was made to move to a new purchasing agent this change management process would require dedicated staff time and have residential disruption implications. These additional activities would be a significant pressure on existing staff resources in both Community Services and Enterprise Resource Management Services.

Relationship to Council Strategic Priorities

Not applicable (pending development of Council's new Strategic Priorities).

Other Pertinent Reports

Not applicable.

_____   _____
Prepared by: **Prepared by:**
Henriette Koning   Jeffrey Mulligan, Manager,
Director   Strategic Sourcing
Community Services   Enterprise Resource Management
                                            Services

                                            _____
_____   **Submitted by:**
Recommended by: Ron Tripp, P.Eng.
Adrienne Jugley, MSW, RSW, CHE   Acting Chief Administrative Officer
Commissioner,
Community Services

Homelessness Services System Background

Cathy Cousins, Director, Homelessness Services

Public Health & Social Services Committee

March 19, 2019

Contextual Data

CHANGES IN SOCIAL ASSISTANCE RATES, VACANCY RATES, AND AVERAGE MARKET RENTS - SINGLES

Legend: OW Single, ODSP Single, AMR Bachelor, AMR 1 Bed, Vacancy Rate 1 Bed, Vacancy Rate All Units
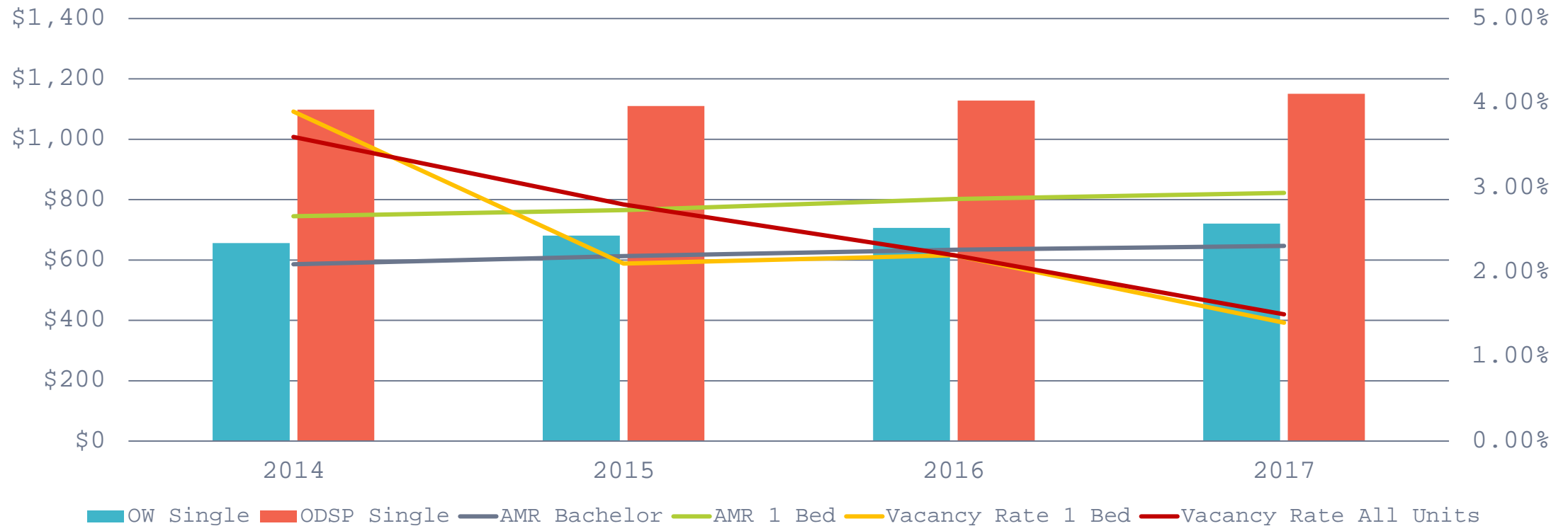
Reasons for Housing Loss

TOP FIVE REASONS FOR MOST RECENT HOUSING LOSS:

01 FAMILY BREAKDOWN (CONFLICT OR VIOLENCE) 36.8%

02 FINANCIAL/JOB LOSS 26.4%

03 ADDICTION OR SUBSTANCE USE 17.2%

04 UNSAFE HOUSING CONDITIONS 13.8%

05 ILLNESS OR MEDICAL CONDITION 11.7%
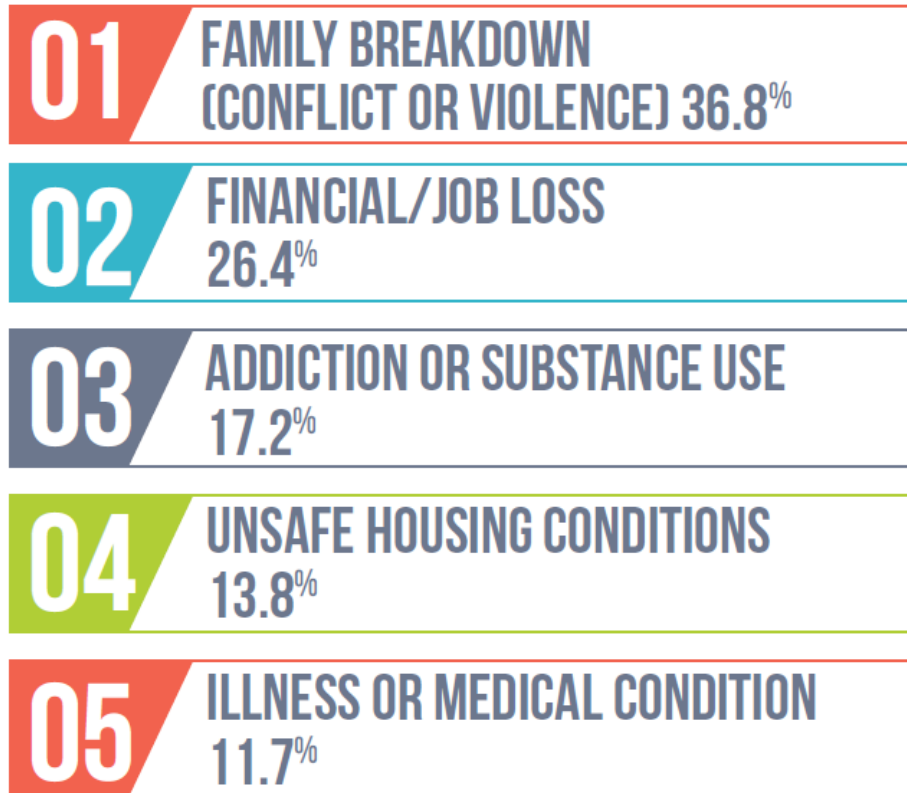
- Nearly 4 out of 5 respondents (78.4%) indicated their source of income as welfare/social assistance and/or disability benefit.

- Almost 80% of respondents indicated that rents being too high and/or a low income were challenges for them when trying to find housing.

Educational Attainment

- The rate of having less than a high school education is more than twice that of the general Niagara population (18.2%, 2016 Census)

RESPONDENT'S HIGHEST EDUCATION

25.2%

36.3%

38.5%

- LESS THAN HIGH SCHOOL
- HIGH SCHOOL GRADUATE/GED
- MORE THAN HIGH SCHOOL
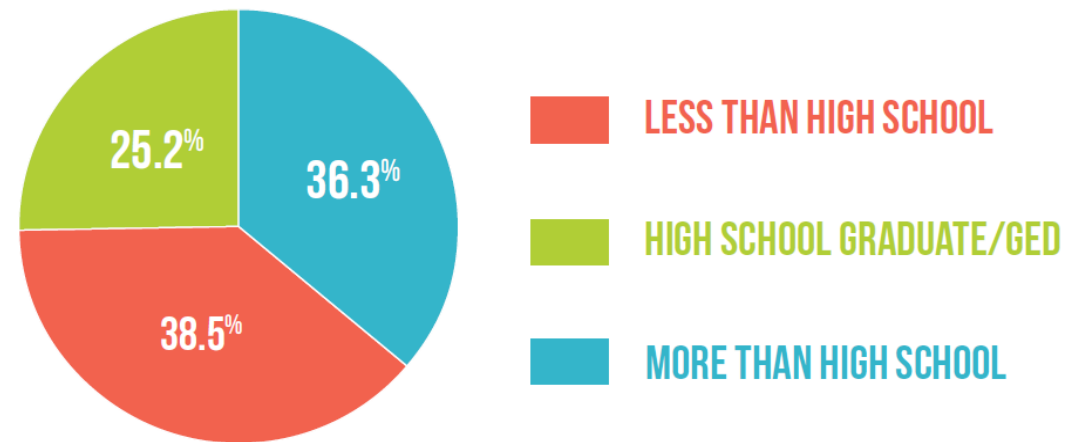
Health

RESPONDENTS self-IDENTIFIED AS HAVING:
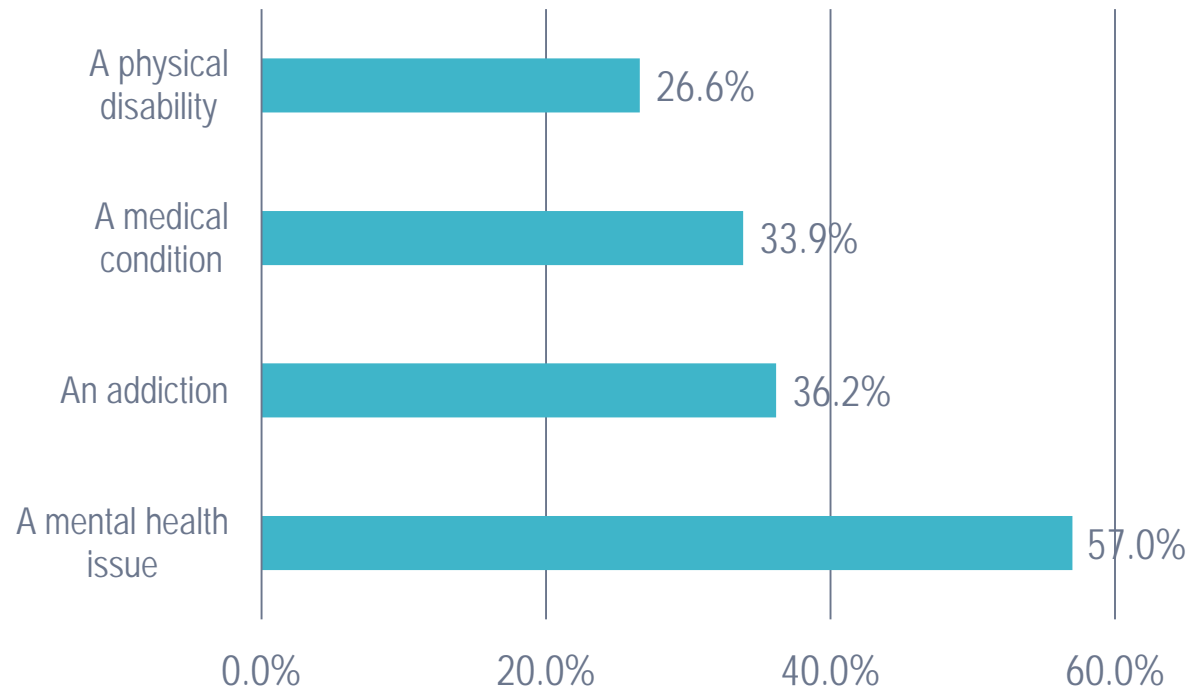
Self-reported need for services related to:

- Mental health (54.3% of respondents)
- Addiction or substance use (29.2%)
- Serious or ongoing medical condition (26.9%)
- Physical disability (19.4%)
- Learning disability (19.1%)
- Culture (12.4%)
- Brain injury (8.5%)
- Developmental disability (5.7%)

System Interactions

- Over the past year, 55% of respondents had been homeless 6 or more months (i.e., chronically homeless)

- 16% had been homeless 3 or more times (i.e., episodically homeless) in the past year.

SYSTEM INTERACTIONS OVER THE PAST YEAR

219 PEOPLE HAD VISITED THE ER 663 TIMES

125 PEOPLE HAD SPENT 1333 CUMULATIVE DAYS IN HOSPITAL (OVER 3.5 YEARS)

161 PEOPLE HAD HAD 628 INTERACTIONS WITH POLICE

70 PEOPLE HAD SPENT 3276 CUMULATIVE DAYS IN JAIL OR PRISON (ALMOST 9 YEARS)

Niagara Region
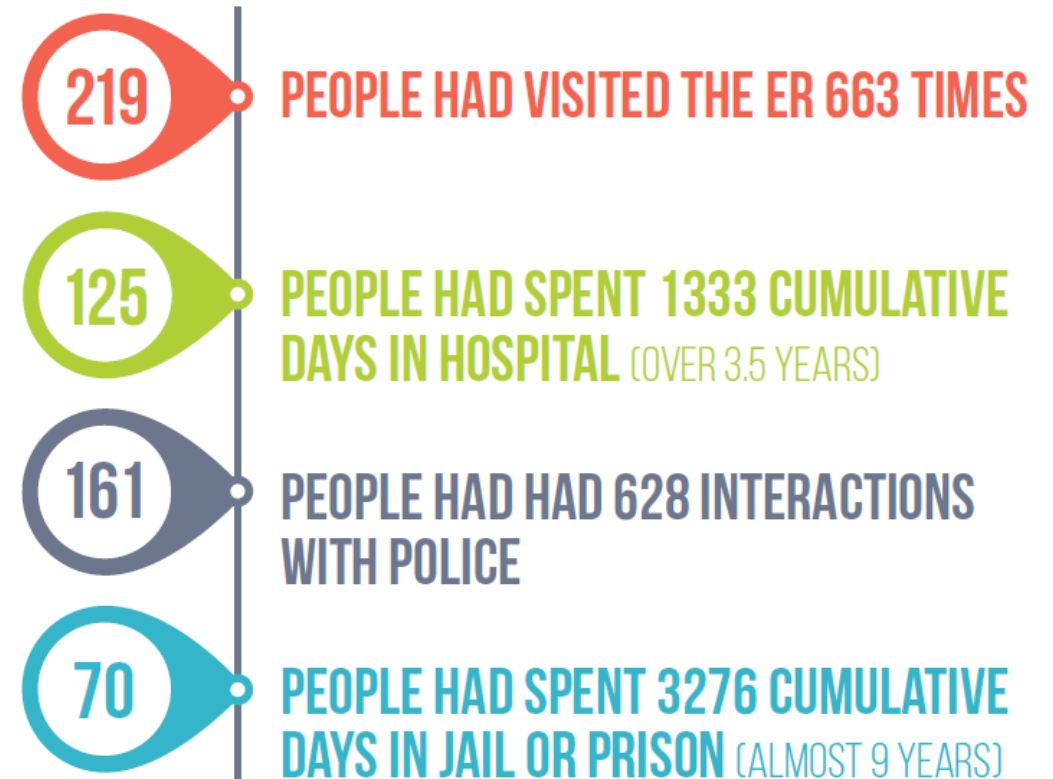
Fig. 8.1 Average Length of Stay in Days per Admission to Emergency Shelters

Results reflect various approaches to providing emergency shelter beds and how motel rooms are counted when they are used as part of the service delivery model. The length of stay increased across most municipalities due to high rental rates, low vacancies and increased demand for shelters.

	DUR	HAL	HAM	LON	NIAG	SUD	TOR	WAT	WIND	YORK	MEDIAN
Adults & Children											
2015	13.0	23.3	8.7	N/A	10.8	N/A	19.2	10.8	6.9	12.6	11.7
2016	10.5	21.1	8.8	8.2	12.0	N/A	19.9	9.5	6.8	15.0	10.5
2017	12.7	16.7	8.5	8.9	16.2	15.6	27.6	9.4	6.5	15.6	14.2

Source: HSTL105 (Community Impact)

	DUR	HAL	HAM	LON	NIAG	SUD	TOR	WAT	WIND	YORK	MEDIAN
Singles											
2015	10.3	10.8	6.6	N/A	8.5	N/A	15.1	9.7	8.1	11.1	10.0
2016	9.3	11.7	6.9	7.6	9.5	N/A	16.6	8.6	8.2	14.1	9.3
2017	10.4	10.6	6.6	8.0	11.2	14.9	21.0	8.7	8.5	14.0	10.5

Source: HSTL110 (Community Impact)

	DUR	HAL	HAM	LON	NIAG	SUD	TOR	WAT	WIND	YORK	MEDIAN
Families – Head of Households											
2015	26.2	35.7	59.3	N/A	22.9	N/A	97.0	27.8	9.3	25.5	27.0
2016	20.7	36.5	52.9	15.1	22.7	N/A	98.9	23.6	10.2	22.1	22.7
2017	24.9	39.5	50.1	16.9	44.6	22.5	115.4	18.3	9.3	23.6	24.3

Source: HSTL115 (Community Impact)

London (2016), Sudbury (2017): Due to the implementation of the federal tracking system, HIFIS, prior year results have been removed.
Toronto: The City is experiencing a significant influx of refugee claimants.

Fig. 8.2 Average Nightly Number of Emergency Shelter Beds Available per 100,000 Population

Where motel rooms are a permanent part of the shelter model, motel rooms are included in the total. However, where motel rooms are not a permanent part of the model but are used as needed, the total number of shelter beds does not include motel rooms.
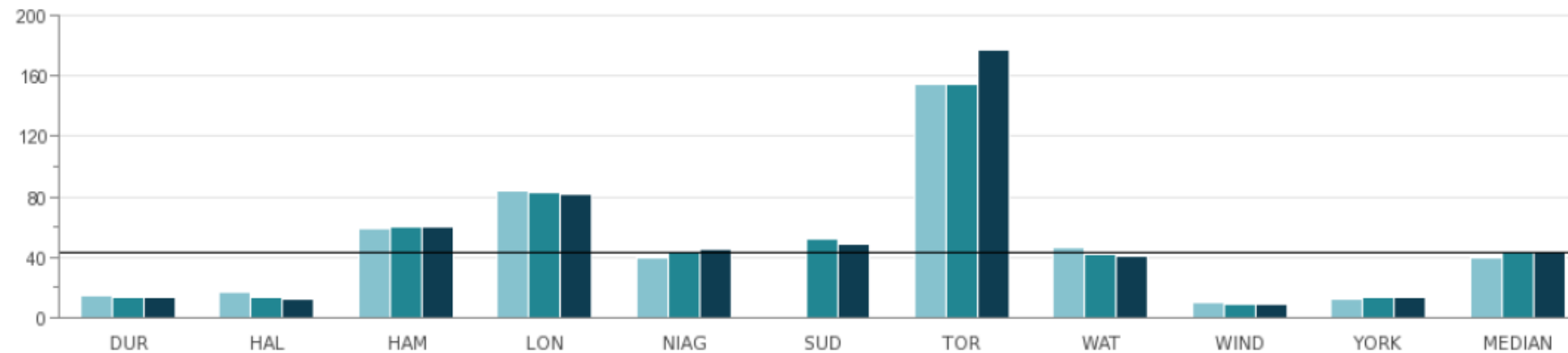
	DUR	HAL	HAM	LON	NIAG	SUD	TOR	WAT	WIND	YORK	MEDIAN
2015	14.1	16.6	59.0	83.9	40.1	N/A	154.9	46.6	9.5	12.3	40.1
2016	13.8	13.3	60.3	83.1	43.2	52.6	155.2	41.6	9.0	13.3	42.4
2017	13.6	11.9	60.5	81.8	44.7	48.9	177.2	41.2	8.9	13.1	43.0

Source: HSTL205 (Service Level)

Halton: The Region's family shelter contract was awarded to two new housing agencies that were able to divert low-medium acuity clients and serve them with supports in the community, instead of admission to an emergency shelter.

Toronto: The use of motels and hotels is a permanent and significant feature of Toronto's shelter system. As such, all beds in motel/hotel programs are always counted toward total capacity.

Fig. 8.3 Operating Cost of Emergency Shelter Program per 100,000 Population

The types of direct operating costs incurred by municipalities vary based on the service delivery models they use to provide emergency shelters. Depending on the service delivery model, operating costs could include municipal shelter staff and building maintenance costs; and/or payments made to third party operators and hotels/motels.

(In Thousands)

	DUR	HAL	HAM	LON	NIAG	SUD	TOR	WAT	WIND	YORK	MEDIAN
2016	$310,357	$276,021	$1,375,253	$1,419,412	$511,054	$1,120,259	$4,122,812	$652,187	$346,166	$510,188	$581,621
2017	$369,055	$328,038	$1,425,448	$1,478,020	$543,567	$1,170,030	$4,658,890	$675,740	$385,248	$478,823	$609,654
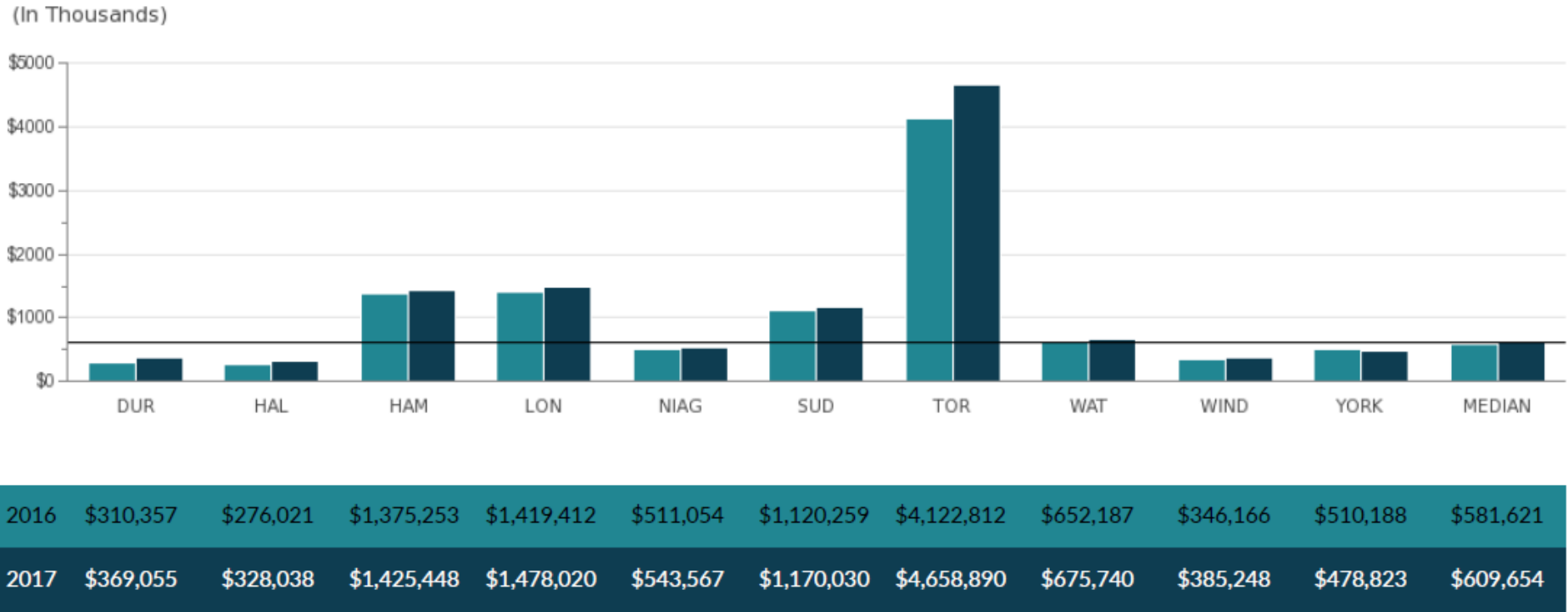
Source: HSTL310 (Efficiency)

Halton: The family shelter contract was awarded to two new housing agencies which offer lower case ratios due to increased staffing to support case management for high acuity clients.

Fig. 8.4 Average Nightly Bed Occupancy Rate of Emergency Shelters

Rooms can be occupied at less than 100% capacity depending on the family size. A result of greater than 100% is possible through the use of overflow spaces.
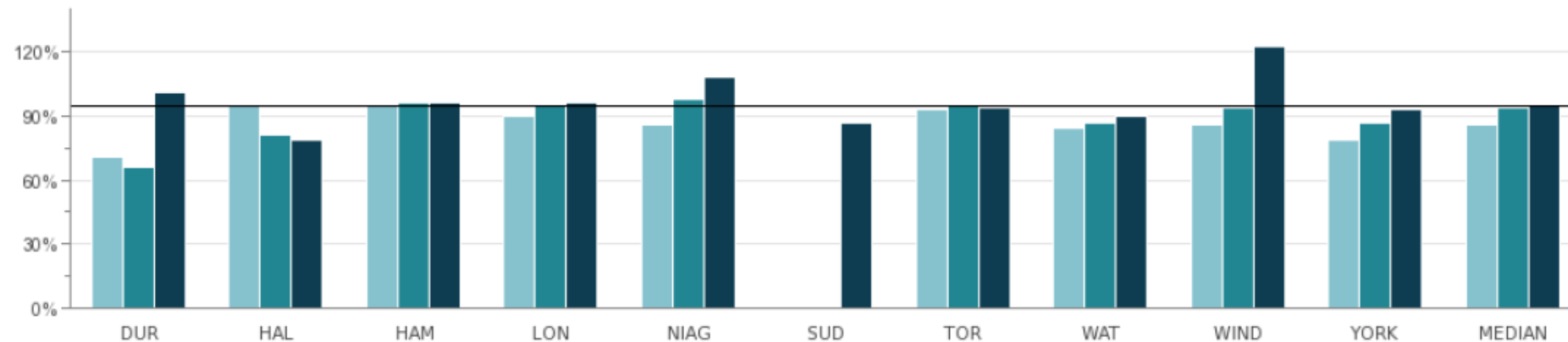
	DUR	HAL	HAM	LON	NIAG	SUD	TOR	WAT	WIND	YORK	MEDIAN
2015	71%	95%	95%	90%	86%	N/A	93%	84%	86%	79%	86%
2016	66%	81%	96%	95%	98%	N/A	95%	87%	94%	87%	94%
2017	101%	79%	96%	96%	108%	87%	94%	90%	123%	93%	95%

Source: HSTL410 (Customer Service)

Sudbury: Due to the implementation of the federal tracking system, HIFIS, prior year results have been removed.

Windsor: The overage in bed nights is due to the increased demand from families who needed emergency shelter and were placed in motels. Moving individuals and families from emergency shelter to permanent housing has become more challenging due to low vacancy rates and limited availability of affordable housing.

Questions?

Homelessness Services System Review

PUBLIC HEALTH & SOCIAL SERVICES COMMITTEE

MARCH 19, 2019

NRHSS Review - Outcomes

REVIEW, RECOMMENDATIONS & SYSTEM 2.0 IMPLEMENTATION

NRHSS Survey Response

"Comprehensive report. Will require lots of open discussion with all parties to get us to 2023. In order for change to happen adequate resources must be in place. Always working without enough limits imagination as well as results. People suffer when they are not housed or their housing is always at risk. Communities are diminished. Can plan be used to build sense of urgency in community?"

NRHSS Review Methodology

- Document & Literature Review

- Stakeholder & Service Provider Interviews

- Service Provider Workshops & Focus Groups

- Project Updates with NRHSS Team

- Key Concepts – Systems & Systems Thinking

- Client Interviews

- Report – Collaborative Review/Edit Process

Whitesell & Company

The NRHSS report and recommendations will act as a guide to help us design and develop System 2.0.

Answered: 16   Skipped: 1
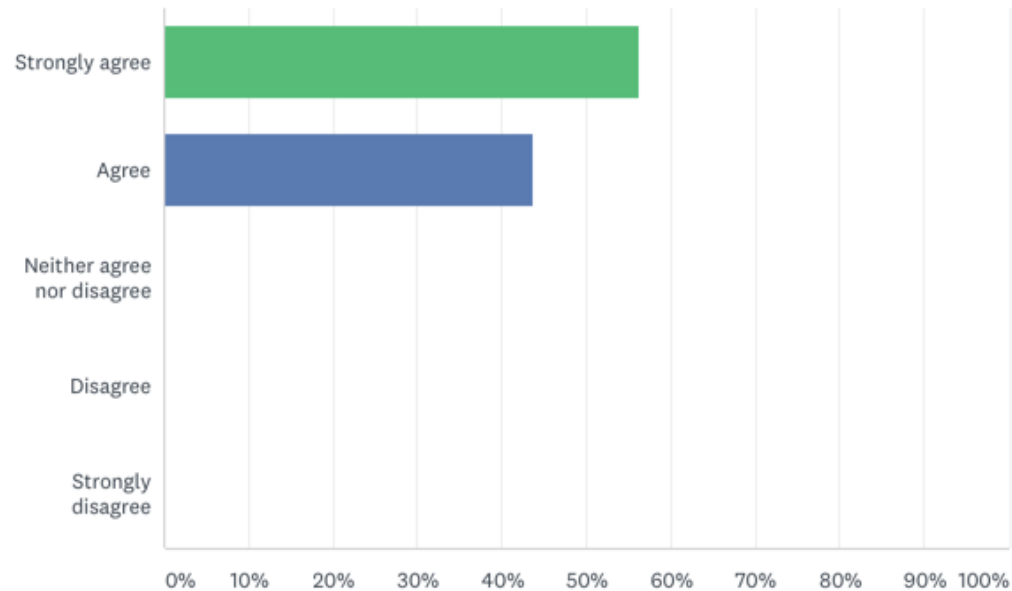
ANSWER CHOICES	RESPONSES	
▼ Strongly agree	56.25%	9
▼ Agree	43.75%	7
▼ Neither agree nor disagree	0.00%	0
▼ Disagree	0.00%	0
▼ Strongly disagree	0.00%	0
TOTAL		16

Figure 8

Growth Curve NRHSS

System 3.0

III integrative

System 2.0

II normative

I formative

2018   TIME   2025

©2014, Whitesell & Company
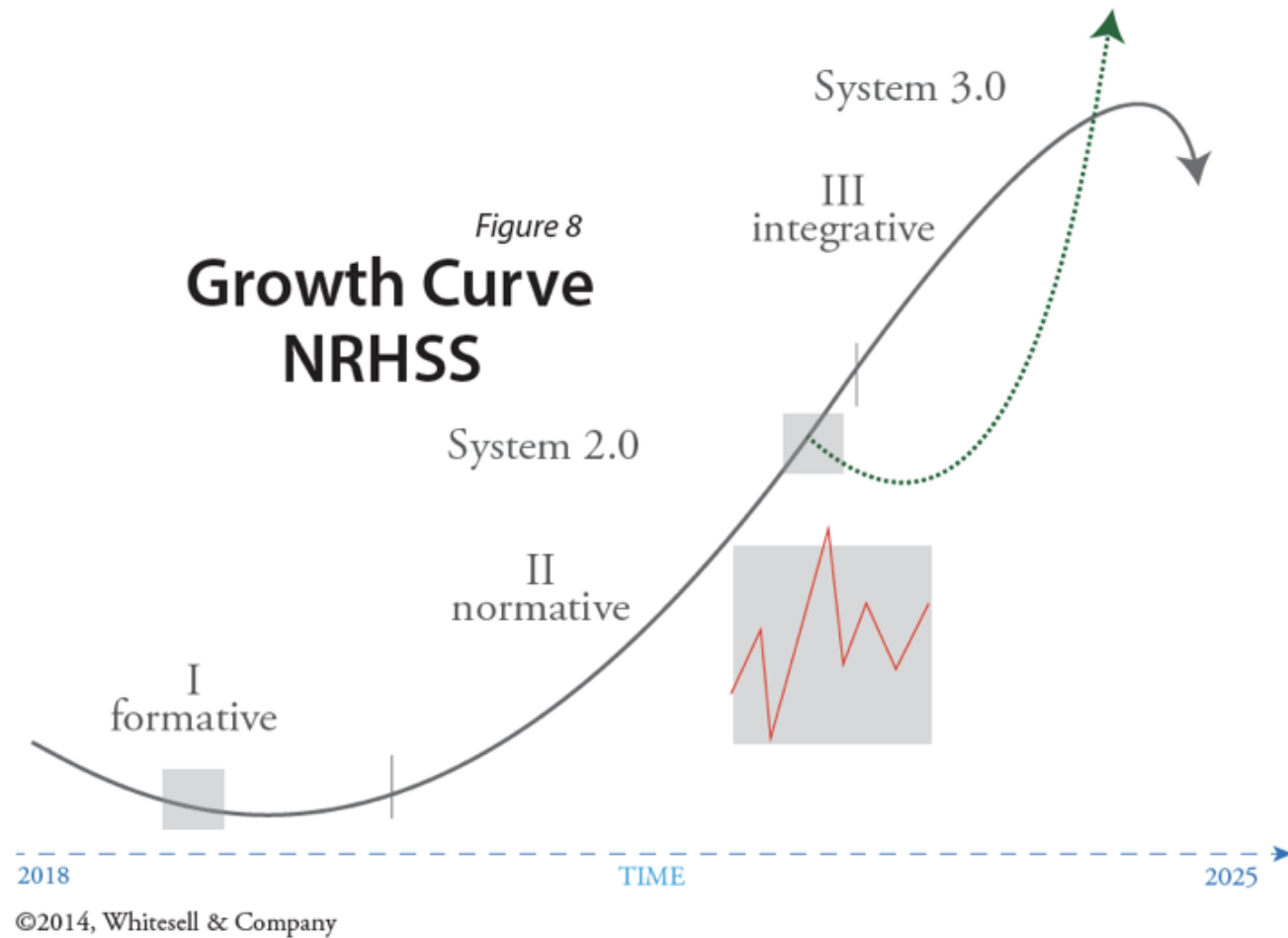
Systems Thinking & Approach
2019 to 2025

42

Figure 7

Alignment & Operational Effectiveness

SHARED VISION FOR SYSTEM 2.0

Recommendations & Implementation Timeline

Recommendations

1. Clarify the system vision and mission grounded in Housing First philosophy.
2. Capture all system components through a system mapping process.
3. Implement the System 2.0 model for program and services delivery.
4. Strengthen Key Components of System 2.0. Outreach, Housing Help and Housing First programs/services as priorities.
5. Develop standards and key performance indicators for each program/service area:
   Outreach, Prevention & Diversion, Emergency Shelter, Transitional Housing and Permanent Supportive Housing.
6. Improve contract management and performance measurement, including continuous improvement.
7. Work to understand the depth of need related to mental health and addictions, and their impacts.
   on the system, in order to improve client access to available health services and supports.
8. Improve decision-making through enhanced technology, communication and tracking.
9. Improve staff capacity through ongoing, service provider training.
10. Increase affordable housing stock and strengthen the linkages between homelessness services and housing.

Niagara /// Region

System 2.0 Implementation

- Mission & Vision Community Workshop

- Outreach Consultation/Workshop – Frontline, EDs, MHART, NRPS

- Housing Help Workshop

- Housing First Systemwide Training

- Funded Program Reviews – Evidence-Informed Baseline

- Preparation for 2020 REOI Process

- Alignment of Homelessness Services to System 2.0 Vision

Whitesell & Company

"We need to stop just pulling people out of the river. We need to go upstream and find where they are falling in."

– Desmond Tutu
Source: Marc Boychuk, Homeless Advocate
Métis Urban/Capital Field Officer for Peace River, AB

Summary

Subject: Homelessness Services System Review

Report to: Public Health and Social Services Committee

Report date: Tuesday, March 19, 2019

Recommendations

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

Key Facts

- To support system planning in this area, Homelessness Services (HS) contracted Whitesell & Company Inc. (Whitesell) to complete a review of the homelessness service system in Niagara (see Appendix A: Niagara Region's Homelessness Services System Review).
- Currently, Homelessness Services funds 22 service providers in the community to deliver programs and services across four key areas: Outreach, Prevention, Emergency Shelter, and Transitional and Supportive Housing.
- From April 2018 to January 2019, Whitesell engaged in various methods of data collection and analysis to complete the review, including: a literature review (together with grey literature supplied by service providers), an environmental scan of best and emerging practices, service provider workshops, key stakeholder interviews and surveys, semi-structured interviews of those with lived experience (consumers of homelessness services), and regular meetings and engagement with HS staff.
- Within the report, Whitesell proposed ten recommendations to support the evolution to a more streamlined, efficient and effective homelessness services system that is proposed to better enable clients to obtain affordable, safe and appropriate housing that meets their needs.
- In a follow-up survey (60% response rate) administered to service providers, a Ministry of Municipal Affairs and Housing representative, and internal and community partners, it was found that survey respondents either strongly agreed (56%) or agreed (44%) that the review and its recommendations should act as a guide to help design and develop the proposed new 'System 2.0'.

Financial Considerations

Initial implementation of the recommendations contained within the report will be managed within the 2019 Operating budget. Further financial considerations of any of the subsequent steps will be estimated and included within the 2020 Operating budget for Committee and Council consideration.

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Analysis

The ten recommendations contained within Whitesell's "Niagara Region's Homelessness Services System Review" are identified below along with responses from Community Services' Homelessness Services division:

1. **Clarify the homelessness services system vision and mission as it relates to "A Home for All: Niagara's Housing and Homelessness Action Plan" (HHAP) and ensure it is grounded in Housing First philosophy.**

The HS division agrees that a shared vision for change and a joint approach to engaging in the change (or shared mission) are critical factors to ensuring an appropriate response to address homelessness in Niagara. In addition to ongoing, regular engagement with homelessness service providers, HS is committed to facilitating a community consultation with providers to develop a shared vision and mission for the system as it relates to the HHAP (which identifies a system vision for the housing *and* homelessness system) and is grounded in the Housing First model. Housing First is defined as a program model (currently implemented in Niagara as a supportive housing program funded in part by HS), systems approach and philosophy. The primary goal of Housing First is to end chronic homelessness by providing immediate housing to individuals ('house first'), followed by flexible, community-based, wraparound supports to promote recovery, housing stability and wellbeing.

2. **Capture all system components through a system-mapping process in order to model and understand the complex components and identify where there may exist opportunities for intervention to enhance client outcomes.**

Homelessness Services agrees that system-mapping is an effective tool to support future system planning by making sense of client touchpoints within the system, identifying the role of internal and community partners, identifying opportunities to meet service gaps, and is a foundational precursor to implementing 'coordinated access'. HS recognizes that system-mapping should also be understood as an ongoing process, and commits to prioritizing this work within the role of Service Manager of the homelessness services system. Additionally, HS system-mapping will look to build from work already completed through the Niagara Prosperity Initiative which captures neighbourhood-based interventions targeted at Niagara residents living in poverty in the areas of housing, health and employment.

3. **Implement the System 2.0 model for program and service delivery, leveraging the expertise of high-performing service providers.**

Homelessness Services commits to considering all recommendations contained within this review and will work to support the evolution of a more streamlined, efficient and effective homelessness services system (or 'System 2.0' which is the redesigned

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system subsequent to the implementation of the recommendations contained in the report). HS will ensure that execution of this work will align with the timing of the next phase of procurement for homelessness services, as contracts are to be in place for March 2020.

4. **Strengthen key components of the system with a particular focus on the areas of Outreach, Housing Help (a service within Prevention), and Housing First (a program within Supportive Housing).**

Homelessness Services is committed to ensuring that Outreach, Housing Help and Housing First programs or services are strengthened as key components of the system, through a collaborative process of engagement with providers, clients and also system partners not funded by HS. As such, HS commits to continuing to draw from best and emerging practices in these respective areas, consider local needs identified through Niagara-specific data (e.g. 2018 Point-in-Time count) and elicit feedback/input from key stakeholders. This work will inform the next round of procurement within these priority areas of the homelessness system.

5. **Develop standards, key performance indicators (KPIs) and targets for each program/service area: Outreach, Prevention, Emergency Shelter, and Transitional and Supportive Housing with the engagement of the community of service providers.**

Homelessness Services agrees that in order to ensure effectiveness of the homelessness system, program/service standards, KPIs and performance targets should guide service delivery and system management. While HS has made some progress in this area (e.g. recently established Emergency Shelter Standards), it will continue to engage in this work drawing from evidence-informed research, local needs and stakeholder engagement. Additionally, HS will continue to work with providers to maximize the use of HIFIS 4 (a federal database used to track client information and support service data such as shelter admissions, case management and client assessments), and identify key data elements to support the use of KPIs and targets within system planning.

6. **Improve contract management and performance measurement to ensure appropriate monitoring of the effectiveness of programs/services within the system.**

Homelessness Services welcomes the opportunity to consider additional strategies to improve contract management and performance measurement of the programs/services within the homelessness services system. HS will continue to work with Niagara Region's Internal Control and Organizational Performance division to ensure that contract design used to procure homelessness services allows for active contract management of successful providers in the next round of procurement.

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7. Work to understand the depth of need related to mental health and addictions, and their impacts on the homelessness system, in order to improve client access to available health care.

Homelessness Services supports this recommendation and presently regularly seeks opportunities to strengthen linkages between health and homeless-serving sectors. For example, HS has recently initiated a pilot project to further understand mental health and addictions support needs within the homelessness system. Launched in January 2019, this pilot project is funded by HS, and through partnership with Niagara Region Mental Health, placed a social worker within Niagara's emergency shelters to work with clients with prolonged stays to offer a comprehensive assessment of concurrent disorders (mental health and addiction), develop individualized treatment plans, and refer to appropriate health services and supports. Outcomes will include capturing fulsome data on the needs and acuity of clients within shelters to inform future health service needs and funding proposals within emergency shelters, and to identify appropriate training and capacity building opportunities for shelter staff.

8. Improve decision-making through the enhanced use of technology, communications and tracking.

Homelessness Services is in the process of building a new performance dashboard of data metrics, which will draw from and expand the use of HIFIS 4 within the homelessness system. Currently 82% of homelessness service providers are actively utilizing HIFIS 4, including **all** emergency shelter providers. Therefore, HS will continue to support providers in adopting and maximizing their use of HIFIS 4 to support enhanced understanding of system-wide performance.

9. Improve system capacity through ongoing, service provider training.

Homelessness Services offers regular training to service providers. To date, the training delivered has included: Non-Violent Crisis Intervention, human trafficking awareness, effective use of the vi-SPDAT (a common assessment tool used to understand the acuity of individuals with housing and related support needs), effective communications training through 'Crucial Conversations' and 'Motivational Interviewing', and Housing First training offered through the Canadian Alliance to End Homelessness. HS will continue to engage providers to determine and fulfil training needs across the homelessness system.

10. Increase affordable housing stock and strengthen the linkages between homelessness and housing services.

Homelessness Services works to support this recommendation as the lead for the Region's Housing and Homelessness Action Plan (a legislated requirement of municipalities through the *Housing Services Act*), and through HS participation in the

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Affordable Housing Steering Committee (a working group comprised of staff from Community Services, ERMS, Planning & Development and Niagara Regional Housing, which aims to support better alignment and increased communication with work related to affordable housing). HS looks forward to exploring all opportunities to increase rental and affordable housing stock in Niagara through collaboration and innovation by partners across the sector.

Alternatives Reviewed

Not applicable.

Relationship to Council Strategic Priorities

Not applicable.

Other Pertinent Reports

None.

_____   _____
Prepared by: **Recommended by:**
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HOMELESSNESS SERVICES SYSTEM REVIEW

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Acknowledgements

Whitesell & Company sincerely appreciates the participation of people from all levels of government, Niagara Regional Housing, service providers and organizations directly or indirectly involved with the homelessness services system in Niagara region. We are especially appreciative of the contribution of people with lived experience who spoke candidly, critically and constructively about their situations and the services that they have received.

We had nearly 100% participation from the Niagara region funded service providers when they attended a workshop to identify the system issues and priorities. The workshop was followed by individual interviews, staff focus groups and onsite tours of the service provider facilities. Their cooperation and candor were remarkable and highly useful for this homelessness services system review.

The leadership and staff of Niagara Region's Homelessness Services and Community Engagement were extremely helpful and supportive as we conducted the review. Their depth of knowledge, enthusiasm and commitment were impressive. We are confident that they will be able to guide the homelessness services system to the next level

of performance. This will help ensure that people who are experiencing homelessness can achieve housing stability in homes that are safe, appropriate, adequate and affordable.

Executive Summary

The purpose of this systems review is to present a snapshot of Niagara's homeless-serving sector as it exists in 2018, clarify understanding of the system, recommend a path to a future state, and recommend policies, practices and a workplan to enable realization of the future state. The ultimate goal of the review is to develop a system that will help prevent and end chronic homelessness in Niagara Region. People experiencing homelessness or precarious housing are the most important stakeholders in the homelessness services system.

While it is widely recognized that housing and homelessness services exist on the same continuum of housing and support, the scope of this report primarily concerns Emergency Shelters, Transitional and Permanent Supported Housing, in addition to Prevention and Outreach services as defined below.

Figure 1

Housing Continuum & Supports

EMERGENCY			HOUSING					Ownership	
Homelessness	Emergency Shelter	Transitional Housing	Permanent Supportive Housing	Social Housing	Subsidized Rental	Affordable Rental	Private Market Rental	Affordable Ownership	Home Ownership

• Housing First
  -intensive case management
• Home for Good
• 2nd Stage Housing

• Rent Geared to Income
• Housing Allowances
• Rent Supplements

Prevention & Diversion: Services that support households to maintain their current housing or find alternate housing so as to *prevent* entry into the housing and homelessness system (e.g. Niagara Emergency Energy Fund - NEEF, Housing Stability Benefit - HSB, Emergency Assistance, etc.). Prevention includes diverting people who are looking to access emergency shelter services to more appropriate and available services. A Housing First best practice prioritizes households that have lost their tenancies due to eviction or other circumstances for soonest possible rehousing with supports that will ensure the stabilization and sustainability of the tenancy. Diversion and rehousing are practices that need to be integrated in the next iteration of the homelessness services system. Prevention and diversion are critical components of the next version of the homelessness services system.

Outreach: Services that facilitate a household's entry into the housing and homelessness system (e.g. Niagara Mobile Food Truck). This includes staff who are able to respond to service requests in the community for individuals who may be 'sleeping rough' or living outdoors at that moment in time (e.g. sleeping in their car, abandoned buildings, encampments, etc.). Outreach services are focused on ending the experience of homelessness for those with high acuity who are not accessing emergency shelters or other homelessness services. Outreach services are not the same as coordinated access.

Methodology

The methodology included five major components conducted during a compressed, four-month time-line from April to August 2018. These included:

1. Document review that included over 43 reports, plans and council briefs
2. Evidence-based literature review
3. Stakeholder and service provider engagement, including 47 users of homelessness services
4. Service providers workshop
5. Project updates and discussions with Niagara Region staff

Key Concepts

The foundational concepts necessary to frame this review are: 1) system analysis, 2) systems thinking, and, 3) understanding different perspectives.

System analysis considers all of the elements that contribute to the outcomes that the system is designed to achieve. The analysis also considers the weight or impact of the elements. For instance, the homelessness services system is designed to facilitate the end of chronic homelessness through housing solutions and supports. So, every service provider that is part of the system needs to contribute to that outcome with as few degrees of separation between the service provision and the outcomes as possible.

Systems thinking is an approach that involves moving from simply observing events or data, to identifying patterns of behavior over time and identifying the underlying structures that drive those events and patterns. By understanding and changing structures that are not serving the purpose and goals of the system well, we can expand the choices available to create long-term, effective solutions to complex problems through intentional design.

Understanding different perspectives is an integral component to systems thinking. People who operate within complex systems find it difficult to fully understand the entire system from the perspective of their own day-to-day responsibilities and operations. By understanding, respecting and including different perspectives, there is an opportunity to work together to design a system that delivers the desired outcomes.

> *Housing First is a philosophy, principles and practices that provide an operational framework for the housing and homelessness system. Housing First is a funded program that is recognized by both the Provincial and Federal Governments.*

Recommendations

The following 10 proposed recommendations are the result of the homelessness services systems review:

1. Clarify the system vision and mission grounded in Housing First philosophy.

2. Capture all system components through a system mapping process.

3. Implement the System 2.0 model for program and services delivery.

4. Strengthen key components of System 2.0, with Outreach, Housing Help and Housing First programs/services as priorities.

5. Develop standards and key performance indicators for each program/service area: Outreach, Prevention & Diversion, Emergency Shelter, Transitional Housing and Permanent Supportive Housing.

6. Improve contract management and performance measurement, including continuous improvement.

7. Work to understand the depth of need related to mental health and addictions, and their impacts on the system, in order to improve client access to available health services and supports.

8. Improve decision-making through enhanced use of technology, communication and tracking.

9. Improve staff capacity through ongoing, service provider training.

10. Increase affordable housing stock and strengthen the linkages between homelessness services and housing.

These recommendations are intended to transform the system from its current state into System 2.0 a more streamlined, efficient and effective means for clients to attain permanent, safe, adequate and affordable housing.

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Methodology

This review included five methods during a compressed, four-month timeline from April to August 2018. Dr. John Whitesell conducted all of the direct contact with people in Niagara Region to ensure that there was a single filter for information gathering, curation and preliminary analysis.

1. Document Review

The consultants reviewed over 43 reports, plans and Council briefs that provided background to the planning and evaluation of Regional homelessness services, including the review that was conducted in 2013.[1] Many of the service agencies provided us with white papers, blogs, promotional documents and even proposals for funding from non-Region organizations.

The relevant contextual documents also included the Auditor General's Report, Housing and Homeless-ness Action Plan (HHAP), National Housing Strategy, Long-Term Affordable Housing Strategy, Human Services Integration, Canada's First Poverty Reduction Program, Point-in-Time Homelessness Count 2018 and the Staff Report on the Proposed Hybrid Model within the Alternative Service Delivery Review of Social Housing.

2. Literature Review

The consultants cast a wide net for the evidence-based, literature review due to the multitude of factors or social determinants of health that directly relate to the experience of homelessness such as mental health, family/relationship breakdowns, addictions, gender-based violence, physical health, trauma, social exclusion, poverty, unemployment, stress, food scarcity, transportation, etc. The lack of affordable and stable housing exacerbates existing mental health issues and that underlines the need for a full spectrum, coordinated system that is responsive and tailored to individual needs. Our research, therefore, had to be expansive.

The research included a review of grey literature. The consultants have been involved in housing and homelessness for over two decades and have access to other thought leaders and their work in this sector.[2]

3. Stakeholder & Service Provider Engagement

The most important stakeholders in the homelessness services system are the actual consumers of the services. Using a semi-structured, informal interview format, the consultant interviewed 47 individuals and families who were experiencing homelessness, precarious housing situations or couch surfing (no fixed address) during this review.

The consultant conducted 19 stakeholder interviews in both face-to-face and telephone formats with six follow-up interviews. The stakeholder interviews included staff and managers from the Region's Homelessness Services, Social Assistance and Employment Opportunities and Public Health; HBHN

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1   Paul Dowling & Associates, Niagara region Homelessness Services System Review, September 2013
2   Grey literature is information produced outside of traditional publishing and distribution

LHIN; Ministry of Housing; Niagara Regional Housing; Niagara Chapter of Native Women, Inc.; Housing Help Centre of Hamilton & Area; Niagara Falls Community Health Centre; and, more. An additional five interviews were conducted with individuals who had direct experience with the homelessness system but are now working outside of the Region.

Eighteen service providers from the Region engaged in the review process. They provided the consultant with their in-depth experience, onsite tours, access to staff and background literature from their organizations. The service providers were very cooperative to give the consultant access and the agencies that are funded by Niagara Region's Homelessness Services can be found in Appendix A.

Prior to the release of this report and following a presentation to service providers on November 29, 2018, the service providers and stakeholders were asked to review the draft report, provide feedback and recommend edits. The changes were reviewed and included in this final version of the report.

4. Service Provider Workshop

On May 22, 2018 the majority of the funded service providers (18 in total) attended a half-day session at the Niagara Region's Headquarters Office to discuss this project and the process. The focus was the homelessness services system. The purpose was to identify and rank the issues impacting system performance. Following 90 minutes of, at times, intense discussion, the service providers were tasked to reach a consensus regarding the homelessness services system issues and priorities from their perspective using a nominal group technique developed by the consultants.[3] *Figure* 2 is the priority ranking for the seven issues identified and defined by the service providers based upon value/importance and current performance.

Figure 2
Service Providers—SOG Priorities

Priority	Value/Importance*	Performance
A - Shared Vision	85	3.25
B - Appropriate Supports	75	3.50
C - Urban Rural Supports	67	1.25
D - Diversity of Permanent Housing Options	60	3.75
E - System Access	74	2.75
F - Shelter Beds & Capacity	67	2.00
G - Prevention of Homelessness	70	3.75

Value/Importance (7X17=126)

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3   The nominal group technique (NGT) is a process based on item response theory. Whitesell & Company used the theory to develop a framework called the Strategic Opportunity Grid (SOG). SOG was designed to objectively reach consensus regarding shared issues and their priorities among diverse participants who are part of the same system. The process involved issue identification, definitions of the issues, and decision making to make an independent, informed, forced choice between two issues at a time (often among 6-15 issues) to determine which is more important to the effectiveness of the system. The total number of choices are ranked on a vertical scale that is calculated as the total number of issues multiplied by the total number of participants. The participants rank current performance relative to each issue on a scale of 1 to 10 on a horizontal axis. This produces four quadrants: Strengths, 2) Opportunities, 3) Over-Emphasis, and, 4) Non-Issues. The results of the Niagara region SOG can be found in Appendix B.

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5. Project Updates & Discussion

The consultant conducted four project updates with Niagara Region staff to identify barriers to the review, new lines of inquiry and to discuss the preliminary findings. An online project tracking tool called Smartsheet, was shared with staff to provide real-time feedback regarding the project. The discussions with staff were especially helpful to the consultant to keep the "reach" of the current system in focus while helping the consultant to understand options and aspirations for the future of the system.

6. Key Concepts – Systems and Systems Thinking

A system is a cohesive assembly of interrelated and interdependent parts. A system can be natural (organic) or designed by humans. Every system is delineated by its spatial and temporal boundaries, surrounded and influenced by its environment, described by its structure and purpose and expressed in what it yields trends, key performance indicators, metrics, measures and events. In terms of its impact, a system can be more than the sum of its parts if it expresses synergy and emergent behavior that are focused on defined outcomes. An example of this impact is how two Regionally-funded agencies supporting youth are independently collaborating to provide a continuum of service appropriate for youth. Co-location of professional resources such as having Public Health nurses and psychotherapists on the frontlines serving clients is another example. And, still another example, is Gateway Residential and Community Support Services in Welland that has developed its own housing ecosystem complete with outreach, comprehensive case management and owned supportive housing stock.

The intent of this homelessness services system review was to examine the system across the entire region. *Collective Impact* is a systems approach that can help individual organizations that are isolated geographically benefit from the scale of service type and access that is provided by collective impact. This can be accomplished through the following five steps:

1. Agreement on common agenda
2. Develop a shared measurement approach
3. Leveraging resources through mutually reinforcing activities
4. Building continuous communications
5. Develop a backbone structure to mobilize the collective effort

Determining the optimal system design is similar to breaking down a bicycle into its component parts: frame, handlebars, wheels, pedals, saddle, shifters, stems, chain, brakes, etc., but it's vitally important to know what the purpose of the bicycle will be. Will the parts be used to construct a mountain bike, road bike, beach bomber, hybrid or a folding bike that can be put into the back of a car or on a sailboat? The bike's purpose informs its design with variations in the parts that are used. The 2013 review was not performed on a system that, at that time, had a singularity of purpose.

Systems need to be designed or continuously improved to adjust to real circumstances that occur in its environment. The system must be responsive to the needs of the clients that it serves. Increasing and shifting pressures from poverty, addictions, evictions, family breakdowns, etc. in the homelessness services system will challenge its design as well as the system's ability to deliver the desired outcomes.

For instance, an experienced rider can use a mountain bike in the Tour de France but even performance enhancing drugs will not overcome the inherent limitations of the bike's structure, system and design. The level of effectiveness and the adaptability of any system is contextual.

Figure 3 illustrates how the various parts of any system are interrelated. The ability to influence positive change in a system or organization increases as the designers or participants in the system go up in the hierarchy to the Mission, Vision and Leadership levels.[4] At the management level on the right side of the illustration where management inter-sects with strategy, traditiona as command and control are illusory, at best. Guiding, supporting, coaching are the management skills that can ad-just to shifting circumstances, assure the adaptability of the system relative to its purpose and, therefore, complement leadership.

Figure 3

Changing one part of a system usually impacts other parts or the whole system, with predictable patterns of behavior and, some-times, unintended consequences. Adding additional shelter beds in Niagara Region may not house more people permanently if oth-er components of the system are not adjusted for the change and the outward flow from shelters and transitional housing towards permanent housing. *Figure 1* on page 2 illustrates a continuum of housing solutions that can work if the overall system is integrated. For systems that are self-learning and self-adapting, the positive growth and adaptation depends upon how well the system ad-justs with its environment.
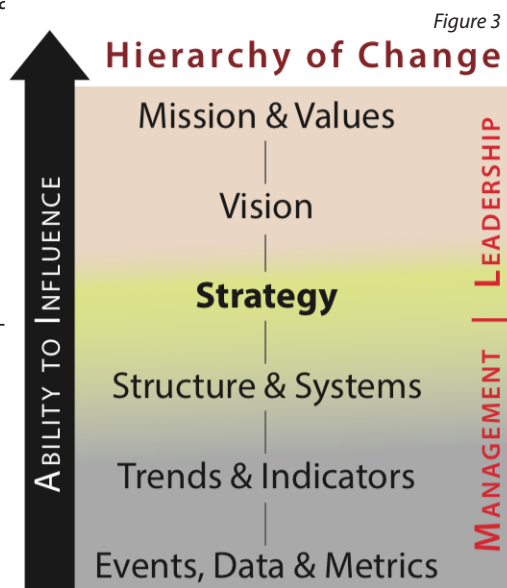
Some systems function mainly to support other systems. Smaller, related systems can aid the purpose, capacity and maintenance of the primary system to prevent failure. The goal of systems theory is to methodically discover a system's dynamics, constraints, conditions and elucidating principles, purpose, measures, methods, tools, etc. that can be discerned and applied to the overall system or the microsystems that function closest to the client, e.g., outreach workers using Housing First principles, tools and intensive case management. *Figure 4* illustrates how intensive case management (ICM) progresses from outreach to housing stability and the termination of supports that signals client self-sufficiency.

The wraparound supports that are tailored to the needs of the client correspond to the six stages in the theory of change with the goal of housing stability as the outcome.[5]

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4   The Hierarchy of Change illustration was used in the Whitesell & Company proposal as well as during the Service Providers Workshop on May 22, 2018.
5   Prochaska J.O., J. Norcross & C. DiClemente 2007. Changing for Good: A Revolutionary Six-Stage Program for Overcoming Bad Habits and Moving Your Life Positively Forward. William Morrow Paperbacks.

8

Figure 4

Housing First & Stages of Change

HF Methodology   Outreach & Shelters   Housing Selection   Housing Stability (ICM)*

Access
System   Exit
                                                                                    System

Stages of Change   1. Pre-contemplation   2. Contemplation   3. Preparation   4. Action   5. Maintenance   6. Termination of Supports

ICM - Intensive Case Management

©Whitesell & Company, Inc.
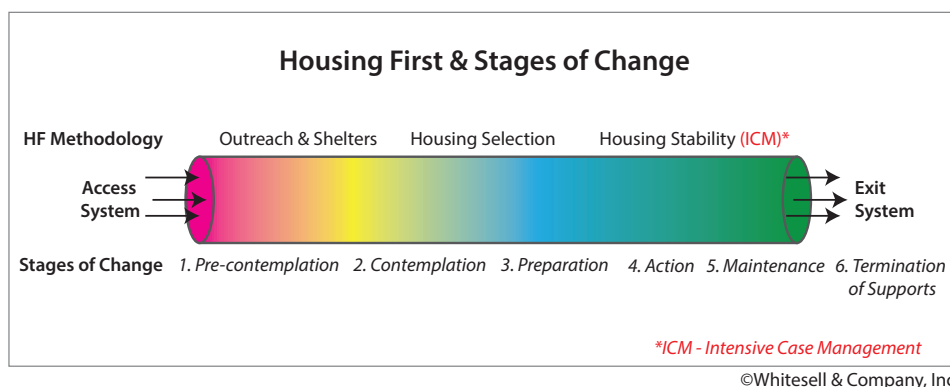
Systems thinking can overcome the major deficiencies of the traditional, linear, mechanistic approach to solving human-based, messy problems such as logic models from the past to explain housing and homelessness systems. Social science is complicated because correlation and causation are often difficult to separate. But the evidence, when viewed objectively and modeled accurately, can inform the changes that need to be made to a system to advance towards the vision and achieve the accompanying goals and objectives. It is important to remember that high-performing systems can only exist within enabling structures.

It's the difference between throwing a rock and throwing a bird.[6] When one throws a rock, the trajectory and distance are predictable unless, of course, skipping stones on the Niagara River. Throwing a bird is different because once the bird leaves one's hands, the bird will determine its own flight path. And, so it goes with people who are experiencing homelessness. A homeless services system must meet clients "where they are at."

The consultant conducted short interviews with 47 individual system users. A common trend in the feedback was that the current system wasn't responsive in meeting their specific needs. At the same time, they wanted the consultant to know that they blamed the system, not the service providers.

The way that individuals respond to the homelessness services system as any frontline worker can verify is going to vary dramatically. And, the variation in responses can be included in the modeling to make initiatives such as A Home For All or Home For Good a reality. An accidental discovery during the service provider interviews was that many of the frontline workers were confused by the various initiatives, e.g., Housing First, A Home For All, Home For Good, etc. This made the consultant curious about the fidelity to Housing First principles and practices across the system. Housing is a human right. Achieving that outcome for everyone requires a system that meets people where they are with the platinum rule in play: Do unto others as they need to be done unto.

Adopting systems thinking does not automatically eliminate counter-productive modes of thinking or outright failures. System thinking is not a silver bullet that will enable policy makers and managers to achieve their intended outcomes. But it will help identify what can be achieved and the means required to achieve it, e.g., what needs to change and how much it will cost.[7]

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6   PE Plsek and T Greenhalgh, 'The challenge of complexity in health care', British Medical Journal (BMJ) 323 (15 September 2001), p 625

7   The review did not include a cost analysis related to the development of the new system. The cost analysis could be included as part of the recommendation to conduct a thorough system mapping exercise since cost is directly related to the design of the new system. There are efficiencies that will be realized through "collective impact" but it is too early to determine if the efficiencies will translate to overall savings compared to the current spend.

Understanding Different Perspectives

The existence of varying perspectives regarding the definition of a problem is a key characteristic of a messy problem, that is, one that is difficult to incorporate in a linear, rational model of decision or policy making. The service providers are getting closer to a shared, conceptual view of the current system but there are still wide variations in their perspectives about how the system should work. They also have a board-mandated obligation to keep their individual organizations viable and to operate in alignment with their Board's strategic vision and mission. The majority of the leaders who were interviewed would like to have a shared view of the system to inform their decisions to serve the "greater good" that the homelessness services system represents while maintaining the operational and financial integrity of their organizations.

The classic example of perspectives phenomenon is the story of the elephant and the blind wise men as illustrated by *Figure 5*.[8] The parable has been used to illustrate a range of truths and fallacies; broadly, the parable implies that one's subjective experience can be true, but that such experience is inherently limited by its failure to account for other truths or a totality of truth. At various times the parable has provided insight into the relativism, opaqueness or inexpressible nature of truth. Often, even experts experience a deficit of evidence or inaccessibility of information which reinforces the need for communication and respect for different perspectives. The homelessness services system is the elephant.

Figure 5— the story of the elephant and the blind wise men
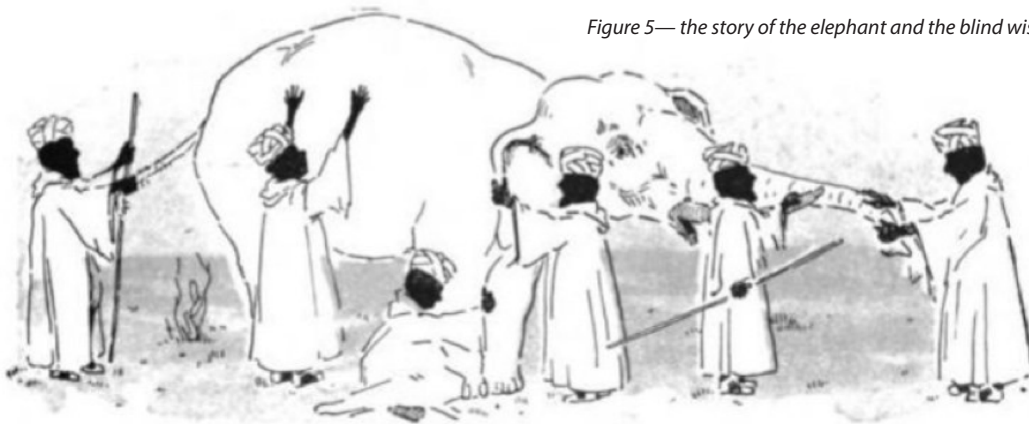
Competing theories are expressions related to trying to make sense of the world or in the case of Niagara Region, the homelessness services system.[9] Echoing many of Thomas Khun's comments on conflicts in science arising from different paradigms, there is no possibility of falsifying a frame of analytical reference; no data can be produced that would conclusively disconfirm it in the eyes of all qualified, objective observers. The reason for this is that if 'objective' means frame-neutral, there are no objective

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8   The earliest versions of the parable of blind, wise men and their first encounter with an elephant is found in Buddhist, Hindu and Jain texts. The parable: A group of blind men heard that a strange animal, called an elephant, had been brought to the town, but none of them were aware of its shape and form. Out of curiosity, they said: "We must inspect and know it by touch, of which we are capable." So, they sought it out, and when they found it they groped about it. In the case of the first person, whose hand landed on the trunk, said, "This being is like a thick snake." For another one whose hand reached its ear, it seemed like a kind of fan. As for another person, whose hand was upon its leg, said, the elephant is a pillar like a tree trunk. The blind man who placed his hand upon its side said, "Elephant is a wall." Another, who felt its tail, described it as a rope. The last wise man felt its tusk and stated that the elephant is that which is hard, smooth and like a spear.In some versions, the blind men then discover their disagreements, suspect the others to be not telling the truth and they come to blows. Lesson: when solving problems, we must respect and explore the limits of perception and emphasize the importance of complete context.
9   CHAPMAN J. 2002. System Failure: Why Governments Must Learn to Think Differently. Demos.

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observers.[10] There is no way of perceiving and making sense of social reality except through a frame called, systems thinking. The task of making sense of complex, information-rich situations requires an operation of evidence-based selectivity which is what 'framing' means. From that point of reference, system effectiveness can be modeled, measured, adjusted, improved and accepted by the key players.

Homelessness systems around the world that are built using the Housing First philosophy, principles and practices have demonstrated that they work to reduce and even end chronic homelessness. The challenge is to reduce the traumatic impact of homelessness for all households whether the experience is episodic or chronic. The objective is to make homelessness an experience that is rare, short and non-repeating. The World Economic Forum reports that the significant decline in homelessness in Finland can be attributed to the adherence by service partners and community leaders to the first principles of Housing First as illustrated by *figure 6*. The Europe Hub and the Liverpool City Region validated and implemented the Finnish approach.

Figure 6

Housing First Principles & Process

independent apartment

transitional housing unit

hostel

night shelter

street

HOUSING FIRST

People have a right to a home

Flexible support is provided for as long as it is needed

Housing and support are separated

Individuals have choice and control

Active engagement approach is used

The service is based on people's strengths, goals and aspirations

A harm reduction approach is used

Source: Liverpool City Region, Europe Hub & World Economic Forum

10 Werner Heisenberg (1901-1976): observer-uncertainty principle

Homelessness Services System – Background

Housing First

Homelessness exists at the intersection of poverty, mental health, gender-based violence, discrimination, lost jobs, physical disabilities and addictions. Housing First has been the touchstone solution for homelessness and it has been integrated into Canadian public policy. It's vital that every element of a homelessness services system is coordinated around the Housing First philosophy, principles and programming. This is the only proven way to make a sustained impact on homelessness with the achievable goal of ending chronic homelessness. Continuing to rely on shelters, policing and emergency medical services as responses to homelessness will only add to the $7.05 billion that Canadians pay annually.[11]

Federal and Provincial Policy Context

Every Canadian has a right to housing but for those individuals and families with limited incomes, finding and maintaining an affordable, stable home is beyond their reach. For the first time in Canada's history, the Poverty Reduction Strategy sets an official measure of poverty — Canada's Official Poverty Line — based upon the cost of a basket of goods and services that individuals and families require to meet their basic needs and achieve a modest standard of living in communities across the country.[12] This measure is an essential benchmark but in housing markets across Canada, affordable housing is no longer affordable for most individuals and families experiencing homelessness. In Ontario, the pilot for the Universal Basic Income (UBI) will likely be shutdown although the Federal Government has shown interest in pursuing the program. OW and ODSP provide a shelter allowance as part of income support.[13]

Coordinated Access System

Coordinated access is an essential element of efforts to prevent and end homelessness. Implemented with a Housing First philosophy, these systems have been in place in the United States for several years and are being implemented in a growing number of Canadian communities. Coordinated access systems are designed to streamline the process for people experiencing homelessness to access the housing and support services needed to permanently end their homelessness. The Provincial Government has endorsed coordinated access and the Federal Government has made coordinated access a requirement under the new homelessness strategy, Reaching Home, that is part of the National Housing Strategy.

The coordinated access system requires the implementation of a common assessment tool and a by-name list of clients. Niagara Region receives federal funding to develop and operate this system.

In the federal government's National Housing Strategy, the Government has taken a rights-based approach by declaring: "Canadians deserve safe and affordable housing. That is why the federal government is taking additional steps to progressively implement the right of every Canadian to access

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11 Stephen Gaetz et al., The State of Homelessness in Canada 2013 (Homeless Hub, 2013), http://www.homelesshub.ca/sites/default/files/SOHC2103.pdf; Stephen Gaetz and Tanya Gulliver, Housing: Housing First (Homeless Hub, 2013), http://www.homelesshub.ca/Topics/Housing-First-209.aspx.

12 http://bit.ly/CanadaPovertyReduction_Strategy. Poverty is the condition of a person who is deprived of the resources, means, choices and power necessary to acquire and maintain a basic level of living standards and to facilitate integration and participation in society.

13 Universal Basic Income is considered to be a practical way of sustaining economic growth through equity in wealth distribution. bit.ly/UBI_Evidence_WorldEconomic Forum

adequate housing."[14] The economic reality of housing affordability in Niagara Region needs to be understood in the context of the Canada Housing Benefit that will become operational in April 2019.[15] In preparation for the inflow of funding and initiatives related to housing, it is critically important for the Region to consider restructuring options related to housing and homelessness services at the Regional level to streamline service delivery and optimize affordable housing options and opportunities.

Best Practices in Homelessness Services

Homeless Hub is the de facto gold standard for evidence-based research and practices. The organization provides easy access to Housing First research, case studies and training.[16] Housing First has led to significant progress in helping people experiencing chronic homelessness. Intensive Case Management (ICM) ensures that households remain stable and it has also been applied to sub-populations of people experiencing homelessness such as Indigenous Peoples, Youth and women experiencing intimate partner violence (IPV) and other forms of gender-based violence (GBV).

There are best and promising practices for homelessness services systems through-out North America, Europe and Ontario. A 2012 Dutch report captures six key points regarding foundational aspects of a successful system: 1) prevention services to help clients avoid evictions and the accumulation of financial debts; 2) a coordinated approach for persons who leave health and mental healthcare institutions or prison; 3) the development of social workers' expertise and competence with respect to housing and homelessness dynamics and practices; 4) a national framework to collect data on homelessness; 5) a stronger governance role for local authorities; and 6) the introduction of a client-centred approach and case management techniques to accelerate the outflow of clients from the homelessness system and into transitional or permanent housing.[17]

Best practices have been identified with several programs in Niagara Region including youth homelessness prevention. The RAFT has been cited as a national best practice through prevention programs such as Youth Reconnect and Eternal Routes that have contributed to a downward trend in homelessness for young people ages 16 to 35.

The consultant has conducted Housing First program evaluations throughout North America, including CMHA in Ontario. Gateway Residential and Community Support Services demonstrates expertise in Housing First that ranks among other exceptional practitioners in this field. Gateway's case management approach helps staff better understand the supports that clients need to achieve their goals, connect with the community and sustain their tenancy.

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14 Government of Canada. (2017). Canada's National Housing Strategy: A Place to Call Home. Ottawa, ON: Government of Canada. Page 8. https://www.placetocallhome.ca/.

15 With investments of $40 billion over 10 years in housing, the Strategy will help provide Canadians with accessible, affordable housing that meets their needs. The aim to reduce or eliminate more than 530,000 families from housing need, protect 385,000 community homes and create another 50,000 units through the expansion of community housing in Canada. Another target is to reduce chronic homelessness by 50%.

16 The Homeless Hub is a web-based research library and information centre representing an innovative step forward in the use of technology to enhance knowledge mobilization and networking. Homeless Hub was formed following the Canadian Conference on Homelessness in 2005 and the Canadian Alli- ance to End Homelessness (CAEH) is a research partner. <homelesshub.ca> <caeh.ca>

17 bit.ly/Dutch_HomelessnessStrategy

Creating a System Vision

When the Government of Alberta crafted its 10-year plan to end homelessness in 2009, one of the most significant visionary statements in the plan became an organizing principle for the future design of the system:

> This will mean that even though there may still be emergency shelters available for those who become homeless, those who become homeless will be re-housed into permanent homes within 21 days. – *A Plan for Alberta: Ending Homelessness in 10 Years*

This design principle guided the decision making for the number of shelter beds in the province, where the beds would be located and the support services that were required to fulfill the goal of re-housing people experiencing homelessness within 21 days. Funding levels to make the system work effectively were calibrated to the 21-day key performance indicator. The Continuums of Care system in Michigan communities have demonstrated fluctuating levels of homelessness since the housing and market crash in 2008 but they tend to take the same approach as Alberta to bring a sense of urgency and accountability to the system partners.[18]

System effectiveness is ultimately judged by the clients who use the system. In a systems approach, implementation of changes needs to include deliberate strategies for innovation, evaluation, learning and reflection. Successful approaches will be reinforced. Programs or approaches that don't add value, deliver outcomes or strengthen the system will be removed from the system[19]

In 2016, the Medicine Hat Community Housing Society (MHCHS) publicly stated that they had ended chronic homelessness in the city of 63,000 people. MHCS housed 1,072 people including 372 children from 2009 to 2016. This announcement attracted international attention because the word "chronic" was typically dropped in the media and by some Albertan politicians. The fact is that people experiencing chronic homelessness — homeless for six months or more — are limited in number compared to the overall homeless population. But they are the most expensive for society because they tend to access expensive emergency services such as hospital emergency rooms, paramedics, and police. The Executive Director of MHCHS qualified the statement regarding the ending of chronic homelessness by saying, "Ending homelessness does not mean that no one will ever experience homelessness."[20] [21] The consultant would like to add to this statement of fact: While ending homelessness so that it never oc-curs again in any given jurisdiction is not possible, ending chronic homelessness can be achieved if the system is working optimally.

> *"While poverty is not always about homelessness, homelessness is always about poverty."*
> *Canada's First Poverty Reduction Strategy, 2018*

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18   Michigan homelessness dropped by 28.7% between 2010 and 2016 according to the Department of Housing and Urban Development.

19   Housing First is not a system. It is one of the major, evidence-based functions of a well operating homelessness services sys- tem that has principles, techniques and tools embedded in the function, including intensive case management (ICM).

20   Medicine Hat News, Gillian Slade, January 4, 2018.

21   The author of this report has direct experience consulting with the Government of Alberta, the MCHCS and the 7-City Consortium in Alberta.

Niagara Region – System 2.0 Model

The current state of the homelessness services system was the focus for this review process. It's encouraging to see several homelessness agencies collaborating with each other as well as with partner organizations to leverage their capacity and capabilities. The objective over the next 18 months is to design and develop the next version of the system (2.0) that will provide more opportunities for cooperation and collaboration in preparation for the next round of funding in 2020.

The collaboration will involve a participatory process through which the agencies will help establish key performance indicators, metrics and measures for various programs and the homelessness services system. This will be combined with performance and quality assurance targets to better serve clients. System 2.0 will form the foundational elements for the next version of the system and will be reflected in the submission requirements during the next round of funding.

The concept of alignment and coordination in the homelessness services system was presented during the service providers meeting on May 22. *Figure 7* illustrates how the shared vision can guide policies, practices and decisions at the agency level while preserving enough autonomy at the ground level as represented by the width of the arrow — to collaborate with each other to achieve the operational effectiveness of the overall homelessness services system.

Figure 7

Homelessness Prevention

Homelessness prevention is the most proactive and cost-effective way to help stabilize households that are at risk of losing their housing. Homelessness prevention refers to policies, practices, and interventions that reduce the likelihood that someone will experience homelessness. It also means providing those who have been homeless with the necessary resources and supports to stabilize their housing, enhance integration and social inclusion, and ultimately reduce the risk of the recurrence of homelessness. The causes of homelessness include individual and relational factors, broader population-based structural factors, and the failure of many public institutions to protect people from homelessness. This

suggests that homelessness prevention must not only include interventions targeted at individuals, but broader structural reforms directed at addressing the drivers of homelessness. That not only communities but all orders of government, and most departments within have a responsibility to contribute to the prevention of homelessness is in keeping with a human rights perspective. [22]

The loss of housing can be traumatic for individuals and families with the high probability of exacerbating existing issues. Assisting households before homelessness results can avoid negative economic, social, mental, and health impacts. Since most households can successfully avoid homelessness with limited assistance, the cost savings generated by an efficient prevention program can reduce reliance on emergency shelter solutions and other emergency services in the community.

The best practices that have been demonstrated success include:

- Utilization of partnerships with providers, agencies, community leaders, and many other mainstream entities that interact with people who may be at risk of homelessness;
- Adopting a 'zero discharge into homelessness' philosophy so that housing stability is maintained regardless of exits from systems of care (child protection, hospitals, prisons, etc.).
- Targeting people who are most likely to become homeless based on HIFIS or other data, or other risk factors;
- Performance improvement through constant review of shelter admission data to analyze-who received prevention assistance but still became homeless and people who were not provided with assistance and became homeless; and,
- Providing "just enough" resources to directly resolve a particular household's specific and immediate barriers to getting or keeping housing and to prevent its near-term recurrence.

Eviction advocacy can be helpful in homelessness prevention by helping clients to understand and invoke their rights. This is not necessarily an "anti-landlord" approach but, instead, a practical way to prevent the loss of housing while considering the rights and issues of the household and the landlord.

Outreach

Outreach services are defined as engagement with any individual who requires housing support but is not accessing emergency shelter or other homelessness services at a particular point in time (e.g. living in encampments, cars, abandoned buildings, living with an abusive partner, etc.). This includes individuals who are "sleeping rough" or living in unsuitable and, perhaps, unsafe circumstances. The goal of outreach services is to help people connect with services that can mitigate the risks that results from not having safe and adequate housing with supports. Outreach workers actively approach potential clients on the streets and offer supports related to accommodation and services.

Street outreach workers respond directly and immediately to clients' needs by bringing services to clients. Outreach services engage homeless individuals in locations such as train stations, bus stops, streets, alleys, bridges and overpasses, parks, vacant lots, abandoned buildings and vehicles, wooded areas, riverbanks, and makeshift camps. Outreach is a harm reduction approach that aims to reduce the adverse effects of living outdoors or locations not suitable for human habitation. For example, in the

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22 Stephen Gaetz & Erin Dej. (2017). A New Direction: A Framework for Homelessness Prevention. Toronto: Canadian Observatory on Homelessness Press.

16

VAW sector, outreach workers may meet with clients in a coffee shop, library, etc. Public meetings are a safe way to support women who are experiencing intimate partner violence but still living with their abusers (and can therefore be understood as a form of 'hidden homeless').

Street outreach services in Niagara Region are currently limited to operating Monday to Friday during daylight hours (08:30-16:30). This approach does not consider that people sleeping rough and in other locations not designed for human habitation are vulnerable around the clock. Best practices point to 24/7 outreach services as being the most effective way to make contact with people experiencing homelessness.

The Canadian Mental Health Association (CMHA) in British Columbia provided outreach services to nearly 800 clients. Outreach workers assisted 34% of the clients (272) access housing. Two thirds of the clients were housed in private rental units and 78% were able to maintain their initial housing situation. Similar housing outcomes have been reported by the Streets to Homes outreach team in Toronto and by London CAReS. CMHA Middlesex has successfully integrated outreach services as part of their Housing First team based upon the same five principles as London CAReS:

1. Immediate access to permanent housing with no housing readiness requirement;

2. Consumer choice and self-determination;

3. Recovery orientation;

4. Individualized and client-driven supports; and,

5. Social and community integration.

Emergency Shelter

Traditional, community responses to visible homelessness have been to build more shelters, but more beds in every jurisdiction is not necessarily the answer, either. It depends on the validated need, the system capacity/options, cost, and, whether the outflow of people into transitional or permanent housing from the shelter can be integrated into the system. Building new shelters (or housing them in motels) without identifying the outflow to permanent housing is simply warehousing people.

Niagara Region is both urban and rural and that presents the opportunity to design a system with programs that are tailored to this geographic reality to address homelessness prevention and emergency response when individuals or families lose their housing.

There are evidence-based guidelines to operating effective emergency shelters that have been developed in Canada, the United States and Australia. The National Alliance to End Homelessness (NAEH) and the Canadian Alliance to End Homelessness (CAEH) endorse the following five operational guidelines for emergency shelters:

1. Housing First Approach: Align shelter eligibility criteria and practices with a Housing First approach to that anyone experiencing homelessness can access shelter without prerequisites, make services voluntary and assist people to access permanent housing options as quickly as possible.

2. Safe & Appropriate Diversion: Provide diversion services to find safe and appropriate housing alternatives to entering shelter through problem-solving conversations, identifying community supports and offering "lighter touch" solutions.

3. Immediate & Low Barrier Access: Ensure immediate and easy access to shelter by lowering barriers to entry and staying open 24/7. Eliminate sobriety and other policies that make it difficult to enter shelter, stay in shelter, or access housing and income opportunities. Shelters that require clients to be sober to access services can be life threatening if a client chooses to experience withdrawal without proper health supports or continue using substances that may lead to overdose. Niagara Region does not currently have a 'wet shelter' that goes beyond harm reduction. Staff in wet shelters permit the use of palatable alcohol while monitoring use to prevent unhealthy or lethal levels of use. Wet shelters can help clients be eligible for other emergency, transitional or permanent housing options.

4. Housing Focused, Rapid Exit Services: Focus services in shelter on assisting people to access permanent housing options as quickly as possible.

5. Data to Measure Performance: Measure data on percentage of exits to housing, average length of stay in shelter and returns to homelessness to evaluate the effectiveness of shelter then, continuously improve outcomes.

Housing First is a recovery-oriented approach that draws upon models from the health, mental health and addictions sectors. Housing stability has been proven to assist recovery, especially when combined with the wraparound supports in the form of Intensive Case Management (ICM) and Assertive Community Treatment (ACT) that are the other critical components of Housing First methodology.[23] In 2014, the Mental Health Commission of Canada released its findings from the five cities pilot program called At Home/ Chez Soi. The $110 million project demonstrated that Housing First saved $9,250 per person compared to people who received traditional community services.[24]

Housing First was originally based upon Pathways to Housing in the 90s which led to a very effective program called, Streets to Homes, that was implemented in Toronto in the mid 2000s. Housing First is a best practice that has been adopted as an operational standard in addressing homelessness by the Federal and Provincial Governments and in countries and jurisdictions around the world. Housing First has evolved during the past 25 years and like any evidence-based program, there are variations on the techniques and tools while the principles have remained largely intact.

Housing First is practiced by some of the funded service providers in Niagara Region with varying degrees of success and fidelity to the program principles and practices. Consistent standards for Housing First practices, protocols and tools, especially ICM, will be addressed in the recommendations.

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23   Ana Stefancic et. al., Implementing Housing First in rural areas: pathways Vermont. American Journal of Public Health 103 (2013). S. Tsemberis, I. Gulcur and M. Nakae, Housing First, Consumer Choice, and Harm Reduction for Homeless Individuals with a Dual Diagnosis.

24   See Mental Health Commission of Canada, National At Home/Chez Soi Final Report (Calgary, Alta.: 2014), http://www. mental-healthcommission.ca/English/node/24376.

Ongoing evaluation by staff regarding shelter practices that drift from the intent of the five points is helpful to determine why the failure occurred and how it can be remedied in the future. Are fewer people being turned away? Are people moving into permanent housing at a higher and/or faster rate? Safety is absolute. But, continue to drop the rules that are reactions to one-time incidents or situations that are unlikely to occur again and further isolate people.

Emergency homelessness shelters that are designated for particularly vulnerable populations such as women fleeing gender-based violence (GBV) and youth are critical to create safe refuge for recovery. In Niagara Region, a response to women (including women seeking asylum) experiencing homelessness due to domestic violence and women who are victims of human sex trafficking makes the size of this subpopulation of "VAW" disproportionately high compared to other jurisdictions due to the high volume of cross-border travel and immigration in Niagara Falls and Fort Erie.[25] The YWCA Niagara Region has been actively participating with public health, police and school boards to identify the level of need and helping to design appropriate responses. Shelter staffing is always important and, especially, in shelters designated for women and youth.[26]

The housing and support needs for survivors of human sex trafficking are unique within the VAW sub-population. There is currently a gap in the housing options for these women and a 'safe house' could provide the security, safety and supports that will help them integrate into the community.

Transitional Housing

Transitional housing is an interim step between emergency crisis shelter and permanent housing or permanent supportive housing. The longer-term stay, intensive services and higher level of privacy differentiates transitional housing from emergency shelters. The typical length of stay ranges from three months to 18 months depending on the population being served. It is meant to provide a safe, supportive environment where residents can overcome trauma, begin to address the issues that led to homelessness or kept them homeless, and provide adequate time to rebuild their support network.

The passing of the 2017 Rental Fairness Act (Bill 124) had significant implications for transitional housing programs. For instance, service/participation agreements signed by clients are exempt from the Residential Tenancies Act (2006) for up to four years.

> *Housing First as a person-centred, harm-reduction approach…can in many ways act as a Trojan horse in social policy, stimulating shifts in practice and policy from within and without government towards enhanced integration.*
>
> *Source: Alina Turner, PhD*
> *Beyond Housing First: Essential Elements of a System-Planning Approach to Ending Homelessness.*

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25   Statistics Canada: Almost one in three (32%) incidents of human trafficking between 2009 and 2016 was a violation of the Immigration and Refugee Protection Act offence which targets human trafficking that crosses Canada's international borders.

26   The youth homelessness sub-population can also be complicated in terms of designing appropriate responses. Multiple sources including the Human Rights Campaign, National Alliance to End Homelessness and Canadian Alliance to End Homelessness report that 20-40% of homeless youth are LGBTQ. In addition, there are male and female youth who have been identified as victims of human sex trafficking.

And, importantly, service/participation agreements must set out a process to address disputes between the client and the provider.

Often the length of stay is directly connected to the availability of affordable housing. There are situations when transitional housing is the only option until a path to permanent supportive housing can be confirmed.

The essential "learning" from transitional housing programs is that the length of stay target and range is contingent on the tailoring of services for the clients, goal setting and connection to the clients' support network. This combination helps reduce the length of stay and eases the transition to the next stage of housing.

Permanent Supportive Housing

Permanent Supportive Housing (PSH) combines rental or housing assistance with individualized, flexible and voluntary support services for people with high needs related to physical or mental health, developmental disabilities or substance use. Niagara Region's Homelessness Services provides PSH through Home for Good and Housing First programs.

PSH is a housing option for chronically homeless individuals with high acuity that is indicative of moderate to severe mental illness and co-occurring issues. These clients are often heavy users of services (HUoS) in the community. Usually, PSH units are located in one home or building that could include rooms in a house or several to all units of a building. PSH units could be scattered site units depending upon the acuity level of the individual and the local availability of the supports that are provided through home visits or in a community-based setting.

Homeward Trust Edmonton currently funds six PSH properties that are considered to be the current best practices associated with this housing form, including:

- A recovery orientation to client case planning and goal setting to promote clients' transition to independent living, when possible;
- The operational premise is that the PSH residents are capable of change and progress;
- Supports can include harm reduction principles and practices as well as trauma-informed care;
- Application of evidence-based practices in case management;
- Choice in housing accompanied by voluntary participation in programs and services;
- Staff efforts focus on housing stability, retention and eviction risk mitigation; and,
- Demonstrated cultural competence in service delivery, e.g., Indigenous clients.

The City of Medicine Hat attributes its success in ending chronic homelessness to provision of PSH and best practices. [27] The Cities of Toronto and Vancouver are also experienced and successful providers of permanent supportive housing.[28]

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27 Turner, A. & Rogers, J. (2016). "The First City to End Homelessness. A Case Study of Medicine Hat's Approach to System Planning in a Housing First Context."
28 De Wolff, A. (2008). "We Are Neighbours: The Impact of Supportive Housing on Community, Social, Economic and Attitude Changes". Toronto: Wellesley Institute. http://www.wellesleyinstitute.com/wp content/uploads/2011/11/weareneighbours.pdf.

Transitional housing and permanent supportive housing need to include a social and community integration component that will help clients overcome feelings of isolation that can undermine a stable household.

Niagara Region's Homelessness Services — Analysis

The consultant applied over 30 years of systems theory study and practicum to the review of the Niagara Region homelessness services system. It should be noted that the 2013 review of the system was an excellent touchstone for this study because the review used a reductionist technique to identify and assess the variables, structures and microprocesses in a system that was emerging organically.

This review applied systems theory as a framework for the study and it was encouraging to observe that members of the Region's Homelessness Services team are familiar with this approach. The starting point is to define what a "system" is because that will help us understand how the current Niagara Region homelessness services system currently functions and what changes can be made to better serve clients, e.g., the reason that the system exists. And, it will help answer a question from the funder's perspective: "…how much money needs to be invested (and where) to make the system better?"

The Niagara Region Homelessness Services System (NRHSS) has been in the formative stage of growth for several years as illustrated in *Figure 8*. The formative phase involves both success and failure in attempts to discover the best practices to achieve the system vision and goals. That is why the growth curve is erratic during this first period of time. System 2.0 in Niagara Region will be developed over the next 18 months with integration of the entire homelessness services system in 2023 and beyond System 3.0.

Figure 8

Growth Curve
NRHSS

System 3.0

III
integrative

System 2.0

II
normative

I
formative

2018   TIME   2025

©2014, Whitesell & Company

21
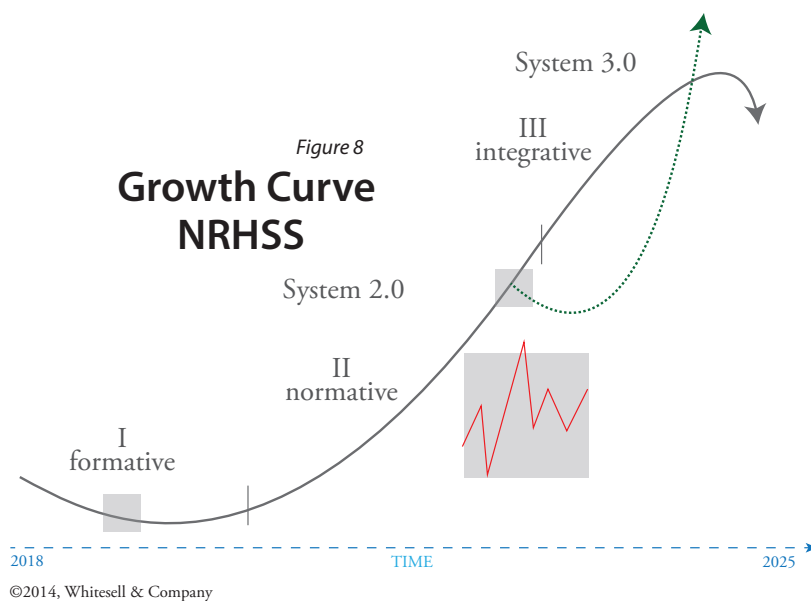
Homelessness Services — 2018

In most jurisdictions in North America, housing and homelessness services' administration are joined together since these major functions manage the entire housing continuum from outreach to emergency shelters to supportive housing to affordable, permanent housing. However, in Niagara the administration of these services is separated between Niagara Region's Homelessness Services and Niagara Regional Housing (NRH).

Homelessness services in Niagara Region are provided through 51 contracts with 22 community agencies. These agencies deliver homelessness prevention services, outreach services, emergency shelter, transitional housing and supportive housing. On April 1, 2018 data from NRH revealed that there were 4,926 households on the social housing waitlist and 17% (842) were considered homeless. In addition to the homeless status applicants on the housing waitlist, there were 226 households with special priority status due to domestic violence and urgent status — people experiencing physical limitations and com-promised health in their current living arrangements. The wait times can only be estimated for house-holds in the queue due to the multiple variables involved including the household status category but the wait time is measured in years and this can exacerbate existing circumstances.

There are clients being served in the various communities who are precariously housed and may not be on the waiting list. For instance, in one of the homelessness services agencies, Community Care of St. Catharines and Thorold, there were an average of 1,647 unique individuals and families accessing housing-related services during a six-month period from April to September 2018 — 275 per month. This data point includes Housing Help services such as housing lists, housing calls, NRH applications, housing appointments, housing searches and calls to shelters regarding availability. The number of people accessing Community Care housing services who were also on the NRH waitlist is unknown. The number of people who had successful housing outcomes is unknown. But, anecdotally, staff report that the frequency of people presenting with complex issues during this period has increased by a minimum of 20%. This requires more staff time and in situations that may exceed the capacity and capabilities of the workers due to the specialized service response required, e.g., serious mental health (SMI), addictions.[29]

Niagara Region's Homelessness Services Division

Niagara Region's Homelessness Services division has assembled a team of dedicated and competent people who have demonstrated through leadership, multiple initiatives and research that they can support service providers while organizing homelessness-related stakeholders in an effort to prevent and end homelessness. The success of the Home For Good program demonstrated that positive housing outcomes can be delivered when there is a singularity of purpose. The next level of system change for Homelessness Services will be to strengthen and leverage the expertise of high-performing service providers as an objective for the development of System 2.0.

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29   The consultant conducted (2) 90-minute "all hands" focus groups with staff at Community Care. The agency provides 21 programs to their clients, including trusteeship services for youth.

The Social Assistance & Employment Opportunities team (SAEO) Homelessness team assists individuals who are experiencing homelessness — or at risk of becoming homeless — with access to emergency sheltering by securing hotel stays. SAEO responds to requests for homelessness supports from community agencies such as corrections, Niagara Health Services and residents. SAEO also assists individuals with the transition from emergency shelter to sustainable housing through financial supports such as the delivery of Housing Stability Benefits, community referrals and individualized case planning.

There is a significant range in the quality and efficacy of the programs and practices among the service providers who form the bulk of the homelessness services system. The implementation of HIFIS 4 will help measure the performance levels of the individual agencies. A systemwide dashboard of key performance indicators (KPIs) focused on outcomes with supporting metadata comprised of the measures and metrics will support a common understanding on a system level of what is working, what needs to improve and where resources need to be invested to improve system performance.

Within this report, 10 recommendations are proposed to support the alignment of the homelessness services system and they are calibrated to an 18 to 24-month timeline for System 2.0. Several of the recommendations are not finite projects and will involve continuous development over a longer period and will go beyond the REOI funding cycle in 2023. The recommendations are based on the premise that the homelessness services system needs to have more influence and direct connection to housing solutions and opportunities that will increase housing stock that meet the needs of the various subpopulations experiencing homelessness in Niagara Region.

Niagara's Housing and Homelessness Action Plan (HHAP)

Niagara's Housing and Homelessness Action Plan (HHAP) has four goals as illustrated in *Figure 9* and they are directly related to the purpose of the homelessness services system. The first two goals point to the only solution for homelessness — housing people permanently. The purpose of the Niagara Region Homelessness Services System is to find homes for people accessing services through any "door" in the system. The homes must be safe, appropriate, adequate, affordable and sustainable. The system capabilities include prevention, outreach, housing and providing support programs that promote good health, wellbeing and independence.

Niagara's Homelessness Services as a System

In Niagara Region, an obvious system limitation is the separation of homelessness related services into two different hierarchical, administrative structures. Structure and context matter to the system's performance capacity.

One of the major, positive changes in Niagara Region since the 2013 homelessness services report has been in the leadership and management of the system.

In the Niagara Region, some of the considerations would be the number of clients being served, the priority clients being served, the services being consumed, the location of the

Figure 9

GOAL 1

House people who do not have a home

GOAL 2

Help people find & retain a home

GOAL 3

Help people find & retain a home

GOAL 4

Build capacity & improve effectiveness of thehousing system
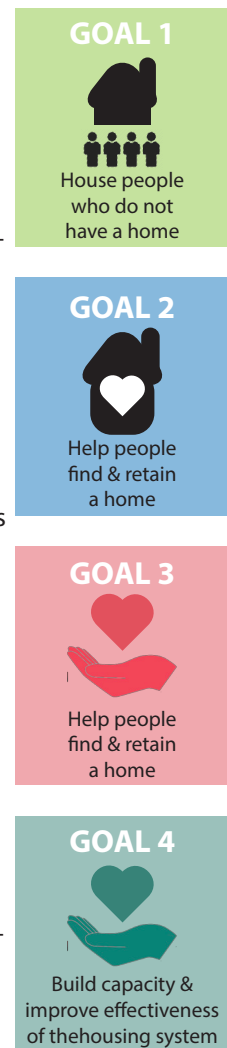
clients, the mental acuity and physical state of clients, availability of affordable housing, transportation, household income, etc.

It's critical to keep the purpose of the system top of mind to leverage its capabilities in delivering positive results. Niagara Region's 2017 Housing and Homelessness Action Plan Update reported 83 households that were placed through Housing First at the same time that there were nearly 5,000 people on the affordable housing waitlist. The rental housing vacancy rate in 2017 was 1.5%.

Is the system operating at maximum capacity? The answer to this question may sound like a hedge but it's both "yes and no" because the system isn't currently designed to respond to the level of need that is evident in Niagara Region. The agencies are doing their best in most cases to serve clients and remain financially viable but, as a system that provides a coordinated and seamless response to client needs, the agencies are rowing a square boat. System capacity will increase significantly when the agencies work collectively to achieve the goals of the overall system as well as the goals attached to their individual mandates.

Will the 13 HHAP goals (May 2018) deliver the intended outcomes? Yes. When the next iteration of the homelessness services system is designed and implemented, these goals are achievable.

What KPIs, metrics and measures will be used to track and evaluate the system's performance? These will be determined through a collaborative process with the service providers based on the design of the new system. Fewer but clearer outcome targets that comprise the operational dashboard of key performance indicators (KPIs) will be combined with greater freedom for service providers to adapt and innovate will help strengthen the homelessness services system in Niagara Region.[30] This includes the understanding among the system partners that poor performance especially from a client perspective will be addressed decisively.

System planning based upon Housing First in Niagara Region requires the "next stage" development of a framework for the delivery of homelessness services. The strategic, purposeful construct will help align the service provider stakeholders based upon their competencies, capabilities and capacity to facilitate their clients' access to stable and sustainable housing.[31] The framework will entail a combination of vertical integration (such as youth-focused agencies) combined with the horizontal integration between and among agencies that has been happening, especially on the frontlines, over the past several years. It is recommended that the framework will be based on systems thinking and modeling.

Determining the optimal number of emergency shelter beds available in Niagara Region combined with the range of people who need to access the beds continues to be a challenge. Shelters are not homes, but they can be the starting point to find permanent housing if the client chooses to accept the

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30   Niagara region currently has a dashboard with KPIs but this information is not common knowledge among the service providers. Many of the service providers have multiple funders and they tend to use the terms KPIs, metrics and measures interchangeably due largely to funder reporting criteria. Appendix C has a brief explanation of the differences in these three terms to help everyone in the system achieve common understanding. There are also examples of both system and program KPIs, metrics and measures that have been aggregated by HomelessHub from multiple jurisdictions.

31   The consultant refers to "stable and sustainable" housing with the caveat that Housing First housing in whatever form must be safe, affordable, adequate and accessible. Also, the "next stage" reference is acknowledgement of the fact that Niagara region has been funding service providers with the intention of developing an effective homelessness services system.

service. All emergency shelters that are funded by Niagara Region should actively provide services that can be connected directly or by a few degrees of supportive separation to the purpose of the system: to find safe, permanent, adequate, appropriate, affordable and sustainable homes for clients. Band-aids are great for small wounds but they don't belong in a homelessness services system. Every assessment, meal, ID application, transportation voucher, clothing request, etc. needs to be connected to a discussion or a path to permanent housing.

The question about the optimal number of shelter beds is still open and Niagara Region has launched a two-year Niagara Falls Out of the Cold program to better understand the level of need that will inform decision making regarding shelter capacity. A report that was submitted by Councillor Wayne Campbell and Dianne Munro in February 2018 concluded that opening a shelter for men over 30 was not a solution for Niagara Falls at this time.

Everyone interviewed in the Campbell-Munro report did agree, however, that the solution to home-less-ness is permanent, safe, affordable and adequate housing. *Figure 10 on the following page* is an illustration of Niagara Region's currently-funded homelessness services, separated by service area: Outreach, Prevention & Diversion, Emergency Shelter and Supportive Housing, and developed by the Region's Homelessness Service's team. It is not a system profile, but it is an excellent categorization and representation of the current system elements.

Several of the Regionally-funded shelters are evolving and improving their services based on experience, research and collaboration with other shelters. They are also appreciative of the Region's training, support and group meetings. At the same time, some of the emergency shelter operators or programs could benefit from an independent review of their policies, practices, protocols and service platforms in an effort to identify opportunities for improvement to better respond to sustained and, at times, over-whelming levels of critical client needs (see Recommendation #6). The aphorism to slow down so you can go faster fits here.

The Niagara Region's housing and homelessness services system as a standalone is an anomaly in Ontario based on its structure. Niagara Regional Housing (NRH) is currently a distinct entity governed by its own Board and funded by Niagara Region. NRH also has a Community Resource Unit and Housing Programs Division as part of its structure. Certainly, there is ample evidence of internal cooperation between these two entities for administration of services but, through the lens of a person or family accessing the housing and homelessness system, it's far from straightforward and that can result in added stress.

The consultant agrees with the rationale and recommendations proposed in the Hybrid Model of social housing service delivery. It is a classic change management challenge but the projected timeline for the transition is reasonable based on the consultant's experience and the cost/benefit analysis makes sense. Special attention will be required to the communication strategy as well as in maintaining client service levels. The transition needs to be invisible and seamless from the client perspective.

Figure 10

Outreach

Niagara Region

Social Assistance & Employment Opportunities [Hostel Workers]

The Salvation Army St. Catharines

START ME UP NIAGARA
Working Together... Moving Forward

Prevention & Diversion

Niagara Emergency Energy Fund
- The Salvation Army Fort Erie
- Project SHARE
- Port Cares
- The Hope Centre
- Community Care of West Niagara
- Community Care St. Catharines & Thorold

Housing Stability Benefit
- Niagara Region's Social Assistance & Employment Opportunities

Housing Help
- Community Care St. Catharines & Thorold
- Community Care of West Niagara
- The Hope Centre
- Port Cares
- Project SHARE
- The Salvation Army Fort Erie
- Start Me Up Niagara

Other
- Community Addiction Services of Niagara
- Community Care St. Catharines & Thorold
- The Hope Centre
- Housing Help Centre Hamilton & Area
- Niagara Furniture Bank
- Port Cares
- The RAFT -Youth Reconnect, -Eternal Routes

Emergency Shelter

- Boys & Girls Club of Niagara
- Casa El Norte
- Hope Centre
- Matthew House
- Project Share*
- The RAFT
- The Salvation Army Booth Centre
- Southridge
- Start Me Up Niagara*
- YWCA Niagara

Seasonal Out of the Cold Programs

Supportive Housing

Home for Good
- Gateway Residential & Community Support Services
- Hope Centre
- Start Me Up Niagara

Housing First
- Bethlehem Housing & Support Services
- Gateway Residential & Community Support Services
- Hope Centre
- Southridge
- Start Me Up Niagara
- The RAFT
- The Salvation Army Booth Centre

Transitional Housing
- Bethlehem Housing & Support Services
- Boys & Girls Club of Niagara
- CMHA Niagara
- Gateway Residential & Community Support Services
- Hope Centre
- Matthew House
- Port Cares
- The RAFT
- The Salvation Army Booth Centre
- Southridge
- Start Me Up Niagara
- West Niagara Affordable Housing
- Youth Resources Niagara
- YWCA Niagara

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Discussion of Niagara System Issues & Priorities

The following table summarizes the trending comments that were gathered by the consultant during

Perspectives	Key Comments
Homelessness Services Users	• The consultant conducted 47 five-minute interviews with users of homelessness services and 29 (61%) had no fixed address, that is sleeping rough, couch surfing or not paying rent. • Clients were generally not critical of the quality of services being provided or the staff even though the majority were frustrated by the long wait times to access services. • When asked about their opinion of the homelessness services system, clients responded that staff want to help them but there is too much paperwork and not much action. • Clients see the agency as a place to socialize and stay current with what's happening in the neighbourhood. • Most clients expressed little hope about their personal situation improving in 2019. • The majority of clients did not think that permanent housing was a reasonable goal, e.g., no job, little income, mental health challenges such as drug/alcohol use, pets, etc.
Homelessness Services Providers	• Dialogue among service providers has been occurring and has been improving steadily over the past few years — facilitated by Region staff at times. This alone has contributed to better understanding about different approaches and experiences when working with people experiencing homelessness. • The current homelessness services system has been improving significantly over the past two years. This was reported unanimously by the service providers who were interviewed for this study. The two reasons cited for the improvement were related to consistent communication and information sharing by the Region's Homelessness Services staff. • Providers articulated that the Region needs to shift from managing homelessness to solving homelessness. • Providers felt that the current system lacks the overall number of shelter beds and the capacity to provide emergency shelter to the range of subpopulations that comprise the total number of people experiencing homelessness. This was especially true for survivors of human sex trafficking. • Most providers stated that they feel unable to address need for affordable housing for clients and accept as reality that housing people who are homeless when there is a lack of affordable permanent housing is an insurmountable obstacle. Homeless service providers want a more direct connection between the work that they do and securing permanent housing for their clients. • Service providers were encouraged by the Region "reaching out more" for feedback and input, especially with the development of the HHAP also known as A Home For All. • Providers discussed how staff turnover impacts capacity and quality of services as more experienced staff tend to carry a disproportionate amount of the client workload leading, in some cases, to burnout — but they stay for the income. • There were four comments from service providers about the "fairness" of the last round of REOIs but that their trust in the Region has been increasing — a paradox.

Perspectives	Key Comments
System Planners	• The major observation from system planners was that there was a lack of integration of homelessness services, homelessness support services such as health, mental health, addictions. The lack of services integration was directly connected to the availability of affordable housing. • The consultant heard "there is no homelessness system" on several occasions and almost always with the caveat that there has been significant progress in the past two to three years. • There was a healthy degree of skepticism about the homelessness services review leading to improvements in client services and outcomes.

Key Points from the May 22 Discussion with Service Providers

On May 22, 2018 a half-day strategy workshop was facilitated by the consultant with 18 service provider representatives. The focus was the homelessness services system. The purpose was to identify and rank the issues impacting system performance. The participants identified and defined seven (7) priorities that were determined through a voting process and the results are displayed in figure 11.32 The highest-ranking issue was to reach consensus regarding a "shared vision" of the homelessness services system across all stakeholders. Some of the defining points for this issue included:

- Is the system functioning as a system?

- Shared measures, metrics and key performance indicators

- Define "success" metrics (when the system is operating as intended)

- Funding needs to be calibrated to the level of needs in the region

Figure 11

Service Providers
Strategic Opportunity Grid
May 22, 2018

A—Shared Vision
B—Appropriate Supports
C—Urban Rural Supports
D—Diversity of Permanent Housing Options
E—System Access
F—Shelter Beds & Capacity
G—Prevention of Homelessness
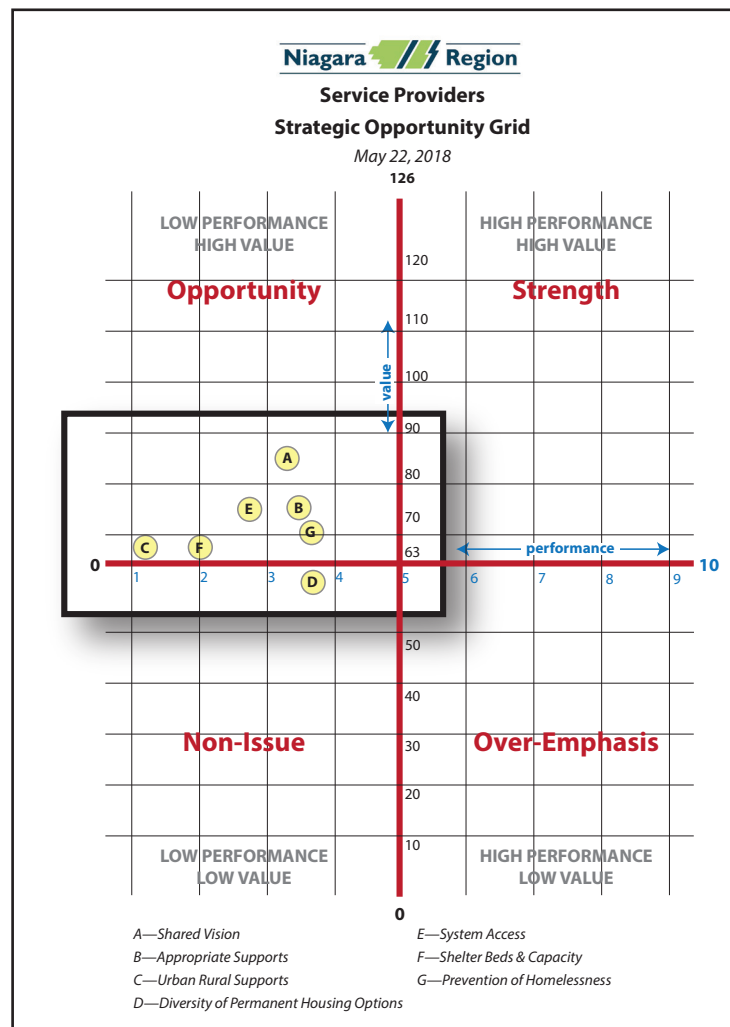
32 The seven (7) issues are plotted on four quadrants. The SOG and definitions can be found in Appendix B.

An example of a shared vision was mentioned earlier in this report and comes from the Government of Alberta's plan to end homelessness in the province: no Albertan without a home for longer than 21 days. From that reference point, the vision for Niagara's system can be described in terms that address all of the other six issues that were identified: funding levels, the number of shelter beds, supports required, transportation that deals with the urban/rural realities, permanent housing form options, system access and how the system helps prevent homelessness. The service providers all agreed that the Region is currently managing homelessness as opposed to ending homelessness. The end of homelessness begins with a shared vision of the system.

In addition to a shared vision for the system, another issue that emerged was the Diversity of Permanent Housing Options that is complicated by the overall lack of permanent, affordable housing. This issue was ranked below the other six because it's an accepted reality that housing people experiencing homelessness in Niagara Region is increasingly difficult to the point of being an insurmountable obstacle.

Shelters were operating at 108% capacity at the time of this report and there were 50-60 evictions in process from social housing. But there are some "green shoots" appearing.[33] There are 17 more Housing First units becoming available in March 2019 and a Landlord Engagement Coordinator has been engaged to help develop landlord relationships in the Region. Bethlehem Housing and Support Services has a new residential building planned that will add 126 affordable units. The Region is exploring alternate housing forms, including congregate living that will add housing capacity to the system. Also, similar to other municipalities experiencing extremely low vacancy rates, the focus of housing help services will be to support renters as well as to recruit and retain landlords to prevent and end homelessness.

The current Landlord Engagement pilot (through the Housing Help Centre) and its positive outcomes securing private market units and connecting clients within Housing First and Home for Good programs could be further enhanced. The pilot could support diversion efforts for those precariously housed, expand landlord engagement through the development of landlord-specific resources and toolkits and through the creation of tenant self-advocacy guides and education materials regarding housing rights.

St. Catharines has one of the highest rates of affordable housing need in Niagara Region and the wait for a one-bedroom unit can be as long as 12 years. In 2017, through the Governments of Canada and On- tario and the Investment in Affordable Housing Agreement (IAH), 161 more units of affordable housing were added to Niagara Region inventory in three cities.[34]

The consultant identified another example of ideas and initiatives that are fueling an optimistic view about youth housing in Niagara Region. Youth Resources Niagara and The RAFT have a coordinated approach for providing safe shelter and supports for youth with the goal of helping their clients become self-sustaining in the mainstream community. How We Can is the motto that underpins their service approach by providing a "light hand of guidance and support."[35]

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33   The term had its original connection to the environmentalist lobby in West Germany during the 1970s. British Conservative MP Norman Lamont introduced the phrase "green shoots of recovery" in relation to the emergence of Britain from the 1991 recession.

34   CMHC reported the following: 527 Carlton Street: (64) one-bedroom; (8) 2-bedroom and 13 accessible units | Birchwood Place, 235 Fitch Street Welland – 67 units | Gateway Residential & Community Support Services, 4750 Huron Street – (9) units

35   bit.ly/YRN_MikeTaylor_Interview

One of the issues discussed during the service providers meeting was the overall number of shelter beds and the capacity of the system to provide emergency shelter to the range of subpopulations that comprise the total number of people experiencing homelessness. The ideal homelessness system would result in every individual and family being safe by having shelter, transitional housing or permanent housing in Niagara Region. Niagara's second point-in-time count concluded that at least 625 people were experiencing homelessness.[36] In addition to homeless enumeration, a second goal of the point-in-time count was to gather information on the demographics, experience and service needs of Niagara's homeless population, through surveys. In total, 408 people completed surveys, the majority of whom (226) stated that they were staying in an emergency or domestic violence shelter or at Safe Beds on the night of the count. Over the past year, 55% of all respondents had been homeless 6 or more months (i.e., chronically homeless).

The next PIT Count needs to include people with no fixed address who are sheltered in hospitals, mental health facilities, jails or are on remand without a permanent address on record. The 2018 PIT Count did highlight, through the detailed survey, the number of people who visited emergency rooms or were involved with police or the justice system.

Many homelessness service providers in Niagara function on the economic premise of scarcity, e.g., if we just had more funding, we could do more for our clients. Without program evaluation and outcomes analysis, the injection of more money into ineffective services will not make them better. It's time to create a baseline reference for performance and embed evaluation into all programs with efficient data tracking.

The current homelessness services system has been improving significantly over the past two years. This was reported unanimously by the service providers who were interviewed for this study. The two reasons cited for the improvement were also consistent — communication and sharing information.

The seven issues and priorities from the service providers meeting were discussed and expanded during the interviews that were conducted for this report. Most participants thought that the Region's Homelessness Services staff has earned enough trust to pro-vide more direction to the ongoing development of the system. Several people mentioned that the system is not integrated to a level where it is reliable and functional for clients or service partners. The previous REOI process was considered "fair" by most but the service providers would appreciate more direction about what the Region wants from the next round of REOI submissions in 2020 in the context of the homelessness services system (e.g., shared vision).

Joint REOI submissions from two or more service providers could result in added synergy and creativity as well as improving the return on investment via successful client outcomes. Several of the service providers were open to the idea of this concept and approach.

" Desperately looking for a place for March first were a young responsible couple looking for a 1-bedroom apartment in Welland. Have to move. Landlord is moving also. We're still in school and no one wants to rent to us because we're too young. Please don't judge us because of other young people don't know how to behave. We're quiet and just want a good future. Please call. "

Posted in housing section of
Niagara Mobile Outreach

" I'm in desperate need of a place - two-bedroom by March 15th at the latest or my family could possibly be homeless - any help will do right now my budget for it is 1100 all-inclusive though and that's the max amount I'm starting to get very worried at this point in time because I cannot find a place any help would be grateful thank you "

Posted in housing section of Niagara Mobile
Outreach; the average market rent for
2-bedroom apartment in Niagara region

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36 The Point-in-Time Count was conducted on March 27, 2018. All PIT Counts underestimate the actual number of people experiencing homelessness. There were 465 people counted in the 2016 PIT Count– 34% increase in two years.

Recommendations

This section of the report represents the distillation of the information that was gathered, curated and analyzed during the review process. The recommendations will be implemented with the understanding that the impact of the homelessness experience is always traumatic but the trauma manifests differently in its impact on different sub-populations such as families, women, veterans, single men, victims of sex trafficking, youth, LGBTQ2, Indigenous and immigrants. Mental health challenges and/or addictions often accompany the experience of homelessness so having psychiatric and health professionals on the frontline of homelessness service delivery contributes to positive client outcomes.

Our understanding of homelessness is not limited to identifying the various sub-populations. Homelessness is more nuanced than categorizing people. For instance, we acknowledge that the needs of women experiencing homelessness due to gender-based violence is different than a single woman with a family experiencing homelessness due to poverty. Similarly, the needs of a transgender youth being ejected from the family home is different than a youth with no fixed address who is released into the community from the justice system.

Housing will always be the solution to homelessness. But the supports that people need to maintain and sustain their housing will vary because homelessness is a different experience across the sub-populations. We need to have tailored responses to the multi-faceted experience of homelessness. That is why the needs of the different sub-populations will be layered over all of the recommendations during the development of System 2.0 with emphasis on including their voices in the process.

The following 10 recommendations are the result of the homelessness services system review.

1.   Clarify the system vision and mission grounded in Housing First philosophy.

The homelessness services system needs to be more clearly articulated so that all stakeholders share an understanding about the goals of the system and their individual and collective roles in achieving the goals. The ultimate focus of all activities in the system will be through the lens of ending homelessness in alignment with Housing First philosophy, principles and practices.

2.   Capture all system components through a system mapping process.

The most important recommendation is the instruction to conduct a system mapping event for all stakeholders. The purpose of the event will be to capture "all of the moving parts" of the homelessness services system using software such as Stella Architect®.[37] This is a disciplined way to model and understand complex, dynamic relationships such as housing and homelessness. It enables people to make better choices and avoid unintended consequences. This approach will help people to visualize the interdependent components that are involved in the homelessness services system, calibrate the inputs with available data and be able to identify the leverage points for effective intervention and to enhance client outcomes. Figure 12 illustrates a Housing Supply Model using Stella Architect®.

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37   bit.ly/Stella_Architect

This recommendation will involve as many as (4) 3-hour events or (2) days. The visioning exercise will reveal not only a representation about how the system operates today but also how the stakeholders in Niagara Region need it to operate to achieve the goals and objectives attached to the system. This approach will help reduce wasted efforts and resources no matter how well intentioned and reinforce the alignment of services and programs.

The next iteration of the Niagara Region homelessness services system 2.0 will require clearly articulated mechanisms that connect to other key public systems and services, including public health, justice, child intervention, immigration/refugee, gender-based violence, LGBTQ2, poverty reduction, mental health and addictions. Capacity gaps and duplication of services can be identified when a complete rendering of the system is achieved. At the operational level, the system mapping can capture differences in such important service approaches such as eligibility criteria, length of stay in shelters or transitional housing, referral processes, data management and performance standards.

Niagara Region combines rural and urban challenges and the system needs to address the challenge of connecting all service providers and programs, regardless of location in the region. The entire system can be reoriented to a Housing First approach.

3. Implement the System 2.0 model for program and service delivery.

The next level of system change for Homelessness Services will be to leverage the expertise of high-performing service providers that will become the foundation for the System 2.0 model. The system design will be the product of a collaborative process with homelessness services stake-holders and will be accompanied by performance targets, key performance indicators, metrics and measures. System 2.0 will include the entire "reach" of the services continuum in both rural and urban settings while striving to reduce distance — figurative and literal as a barrier to services access.

4. Strengthen Key Components of System 2.0 with Outreach, Housing Help and Housing First programs/services as priorities.

In an effort to improve client service and outcomes, it is important to strengthen key components of the homelessness services system. The consultant recommends that organization and program reviews should be conducted with agencies that have high client volume and broad service offerings. This will ensure that program integrity and outcomes related to outreach, housing and housing stability are rein-forced. A review of outreach and housing help can use the highly successful, award-winning London CAReS model as a reference point. Enhanced staff training in Housing First with accreditation will also contribute to strengthening the system.

Outreach needs to be linked to coordinated entry into the system in System 2.0. This will involve the implementation of a common assessment tool and by-name list.

Strong outreach or street engagement services include components such as:

1. Seasoned staff with expertise working with clients with high acuity;
2. Ensuring engagement with clients is planned, strategic and housing focused, and,
3. A balanced approach that involves engagement with clients during daytime, evening and early morning hours — 24/7 outreach.

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5. *Develop standards and key performance indicators for each program/service area: Outreach, Prevention & Diversion, Emergency Shelter, Transitional Housing and Permanent Supportive Housing.*

Standardize, support and sustain Housing First practices through regular staff training and auditing. This can be done through the further development of resources such as tool kits, tip sheets, webinars, conferences and direct support. Without consistent engagement with frontline staff and supervisors, the uptake and implementation of best practices by new staff will be limited while skills can erode over time.

Training will have a long-term impact on the quality and efficacy of System 2.0 by recruiting qualified staff and managers.

There is a range of interpretations across the service providers in Niagara Region about Housing First principles and how it works in practice. Currently, the fidelity to the Housing First approach is variable across the agencies in the system. Housing First is a philosophy, a set of principles, a methodology and tools. An individual or family experiencing homelessness does not have to qualify or meet specific criteria to be housed. But, the practical component of Housing First is the intensive case management (ICM) that ensures that a new household receives wraparound supports so that people can be successfully housed over time and, eventually, sustain their tenancy without supports.

6. *Improve contract management and performance measurement, including continuous improvement.*

Once the system mapping of 2.0 has been completed, the Region can work towards establishing and monitoring service standards and the impact of programs across the system, especially with priority populations. Sample indicators would include shelter occupancy/conditions, length of stay, destinations upon exiting shelter, case management practices, recidivism, rehousing rates, income, self-sufficiency, acuity and interaction with public systems. The Plan, Do, Check, Act (PDCA) cycle of continuous improvement will help combine quantitative and qualitative factors that contribute to effectiveness.

Using the Six Sigma model of graduated knowledge and skill levels, Regional staff can design a syllabus for homelessness and housing services training to ensure quality standards, learning goals and system capacity. The Region can certify people for each level as they master the theories, techniques and tools associated with their frontline work.[38] The syllabus can be populated from approved content from sources such as Homeless Hub, Canadian Alliance to End Homelessness, National Alliance to End Homelessness, etc.

This training should have an additional focus on mental health, addictions, stages of change, communication skills, first aid, overdose protocols/treatment and trauma. The courses can be a combination of in-class and on- line instructional modalities. There have been recommendations from the federal Advisory Committee on Homelessness to develop national guidelines and an accreditation process for Housing First and this recommendation is a significant step in that direction.

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38 Niagara region's Internal Controls and Organizational Performance (ICOP) department has Six Sigma Black Belt capability. Homelessness Services has already tapped ICOP expertise in 2018 for yellow belt training for homelessness staff (Action Plan Advisor, Homelessness Contracts Administrator) and for assistance with the 5-year review of the HHAP and new logic model.

7. *Work to understand the depth of need related to mental health and addictions, and their impacts on the system, in order to improve client access to available health services and supports.*

The Region should continue to work towards standardizing protocols and data collection when working with the same clients across multiple agencies (e.g., there are five agencies in the mental health space, including Niagara Region's Public Health). Providers should maintain their focus on Housing First in all client interactions with consistent use of the SPDAT assessment process and HIFIS 4.

Housing First is a proven methodology but it is not effective with all clients, particularly those who are experiencing clinical-level, serious mental illness (SMI) such as — but not limited to — schizophrenia, schizoaffective disorder, manic depressive disorder and autism. Psychiatric nurse practitioners who meet clients where they are in the community could expedite diagnoses, recommend appropriate treatment and help sustain housing for clients experiencing SMI. Niagara Region frontline staff need to be included in the development of System 2.0.

Mental health includes the negative impacts resulting from social isolation, stigma and exclusion that often accompanies the homelessness experience.

8. *Improve decision-making through enhanced use of technology, communication and tracking.*

The next iteration of the system should involve increasing the use and integration of technology for homelessness supports, communication, KPIs, metrics/measures tracking and assistance with diversion. The goal is to determine the impact of the homelessness services system to determine the "state" of homelessness in the region and to improve decision making at the program and system levels. The alignment of data collection, reporting, intake, assessment, referrals will enable coordinated service delivery.

a. 211 is administered by INCommunities for the Central South Region — formerly Information Niagara — and is designed to connect people in Niagara with community services. This database driven resource can provide eligibility guidelines for shelters but the operators have no access to information about shelter bed availability. The combination of eligibility, available beds and connections to transportation services would help enhance this service channel.[39] Consideration should be made to designate a 'lead' shelter provider to centralize access to all available bed spaces in the Region.

b. Medimap® is an online service designed to provide people with wait times for health clinics. The organization is exploring opportunities to expand into the mental health and addictions sector.[40] People experiencing homelessness are four times more likely than the general population to also experience severe mental illness — 25% versus 6%, respectively.[41] Medimap®

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39 211 flips over to Toronto in the evenings when it could be argued that client needs are higher. The consultant called and confirmed that the Toronto operators were limited in their knowledge about the Niagara service providers beyond the shelter descriptions and locations.

40 Medimap® or similar technology will reinforce the Home For Good program, specifically, and the homeless services system overall when clients have improved access to diagnoses, treatment and housing. The consultant has been in touch with the B.C. based owners of Medimap® and they would entertain conducting a pilot in Niagara region as proof of concept for the sector.

41   bit.ly/NIMH_Homelessness. National Institute of Mental Health. Homelessness counts such as those conducted by the City of Toronto report that more than 40% of people experiencing homelessness have had mental health diagnoses.

has the potential of connecting agencies and organizations such as CMHA, CAMH, Hospitals, Shelters, Food Banks, etc.

c. Ontario Telemedicine Network (OTN) for telepsychiatry services that can help with diagnoses and diversion to appropriate shelters and supports.

d. Niagara Mobile Outreach – nmop.ca has significant potential and demonstrated success to direct people to housing solutions, provide locations for food distribution, locate shelters, advocacy, scheduled stops for basic needs, etc. The service needs to be 'real time' for the housing information via Kijiji and synchronize with other information platforms.[42]

e. Interagency communication systems, especially with frontline staff, can help reduce the time required to access homelessness services. There are a multitude of secure apps available with Slack having the best track record for reliability and features. Slack can help facilitate intra-agency communication among team members, as well.

f. Develop a Mobile App and/or SaaS website. Every informational element of the homelessness to housing continuum can be captured through a mobile app or Software as a Service (SaaS). Information services and access to services is currently fragmented with the caveat that there is a plethora of high-quality information readily available if you know where to look.[43]

9. *Improve staff capacity through ongoing, service provider training.*

The Region should seek to provide ongoing HIFIS 4 and SPDAT training. The implementation of a homelessness management information system has been partially achieved with the introduction of HIFIS 4 — Homeless Individual and Family Information System. The web-based system has currently documented 50% (1,552) people who are experiencing are considered active users of the system. This effort will align data collection, reporting, intake, assessment and referrals to enable the next level of coordinated service delivery in the Region with a focus on capacity building. Additional work needs to be done with the Violence Against Women (GBV, IPV, Human Sex Trafficking) sector to collect statistics and create a more complete picture of how homelessness impacts women and children. New tools need to be integrated into HIFIS for population-specific dynamics with respect to Indigenous Peoples, youth and women.

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42 Niagara Mobile Outreach features the following services:
-Provide evening Mobile Outreach services in the communities of St. Catharines, Grimsby, Beamsville, Niagara Falls, Fort Erie, Welland, Port Colborne six nights per week at regular stops.
-Mobile Outreach will be staffed with a Community Outreach Worker who will engage individuals, build r42 apport and complete rapid assessments to determine immediate needs
-Referrals for emergency shelter will be made and transportation provided, if needed, as well as to other community services for follow-up care and housing supports
-Provision of basic needs (food, sleeping bags, hats, gloves, etc)
-Advocacy and follow-up for all referrals
43 Candace Faber provides a thorough review of why homelessness apps are not a great idea. The consultant is presenting the app as an additional information channel once the other communication platforms are current. bit.ly/HomelessnessApps_Ar-mgument

Currently, the Service Prioritization Decision Assistance Tool (SPDAT) has been integrated into HIFIS 4. Service prioritization is based upon measuring and responding to the acuity of people accessing services, especially those with mental health and co-occurring issues.[44] Therefore, ongoing HIFIS 4 and SPDAT training needs to be offered by qualified staff to offset the reality of high staff turnover in this sector and to maintain data integrity and consistency.

Frontline homelessness services workers require a range of skills to serve their clients, including (but not limited to): harm reduction, de-escalation techniques, mental health first-aid, motivational interviewing, advanced first-aid, CPR, health and safety, crisis management, resiliency and self-care and trauma-informed service delivery.

10. Increase affordable housing stock and strengthen the linkages between homelessness services and housing.

The Hybrid Model proposed within the Alternate Service Delivery (ASD) review of Niagara Region Housing and the Region's existing homelessness services should be implemented.[45]

Through the Home For Good program, the Region engaged the Housing Help Centre to help build landlord relationships while identifying and facilitating affordable housing options in a market that has 1.5% vacancy. The extremely low vacancy rate provides an opportunity for landlords to increase rents – sometimes, in the double digits. Those two facts make it seem like a mission impossible for the housing worker. Complicating matters is the fact that several agencies are speaking to the same landlords on behalf of their clients.[46] The RentSmart Ontario program is active in Niagara Region. The program was designed to increase successful tenancies by educating landlords and potential tenants about how that goal can be achieved. An evaluation of the program demonstrated its effectiveness.[47]

Niagara Region has been doing well finding ways to deal with a constrained housing market. In some ways, however, closing the gap between housing availability and the need for housing is frustrating. The 2018 point-in-time count used a more robust methodology compared to previous years with searches conducted in remote and hard to access locations as well as mobilizing a larger group of volunteers to conduct the count.[48] Shelter capacity was 117% at the time of the 2018 count compared to 82% during the evening of the previous PIT Count.

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44 People experiencing high acuity and stress may discount the severity of their symptoms or "low-ball" their involvement with substances. It is important for frontline workers to conduct an informal conversation with their client to determine their background narrative before conducting the SPDAT. That will help the client feel more comfortable about describing their situation and help make the results (and subsequent service decisions) more appropriate.

45 The ASD model developed and recommended by Ernst & Young was presented to the Committee of the Whole on July 19, 2018 and deferred until after the October 22 election. Whitesell & Company originally leaned towards recommending the current, separate NRH structure including dissolution of the NRH Board to be consistent with other jurisdictions in Ontario and to improve service delivery for both housing and homelessness services. Following a review of the ASD recommendation, it makes sense to implement this level of change as a first step and it is less costly and disruptive while allowing time to focus on taking the homelessness services system to the next level of performance.

46 One of the service providers used an African aphorism to describe the lack of affordable housing: "…once the watering hole gets smaller, the animals look at each other differently." The housing worker is managing the competition among service providers at the same time as trying to coordinate the landlord relationships.

47 The RentSmart Ontario program (www.rentsmartontario.ca) is funded by the Government of Canada, Homelessness Partnering Strategy and the Ontario Trillium Foundation. An independent program evaluation reported that 86% of tenants said that the program has helped them keep their housing. As well, 66% of tenants who received their RentSmart certificates used the document when applying to a landlord for rental housing, and, 70% of those tenants said that the certificate directly helped them to acquire housing.

48 It's important to note, once again, that all PIT Counts are under-counts. The count methodology is adjusted over time to identify people who need housing but the counts are still only indicators of the actual level of need.

The management and coordination of all housing workers in the Region would help strengthen land-lord relationships. A coordinated housing approach and alignment of messaging with land- lords and the public will result in increased housing placements. Also, the RentSmart program can be integrated into Housing First engagements to help tenants and landlords work together for successful tenancies.

The Region has encouraged secondary suites but other housing forms need to be considered such as single residence occupancy (SRO) units that also come in different forms. For instance, The Buffalo Apartments in Red Deer, Alberta rent their 39 apartments to Housing First clients with 24/7 onsite support from CMHA workers. Another example of SROs comes from British Columbia. The Nuxalk First Nation in Bella Coola built four, 338 square foot tiny homes with a fifth unit for shared laundry and utilities.[49] The Government of British Columbia injected $66 million for the build of 600 temporary, modular units as transition housing.[50] Co-living, housing solutions are also being promoted in Vancouver where the rental market, like Toronto, is beyond the reach of most people.

One of the opportunities for the new homelessness services system as identified by the service provid-ers was the "Diversity of Permanent Housing Options." There were several defining points that impact the affordable housing inventory, including:

   a. Determine the 'exit' strategies for clients from shelter, supportive housing and transitional housing;
   b. Re-purpose existing facilities;[51]
   c. Advocate for resetting the housing formula for ODSP and OW – client subsidies are not in pace with the rental market; and,
   d. Implement incentives for housing builders and contractors.

Figure 12

Housing Supply Model

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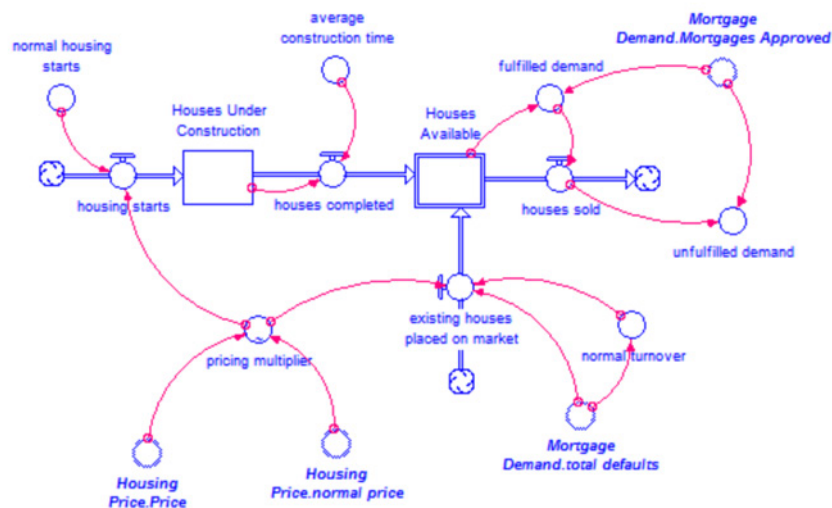
49 The cost of $50,000 per unit also includes a small galley kitchen, bedroom, open living area and a bathroom with standup shower. Solar panels on each of the units provides supplemental power. As a comparative, the average cost to build a Habitat for Humanity home for a family is $200,000.

50 The right supply of housing, with the right supports for the city's lower income and homeless residents, continues to be a top priority. Temporary, modular housing provides lower-income and homeless residents with an opportunity to be placed direct-ly into housing with supportive services until they can transition to longer-term housing solutions. bit.ly/TemporaryModular-p Housing_Vancouver

51 In Finland, the country has embraced Housing First tenets to the point where they have eliminated shelters by repurposing the shelters into supported housing on a path to permanent housing. bit.ly/Finland_SolvesHomelessness_2017. The consult-i ant could expand the recommendation into increasing land banking, buying vacant buildings or under-valued buildings to be repurposed into housing, etc. and those initiatives could be considered by coordinated efforts between Housing (NRH) and the Homelessness Services System.

Consolidation & Integration of Homelessness Services

In 2020, the next round of Requests for Expression of Interest (REOI) will be issued by the Region. This will set the stage for the emergence of System 3.0 and will be reinforced by the 2023 funding cycle. The aim for System 3.0 will be to consolidate and integrate homelessness services to provide more efficient client services based upon the lessons learned during System 2.0 months and the system KPIs, metrics and measures.

Recommendations & Implementation Timeline

Recommendations

1. Clarify the system vision and mission grounded in Housing First philosophy.
2. Capture all system components through a system mapping process.
3. Implement the System 2.0 model for program and services delivery.
4. Strengthen Key Components of System 2.0. Outreach, Housing Help and Housing First programs/services as priorities.
5. Develop standards and key performance indicators for each program/service area:
   Outreach, Prevention & Diversion, Emergency Shelter, Transitional Housing and Permanent Supportive Housing.
6. Improve contract management and performance measurement, including continuous improvement.
7. Work to understand the depth of need related to mental health and addictions, and their impacts.
   on the system, in order to improve client access to available health services and supports.
8. Improve decision-making through enhanced technology, communication and tracking.
9. Improve staff capacity through ongoing, service provider training.
10. Increase affordable housing stock and strengthen the linkages between homelessness services and housing.

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Conclusion

Complexity, ambiguity and uncertainty have the capacity to absorb large amounts of resources in systems that are comprised of disparate elements or services. Capturing, measuring and modeling these elements is the first major step towards better understanding the system, eliminating waste and improving client outcomes. This process will also harness the under-utilized system energy.

Systems practice is different from command and control. The priority is to improve overall system performance as determined by the end-users of the system as opposed to the municipality or other levels of government. To improve the homelessness services system, the engagement with agencies and other stakeholders needs to be based upon listening, co-researching and implementing changes with evaluation and reflection as part of the overall system design. System 2.0 will help facilitate, implement and improve the homelessness services system.

The components of the Niagara Region's homelessness services system are evolving and adapting to funding resources from multiple sources. At this point, categorizing the system as "messy" is certainly ac-curate because it is based on human activities and is reacting to dynamic changes in the environment. Every agency for itself cannot deal with the scale of homelessness or the complexity of needs in the region. System alignment and shared goals can result in purposeful actions, consistent service quality and better client outcomes.

The policies guiding Niagara Region's housing and homelessness functions should have minimum specifications that establish the direction of the change clearly, set boundaries for the implementation strategy and allocate resources for a sufficiently long period of time to determine impacts. Niagara Region has improved homelessness services communication significantly in the past two years through service provider meetings associated with the Housing and Homelessness Action Plan, Home For Good, Housing First, etc.

Implementation strategy boundaries are established by the subset of systems that are represented by the service providers. Determining service provider funding through the REOI process and extending the timeline for funding streams has improved stability in the emerging system. Also, there has been encouragement to join forces for funding submissions within and outside of the Region with full transparency so that system impacts can be tracked. Importantly, core evaluation needs to be embedded into existing and new services with accessibility by clients to provide feedback, evaluations and recommendations. A representative, paid group of people with lived experience could be convened on a quarterly basis for this purpose. A Lived Experience Advisory Committee has been assembled for this purpose. These changes should be included in the service provider contracts and form a component of the performance management system.

Our learned instinct with social issues such as homelessness is to troubleshoot and fix things in the system using reductionist thinking. It's an effort to breakdown the ambiguity, resolve any paradox, achieve more certainty and agreement and move towards simplifying the system. But complexity science suggests that it is often better to try multiple approaches and let direction arise by gradually shifting time and attention towards those things that seem to be working. Successful approaches will be reinforced and the demise of those that don't inform or strengthen the system will be removed from the system. System effectiveness will be determined by client outcomes.

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Resources

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Appendix A

Niagara Region:

Funded Stakeholders & Service Providers

Agency	Description
Bethlehem	Supportive transitional housing for people facing issues of poverty, abuse, homelessness and family breakdown. Assistance with housing, income source referrals, life skills and advocacy for residents living in transitional housing.
Boys & Girls Club of Niagara (BGCN)	Emergency shelter for homeless youth aged 16 to 30 and supportive transitional housing for youth at risk. Designed to assist youth to reach their full potential through shelter services and supportive transitional housing services.
Casa El Norte	Provides emergency shelter and services to immigrants and refugees coming into Canada. Services include assistance with legal documents, immigration appointments, health care and housing help referrals.
Community Care St. Catharines (CCSC)	Assists individuals who are homeless or at risk of becoming homeless to find affordable safe, adequate housing with a wide range of services on an individual basis including: education, budget management, utility funding assistance and housing help assistance and income referrals. Clients can also utilise a voluntary Trusteeship program to assist with money management.
Community Care of West Niagara (CCWN)	Assists individuals who are homeless or at risk of becoming homeless to find affordable safe, adequate housing with a wide range of services on an individual basis including: education, budget management, utility funding assistance and housing help assistance and income referrals.
Canadian Mental Health Association (CMHA)	Supportive Transitional Housing is available for residents with mental health issues who are preparing to live independently. Support counsellors are available for those with moderate support needs (up to 4 hours in group homes) and high support needs (up to 7 hours in modified lodging homes). Transitional housing supports are also available.
Grimsby Affordable Housing Partnership (GAHP)	Provides supportive transitional housing, subsidized rent and program supports to assist low to moderate income families and individuals - homeless or those at risk of homelessness.
Gateway Housing	Provides Supportive Transitional housing and support services to residents which provides stable and supportive environments for the individual that emphasize personal choice, dignity and respect.
Matthew House	Provides emergency shelter and services to immigrants and refugees coming into Canada. Services include assistance with legal documents, immigration appointments, health care and housing help referrals.
Niagara Furniture Bank (NFB)	Collects gently used home furnishings in order to provide individuals and families in the Niagara region with the beds, tables, chairs and other furnishings. The members of your community that receive these items are referred by organizations across Niagara.
Port Cares	Assists individuals who are homeless or at risk of becoming homeless to find affordable safe, adequate housing with a wide range of services on an individual basis including: education, budget management, utility funding assistance and housing help assistance and income referrals. Clients can also utilise a voluntary Trusteeship program. Supportive transitional housing program is also available to clients.

Agency	Description
Project SHARE	Emergency utility program assists people who are in threat of being disconnected for heat, water or gas utilities or to reconnect those households where the utility has already been disconnected.
Salvation Army - Booth Centre	Overnight accommodation and meals are provided to transient men over age 18. Meals, clothing and life skills programs are available to clients. Assistance with permanent housing is also available through the Housing First Program.
Salvation Army - Fort Erie	Emergency utility program assists people who are in threat of being disconnected for heat, water or gas utilities or to reconnect those households where the utility has already been disconnected.
Salvation Army - Niagara Mobile Outreach	A food truck travels to numerous locations across Niagara where hot meals are provided to those that access the service. Referrals to other homelessness services are offered and those clients that express an interest can be given more in depth services at the permanent sites across the Niagara region.
Start Me Up Niagara (SMUN)	Offers individualized support for maintaining housing to individuals who have experienced chronic homelessness. Assistance with permanent housing is also available through the Housing First Program. **Out of the Cold:** November through March, provides temporary overnight shelter to homeless individuals through a network of churches in St. Catharines that is available to anyone in the Niagara region.
Southridge Shelter	Temporary housing and shelter for men and/or women over the age of 18 who are homeless in a dormitory style shelter with washroom/bath/shower /laundry facilities. Provides breakfast, lunch and dinner to residents. Assistance with permanent housing is also available through the Housing First Program.
The Hope Centre	Assists individuals who are homeless or at risk of becoming homeless to find affordable safe, adequate housing with a wide range of services on an individual basis including: education, budget management, utility funding assistance and housing help assistance and income referrals. Assistance with permanent housing is also available through the Housing First Program.
The RAFT Shelter	Provides emergency shelter and support to homeless and high risk youth over the age of 16 in Niagara. Shelter is open 24 hours a day seven days a week and provides a clean bed, showers, and warm healthy meals. Additional support includes Steps to Independent Living Program, support and mentorship, internet and phone access, assistance in connecting to community support services for employment, education and housing assistance. Assistance with permanent housing is also available through the Housing First program.
Youth Resources Niagara (YRN)	A supportive reintegration housing residence which provides accommodation, educational and social programs and supports for justice involved male youth ages 16-18 who are experiencing or are at risk of homelessness. This population also typically suffers from an absence of role modelling/mentorship of family/others in coping and managing their many needs.

Agency	Description
YWCA Niagara	**YWCA - Men's Shelter:** Emergency shelter for homeless men and men with children, designed to assist these households to regain permanent housing through shelter and program services. **YWCA St Catharines:** Temporary housing and emergency shelter for women, women with children and families over the age of 16 years who are homeless. Provides breakfast, lunch, dinner, and snack to residents; Programs available for children staying at the Centre. Staff assist with goal planning and accessing community resources during the search for affordable housing. Assistance with housing, referrals, life skills and advocacy for residents living in transitional housing. Assistance with permanent housing is also available through the Housing First Program.

Appendix B

Strategic Opportunity Grid: Issues & Priorities

Niagara Region

Service Providers

Strategic Opportunity Grid

May 22, 2018

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LOW PERFORMANCE
HIGH VALUE

120

Opportunity

HIGH PERFORMANCE
HIGH VALUE

Strength

110

value

100

90

Ⓐ

80

Ⓔ   Ⓑ

70

Ⓖ

Ⓒ   Ⓕ

63   performance

0

1   2   3   4   5   6   7   8   9   **10**

Ⓓ

50

40

Non-Issue

30

Over-Emphasis

20

10

LOW PERFORMANCE
LOW VALUE

HIGH PERFORMANCE
LOW VALUE

0

A—Shared Vision   E—System Access

B—Appropriate Supports   F—Shelter Beds & Capacity

C—Urban Rural Supports   G—Prevention of Homelessness

D—Diversity of Permanent Housing Options

Issue	Description
A. Shared Vision	• Is the system a system? Common understanding about function of system; communication; define 'system' • Shared measures, metrics, KPIs • Define "success" • Funding - ensuring funding to sustain services and supports • Funding is not calibrated to the level of needs in Region • Hospitals at the table for discharge conversations • Shifting priorities based on politics & funding
B. Appropriate Supports	• Equity • Diversity of needs: individuals, families, youth, seniors, women, etc. • Complexity of needs • Connection with health system to prevent need for rehousing clients • Internal changes in various organizations • Appropriate housing supports • Supports for MH&A to secure and sustain housing • Supports for people who are not appropriate for shelters • Need to better understand our clients, e.g., trauma-informed
C. Urban-Rural Supports	• Transportation • Community realities • Disconnect about the realities of homelessness between the public and government • Equitable services for diverse region • TAY with developmental needs • Provide services closer to where people call home
D. Diversity of Permanent Housing Options	• Increase housing forms & options • Affordable, safe, adequate • Lack of affordable housing • What is the 'exit' strategy, e.g., shelter, supportive, transitional • Re-purpose existing facilities • Landlord engagement & partnerships • Base housing formula on ODSP/OW reality v. 30% gross income • Work with private sector, e.g., incentives for builders and contractors • Vacancy rates, e.g., rental market; subsidy not in pace with market; recent explosion
E. System Access	• Shared tools • Data sharing - central access point, e.g., mental health, addictions, seniors • Data collection is not integrated • Shared decision-making • Too many organizations - focus on collaboration & priorities based on client needs • Inconsistent, two-tier government policies • Alignment (lack of) to other community services: healthcare; justice/jail; education; family & children's services; detox
F. Shelter Beds & Capacity	• Emergency only • Lack of shelter beds • Occupancy & capacity
G. Prevention of Homelessness	• Community support • Political will • Prevention strategy • Public perception; remove stigma

Appendix C

Homeless Hub

KPIs, Metrics & Measures

System-Level Performance Targets

The following section outline targets that can help provide a basic outline of a community's progress towards reducing homelessness. Note that these are only part of a broader performance management process, which includes qualitative methods to augment data with client, staff and partner organization narratives, program monitoring, financial analysis, etc.

Progress towards the sample goals is indicated by the various measures outlined in the system indicators section of the table. Note that goals should be specific and measured with associated timelines.

Sample Target	Corresponding Performance Indicators
Overall homelessness is reduced by 60% by 2017-18.	• Number of homeless. Indicate number in emergency shelter, transitional • housing, and sleeping rough against emergency shelter and transitional • housing capacity. • Number of households housed. Break data down by chronic/episodic, singles, families, youth, Aboriginal people, Veterans, immigrants, women, etc. • Number of permanent housing units and occupancy rates in community.
Chronically and episodically homeless numbers are reduced by 20% by 2017-18.	• Number of chronically and episodically homeless housed. • Percent of shelter/transitional housing users with multiple stays. • Percent of housed chronically and episodically homeless who maintain housing at 6 and 12 months post-intake.
80% of Housing First clients are stabilized in permanent housing by 2016-17.	• Percent of re-housed clients who remain in housing 1 year post • intervention. • Percent of those served by "Housing First" programs return to • homelessness.
Usage of emergency shelters is reduced by 15% by 2017-18.	• Average length of stay in emergency and family shelters. • Number of days for clients to move from shelters into permanent • housing. • Number of emergency shelter and transitional beds in community.
90% of Housing First clients have improved self-sufficiency at program exit.	• Change in clients employed and reduction is social assistance use, where • appropriate. • Average income increase from intake to 12 month follow up. • Average acuity levels at program intake and exit.
Use of public systems is decreased by 25% among Housing First clients at program exit.	• Interactions with police, days in jail, days hospitalised, EMS and ER usage • at client intake and 12 month follow up. • Estimate of dollars saved through intervention.
50% of homeless pro-grams participate in integrated information system by 2017.	• Percent of homeless agencies in community contributing data to HPS using an integrated information management system. • Number of shelter beds on integrated information management system.

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Program-Level Performance Targets

While the indicators outlined above can be gleaned through analysis of output information at the highest aggregate level, system effectiveness is also assessed through program performance monitoring.

Program Performance Indicators	Program Performance Targets Examples					
	Emergency Shelter	**Transitional Housing**	**Affordable Housing**	**Housing First Programs**	**Prevention**	**Outreach**
Occupancy	90%	95%	95%	95%	90%	95%
Length of Stay	21 days	90% clients complete program within timeframe (mns, 24 mns, etc.)	At any given reporting period, 85% of the people housed will still be permanently housed	95% maintain housing for at least 6 months; at least 85% maintain housing for at least 12 months	85% of clients maintain housing for 1 year after intervention	N/A
Destinations at Exit	50% of those engaged with shelter service providers leave program to go to positive housing destinations	85% go to positive housing destinations	N/A	N/A *Homeless individuals are considered to have successfully exited the program when they demonstrate the ability to maintain stable housing and require less intensive supports and services, and as a result, leave an organization's Housing First client caseload	85% of clients leaving program go to positive housing destinations	70% of clients engaged in program leave program to go to positive housing destinations
Return to Homelessness	Less than 20% of clients return to shelter/rough sleeping.	Less than 10% of of clients return to shelter/rough sleeping.	Less than 10% of clients return to shelter/ rough sleeping.	Less than 5% of clients of clients return to shelter/ rough sleeping.	N/A	N/A
Income	30% of those engaged with shelter service providers report an increase in income from employment and/ benefits.	85% of clients leaving program report an increase in income from employment and/ benefits Where clients are unable to increase income, 95% maintain stable source of income.	Program defined, if applicable.	85% of clients leaving program report an increase in income from employment and/ benefits. Where clients are unable to increase income, 95% maintain stable source of income.	85% of clients have an increase in income at program exit.	20% of those engaged with shelter service providers report an increase in income from employment and/ benefits.

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Program Performance Indicators	Program Performance Targets Examples					
	Emergency Shelter	**Transitional Housing**	**Affordable Housing**	**Housing First Programs**	**Prevention**	**Outreach**
Interaction with Public Institutions	Program defined, if applicable	Program defined, if applicable	Program defined, if applicable	Intake and Exit comparison of: EMS interactions, Hospital days, days in jail/prison etc.	Intake and Exit comparison of: EMS interactions, Hospital days, days in jail/prison etc.	Program defined, if applicable

What is a key performance indicator (KPI)?

Definition: A Key Performance Indicator (KPI) is a measurable value that demonstrates how effectively an organization, program or initiative is achieving key goals and objectives. They can span across organizations that are part of system, departments or individual tasks. KPIs are evaluated over a specified time period, and are compared against past performance metrics or best practices norms.

Why are KPIs important? Without establishing and tracking proper key performance indicators, companies would be left in the dark about their performance. They might feel that they are having success, but what kind of success? And compared to what? They may know which metrics are trackable, but which ones should they track? With KPIs in place you can set appropriate goals, develop strategies to reach them and evaluate your progress, and eventually have a historical record of your performance.

KPI examples: If you work in the highway division of a transportation authority, a key performance indicator could be to track the average driver's speed from July to November, as many accidents happened during this time the previous year. In this case, it would be helpful to know that from July to November the average driver cruises at 60 km/h which is 10 km/h higher than the posted speed limit of 50 km/h, and 6 km/h higher than they typically drive during all other months.

Or let's say you are a marine biologist. Establishing average water temperature as a key performance indicator would allow you to notice trends over time, such as how the water temperature in a particular region is rising exponentially faster than all surrounding regions.

And let's say you are the owner of a local pub. In establishing average pints per patron per visit (ppv) as a key performance indicator, you may notice that last month you averaged 1.1ppv (compared to the local pub average of 1.4ppv and last month's average of 1.3ppv). In this sense, estab-

lishing a KPI can help open the door to questions about your business performance that you may have missed otherwise.

What is a metric?

Definition: A metric is a quantifiable measure that is used to track and assess the status of a specific process. If you're confused because we haven't yet covered "measure," get this: according to the Oxford dictionary, the word measure is derived from the Latin word "metiri." In other words, their meanings are almost identical which is why you may find them used interchangeably. That said, here is the difference: a measure is a fundamental or unit-specific term a metric can literally be derived from one or more measures. This is why the term metric has a more goal or performance nuance attached to it.

This difference becomes especially obvious when metric becomes "business metric," and thereby becomes a "quantifiable measure" that is used to track and assess the status of a specific business process.

Why are metrics important? Metrics are important because they are comprised of a wide swathe of all trackable areas. With metrics, think broad. With key performance indicators, think deep. For example, a metric may monitor website traffic compared to a traffic goal, whereas a key performance indicator would monitor that same site traffic but only insofar as it's related to, say, content downloads.

Unlike key performance indicators which drill down into what truly is key — metrics cover the entire gamut. Think of it like this: if you don't know all the trackable metrics, how can you select which to take most seriously?

Metric examples: If you're a content marketing agency, you may find that a particular client is adamant about seeing a massive uptick in email subscriptions per month. If you have a grasp on all the content marketing metrics, you may be able to present some surprising news to your client: "Readers are signing up, but none are trialing your product. If you want better bottom-line results, it's time to focus on middle-of-the-funnel content."

Or let's say you're the founder of a SaaS (Software-as-a-Service) startup. There are seemingly infinite SaaS metrics to track, so where to begin? With a bird's-eye view of all metrics, you notice that your Customer Churn Rate isn't where you want it to be. In fact, at the current rate it could sink your company within six months. In teasing out Customer Churn Rate from the many other metrics and setting the parts that build it as departmental KPIs, you just helped steer your company in a better direction.

What is a measure?

Definition: In a data context, measures are the numbers or values that can be summed and/or averaged, such as sales, leads, distances, durations, temperatures, and weight. The term is often

used alongside dimensions, which are the categorical buckets that can be used to segment, filter or group such as sales rep, city, product, colour and distribution channel.

For example, let's say you have 50 TVs sold and 30 radios sold. The units sold is the measure and the dimensions are the product type. You can perform math on the measure and you could filter or group on the dimension.

A measure differs from a metric in that it's unit-specific. Whereas a metric may be Customer Churn Rate, it's made of measures such as a) the overall number of customers and b) the number of customers that discontinue their service each month.

If measure sounds like a KPI, think of it like this: measures are numbers/values; KPIs are context-driven and are often made up of multiple measures.

Why are measures important? Both metrics and KPIs rely on and are derived from measures. Without measures, you can certainly name industry best practices for metrics and KPIs, but you won't have the capacity to understand how they're built. The result? You're basically our example from the beginning: a company in the dark just trying to feel its way toward progress.

Measure examples: In the SaaS industry, Customer Acquisition Cost (CAC) is an important metric. As it sounds, this is quite literally how much it costs for a company to acquire a customer. If you know that your CAC is 100, great. That means you know the number behind the metric. But do you know the measures that gave life to that number? In this case, there would be several measures. They would include, at least, all your marketing and sales costs for a given period of time. You would then divide this by another measure: the number of customers acquired over that same period of time. The resulting metric, then, would be your CAC for that time period.

Note: Whitesell & Company acknowledges and thanks Klipfolio for their concise summary of these terms that are often confusing for strategic planning teams. https://www.klipfolio.com/blog/kpi-metric-measure

Subject: Niagara Prosperity Initiative – 2015 / 2016 Project Evaluations

Report to: Public Health & Social Services Committee

Report date: Tuesday, March 19, 2019

Recommendations

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

Key Facts

- Since 2008 Regional Council authorized staff to invest $1.5 million annually towards Niagara Prosperity Initiatives (NPI).
- Projects funded through NPI can be for one or two years. All 2015 projects were completed in December 2017 and all 2016 projects were completed in June 2018.
- This report provides information on 2015 and 2016 NPI funded projects.

Financial Considerations

The investment of $1.5 million is reviewed annually by Council as part of Community Services' operating budget. Funds invested were approved as part of the 2015 and 2016 operating budgets, respectively.

Analysis

NPI focuses on neighbourhood-based interventions aimed to increase prosperity for Niagara residents living in poverty. Research shows that strong neighbourhoods are ones that engage residents and are essential to healthy, safe and prosperous communities.

Neighbourhoods in need of attention have been identified throughout the region based on key indicators such as the low income measure, unemployment rate, and educational attainment.

In 2015, 40 projects were funded and in 2016, 31 projects were funded. Details of each project are provided in Appendix A.

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2015 Projects:

NPI Contracted Amounts by Project Type (2015)				
Project Type	**$**		**# of Projects**	
Educational Programs for Children/Youth	$366,233.16	23.0%	14	35.0%
Direct Services	$274,753.46	17.2%	3	7.5%
Job Specific Skills	$238,690.53	15.0%	5	12.5%
Life Skills Programs for Adults	$228,887.27	14.4%	4	10.0%
Assistance with Shelter	$228,162.89	14.3%	3	7.5%
Community Development	$72,422.81	4.5%	3	7.5%
Community Gardens	$70,024.43	4.4%	4	10.0%
Transportation Initiatives	$67,064.89	4.2%	1	2.5%
Access to Food	$46,184.32	2.9%	2	5.0%
Research / Conferences	$1,834.80	0.1%	1	2.5%
	$1,594,259[1]		**40**	

2016 Projects:

NPI Contracted Amounts by Project Type (2016)				
Project Type	**$**		**# of Projects**	
Educational Programs for Children/Youth	$469,336.80	34.0%	9	29.0%
Direct Services	$151,626.58	11.0%	2	6.5%
Job Specific Skills	$82,662.49	6.0%	3	9.7%
Life Skills Programs for Adults	$238,956.89	17.3%	7	22.6%
Assistance with Shelter	$183,491.07	13.3%	3	9.7%
Community Development	$8,737.76	0.6%	1	3.2%
Community Gardens	$246,598.40	17.9%	6	19.4%
	$1,381,410[2]		**31**	

NPI projects are required to submit quarterly and final reports that include:
- Number of children, youth, adults and/or seniors served;
- Outcomes achieved and measured;
- Lessons learned and recommendations for future initiatives;
- Specific examples of impact to neighbourhood/community; and
- Testimonials from project participants.

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[1] Includes returned unspent funding from previous projects and interest held by the Secretariat.
[2] Ibid

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The NPI secretariat and/or convener complete site visits/program reviews throughout the funding period to ensure contractual obligations are being met. All 2015 and 2016 funded projects stayed within their approved budgets, provided reports and passed their site visits/program reviews. Some projects spent less than their allotment. The total number of people served from all projects exceeded target by 22%.

A tally of final reports from these projects provided the following information:

	Total People Expected	Total People Served	% Increase	Jobs Expected	Jobs Created	% Increase
2015	7,689	9,259	20%	111	170	53%
2016	7,796	9,665	24%	140	184	31%
Total	**15,485**	**18,924**	**22%**	**251**	**354**	**41%**

NPI has adopted the Sustainable Livelihoods measures as a way to track progress and impact. Sustainable Livelihoods measures improvement in terms of individual and household assets in five asset areas: personal, social, human, financial and physical.

An analysis is conducted to measure project impacts on individuals and communities. Through the collection of testimonials a review is completed to measure how individual and community assets have been affected by the projects.

In 2015, 618 testimonials were received; the chart below details how investments have increased assets. From the testimonials, an improvement in social assets was the highest outcome of NPI funding:

2015 NPI Projects
Frequency that Increases in Asset Types Were Mentioned in Testimonials

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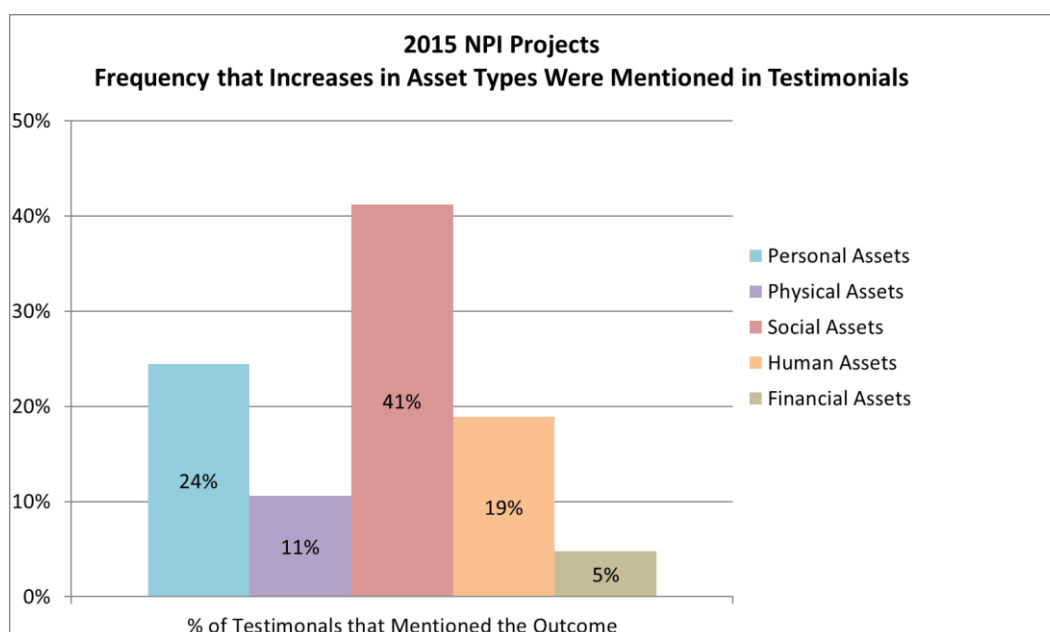
Social Assets include the following: low income residents are engaged in their community through regular participation in community groups and activities; children and youth participate in activities that support their growth and development; seniors participate in services that promote active, independent living; enhanced personal support networks; and enhanced information network.

In 2016, 789 testimonials were received; the chart below details how investments have increased assets. From the testimonials, an improvement in social assets continues to be the highest outcome of NPI funding:

2016 NPI Projects
Frequency that Increases in Asset Types Were Mentioned in Testimonials

Asset Type	%
Personal Assets	28%
Physical Assets	15%
Social Assets	30%
Human Assets	17%
Financial Assets	10%

% of Testimonals that Mentioned the Outcome
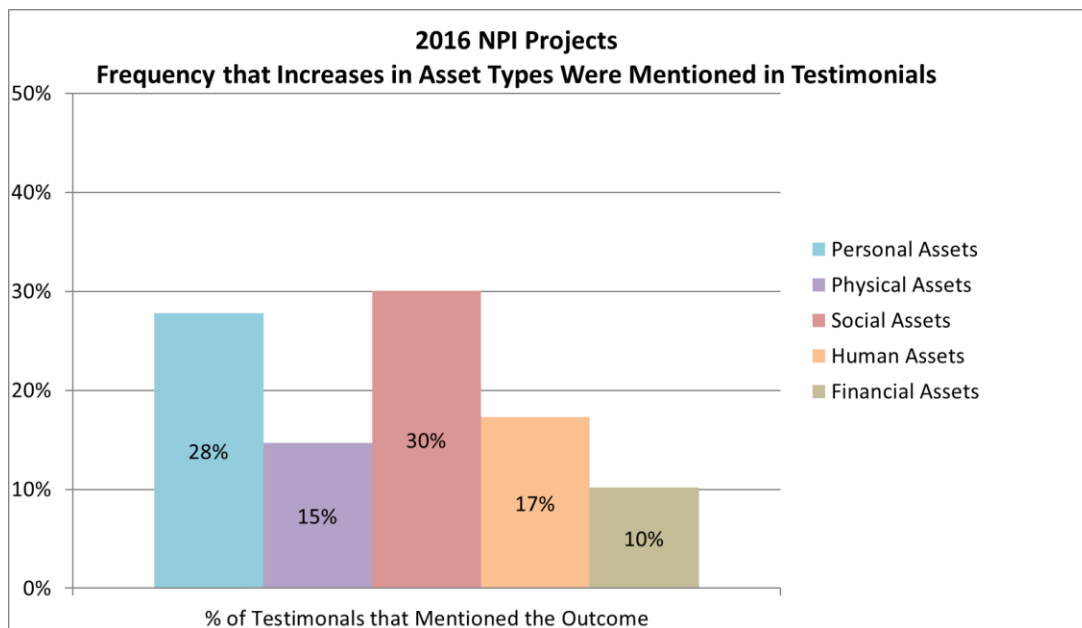
The following are testimonial examples of increased social assets for individuals served through the 2015 and 2016 projects. More examples are available in Appendix A.

- "I was depressed and sad and I have lots of friends now and I am happier…I have a place to go after school and people who I can talk to when I need help."
- "…helped me get to important medical appointments…feeling connected to another person in the community on a regular basis helped me feel less alone."
- "My kids have been exposed to different activities that I would have never been able to involve them in… advanced their ability to adapt and to deal with others."
- "This program helped me with self-confidence knowing I have proper clothes and nice looking clothes for my job interview… Without this Program I would not have any nice clothes."

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Alternatives Reviewed

Not applicable.

Relationship to Council Strategic Priorities

Not applicable (pending the development of Council's new Strategic Priorities).

Other Pertinent Reports

- COM 14-2015   2015 Niagara Prosperity Initiative Update
- COM 21-2016   2016 Niagara Prosperity Initiative Update
- COM 18-2017   NPI Update
- COM C 06-2017 Local Poverty Reduction Fund Application
- COM 13-2018   NPI Update
- COM 04-2019   Niagara Prosperity Initiative Update and Request for Review Committee Members

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Prepared by: **Recommended by:**
Lori Watson   Adrienne Jugley, MSW, RSW, CHE
Director   Commissioner
Community Services   Community Services

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Submitted by:
Ron Tripp, P.Eng.
Acting Chief Administrative Officer

This report was prepared in consultation with Marc Todd, Manager Social Assistance & Employment Opportunities.

Appendices

Appendix 1   2015 and 2016 Individual NPI Project Evaluations   6

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2015 Individual NPI Project Evaluation

Project	Description
Mental Health Coach	A Full-time Mental Health Coach with expertise in crisis intervention to support the YWCA Niagara Region shelters in working with individuals who are experiencing mental health and addiction issues that interfere with their ability to secure housing. By connecting individuals to mental health and addictions services and increasing the YWCA's staff capacity to support it will further stabilize the clients and therefore improve their ability to connect to community and move out of poverty.
Agency	
CMHA Niagara	
Municipality	
Niagara Falls; St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $148,758.54		Expected	Actual	**Human Asset**: Enhanced Life Skills
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	0	10	**Testimonial**
Met Targets Established ☑	Adult 19-64	120	206	"I received support, acceptance and felt a level of trust I had not had for a very long time. I feel hopeful about my future."
Completed Objectives ☑	Seniors 65 +	0	3	
Reporting Requirements ☑	**TOTAL**	**120**	**219**	"Currently involved in setting goals, remaining positive, building on my coping skills."
Site/Program Review ☑				

Result

The project has been tremendously successful at connecting individuals to community resources and activities to allow individuals to get the help they need to move forward with their lives. Involving individuals in community activities where they have the opportunity to contribute provides hope and inspires them to move forward on their other goals.

Project	Description
Community Gardens – Torosian Park	The aim of the project is to introduce the learning tools necessary for lifelong growing of food and promoting healthy lifestyles. Specifically, it provides gardening space and all necessary items for participants to grow and harvest their own fresh produce. Sharing knowledge and expertise supports the project with the goal of increasing fresh produce for participants. It is intended for residents of Niagara Regional Housing, clients of Community Care and those without gardening space.
Agency	
Community Care of St. Catharines and Thorold	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $811.04		Expected	Actual	**Physical Asset**: Increased Food Security
	Children 0-12	52	19	
Within Budget ☑	Youth 13-18	0	15	**Testimonial**
Met Targets Established ❌	Adult 19-64	66	65	"I was able to provide my kids with more vegetables throughout the summer. Produce is expensive."
Completed Objectives ☑	Seniors 65 +	0	2	
Reporting Requirements ☑	**TOTAL**	**118**	**101**	"We have a large family so it is nice to not have to spend money at the grocery store for fresh vegetables. We are on a limited budget."
Site/Program Review ☑				

Result

The project showed that we need a strong infrastructure for the community gardens. The garden committee worked hard to make sure that everything was in place so that the gardeners can plant, grow, harvest and connect with people in their community they may otherwise never have met. We learned to stretch our dollar and partner with wholesalers to get the best bang for our buck and to ask for assistance from businesses who were able to offer a discount. The City of St. Catharines, Niagara Regional Housing and Community Care helped expand our gardens by 10 plots in 2016 as a result of having a wait list.

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Project	Description
Niagara Region ID Clinic	Housing Help Program will reach the targeted goals by continuing to offer ID clinics throughout the Niagara Region. Staff will facilitate the acquisition of ID and make referrals to shelters, food resources, health care, legal services, case management and crisis support. A Safe/Bank is available for people needing a secure place to store their ID. Without ID, people don't have the ability to access supports and resources in the community.
Agency	
Community Care St. Catharines and Thorold	
Municipality	
Regional	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $151,063.78		Expected	Actual	**Physical Assets**: Increased Food Security
	Children 0-12	192	296	
Within Budget ☑	Youth 13-18	168	107	**Testimonial**
Met Targets Established ❌	Adult 19-64	1,752	1,366	"I was able to apply for my SIN number after my Birth Certificate was replaced and open a bank account…I have been using cash stores to cash my cheque and they keep a part of my cheque every time. Now I can use my bank account and not pay for those extra fees."
Completed Objectives ☑	Seniors 65 +	72	17	
Reporting Requirements ☑	**TOTAL**	**2,184**	**1,786**	
Site/Program Review ☑				

Result

Because of this funding, there are currently fifteen ID Clinics in the region. Examples of impacts include helping a single mother apply for child subsidy and enroll her children in summer camp and childcare programs, which lead to her finding employment.

Project	Description
Hardest to House Case Facilitation	The position is an intensive case facilitator for the Housing First program and hard to house trusteeship participants. Research from federal programs demonstrates that this particular group is most successful in their recovery with intensive supports. They require more physical supports to keep and get to appointments, social and other supports to ensure required follow through is done. Project has to be for 2 years to build a holistic service with demonstrated value to improve their socioeconomic status.
Agency	
Community Care St. Catharines and Thorold	
Municipality	
St. Catharines; Thorold	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $117,992.40		Expected	Actual	**Social Assets**: Support Networks
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	0	1	**Testimonial**
Met Targets Established ☑	Adult 19-64	40	55	"The best change was finding me a clean living accommodations."
Completed Objectives ☑	Seniors 65 +	10	0	"…helped me get to important medical appointments…feeling connected to another person in the community on a regular basis helped me feel less alone."
Reporting Requirements ☑	**TOTAL**	**50**	**56**	
Site/Program Review ☑				

Result

Individuals who previously shown very little progress are showing signs of incremental and sustained improvement in their social functioning and ability to care for themselves. Long-term impact has been measured by clients' housing stability as well as whether or not they continue to flourish in their personal and social lives.

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Project	Description
Cool Kids Club	There will be a variety of sessions offered at the Center for Community Living, which is located in the Three Bridges Neighbourhood. Sessions will include: music, arts and crafts, getting your G1, cooking, piano, cosmetology, ball hockey etc. Children and youth from the Three Bridge Neighbourhood, as well as other neighbourhoods, will be able to access the after school sessions at no cost. Sessions will run every Mon and Wed from 6-9pm at one hour intervals.
Agency	
Community Living Port Colborne Wainfleet	
Municipality	
Port Colborne	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $22,716.60		Expected	Actual	**Human Assets**: Enhanced Life Skills **Social Assets**: Low Income People are Engaged in their Community
	Children 0-12	25	46	
Within Budget ☑	Youth 13-18	20	24	
Met Targets Established ☑	Adult 19-64	5	0	**Testimonial**
Completed Objectives ☑	Seniors 65 +	0	0	"…BEST change is that my autistic 12 year old son (with significant social anxiety) is playing and interacting with absolutely no issue… he is normally terrified in all new social situations." "I am so happy that (the activities) are free as funds are limited...I have limited income and could never afford these activities if I had to pay for them elsewhere."
Reporting Requirements ☑	**TOTAL**	**50**	**70**	
Site/Program Review ☑				

Result

The children were excited to attend and we saw increases in their self-esteem. In the future, some adults wanted to have classes made available to them, such cooking and other life skills.

Project	Description
Faith Welland Outreach - McLaughlin Community House Programming	Programming included music, cooking, sewing, arts, crafts, woodworking, girl talk, afterschool homework help, summer program, reading, and community gardens. A new funding source, Ontario Trillium Foundation, has allowed staff to develop and implement programming for teens. Developing the teen programming is expected to have substantial positive social impacts with mentorship and leadership training.
Agency	
Faith Welland Outreach	
Municipality	
Welland	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $17,662.47		Expected	Actual	**Social Assets**: Low Income People are Engaged in their Community
	Children 0-12	100	236	
Within Budget ☑	Youth 13-18	20	67	**Testimonial**
Met Targets Established ☑	Adult 19-64	40	65	"It gives my child something to look forward to every week. It involves her in the community and gives her the ability to meet other children her age to build friendships." "Helps her to feel involved and again opens up more opportunity for her to meet others and develop and maintain relationships outside the home."
Completed Objectives ☑	Seniors 65 +	5	30	
Reporting Requirements ☑	**TOTAL**	**165**	**398**	
Site/Program Review ☑				

Result

Parents were able to bring their children to a free place where they learned a variety of skills and helped build their confidence. Families were able to meet new people and learn about new things. Many connections were made, not only between the people attending but also with the volunteers.

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Project	Description
Kinsmen Pool Together	The Kinsmen Pool is the only public pool in Fort Erie and was closed as a budget saving measure by the town in 2011 in favour of a splash pad. A group of individuals have formed the 'Pool Together Campaign' to reopen the facility to provide vital lifesaving instructional and swimming lesson opportunities to the neighbourhood once again.
Agency	
Fort Erie Underwater Recovery Unit	
Municipality	
Fort Erie	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $38,165.96		Expected	Actual	**Social Assets**: Low Income People are Engaged in their Community
	Children 0-12	350	170	
Within Budget ☑	Youth 13-18	150	164	**Testimonial**
Met Targets Established ❌	Adult 19-64	75	99	"When the Kinsmen pool opened its doors in August of 2015, it gave my daughters an activity to look forward to… they also helped do some painting to open the pool. They got a sense of what it means to help a community and take pride in the work they have done. To this day, when we drive by the pool they say 'look Dad, that's what we did.'"
Completed Objectives ☑	Seniors 65 +	50	19	
Reporting Requirements ☑	**TOTAL**	**625**	**452**	
Site/Program Review ☑				

Result

Children across all economic and cultural backgrounds learned water safety and lifesaving skills in an aquatic environment. Lower number of people served was due to record amounts of rainfall in Spring and early Summer delaying our plans to open in July, pushing opening day to the beginning of August. People coming together, strangers volunteering side by side, an entire neighbourhood has been lifted up.

Project	Description
I'm Worth It!	The basis of this program focuses on preventative measures of poverty reduction by providing key life skills workshops such as money management, job search assistance, resume building, volunteer opportunities, healthy eating and food preparation, homework help, and tutoring. This program was created as a proactive measure to address local poverty rates among youth.
Agency	
Foundation of Resources for Teen	
Municipality	
Grimsby	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $46,771.21		Expected	Actual	**Social Assets**: Low Income People are Engaged in their Community
	Children 0-12	35	103	**Social Assets**: Children and Youth Participate in Activities
Within Budget ☑	Youth 13-18	150	264	
Met Targets Established ☑	Adult 19-64	0	0	**Testimonial**
Completed Objectives ☑	Seniors 65 +	0	0	"I was depressed and sad and I have lots of friends now and I am happier, the Fort is a family to me and I love the Fort… I have a place to go after school and people who I can talk to when I need help … it's a fun place to meet new and amazing people."
Reporting Requirements ☑	**TOTAL**	**185**	**367**	
Site/Program Review ☑				

Result

Statistics show a 30% increase in attendance over the previous year. Our youth benefited by learning about healthy eating, cooking skills, and the importance of giving back to their community. Programs were expanded to include professional counselling, Grade 9 integration, and an increased focus on mental health and self-esteem.

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Project	Description
Agro-Biodiversity Gardens	Our project will raise awareness amongst newcomers to Canada and to the Niagara Region about growing their own food, introducing them to local community gardens and sustainability. We will educate and provide them with an opportunity to grow their own organic food (local and cultural) and encourage them to share their traditional recipes with long time Canadians and other newcomers and volunteers.
Agency	
Links for Greener Learning Inc.	
Municipality	
St. Catharines; Welland	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $17,273.94		Expected	Actual	**Social Assets**: Low Income People are Engaged in their Community
	Children 0-12	40	49	
Within Budget ☑	Youth 13-18	60	16	**Testimonial**
Met Targets Established ☑	Adult 19-64	60	118	"We have been able to donate to so many people in our community… we have been able to increase our youth involvement so much by caring for the garden together."
Completed Objectives ☑	Seniors 65 +	30	47	
Reporting Requirements ☑	**TOTAL**	**190**	**230**	
Site/Program Review ☑				

Result

There have been over 50 families involved in the Agro-Biodiversity garden project and the number of gardeners have grown by 30%. Two new gardens were built in St. Catharines and in Niagara Falls serving 40 new families. This project has brought community together by providing food, providing meaningful, productive recreational activities for children and adults and educating the community about their natural environment.

Project	Description
Links for Greener Kids	Students and families learn nutrition, growing and environmental education while supplementing their diet with healthy, organic vegetables. Seasonal fun, hands-on growing, cooking/tasting activities implemented at three schools and three Band G clubs in 2015 for children/families. In 2016, second program year, garden/food education will be offered to any Niagara schools for donations. Families/volunteers will care for/harvest gardens over summers and enjoy a Harvest Celebration party in their neighbourhood.
Agency	
Links for Greener Learning Inc.	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $8,525.21		Expected	Actual	**Social Assets**: Children and Youth Participate in Activities **Physical Assets**: Increased food security
	Children 0-12	67	166	
Within Budget ☑	Youth 13-18	10	10	
Met Targets Established ☑	Adult 19-64	25	18	**Testimonial**
Completed Objectives ☑	Seniors 65 +	6	1	"I planted vegetables and learned more about plants. I tried new things and I also helped build the garden. I learned how to plant plants… I learned how to take care of a garden… the people who help with breakfast club don't have to purchase vegetables and fruit."
Reporting Requirements ☑	**TOTAL**	**108**	**195**	
Site/Program Review ☑				

Result

Entire schools embraced the program and kids reported asking parents to buy healthier foods and plant gardens at home. Collaborative teaching and teacher training was provided so that the project can be run more independently in the future. In-class lessons were incorporated into curriculum so that the gardens are not an "extra" but are included in the regular school day.

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Project	Description
Ramp it Up	Ramp it Up empowers persons with disabilities living in poverty to advocate for themselves, their families and peers and to increase access to safe/affordable housing and income supports.
Agency	
Niagara Centre for Independent Living	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $44,853.60		Expected	Actual	**Human Assets**: Enhanced Life Skills
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	0	0	**Testimonial**
Met Targets Established ❌	Adult 19-64	100	80	"During tax season, the Ramp it Up Volunteer explained step by step how to do them. Was able to do my 2015 taxes… showed me how easy it is to do by myself. Now I am able to do my own taxes without having to pay someone."
Completed Objectives ☑	Seniors 65 +	10	8	
Reporting Requirements ☑	**TOTAL**	**110**	**88**	
Site/Program Review ☑				

Result

At the outset we were hoping success would be an increase in the capacity of NCIL's Advocacy program to keep up with the increasing demand for assistance with access to needed goods and services, benefits, housing etc. We found, however, that despite providing participants with the knowledge base and skills to assist consumers, they were not prepared to deal with our consumers who usually come to us "in crisis." The success of the project was that participants took their knowledge back to their family, friends, neighbours, and "natural" communities. The knowledge gained and shared, expanded the impact of the project to persons living in poverty who would be unlikely to come to an agency for assistance.

Project	Description
Summer Family Literacy Program for Kindergarten Children at Risk for Literacy Difficulties	This program is for children identified as at risk in key foundational skills in emergent literacy. These risks may affect their success moving forward into their second year of full day kindergarten. This proven, researched program adapted with permission from the original authors is offered by professionals trained in literacy. It focuses on educating the parent, instruction for the child and then bringing the two together for practice.
Agency	
Niagara Children's Centre	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $12,652.82		Expected	Actual	**Social Assets**: Low Income People are Engaged in their Community
	Children 0-12	18	23	**Social Assets**: Children and Youth Participate in Activities
Within Budget ☑	Youth 13-18	0	0	
Met Targets Established ☑	Adult 19-64	20	21	**Testimonial**
Completed Objectives ☑	Seniors 65 +	0	0	"We have seen a great improvement with [our child's] speech and vocabulary. She is more excited about reading books and often points out new words, signs and rhyming words as we do our daily routine…the classes were a great opportunity to learn these things with her."
Reporting Requirements ☑	**TOTAL**	**38**	**44**	
Site/Program Review ☑				

Result

Children's participation and success was monitored on an individual and a session-by-session basis. Results of final testing demonstrated gains made in the children's abilities. Parents indicated that their knowledge base was broadened and they had the confidence to continue to foster emergent literacy development in their children.

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Project	Description
Eating Healthy in Canada	Newcomers are asking for help to navigate the confusing and media driven Canadian food system- where to find the healthiest foods in grocery stores; shopping at farmers markets and local farms; learning about grocery store sale flyers; dangers of processed and fast foods; introducing local vegetables/fruits and planning menus with them; cooking together and sharing recipes with unfamiliar foods; introducing community gardening. All of this increases food security and health and lowers food costs.
Agency	
Niagara Folk Arts Multicultural Centre	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $27,213.44		Expected	Actual	**Life Skills**: Enhanced Life Skills **Social Assets**: Information Networks **Social Assets**: Low Income People are Engaged in their Community
	Children 0-12	0	24	
Within Budget ☑	Youth 13-18	15	19	
Met Targets Established ☑	Adult 19-64	60	231	
Completed Objectives ☑	Seniors 65 +	20	39	**Testimonial**
Reporting Requirements ☑	**TOTAL**	**95**	**313**	"Because I'm new to Canada… for me it is important to feed me and my family with good food. Also helps me learn more English."
Site/Program Review ☑				

Results

Participants asking increasingly complex food questions demonstrated ongoing interest and learning. Co-teaching with ESL teachers in their classrooms provided an effective learning environment for students and provided teachers with materials for ongoing teaching in the future. This project has led to better health and lower food costs in participants' households.

Project	Description
MCAP+: Merritton Children's Afterschool Program Plus	After-school programming 2 days/week, Professional Development day programming four times a year and two times a week of summer programming in July and August. Activities include homework help, arts and crafts, sports, life skills etc. for children aged 6-12 located in Merritton. Supported by program staff and community volunteers as well as the establishment of a youth council in the second year.
Agency	
Niagara Folk Arts Multicultural Centre	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $22,688.59		Expected	Actual	**Social Assets**: Low Income People are Engaged in their Community **Social Assets**: Children and Youth Participate in Activities
	Children 0-12	35	88	
Within Budget ☑	Youth 13-18	8	13	
Met Targets Established ☑	Adult 19-64	20	19	
Completed Objectives ☑	Seniors 65 +	0	0	**Testimonial**
Reporting Requirements ☑	**TOTAL**	**63**	**120**	"My kids have been exposed to different activities that I would have never been able to involve them in… advanced their ability to adapt and to deal with others."
Site/Program Review ☑				

Results

Participants asking increasingly complex food questions demonstrated ongoing interest and learning. Co-teaching with ESL teachers in their classrooms provided an effective learning environment for students and provided teachers with materials for ongoing teaching in the future. This project has led to better health and lower food costs in participants' households.

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Project	Description
Youth "Bed and Dresser" program	Youth transition from Resource Association for Teens (RAFT) to bed/sit rentals as our full apartment service is not economical due to a flat rate for delivery. Youth need either bed and dresser or bed and chair or bed and desk. Single bed and dressers are scarce so we would need to purchase new stock to subsidize donated goods. Niagara Region has agreed to a new service for youth: "Bed and Dresser" at a new low rate; Canadian Tire will provide a sturdy small dresser at 50% off retail and RAFT will be our initial referring agent.
Agency	
Niagara Furniture Bank	
Municipality	
Regional	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $10,963.26		Expected	Actual	**Personal Assets**: Enhanced Self-esteem and Self-confidence
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	200	140	**Testimonial**
Met Targets Established ❌	Adult 19-64	0	5	"My Ontario Works case worker referred my family to your organization. We have furniture in our home now and beds to sleep on every night. No more sleeping on comforters or sofas. We needed these items to have a better night's sleep. Dressers to put clothes away to things organized and not clothes all over the floor."
Completed Objectives ☑	Seniors 65 +	0	0	
Reporting Requirements ☑	**TOTAL**	**200**	**145**	
Site/Program Review ☑				

Result

One example is a single-mother with four boys who needed new furniture. The stock of dressers was low and without youth dressers, we would likely have only been able to provide one dresser to the family. The boys have the pride of having each their own brand new dresser so they have somewhere other than the floor or a basket to put their clothes. Poverty is tough on dignity and the youth dressers made a difference for this family.

Project	Description
Injured Worker Support Centre	The Centre is a place for injured workers to find support, information and to come together for common action to change the workers compensation system. The Centre offers capacity building workshops in employment and mental health issues. There are also speakers and trainings on issues concerning WSIB. Participation in Centre will help injured workers break out of their isolation and get involved in their community. A fundraising strategy will help to provide an office and sustain the Centre.
Agency	
Niagara North Community Legal Assistance	
Municipality	
Regional	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $19,447.09		Expected	Actual	**Personal Assets**: Enhanced Self-esteem and Self confidence, Improved Hope and Motivation **Social Assets**: Low Income People are Engaged in their Community, Support Networks, Information Networks.
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	0	0	
Met Targets Established ❌	Adult 19-64	75	31	
Completed Objectives ☑	Seniors 65 +	5	0	**Testimonial**
Reporting Requirements ☑	**TOTAL**	**80**	**31**	"The best thing that happened was being part of a supportive group of people who understand what you are going through… My biggest challenge as an injured worker was dealing with the employer/insurance company and health care system. I found unconditional support through the NIWC."
Site/Program Review ☑				

Result

Due to changes in staffing at the Injured Worker Centre, the project is no longer needed. It was felt that the project no longer required funding since the members were meeting on their own. Because of this, the project did not officially met expected targets, however meetings and collaborations are still being made.

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Project	Description
New Pathways for Adult Learners in Welland	The project offers training, alternative learning and personal supports to adult learners who have "fallen through the cracks" of traditional educational institutions. This project will assist unemployed individuals interested in achieving their high school diplomas with individualized workshops, one-on-one coaching, valuable certificates and work placements to support them both achieving their Ontario Secondary School Diploma and gaining valuable skills and experience to assist them in finding sustainable employment.
Agency	
Niagara Peninsula Homes	
Municipality	
Welland	

Contract Requirements	**Number Served**			**Highest Assets Impact**
Contract Amount - $61,050.00		Expected	Actual	**Personal Assets**: Enhanced Self-esteem and Self-confidence, Improved Hope and Motivation. **Social Assets**: Low Income People are Engaged in their Community. **Human Assets**: Enhanced Life Skills, Obtained Employment Skills.
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	0	0	
Met Targets Established ☑	Adult 19-64	50	68	
Completed Objectives ☑	Seniors 65 +	0	0	
Reporting Requirements ☑	**TOTAL**	**50**	**68**	
Site/Program Review ☑				**Testimonial**
				"I gained a lot of hands-on experience and working in the pop-up store gave me so much confidence. Having the confidence I never had before I found a job where I love to be… having the certificates helped me to get this job. I haven't had a job in 15 years... I'm also in school to get my grade 12. When I started this program, I didn't have any high school credits. I now have 21 credits."

Result

Employment Ontario agencies were crucial to our success by offering employment supports, wage subsidies (where eligible) to enhance the chances for graduate success. Because of this funding and the success of this project, we will be replicating this model and expanding it beyond Welland.

Project	Description
Niagara West Community Garden Collective	Currently in Niagara West there are two Community Gardens in operation and one slated to open this year, each in a separate community. The Niagara West Community Garden Collective (NWCGC) will bring together all of the gardens to form a collective gardening group working with combined resources and knowledge to benefit all of the gardeners and the Niagara West communities. This Collective will also incorporate learning activities such as healthy diet, exercise and food preservation.
Agency	
Niagara West Adult Learning Centre	
Municipality	
West Lincoln - Lincoln	

Contract Requirements	**Number Served**			**Highest Assets Impact**
Contract Amount - $32,399.77		Expected	Actual	**Physical Assets**: Increased Food Security
	Children 0-12	5	0	
Within Budget ☑	Youth 13-18	5	9	**Testimonial**
Met Targets Established ☑	Adult 19-64	10	58	"…growing vegetables is a big thing for me. I need my vegetables and they are so expensive in stores … Learning how to do canning is even a bonus because now I can extend my food for the winter."
Completed Objectives ☑	Seniors 65 +	8	17	
Reporting Requirements ☑	**TOTAL**	**28**	**84**	
Site/Program Review ☑				

Result

The support of two partner agencies provided extra people, guidance, and consistency for all three gardens. The establishment of the community garden at the Beamsville office was the start of making a difference in that neighbourhood. It has provided seniors with the opportunity to grow their own food, to engage with other community members and to have a green space that is theirs to use.

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Project	Description
Read Learn Grow	Recognizing that a parent is a child's first teacher, Read Learn Grow will assist parents in rural communities to gain the literacy skills needed to help their child succeed in school. The sessions will be an increased focus on working with the parents to build a strong community-based network of support.
Agency	
Niagara West Adult Learning Centre	
Municipality	
West Lincoln - Lincoln	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $28,618.87		Expected	Actual	**Social Assets**: Low Income People are Engaged in their Community, Children and Youth Participate in Activities
	Children 0-12	20	30	
Within Budget ☑	Youth 13-18	0	0	
Met Targets Established ☑	Adult 19-64	20	18	**Testimonial**
Completed Objectives ☑	Seniors 65 +	0	0	"My son is more willing to be social and participative in activities. I feel more a part of our community. He is not as hesitant to become engaged in larger group activities. I have more hope for my child's development especially speech development…"
Reporting Requirements ☑	**TOTAL**	**40**	**48**	
Site/Program Review ☑				

Result

Each adult and child that participated left with new tools and strategies for learning. The adults were able to learn new literacy skills, learn to play using literacy, taking advantage of teachable moments, build a new community based network and have social time in their community. The children learned how to socialize with others, how to follow structure and teaching time and to develop their early literacy skills.

Project	Description
Empowering Partnerships Program	This program is a series of 10 workshops conducted by industry experts to empower and educate people living in poverty by improving health, food security and increasing personal, social, human, financial & physical assets. Some of the topics we plan to offer are baby food making, dental hygiene, landlord & tenant rights, financial literacy & navigating public transportation.
Agency	
Project SHARE of Niagara Falls Inc.	
Municipality	
Niagara Falls	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $13,140.67		Expected	Actual	**Social Assets**: Information Network
	Children 0-12	15	16	
Within Budget ☑	Youth 13-18	50	50	
Met Targets Established ☑	Adult 19-64	100	108	**Testimonial**
Completed Objectives ☑	Seniors 65 +	50	47	"As a senior I now know My Care Dental will cover the 20% that my benefits do not. I have no transportation and I know they will pick me up and drop me off."
Reporting Requirements ☑	**TOTAL**	**215**	**221**	
Site/Program Review ☑				

Result

We made new community partners, and have received great feedback. Examples include St. Ann Adult Learning Centre who have asked us to come back and run additional workshops; My Care Dental has offered transportation assistance and reduced rates for our clients to access their dental cleaning services; and Niagara North Legal Clinic has asked to run the Landlord and Tenant Rights workshop on a monthly basis.

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Project	Description
Expressions	Finding voice using a variety of art forms including video, drawing, poetry, music. Using the creations to tell stories about the lived reality, hopes and dreams of people who face social exclusion as their voices having little space in community dialogue.
Agency	
Start Me Up Niagara	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $14,809.76		Expected	Actual	**Social Assets**: Low Income People are Engaged in their Community
	Children 0-12	10	0	
Within Budget ☑	Youth 13-18	0	0	**Testimonial**
Met Targets Established ☑	Adult 19-64	20	101	"… artwork is opening a whole new way of life for me. I was also pleased to add my poems to a recent event at the NAC centre. I feel that we as a group are helping to show the general public that the community itself is improving all the time."
Completed Objectives ☑	Seniors 65 +	10	16	
Reporting Requirements ☑	**TOTAL**	**40**	**117**	
Site/Program Review ☑				

Result

Having an arts' facilitator was critical to reaching out to artists/participants and making connections in community. An art exhibit was held from February 8th to the 12th. This provided the opportunity for artists/participants to show their work and feel like part of community. Some were even able to connect with estranged family members.

Project	Description
Home at Last. Home to Stay	Stabilize housing placement for individuals with histories of homelessness by providing a range of needed services not available at this time. Services will assist them to retain housing and work on issues that have negatively affected them, causing repeated bouts of homelessness. Included are in-home supports, basic necessities, coaching, individual counseling and life skills courses that assist them through the period of transition to staying housed and ending homeless recycling.
Agency	
Start Me Up Niagara	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $99,207.23		Expected	Actual	**Social Assets**: Low Income People are Engaged in their Community
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	0	0	**Testimonial**
Met Targets Established ☑	Adult 19-64	35	53	"It has helped me to understand how my brain works and why I keep going around the same mental reaction track. Now I stop and realize what's going on and it helps. I am presently in an emotionally traumatic period in my life and the skills I've learned/am learning have helped me to level out when I get out of control."
Completed Objectives ☑	Seniors 65 +	10	6	
Reporting Requirements ☑	**TOTAL**	**45**	**59**	
Site/Program Review ☑				

Result

Individualized supports were provided, that engaged individuals in solutions based coaching. People remained housed-independently. Participants in the life skills program "Think Well" gained confidence to interact with their peers in a better, calmer manner. Increased understanding of emotions make for less conflict in the community and in their personal lives.

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Project	Description
Social Enterprise Catering Pilot Project	We would like to hire two of the graduates from the Food Service Training Program part time to pilot the next phase of the training program: a social enterprise catering business. One of the grads has previous experience in marketing and event planning and would be responsible for securing contracts for catering. The other graduate has previous experience in food services and would be responsible for overseeing the food prep/catering portion.
Agency	
The Hope Centre	
Municipality	
Welland	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $61,936.89		Expected	Actual	**Social Assets**: Low Income People are Engaged in their Community
	Children 0-12	50	0	
Within Budget ☑	Youth 13-18	150	0	**Testimonial**
Met Targets Established ☑	Adult 19-64	540	748	"…More positive about self. Like helping people, gained knowledge on cooking and food prep. I like learning, they are life skills. Giving back to the community and The Hope Centre when I was down."
Completed Objectives ☑	Seniors 65 +	60	68	
Reporting Requirements ☑	**TOTAL**	**800**	**816**	
Site/Program Review ☑				

Result

We were able to secure the talents of a world-renowned chef who was able to assist us in creating a menu and helped to train the participants. Within six months, we managed to generate $6,519 in revenue. We provided hands-on training for individuals and provided them with an honorarium for their time through the money that was generated. This program also provided our client-volunteers a free gourmet meal for our volunteer appreciation night.

Project	Description
Strengthening Families for the Future	Strengthening Families for the Future (SFF) is a 14 week, 3 hrs. /wk. family-focused skills training program for the prevention of multiple developmental problems including school failure, violence, mental health issues and early age substance misuse among high-risk children of all ages. Family factors such as bonding, supervision, and communication are addressed as protective factors which help children to achieve family stability and education that build skills to overcome poverty in the future.
Agency	
The John Howard Society of Niagara	
Municipality	
Fort Erie; Niagara Falls; Welland	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $75,079.62		Expected	Actual	**Social Assets**: Low Income People are Engaged in their Community
	Children 0-12	140	171	
Within Budget ☑	Youth 13-18	15	28	**Testimonial**
Met Targets Established ☑	Adult 19-64	80	137	"…Has helped me communicate with my kids in a more positive way. I noticed my kids applying some of the things that we learned here. Has helped reduce some of the negative energy in my home and has definitely opened up communication in our family."
Completed Objectives ☑	Seniors 65 +	10	10	
Reporting Requirements ☑	**TOTAL**	**245**	**346**	
Site/Program Review ☑				

Result

Because of the funding, we were able to have key partnerships with various community agencies to help facilitate the program. The program has helped create better/stronger relationships between parents and their children, provided strategies in dealing with difficult behaviours, and improved family communications.

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Project	Description
Brushed Aside: Dental Care Access Program Expansion	This project will allow the Brushed Aside program to expand to partner with agencies in Fort Erie, Port Colborne, Welland and Niagara Falls. In 2014, the Brushed Aside program began as a pilot project to provide access to dental care for 120 adults in need of treatment through a partnership with five agencies in St. Catharines. The project has been very successful in St. Catharines and there has been a great demand to expand the project to partner with other agencies across Niagara.
Agency	
United Way of St. Catharines & District	
Municipality	
Fort Erie; Niagara Falls; Port Colborne; Welland	

Contract Requirements	Number Served		Highest Assets Impact
Contract Amount - $98,546.00		**Expected** / **Actual**	**Financial Assets**: Reduced Cost **Human Assets:** Obtained Needed Health Services
	Children 0-12: 0 / 0		
Within Budget ☑	Youth 13-18: 0 / 0		**Testimonial**
Met Targets Established ✖	Adult 19-64: 170 / 107		"I was in extreme pain ...I'm getting my rotten teeth out of my mouth and getting new dentures put in. That is the BEST thing. No more tooth pain. After 30 years, finally no more pain. Extreme pain gone!! Will be able to chew for a change… Hopefully be able to smile and show teeth for first time in many many years."
Completed Objectives ☑	Seniors 65 +: 30 / 29		
Reporting Requirements ☑	**TOTAL** 200 / 136		
Site/Program Review ☑			

Result

136 adults accessed dental care through our six agency partners. Agency partners completed follow-up surveys with participants to evaluate the impact of this program on confidence, self-esteem, sociability, and employment readiness. Many participants have not had access to a dentist for much of their lives. We did not meet our target of 200 people served, as the cost per client cost was higher than anticipated. Originally, we anticipated treatments to cost an average of $500 per person, but the average cost per treatment at the end of this project was $762.

Project	Description
Breaking Barriers Initiative	Due to the cyclical relationship between poverty, mental health and addictions (concurrent disorders), access to addiction treatment is both an intervention and prevention resource against poverty. In an initiative to address the unique barriers that prevent women from accessing addiction services, WARM Niagara is launching the 'Breaking Barriers Initiative' to promote accessible service by breaking the barriers of child care and transportation leading to healthy communities.
Agency	
WARM Niagara	
Municipality	
Fort Erie; Niagara Falls; St. Catharines; Welland	

Contract Requirements	Number Served		Highest Assets Impact
Contract Amount - $18,811.82		**Expected** / **Actual**	N/A
	Children 0-12: 100 / 0		
Within Budget ☑	Youth 13-18: 10 / 0		**Testimonial**
Met Targets Established ✖	Adult 19-64: 120 / 6		None provided
Completed Objectives ✖	Seniors 65 +: 0 / 0		
Reporting Requirements ✖	**TOTAL** 230 / 6		
Site/Program Review ✖			

Result

Within a few months of receiving funding, WARM lost their primary source of funding and was no longer able to sustain itself, and had to close its doors. The project was terminated early with only $330 spent. This funding was provided for transportation costs for women to attend initial group programming at WARM.

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Project	Description
Making Healthy Choices	Our project will stimulate the awareness of participants' physical, mental, social, and emotional well-being and build positive community connections and long term friendships, with a strong focus on the senior citizens and those with mental health problems in the designated neighbourhoods by providing yoga/fitness/nutritional sessions as well as workshops to educate the community about mental health awareness and coping strategies for mental health problems.
Agency	
Welland Heritage Council and Multicultural Centre	
Municipality	
Welland	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $48,176.24		Expected	Actual	**Human Assets**: Obtained Needed Health Services
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	3	6	**Testimonial**
Met Targets Established ☑	Adult 19-64	30	292	"These programs have invigorated my life by making me want to get out of the house and exercise… these classes are benefiting me spiritually, physically, medically, mentally and socially. They have also inspired me to get my bike out on nice days and cycle to the classes … I love these classes- they are changing my life…"
Completed Objectives ☑	Seniors 65 +	40	65	
Reporting Requirements ☑	**TOTAL**	**73**	**363**	
Site/Program Review ☑				

Result

Collaborating with the Metis Nation of Ontario during our year brought hope to the participants to continue at a minimal level of fitness for their future with funding through their organization. For all the participants who attended they gained trust with the professional instructors and workshop leaders, providing encouragement, hope and positive feedback about the project.

Project	Description
Westview Centre4Women	Westview Centre 4Women (WC4W) is responding to the expressed needs by the Queenston area women combating the effects of poverty. While providing this growing community experience we have acquired many more school aged children over the summer months than anticipated. Our intention is to provide summer child care for children 7 through 12 years of age, for the months of July and August 2015 off site while mom attends WC4W.
Agency	
Westview Christian Fellowship	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $15,341.54		Expected	Actual	**Personal Assets**: Improved Hope and Motivation **Social Assets**: Low Income People are Engaged in their Community, Children and Youth Participate in Activities
	Children 0-12	15	14	
Within Budget ☑	Youth 13-18	0	0	
Met Targets Established ❌	Adult 19-64	0	0	
Completed Objectives ☑	Seniors 65 +	0	0	**Testimonial**
Reporting Requirements ☑	**TOTAL**	**15**	**14**	"… This has been a huge help. I was able to go to counselling, talk to people who can help me move etc. to get my children and myself out of a bad situation."
Site/Program Review ☑				

Result

The women were very involved and for three days weekly worked diligently on themselves and the improvement of their family situations. There was a real need for this program and we have decided to make sure it will be available moving forward. Many of the moms worked on completing their grade 12 or college courses. One mom started self-employment. All the moms were pushed to have their children properly immunized due to a policy of the summer day care.

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Project	Description
YMCA Youth Club	YMCA Youth Club is an innovative program offered free of charge to kids in grades 3-6 at St. Mary's School in Welland. This program runs 2½ hours a day, five days a week. The program focuses on health, wellness, nutrition, academic support, physical activity and developmental asset building. This program includes a foundation of quantitative research to determine the impact on the physical and emotional health of the children it serves.
Agency	
YMCA of Niagara	
Municipality	
Welland	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $28,320.87		Expected	Actual	**Social Assets**: Children and Youth Participate in Activities
	Children 0-12	50	36	
Within Budget ☑	Youth 13-18	0	0	**Testimonial**
Met Targets Established ❌	Adult 19-64	0	0	"I like the organized activities the best because they keep me active. I have made new friends and learned new things about making healthy foods and stuff… I get to hang out with my friends and I have a safe place to play."
Completed Objectives ☑	Seniors 65 +	0	0	
Reporting Requirements ☑	**TOTAL**	**50**	**36**	
Site/Program Review ☑				

Result

We found that while there was initial interest from both the principal of the school and parents whose children were part of the program in previous years, we had difficulty attracting as many new participants as we thought. The changes to our program plan allowed us to deliver an expanded educational curriculum targeted specifically on literacy and numeracy.

Project	Description
Leadership Summit for Women	The Leadership Summit for Women is an intergenerational, region-wide, inclusive, and accessible event to discuss, evaluate and celebrate women's leadership and promote women in leadership to effect positive change for all of Niagara. An application for funding in 2014 was approved but monies had to be turned down due to a conflict of interest. This issue is no longer relevant.
Agency	
YWCA Niagara Region	
Municipality	
Regional	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $1,834.80		Expected	Actual	**Personal Assets**: Improved Hope and Motivation
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	20	7	**Testimonial**
Met Targets Established ❌	Adult 19-64	250	236	"By participating in workshops that I got to choose, I was able to connect with peers, network, have a safe place for female-focused discussion, learn something new, and feel extremely connected, encouraged, supported and empowered."
Completed Objectives ☑	Seniors 65 +	20	1	
Reporting Requirements ☑	**TOTAL**	**290**	**244**	
Site/Program Review ☑				

Result

Women received information, which helped to support their own leadership development. Funding was used to pay for attendees who could not afford the entrance fee. After the summit two women's groups were formed – "Women Working in a Male Dominated Profession" and "Women Encouraging Women in Politics".

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Project	Description
Crystal Beach Local Food Project	We will work with the Crystal Ridge Community Church, Sexsmith Farm, Bridges and For the Least of Them, to enhance their existing service offerings to better engage low income residents in learning new ways to stretch limited budgets and improve health through a weekly farm to table program. This incorporates a community garden, local market, and training in food preparation and processing to teach new skills and help shift residents out of poverty.
Agency	
Advancing Crystal Beach Community Development Organization	
Municipality	
Fort Erie	

Contract Requirements	**Number Served**			**Highest Assets Impact**
Contract Amount - $18,970.88		Expected	Actual	**Social Assets**: Low Income People are Engaged in their Community
	Children 0-12	50	75	
Within Budget ☑	Youth 13-18	50	40	**Testimonial**
Met Targets Established ❌	Adult 19-64	50	42	"I come almost every day. Meeting new people and excited about this project. In the past, I just stayed home. But now I have something that interests me."
Completed Objectives ☑	Seniors 65 +	50	23	
Reporting Requirements ☑	**TOTAL**	**200**	**180**	
Site/Program Review ☑				

Result

Several areas of success were achieved: 40+ volunteers attended the Open Space Forum/Project Planning sessions; 50+ community members attended the May Launch and October Harvest events. Town Staff fast-tracked licensing of the market and seven local businesses contributed cash/supplies for the garden/market. Additional cash donations were received from service clubs/personal donors. Port Colborne market vendors and six local farmers/gardeners/vendors supplied/contributed additional fresh produce and retail items for the market and we exceeded our networks goal by creating 28 new service partnerships.

Project	Description
Get There with Ride Share	For many residents transportation is an access barrier, particularly for people living in poverty. A web-based ride share service addresses this need by facilitating connections among people who may be going to the same place. It applies to work, school as well as social & recreational outings. Beyond its environmental benefits, Ride Share fills a need for transportation that cannot be logistically or reasonably accommodated by existing conventional & inter-municipal transit services.
Agency	
Bridges Community Health Centre	
Municipality	
Regional	

Contract Requirements	**Number Served**			**Highest Assets Impact**
Contract Amount - $67,064.89		Expected	Actual	**Social Assets**: Low Income People are Engaged in their Community Financial Assets: Reduced Cost
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	0	0	
Met Targets Established ☑	Adult 19-64	100	628	**Testimonial**
Completed Objectives ☑	Seniors 65 +	25	0	"Being involved with Ride Share and carpooling with others has helped me to save money, connect with coworkers and contribute to bettering the environment... Gas is very expensive so it's nice to be able to share the cost with others and even better when you are offered a ride for free."
Reporting Requirements ☑	**TOTAL**	**125**	**628**	
Site/Program Review ☑				

Result

At the time of this report, there were 286 people and 12 respected employers in the Niagara region who were registered with Ride Share. This program is proving to be a complementary service to address transportation needs within Niagara.

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Project	Description
Self-Employment Program	Self-employment program to start a part-time or full-time business. This 12 month program will assist clients with developing and implementing a business plan. One-on-one mentoring will be provided along with regular seminars that are all business relevant. We will provide bookkeeping services along with access to the resource centre with access to a computer, office space and some clerical services. All is provided at no cost to the individual.
Agency	
Business Success & Loan Centre Fort Erie	
Municipality	
Fort Erie	

Contract Requirements	Number Served		Highest Assets Impact
Contract Amount - $42,620.70		Expected	Actual	**Personal Assets**: Improved Hope and Motivation **Social Assets:** Low Income People are Engaged in their Community **Human Assets**: Increased Ability to Manage Income and Accumulate Assets **Financial Assets**: Unemployed and Attained a Job

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $42,620.70		Expected	Actual	**Personal Assets**: Improved Hope and Motivation
	Children 0-12	0	0	**Social Assets:** Low Income People are Engaged in their Community
Within Budget ☑	Youth 13-18	0	0	**Human Assets**: Increased Ability to Manage Income and Accumulate Assets
Met Targets Established ❌	Adult 19-64	25	16	**Financial Assets**: Unemployed and Attained a Job
Completed Objectives ☑	Seniors 65 +	0	0	
Reporting Requirements ☑	**TOTAL**	**25**	**16**	**Testimonial**
Site/Program Review ☑				"We were approached by the individual starting the business. Business should be opening February 15, 2017. Start of my self-employment and employment for others."

Results

Our self-employment program was focused on those neighbourhoods identified as having the greatest need for support. Although we did not meet the expected results that we wanted, we will continue to offer self-employment services in the community.

Project	Description
Art Therapy	Children in the lowest income families are more likely to exhibit high levels of emotional anxiety as well as aggression. Poverty also impacts children's mental health. These families will be offered art therapy for their children.
Agency	
Community Living Port Colborne Wainfleet	
Municipality	
Port Colborne	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $27,944.51		Expected	Actual	**Personal Assets**: Improved hope and motivation
	Children 0-12	7	8	**Social Assets**: Support Networks
Within Budget ☑	Youth 13-18	5	11	**Human Assets**: Obtained needed health services, Enhanced life skills
Met Targets Established ☑	Adult 19-64	0	3	
Completed Objectives ☑	Seniors 65 +	0	0	**Testimonial**
Reporting Requirements ☑	**TOTAL**	**12**	**22**	"Our son felt awful about himself because he is 'different'. He was talking about hurting himself… The art therapy is exactly what he needed. It gives him a voice. Art therapy was amazing. It has improved our situation at home. We did not know that this kind of therapy even existed."
Site/Program Review ☑				

Result

Children and youth who received art therapy were much more able to self-regulate their emotions. Parents of children expressed their gratitude, as children seemed to be doing better with therapy. The impact of the project over long term will be monitored as we continue to work with the kids and keep in contact with families.

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Project	Description
Dress for Success Niagara West	Job seekers can have the best resume and interview skills but without a good quality interview outfit, they often lack the confidence that they need to present themselves well to employers. Dress for Success Niagara West will partner with local thrift stores to create a voucher system that will enable job seekers to select a free interview outfit and/or a free outfit for their first day of work. In addition, potential clothing donors will be found & Dress for Success workshops will be created.
Agency	
Employment Help Centre	
Municipality	
Lincoln, West Lincoln, Grimsby	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $25,143.68		Expected	Actual	**Social Assets**: Low Income People are Engaged in their Community
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	2	5	**Testimonial**
Met Targets Established ☑	Adult 19-64	60	72	"This program helped me with self-confidence knowing I have proper clothes and nice looking clothes for my job interview… Without this Program I would not have any nice clothes."
Completed Objectives ☑	Seniors 65 +	3	3	
Reporting Requirements ☑	**TOTAL**	**65**	**80**	
Site/Program Review ☑				"Learn how to do an interview properly and look the part. It helps with looking good for the interview… To secure a job, make a good first impression."

Result

The increase in self-confidence the clothing and supports provided to clients expanded beyond employment opportunity. Hire Attire was embraced by the community, from job seekers, to businesses, agencies, educational institutions and private citizens. Hire Attire was offered the opportunity to present the program to Brock University and the Goodman School of Business.

Project	Description
McLaughlin Community House & Denistoun Outreach	Programming includes cooking, sewing, arts, crafts, woodworking, girl-boy talk, afterschool homework help, summer program, reading, and community gardens at McLaughlin Community House. In 2016, it is planned to commence programming for low-income youth in the Densitoun residential development by transporting these youth to service locations at McLaughlin Community House or Faith Welland Outreach.
Agency	
Faith Welland Outreach	
Municipality	
Welland	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $35,007.59		Expected	Actual	**Personal Assets**: Improved Hope and Motivation
	Children 0-12	150	202	**Social Assets**: Low Income People are Engaged in their Community
Within Budget ☑	Youth 13-18	20	51	
Met Targets Established ☑	Adult 19-64	40	81	**Testimonial**
Completed Objectives ☑	Seniors 65 +	6	15	"I love to volunteer with the activities and I'm part of the women's group… the Community House helps us to feel happy and feel that this is our family. Thanks to all the activities my kids have a special place to go during the summer doing nice things instead of being just at home watching TV."
Reporting Requirements ☑	**TOTAL**	**216**	**349**	
Site/Program Review ☑				

Result

New faces attended regularly, and the provision of childcare has been a definite driving force to continued attendance. We were able to build strong connections with the parents of the Denistoun area by providing a many different programs.

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Project	Description
In Support of Local Community Gardens	Providing support and expansion for Community Gardens in Queenston, St Catharines. With community volunteers, Greening Niagara will rebuild the Centennial garden feeding 52 families & orgs, provide a new garden build with 12 plots, & strengthen community support for all three locations. The program also provides a community-training program and food bank donations.
Agency	
Greening Niagara	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $19,539.68		Expected	Actual	**Social Assets**: Low Income People are Engaged in their Community
	Children 0-12	80	463	
Within Budget ☑	Youth 13-18	30	117	**Testimonial**
Met Targets Established ☑	Adult 19-64	140	385	"I like to know how to grow my own vegetables and this garden makes it very easy to do so by organizing the soil and mulch. I am a newcomer to Canada and when I was REALLY new it was a nice way to meet other Canadians and grow food at the same time."
Completed Objectives ☑	Seniors 65 +	25	94	
Reporting Requirements ☑	**TOTAL**	**275**	**1,059**	
Site/Program Review ☑				

Result

With the materials we were able to purchase in combination with materials donated, we were able to provide hands on learning in the form of workshops in our garden. Residents participated in building garden plots, vertical planters, spreading mulch, adding soil, plot preparation, as well as planting, growing, and harvesting. The garden was open seven days a week for participants.

Project	Description
Reading Rocks Junior	This is a literacy intervention program for children 4-6, who are at-risk for reading difficulties. Responding to the need to provide support to children during this crucial time period to prevent more challenging reading difficulties later on. This project expansion includes two caregiver workshops on early literacy and effective use of technology in learning as well as exploring children's learning engagement.
Agency	
Learning Disabilities Association of Niagara Region	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $20,122.02		Expected	Actual	**Social Assets**: Low Income People are Engaged in their Community, Children and Youth Participate in Activities, Information Network
	Children 0-12	40	34	
Within Budget ☑	Youth 13-18	0	0	**Human Assets**: Enhanced Life Skills
Met Targets Established ❌	Adult 19-64	20	23	**Testimonial**
Completed Objectives ☑	Seniors 65 +	0	0	"My son is more excited, motivated, and enthusiastic in his approach to reading. The program has made it fun and enjoyable rather than daunting and tiresome. (He) was easily frustrated when trying to read, especially if he couldn't figure it out... Now he is eager to listen to a story as well as point out words he knows."
Reporting Requirements ☑	**TOTAL**	**60**	**57**	
Site/Program Review ☑				

Result

This project was successful as the data collected shows that children improved in their literacy skills over the course of the program. Parents found these workshops informative and provided positive feedback. The United Way of St. Catharines has provided funding to continue offering this program and we will continue to collect pre and post-test data to measure the effectiveness of the program.

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Project	Description
SMUN Bridge to Employment	The objective of this project was to provide food handling and processing skills training for SMUN clients in a commercial setting. SMUN collaborated with two businesses in Niagara to accomplish this goal - Wrap It Up Raw and WP Warehousing. This allows SMUN gardens to convert produce into a variety of processed products for year-round sale and use.
Agency	
Start Me Up Niagara	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $28,229.34		Expected	Actual	**Personal Assets**: Improved Hope and Motivation
	Children 0-12	0	0	**Social Assets:** Low Income People are Engaged in their Community
Within Budget ☑	Youth 13-18	0	0	**Human Assets**: Enhanced Life Skills, Obtained Employment Skills
Met Targets Established ☑	Adult 19-64	10	12	**Financial Assets**: Unemployed and Attained a Job
Completed Objectives ☑	Seniors 65 +	2	2	
Reporting Requirements ☑	**TOTAL**	**12**	**14**	**Testimonial**
Site/Program Review ☑				"Being able to have steady work, and being in a great learning environment. I have learned so many new skills and am becoming more confident in my abilities. I have been off work for many years to deal with my disability and raise my children. My resume needs to be built up and having positive feedback about my work is helping me feel more confident about returning to permanent work."

Result

We are managing the positive impacts of this project by continuing to work with the project participants who were hired part and full time from the pilot by WP Warehousing. Some of our clients have successfully applied and are getting approval for a subsequent project in the Manufacturing Supply Chain Services Training Program.

Project	Description
Grantham Teen Active Living (GTAL)	GTAL will provide youth from the Old Pine Trail subsidized housing complex and the surrounding Grantham neighbourhood the opportunity to participate in field trips promoting active living such as beach volleyball, snowshoeing, and high ropes. Such excursions are often unattainable to low-income families due to cost and transportation. Field trips will be planned, implemented, and evaluated by neighbourhood youth. Participants will gain the common experience of their more affluent peers.
Agency	
United Way of St. Catharines & District	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $4,781.24		Expected	Actual	**Social Assets**: Children and Youth Participate in Activities
	Children 0-12	20	45	
Within Budget ☑	Youth 13-18	20	28	**Testimonial**
Met Targets Established ☑	Adult 19-64	0	0	"…because I get to go on trips I get to experience things that my parents may not be able to afford. The best things about trips is seeing all my friends."
Completed Objectives ☑	Seniors 65 +	0	0	
Reporting Requirements ☑	**TOTAL**	**40**	**73**	
Site/Program Review ☑				

Result

Many of these participants will remain engaged with the Grantham After School program moving forward, which will continue to provide access to free educational, recreational, and leisure activities in this neighbourhood.

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2016 Individual NPI Project Evaluation

Project	Description
AOA (Autism Ontario Adult) Summer Day Camp	AOA Summer Day Camp for adults with ASD who have high support needs offers a supported program in a vacation-like setting to combat isolation & allow campers choice in activities of interest to adults that encourage social interactions & build skills
Agency	
Autism Ontario Niagara Region Chapter	
Municipality	
St. Catharines; Welland	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $50,341.37		Expected	Actual	**Social Assets**: Children and Youth Participate in Activities
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	0	8	**Testimonial**
Met Targets Established ☑	Adult 19-64	20	17	"Being able to provide (him) with a specific routine alleviates his stress which avoids triggering a melt-down that typically involves some serious self-injurious behaviour… this program also makes him happy and provides much needed social recreation time… it gives (him) a routine, but also allows me some freedom."
Completed Objectives ☑	Seniors 65 +	0	0	
Reporting Requirements ☑	**TOTAL**	**20**	**25**	
Site/Program Review ☑				

Result

We have already seen positive impacts from offering the adult summer camp. We are now offering an evening adult recreation program this fall and had no trouble achieving registration numbers. Our measure of the impact of this project over the long term will be the continued engagement of these adults in our programs and the number of requests for additional supports relating to factors such as housing and employment that will help individuals achieve quality of life and independence.

Project	Description
Mobile Kids Zone - Community Cruiser	This project will increase the access to physical activity in priority neighborhoods by supplying staff to engage children and youth in play, sports and activities.
Agency	
Boys and Girls Club of Niagara	
Municipality	
Fort Erie; Niagara on the Lake	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $30,073.57		Expected	Actual	**Physical Assets**: Obtained Care for Child or Other Dependant
	Children 0-12	60	105	**Social Assets**: Children and Youth Participate in Activities
Within Budget ☑	Youth 13-18	4	2	
Met Targets Established ☑	Adult 19-64	0	0	**Testimonial**
Completed Objectives ☑	Seniors 65 +	0	0	"…I had a lot of fun and it helped me to become more active and I met a lot of nice kids. Because my usual activity is swimming or mostly watching tv or on my tablet this was so healthy for me."
Reporting Requirements ☑	**TOTAL**	**64**	**107**	
Site/Program Review ☑				

Result

This project was a success because it engaged children in sports activities and got them active when they were not involved in other activities. The project was also a success because children were able to participate with the proper equipment, and with enough equipment to participate fully. The activities and sports provided are ones which are not generally available directly in their neighborhoods

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Project	Description
"A Clean Start" Laundry Program	Individuals will be able to access vouchers from the Housing Help Centre to use at a partnering laundromat to do laundry. Community Care will also provide a bus ticket, if required and laundry soap.
Agency	
Community Care of St. Catharines & Thorold	
Municipality	
St. Catharines	

Contract Requirements	Number Served		Highest Assets Impact
Contract Amount - $11,504.58		Expected / Actual	**Personal Assets**: Enhanced Self-esteem and Self-confidence, Improved Hope and Motivation **Social Assets**: Low Income People are Engaged in their Community

Contract Requirements		Number Served			Highest Assets Impact
Contract Amount - $11,504.58			Expected	Actual	**Personal Assets**: Enhanced Self-esteem and Self-confidence, Improved Hope and Motivation
		Children 0-12	135	88	**Social Assets**: Low Income People are Engaged in their Community
Within Budget ☑		Youth 13-18	135	12	
Met Targets Established ❌		Adult 19-64	390	512	**Testimonial**
Completed Objectives ☑		Seniors 65 +	90	21	
Reporting Requirements ☑		**TOTAL**	**750**	**633**	"I saw the program advertised at the Housing Help Centre. I needed help with laundry because I don't have a washing machine. Every week the program helps me as I am low income. I can save extra money for food. I can care for myself better now."
Site/Program Review ☑					

Result

A primary outcome of the program was client satisfaction. Clients accessing this program have stated the many barriers they face in order to obtain clean clothing include not only insufficient funds for laundry but also the lack of transportation and/or lack of funds for transportation. Clients are now able to spend more of their funds on things like safer and stable housing, food, utilities and even small luxuries that are normally out of reach for most. Emotionally clients have reported feeling a lot better about themselves.

Project	Description
Young Fun	A no cost afterschool/early evening program for children and youth aged 4 - 21 years of age. Free parenting classes once per month. We will also have a child/ youth worker on hand for those requiring support.
Agency	
Community Living Port Colborne Wainfleet	
Municipality	
Port Colborne; Wainfleet	

Contract Requirements		Number Served			Highest Assets Impact
Contract Amount - $46,850.67			Expected	Actual	**Personal Assets**: Improved Hope and Motivation
		Children 0-12	30	55	**Social Assets**: Low Income People are Engaged in their Community, Children and Youth Participate in Activities
Within Budget ☑		Youth 13-18	20	23	
Met Targets Established ☑		Adult 19-64	20	19	**Financial Assets**: Reduced Cost
Completed Objectives ☑		Seniors 65 +	0	0	**Testimonial**
Reporting Requirements ☑		**TOTAL**	**70**	**97**	
Site/Program Review ☑					"I am a single parent so the fact that it was free was great. My daughter was a homebody and did not want to go out. But now she has become independent and enjoys going out with kids her own age."

Result

We offered some very good quality programs that kids do not always have the opportunity to try. We also provided transportation to some of the children and youth who otherwise would not be able to attend. We were able to hire four individuals living in poverty to help with our programs. One individual is still employed at our agency.

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Project	Description
Niagara West Community Garden Collective	Continue to grow the three established community gardens and in response to gardener requests. Will incorporate more cooking and preservation classes / workshops, and will pilot a new Children in the Garden program and will investigate the addition of other existing gardens to the Collective. In addition, we will establish a volunteer program to assist with garden operation and community outreach.
Agency	
Employment Help Centre	
Municipality	
Grimsby	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $64,058.58		Expected	Actual	**Personal Assets**: Improved Hope & Motivation **Physical Assets**: Increased Food Security **Social Assets**: Support Network, Information Network
	Children 0-12	0	66	
Within Budget ☑	Youth 13-18	0	0	
Met Targets Established ☑	Adult 19-64	40	67	
Completed Objectives ☑	Seniors 65 +	25	30	**Testimonial**
Reporting Requirements ☑	**TOTAL**	**65**	**163**	"As a newcomer to the area, having a plot in the community gardens enabled me to meet many of my neighbours, both young and older. Seeds, recipes, and vegetables were shared as well as gardening knowledge. I have even started canning with my vegetables… The outcome of the gardens for me and my husband is that we are eating better and exercising more."
Site/Program Review ☑				

Result

All our garden plots were full, and we had a wait list in spring of 2018. We are exploring expanding our program and services to meet the increased demand. Garden members reported increased consumption of fresh vegetables, increased fresh local produce available in the other programs (food banks and food programs - Community Care West Niagara, West Lincoln Community Care, and Loaf of Bread), demonstrated increased knowledge, skills and behaviours for growing food and feeling more connected to the community.

Project	Description
Denistoun Outreach Staffing	Programming includes cooking, sewing, arts, crafts, woodworking, girl-boy talk, after school homework help, summer program, reading, and community gardens. Successfully implementing the outreach to this new neighbourhood (Denistoun) requires dedicated staffing for the initial phase of service provision.
Agency	
Faith Welland Outreach	
Municipality	
Welland	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $28,198.00		Expected	Actual	**Social Assets**: Children and Youth Participate in Activities
	Children 0-12	150	220	
Within Budget ☑	Youth 13-18	20	75	**Testimonial**
Met Targets Established ☑	Adult 19-64	40	62	"…they have had unique experiences that I would not have been able to provide them on my own such as bird house making and flower arranging. As a single parent, I wouldn't be able to afford similar activities without it being free for us like this one."
Completed Objectives ☑	Seniors 65 +	6	15	
Reporting Requirements ☑	**TOTAL**	**216**	**372**	
Site/Program Review ☑				

Result

Developing Jr. leaders allows for a "lead by example" approach. Watching Jr. leaders take ownership of their community by investing in those younger than themselves gives a positive impact on the community itself. The hope is to generate more leaders that allows a positive cycle to develop.

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Project	Description
The FORT Empowering Youth	The FORT will continue its mission of youth empowerment by expanding our teen programs while sourcing support and creating new partnerships in the communities we now serve.
Agency	
FORT	
Municipality	
Grimsby	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $166,541.80		Expected	Actual	**Physical Assets**: Obtained Care for Child or Other Dependent **Social Assets**: Children and Youth Participate in Activities
	Children 0-12	100	251	
Within Budget ☑	Youth 13-18	150	102	
Met Targets Established ☑	Adult 19-64	0	0	
Completed Objectives ☑	Seniors 65 +	0	0	**Testimonial**
Reporting Requirements ☑	**TOTAL**	**250**	**353**	"The FORT also gave me the opportunity to meet new friends and the ability to have friends that will stick with me no matter what. This is important because when I was growing up I got bullied and did not have the skills to cope with the bullies. Because of the FORT I now gained those skills and can now stick up for myself and others."
Site/Program Review ☑				

Result

The Resource Developer has increased the FORT's success in community outreach, support, and fundraising. More people are aware of the FORT, and are supporting our programs through donation, volunteering, and fundraisers.

Project	Description
Housing Coach	One-one dedicated Housing Coach (HC) for adults and families in Fort Erie who are homeless, or at risk of being homeless. The HC will provide front-line help with housing crisis situations and mitigating common barriers to persons living in poverty such as lack of phone and transportation.
Agency	
Fort Erie Multicultural Centre	
Municipality	
Fort Erie	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $38,542.64		Expected	Actual	**Personal Assets**: Enhanced Self-esteem and Self-confidence, Improved Hope and Motivation **Physical Assets**: Prevented Eviction or Utility Shut-off, Obtained Safe, Affordable, Rental Housing **Social Assets**: Low Income People are Engaged in their Community, Support Network, Information Network
	Children 0-12	40	0	
Within Budget ☑	Youth 13-18	25	0	
Met Targets Established ❌	Adult 19-64	80	48	
Completed Objectives ☑	Seniors 65 +	15	4	
Reporting Requirements ☑	**TOTAL**	**160**	**52**	
Site/Program Review ☑				**Testimonial**
				"… I am facing eviction. Having someone to talk to who is making time and generating options for me is giving me hope… having an advocate is helping me to cope better and therefore there is less negative impact on my physical and mental health because I am not alone or isolated in the moment."

Result -Approved for $38,542 this two year project was shortened due to staffing issues and instead received $26,537. The project was able to facilitate and strengthen new and existing landlord relationships by creating a unified strategy that included consistent messaging and the creation of important space for landlords to share their experiences, challenges and successes. The 52 clients who were served by the project, totaled in number of interactions and total hours spent in direct service, exceeded the service unit target of 1,365 hours that was originally proposed.

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Project	Description
Rock Solid	A 40 week life skills program taught to young, pregnant and parenting women under the age of 21 experiencing homelessness or at risk of homelessness. This program addresses the skills necessary to reduce risks associated with homelessness and associated levels of poverty, such as education, employability, income, shelter and the health of the women and their babies.
Agency	
Hannah House	
Municipality	
Niagara Falls	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $6,113.49		Expected	Actual	**Personal Assets**: Increase Self-awareness, Enhanced Self-esteem and Self-confidence, Improved Hope and Motivation
	Children 0-12	8	7	
Within Budget ☑	Youth 13-18	6	6	**Social Assets**: Support Network, Information Network
Met Targets Established ☑	Adult 19-64	2	6	
Completed Objectives ☑	Seniors 65 +	0	0	**Testimonial**
Reporting Requirements ☑	**TOTAL**	**16**	**19**	"I heard about the project through Hannah House when I first arrived. I currently attend all the classes to help myself further in the future. The best thing about the program would be all the many different things we learn for our daily tasks or future tasks for independence."
Site/Program Review ☑				

Result

Participants worked through the Rock Solid project during their stay in residency at Hannah House, completing topics such as goal setting, organization, financial planning, nutrition, relationship skills, communication and assertiveness, self-care, hobbies, infant care/parenting, and job preparedness.

	Description
Project	
Inclusive Summer Adventure Camp & Winter Break Camp	We will provide 90 children from families living in poverty with a week of summer camp and 10 children with a week of winter camp. The camp experience will expand the campers' social views, enhance skills both physical & learning, increase self-esteem and provide hope.
Agency	
Heartland Forest Nature Experience	
Municipality	
Niagara Falls	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $38,617.82		Expected	Actual	**Physical Assets**: Obtained Care for Child or Other Dependant
	Children 0-12	100	95	**Social Assets**: Children and Youth Participate in Activities
Within Budget ☑	Youth 13-18	0	0	
Met Targets Established ❌	Adult 19-64	0	0	
Completed Objectives ☑	Seniors 65 +	0	0	**Testimonial**
Reporting Requirements ☑	**TOTAL**	**100**	**95**	"I have seen my kids' blossom in making friends, and the joy we have that they could have an opportunity to go to a Day Camp has been wonderful. We have five children. Unfortunately it's not in our budget to send our kids to camp. It has built confidence in our kids and they have seen the graciousness of others by being able to go to camp."
Site/Program Review ☑				

Result

All of the children that attended our Summer Adventure Camp were invited to return for a second week of Summer Adventure Camp at no charge. These children were not counted in any reporting as this was an additional free gift to the families from Heartland Forest. With the pilot behind us, we feel we are well positioned to continue this program for the next two years.

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Project	Description
Work Experience Program for Adults with Disabilities	This pilot project is a one-year structured and goal-oriented work experience program for adults with intellectual and developmental disabilities. This initiative will remove barriers and increase equitable access to participation in community life & workplace opportunities through the development of knowledge and skills.
Agency	
Heartland Forest Nature Experience	
Municipality	
Niagara Falls; Thorold; Welland	

Contract Requirements	Number Served		Highest Assets Impact
Contract Amount - $37,206.38		Expected	Actual	**Social Assets**: Information Network

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $37,206.38		Expected	Actual	**Social Assets**: Information Network **Human Assets**: Obtained Employment Skills
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	0	0	**Testimonial**
Met Targets Established ☑	Adult 19-64	29	29	"I am a person who had a traumatic brain injury and had a terrible time accepting the fact that I am never going to return to my own business…[this program] made me feel important and gave me a reason to help where I can not only myself but others in need."
Completed Objectives ☑	Seniors 65 +	35	35	
Reporting Requirements ☑	**TOTAL**	**64**	**64**	
Site/Program Review ☑				

Result

Aside from gaining valuable experience that helped in preparing people to enter the work force, this project also provided an opportunity for community involvement and social interactions. Gaining work experience and being able to socialize with staff and other members of the program created a sense of purpose and pride in the participants, and helped boost self-esteem and confidence.

Project	Description
Garden-Fresh Food Every Time (Summer and Winter)	Participants will learn to grow vegetables adapted to the conditions in the Region, and learn cooking and preserving skills.
Agency	
Links for Greener Learning Inc.	
Municipality	
Fort Erie; St. Catharines; Welland	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $45,341.57		Expected	Actual	**Personal Assets**: Increase Self-awareness **Physical Assets**: Increased Food Security **Social Assets**: Information Network
	Children 0-12	40	77	
Within Budget ☑	Youth 13-18	15	44	**Testimonial**
Met Targets Established ☑	Adult 19-64	100	196	"Students had the opportunity to engage in experiences that were both educational and inspiring, for some, ex: strawberry picking, it was first time experience. Students are experiencing Canadian Culture and engaging in the community. It also introduce students in job opportunities. "
Completed Objectives ☑	Seniors 65 +	30	24	
Reporting Requirements ☑	**TOTAL**	**185**	**341**	
Site/Program Review ☑				

Result

The project has continued to see exponential growth each year and the impact within the lives of the families is evident through the level of participation and interest. As a result of this project, the City of St. Catharines has allocated funds to restore a community garden in St. Catharines (Buchanan Community Gardens) and a new garden was started in Niagara Falls (Westlane Secondary), which will serve an additional 40 families.

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Project	Description
Links for Greener School Yards	This project will address food security, nutrition education, and civic engagement for students, their families, and neighbours within the communities around Lincoln Centennial School, St. Christopher School, and a future partner school in 2017.
Agency	
Links for Greener Learning Inc.	
Municipality	
St. Catharines	

Contract Requirements	Number Served		Highest Assets Impact
Contract Amount - $19,750.67		Expected / Actual	**Personal Assets**: Increase Self-awareness **Social Assets**: Children and Youth Participate in Activities **Human Assets**: Enhanced Life Skills

Number Served	Expected	Actual
Children 0-12	240	1173
Youth 13-18	10	269
Adult 19-64	25	128
Seniors 65 +	6	0
TOTAL	**281**	**1,570**

Within Budget ☑
Met Targets Established ☑
Completed Objectives ☑
Reporting Requirements ☑
Site/Program Review ☑

Testimonial

"Children are naturally curious and many just thought "veggies" came from store. Now they are excited to learn and watch their vegetables grow, and to use these vegetables as raw snacks or in recipes they can make themselves."

Result

Outcomes included the learning of new valuable skills which included cooking (things such as spaghetti sauce, eggplant fritters, salads and salad dressing, thanksgiving herb bunches, garden snacking) as well as additional educational lessons on nutrition, food preparation and cooking, diversity, pest control, water conservation, seed saving, pollination, and garden planning were given.

Project	Description
Summer Family Literacy Program	A summer family literacy program for children in low SES households identified as at risk in key foundational skills in emergent literacy that will facilitate their success moving forward into grade 1. A unique union of direct intervention with children by trained professionals while simultaneously coaching parents on how to facilitate the early literacy skills in their child.
Agency	
Niagara Children's Centre	
Municipality	
Fort Erie	

Contract Requirements	Number Served		Highest Assets Impact
Contract Amount - $10,965.9		Expected / Actual	**Personal Assets**: Enhanced Self-esteem and Self-confidence, Improved Hope and Motivation **Social Assets**: Children and Youth Participate in Activities, Support Networks, Information Networks **Human Assets**: Enhanced Life Skills

Number Served	Expected	Actual
Children 0-12	18	36
Youth 13-18	0	1
Adult 19-64	20	25
Seniors 65 +	0	0
TOTAL	**38**	**62**

Within Budget ☑
Met Targets Established ☑
Completed Objectives ☑
Reporting Requirements ☑
Site/Program Review ☑

Testimonial

"I've been very involved in my child's education and development. I've learned to be more patient with my child and allow her to take the lead as to what interests her."

Result

Parents shared that they themselves were more aware of the foundational skills of literacy with respect to their children. They found that their children were more receptive to book sharing overall, looking at books for longer periods, trying some of the target skills and showing increased awareness of everyday literacy in their environment.

Project	Description
Health Attack - After School Program	After school program for children age 6-12 with a healthy living focus 1x per week in two different locations as well as a Professional Development, and March Break camps throughout the school year. The weekly program will allow the participants a chance to access and learn about healthy foods while also participating in weekly activities.
Agency	
Niagara Folk Arts Multicultural Centre	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $31,981.22		Expected	Actual	**Personal Assets**: Increase Self-awareness, Enhanced Self-esteem and Self-confidence **Physical Assets:** Increased Food Security **Social Assets**: Children and Youth Participate in Activities, Information Network
	Children 0-12	40	65	
Within Budget ☑	Youth 13-18	5	13	
Met Targets Established ☑	Adult 19-64	20	25	
Completed Objectives ☑	Seniors 65 +	0	0	
Reporting Requirements ☑	**TOTAL**	**65**	**103**	**Testimonial**
Site/Program Review ☑				"…the benefits of after-school activities are numerous. It helps children choose a fun way to learn, develop talents and skills, and build confidence."

Result

We were able to create a partnership with Brock University and the Niagara Catholic District School Board that allowed us to use their outdoor education facility with their trained staff to give these children an opportunity to experience the outdoors in ways they for the most part had never done before. This opportunity was in addition to partnerships created before the grant and serves as an example of where the program was able to reach.

Project	Description
Summer ESL for Adults and Children	Half-day summer English Second Language (ESL) classes for newcomers to Canada coordinated with a summer program for newcomer children age 6-12 that enables the clients to continue to learn English over the summer months while their children are in programming.
Agency	
Niagara Folk Arts Multicultural Centre	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $14,289.98		Expected	Actual	**Personal Assets**: Increase Self-awareness, Enhanced Self-esteem and Self-confidence, Improved Hope and Motivation **Social Assets**: Support Network, Information Network **Human Assets**: Enhanced Life Skills, Obtained Employment Skills
	Children 0-12	20	27	
Within Budget ☑	Youth 13-18	8	10	
Met Targets Established ☑	Adult 19-64	40	35	
Completed Objectives ☑	Seniors 65 +	0	0	
Reporting Requirements ☑	**TOTAL**	**68**	**72**	**Testimonial**
Site/Program Review ☑				"…been attending ESL classes to improve my language ability… visited the local library and got a library card… Improved my language proficiency in listening and speaking. This is a good project for new immigrants."

Result

Some of the students in this class had literacy barriers, even in their first language. This project was not only level appropriate but also a task that mirrors real life. Through every day language instruction, students learned the alphabet, numbers and basic structures of the English language and telephone etiquette. For most of the students this was the first time they would leave a voice message.

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Project	Description
Niagara's Food Forest	Niagara's Food Forest will reduce poverty in St. Catharines' Queenston St. neighbourhood by expanding Niagara's most productive community garden. A Living Wall will be constructed adjacent to the garden and more fruit trees will be planted. Access to locally grown food for area residents will improve. This initiative also includes a series of workshops designed to teach residents how to grow food in limited spaces such as balconies.
Agency	
Niagara Sustainability Initiative	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $56,206.59		Expected	Actual	**Physical Assets**: Increased Food Security
	Children 0-12	180	78	**Social Assets**: Low Income People are Engaged in their Community, Support Network, Information Network
Within Budget ☑	Youth 13-18	60	0	
Met Targets Established ❌	Adult 19-64	220	78	**Human Assets**: Enhanced Life Skills, Obtained Employment Skills
Completed Objectives ☑	Seniors 65 +	60	18	
Reporting Requirements ☑	**TOTAL**	**520**	**174**	**Financial Assets**: Reduced Cost
Site/Program Review ☑				

Testimonial
"…it keeps me active and it provides a gardening alternative since I live in an apartment. I enjoy the fresh produce."

Result

Approved for $56,206 for two years this project was shortened to nine months and received $20,234 due to the agency closing. The garden did become fully active with local residents managing their own garden plot. Local families and individuals were also able to participate in numerous workshops learning how to create and improve their gardening skills, vertical gardening skills, and increase their own self-reliance and community connections.

Project	Description
Financial Literacy Workshops	Using the Prosper Canada Financial Literacy curriculum, the Niagara West Adult Learning Centre will offer Financial Literacy Workshops for the residents of Niagara West.
Agency	
Niagara West Adult Learning Centre	
Municipality	
Grimsby	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $15,841.16		Expected	Actual	**Human Assets**: Enhanced Life Skills, Increased Ability to Manage Income and Accumulate Assets
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	0	0	**Testimonial**
Met Targets Established ❌	Adult 19-64	75	39	"My income tax return was done quickly, filed on-line, and it was free. I do not have extra money to spend."
Completed Objectives ☑	Seniors 65 +	45	8	
Reporting Requirements ☑	**TOTAL**	**120**	**47**	
Site/Program Review ☑				

Result

Rural inaccessibility played a role in having less than expected participants signing up for this program. Due to low registration, a topic that is difficult to sell initially, along with the Prosper Canada Financial Literacy curriculum and the unavailability of trained workshop deliverers, clients were difficult to attract.

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Project	Description
Skills to Work	Provide training for individuals to gain in demand skills and successfully connect to the workforce. The training will be unique, be provided locally and be free of charge to participants.
Agency	
Niagara West Adult Learning Centre	
Municipality	
Grimsby; Lincoln; West Lincoln	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $27,676.67		Expected	Actual	**Personal Assets**: Enhanced Self-esteem and Self-confidence, Improved Hope and Motivation
	Children 0-12	0	0	**Human Assets**: Enhanced Life skills, Obtained Employment Skills
Within Budget ☑	Youth 13-18	0	0	
Met Targets Established ☑	Adult 19-64	36	47	
Completed Objectives ☑	Seniors 65 +	0	1	**Testimonial**
Reporting Requirements ☑	**TOTAL**	**36**	**48**	"Took the Pre-employment Training Program. I learned a great deal about various career objectives & how to enhance my resume. What employers look for, when they're hiring for employment in today's work force."
Site/Program Review ☑				

Result

As a result of the program, as of the writing of this report, two clients who experience functioning autism were able to apply for a job and both were hired. Eight other clients were also hired. Some of our graduates have been hired directly into our local wine industry.

Project	Description
Engaging People with Serious Mental Illness Towards Employability	This project involves engaging people with serious mental illness in the planning, execution, presentation, participation and evaluation in a clubhouse conference. This offers an opportunity for Oak Centre's members to gain work and practical experience in order to increase their employability skills.
Agency	
Oak Centre	
Municipality	
Welland	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $16,368.00		Expected	Actual	**Personal Assets**: Enhanced Self-esteem and Self-confidence, Improved Hope and Motivation
	Children 0-12	0	0	**Social Assets**: Support Networks, Information Network
Within Budget ☑	Youth 13-18	0	0	**Human Assets**: Obtained Needed Health Services, Enhanced Life Skills, Obtained Employment Skills
Met Targets Established ❌	Adult 19-64	60	57	
Completed Objectives ☑	Seniors 65 +	0	0	
Reporting Requirements ☑	**TOTAL**	**60**	**57**	**Testimonial**
Site/Program Review ☑				"I suffer from Schizophrenia and Depression…going to the Clubhouse conference was a great experience. It helped my self-confidence and self-esteem in many ways."

Result

The 5th Canadian Clubhouse Conference took place in June 2016. We asked respondents if they felt they built some skills because of the conference: 68.75% increased communication skills; 34.38% increased information management skills; 56.25% increased their critical thinking/problem solving skills; 59.38% increased interpersonal skills; 56.25% increased personal skills

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Project	Description
Food Central Learning Garden	This project will be growing organic produce in a 5,000 square foot garden. Garden Volunteers will be trained in all aspects of gardening (planning, planting, weeding, harvesting, marketing, and care of the different produce) with ongoing support. Any abundance of food will be sold at the Market stand. Volunteers will get a % of sales and a % will go to supporting the project costs.
Agency	
Open Arms Mission	
Municipality	
Welland; Port Colborne; Wainfleet	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $24,535.42		Expected	Actual	**Physical Assets**: Increased Food Security
				Social Assets: Information Network
	Children 0-12	0	11	**Financial Assets**: Reduced Cost
Within Budget ☑	Youth 13-18	0	4	
Met Targets Established ☑	Adult 19-64	25	35	**Testimonial**
Completed Objectives ☑	Seniors 65 +	10	6	
Reporting Requirements ☑	**TOTAL**	**35**	**56**	"I enjoyed learning about planting times and soils, various ways to plant, what to plant beside other plants, what can be planted to fend off insects, etc. ...learning patience and putting in the hard work before one is able to see the bounty of all that work - that is significant. I think next year I will have a garden of my own."
Site/Program Review ☑				

Result

We have opened up the garden and learning aspects to a broader aspect of the community, with an opportunity to have garden plots for various people working side by side - learning from each other. We have also attracted a local beekeeper who brought two hive boxes and is storing them near our garden plots.

Project	Description
Community Garden	This initiative will involve expansion of the current community gardens in the 3 Bridges Community to include safe food handling, meal preparation, cooking and canning produce grown in the garden. The Facilitator will introduce participants to basic gardening skills, do food demonstrations at the food bank & provide workshops in nutrition.
Agency	
Port Cares	
Municipality	
Port Colborne	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $36,705.57		Expected	Actual	**Physical Assets**: Increased Food Security, Obtained Care for Child or Other Dependant
	Children 0-12	0	35	**Social Assets**: Children and Youth Participate in Activities
Within Budget ☑	Youth 13-18	20	52	**Human Assets**: Enhanced Life Skills
Met Targets Established ☑	Adult 19-64	25	174	**Financial Assets**: Reduced Cost
Completed Objectives ☑	Seniors 65 +	5	6	
Reporting Requirements ☑	**TOTAL**	**50**	**267**	**Testimonial**
Site/Program Review ☑				"… I was able to attend/assist with the cooking class… working with the clients from Community Living and NTEC, I am now exploring these options for my second year placement and career path."

Result

The program brought thousands of pounds of fresh produce for use in the community meals and foodbank, which in turn provided additional/healthy alternatives to the canned/dry goods typical of foodbank supplies.

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Project	Description
Niagara Poverty Reduction Network Speakers Bureau Coordination	Positive Living Niagara will offer coordination support to the Niagara Poverty Reduction Network's Speakers Bureau. It will recruit and train speakers for the Bureau. This project will also assist in refreshing presentation materials and promotional materials for the Bureau.
Agency	
Positive Living Niagara	
Municipality	
Regional	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $8,737.76		Expected	Actual	**Personal Assets**: Increase Self-awareness, Improved Hope and Motivation **Social Assets**: Low Income People are Engaged in their Community, Support Networks, Information Network
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	100	4	
Met Targets Established ❌	Adult 19-64	1320	359	
Completed Objectives ☑	Seniors 65 +	120	0	
Reporting Requirements ☑	**TOTAL**	**1,540**	**363**	**Testimonial**
Site/Program Review ☑				"This program has made me consider all the pieces to the puzzle that make-up poverty, and not just the more obvious ones, as well as the situations that 'support' poverty which was a new concept for me"

Result

The project although falling short on meeting service targets does have a good core team on the task group working on sustaining the speakers' bureau. We are moving forward with revising content for presentation and creating a better promotional strategy to move forward. Although the project has ended, the Task group and speakers will continue to function under the operating model that we have created through this project.

Project	Description
Housing & Homelessness Case Facilitation	An Intensive Case Manager specializing in mental health and addictions help people find and retain their housing.
Agency	
Project SHARE of Niagara Falls Inc.	
Municipality	
Niagara Falls	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $86,292.01		Expected	Actual	**Physical Assets**: Obtained Safe, Affordable, Rental Housing **Social Assets**: Support Networks, Information Network
	Children 0-12	2	15	
Within Budget ☑	Youth 13-18	16	10	
Met Targets Established ☑	Adult 19-64	25	65	
Completed Objectives ☑	Seniors 65 +	6	20	
Reporting Requirements ☑	**TOTAL**	**49**	**110**	**Testimonial**
Site/Program Review ☑				"I was homeless and staying at the 'Out of the Cold' in St. Catharines for several months, and couch surfing off and on for awhile. For the first time in a very long time I feel like my life will improve. I have a chance to finally get my own apartment somewhere to live that is safe and affordable."

Result

Improvements in self-esteem, independence, family relationships, reduced stress, and success finding / retaining affordable housing are providing foundation for people to build their lives, improve health and participate in society. Clients have stated they feel like they have found some sense of hope and encouragement with this program, it is definitely making a difference in their daily lives.

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Project	Description
Expressions	Finding, sharing voice using a variety of art forms & presentation methods to encourage participation, sharing of interests & talents. Creates new voice & spaces in community for those who are excluded.
Agency	
Start Me Up Niagara	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $23,201.20		Expected	Actual	**Personal Assets**: Increase Self-awareness, Enhanced Self-esteem and Self-confidence **Social Assets**: Support Network, Information Network
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	2	0	
Met Targets Established ☑	Adult 19-64	30	62	
Completed Objectives ☑	Seniors 65 +	5	3	**Testimonial**
Reporting Requirements ☑	**TOTAL**	**37**	**65**	"I have found an outlet for my creativity and personality to come through without much judgement, plenty of encouragement and tools & resources provided for me along the way. Most of all, I have confirmed many times for myself that I have gifts inside of me to nurture and share to inspire."
Site/Program Review ☑				

Result

Art Me Up continues to take part in community events such as the Art Crawl, In the Soil, and Harvest Festival. The culture of expression through the arts is life changing .Restoring confidence. Helping people cope with life issues. Providing ways out of isolation. Building community.

Project	Description
Income Matters	Provide free income tax filing and apply for all tax related credits for people living in poverty. Assist in securing bank accounts and development of basic financial literacy.
Agency	
Start Me Up Niagara	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $25,785.28		Expected	Actual	**Human Assets**: Enhanced Life Skills, Increased Ability to Manage Income and Accumulate Assets **Financial Assets**: Increased Income from Non-Employment Sources, Build Financial Consent, Reduced Cost
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	0	6	
Met Targets Established ☑	Adult 19-64	60	391	
Completed Objectives ☑	Seniors 65 +	20	156	**Testimonial**
Reporting Requirements ☑	**TOTAL**	**80**	**553**	"My mortgage was in chaos… Ada called the bank and made those in authority understand that I had rights and they were not going to cause me to lose my house. I still have the house and the bank understands all the details. I will continue to pay as required and my housing will be stable."
Site/Program Review ☑				

Result

Over the long term, participants have seen an overall increase in their income and their level of understanding their finances has increased significantly.

Project	Description
RAFT Niagara Regional Housing Summer Camp	Daily Summer camp program that offers sports/active games, arts, crafts, educational activities, field trips, special events & cultural learning opportunities. Camp includes healthy breakfast and snacks. No cost for participation. Program will expand the existing summer programming offered through our After School Matters program. The camp will reduce isolation, provide constructive activities, and child minding support for working parents
Agency	
RAFT	
Municipality	
Niagara Falls; St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $58,656.42		Expected	Actual	**Personal Assets**: Increase Self-awareness, Enhanced Self-esteem and Self-confidence
	Children 0-12	336	337	**Social Assets**: Children and Youth Participate in Activities, Support Network, Information Network
Within Budget ☑	Youth 13-18	144	143	
Met Targets Established ☑	Adult 19-64	0	0	
Completed Objectives ☑	Seniors 65 +	0	0	**Testimonial**
Reporting Requirements ☑	**TOTAL**	**480**	**480**	"My older brother went to program and now works for The Raft. He told me about it and the fun things they did so I started going to program."
Site/Program Review ☑				

Result

We successfully offered 320 hours of health and physical activity programming and 160 hours of education and cultural activities. We offered eight field trips throughout the summer that explored our local community and the assets Niagara has to offer.

Project	Description
Rent Bank	The Rent Bank will expand homelessness prevention in Fort Erie to aid low income households by assisting with rent arrears and rent deposits as a 0%, no penalty loan.
Agency	
The Salvation Army - Fort Erie Community & Family Services	
Municipality	
Fort Erie	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $103,229.28		Expected	Actual	**Physical Assets**: Prevented Eviction or Utility Shut-off, Obtained Safe, Affordable, Rental Housing
	Children 0-12	24	25	**Social Assets**: Low Income People are Engaged in their Community, Support Networks, Information Network
Within Budget ☑	Youth 13-18	9	18	
Met Targets Established ☑	Adult 19-64	66	69	
Completed Objectives ☑	Seniors 65 +	3	6	**Financial Asset**: Obtained Capital Asset, Reduced Cost
Reporting Requirements ☑	**TOTAL**	**102**	**118**	
Site/Program Review ☑				**Testimonial**
				"I was in a tough situation with my marriage ending. I needed to find an apartment… I was unable to acquire first and last months rent deposit for the new apartment. [This program] was a wonderful help in acquiring the deposit."

Result

Many of the families coming for the rent assistance are new to the Salvation Army. This has enabled us to inform them of the services we provide such as ensuring that their utilities are up to date, that they have filled out the OESP forms, and that they are aware of our food bank, tax clinics, and vouchers for the Thrift Store, which further enhances their financial stability.

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Project	Description
Brushed Aside: Dental Care Access	This project will allow the Brushed Aside Dental Care Access program to continue to provide access to dental care for adults in need of treatment through existing agency relationships.
Agency	
United Way of St. Catharines & District	
Municipality	
Regional	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $140,122.00		Expected	Actual	**Personal Assets**: Enhanced Self-esteem and Self-confidence, Improved Hope and Motivation **Human Assets**: Obtained Needed Health Services **Financial Assets**: Reduced Cost
	Children 0-12	0	0	
Within Budget ☑	Youth 13-18	0	0	
Met Targets Established ☑	Adult 19-64	200	172	
Completed Objectives ☑	Seniors 65 +	0	28	**Testimonial**
Reporting Requirements ☑	**TOTAL**	**200**	**200**	"I received my dentures through the brushed aside program and am so happy with the way things have worked out. My teeth had all been pulled because they were in such bad shape and at the time I did not have the money to afford dentures."
Site/Program Review ☑				

Result

As one of the only programs in Niagara that provides access to dental care for adults, we see a huge demand for this program. y partnering with multiple agencies we have been able to reduce barriers and help participants to feel comfortable accessing this program, as well as other needed services at the agencies.

Project	Description
WC4W Production	Drama performance to help women express how they feel about their personal situation. This project will help in combating social isolation, will give a voice to the voiceless and be a source of empowerment. Will be utilized as an educational tool for our ladies as well as the community by attending the performance.
Agency	
Westview Centre4Women	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $4,624.00		Expected	Actual	**Personal Assets**: Increase Self-awareness, Enhanced Self-esteem and Self-confidence **Social Assets**: Support Networks
	Children 0-12	0	5	
Within Budget ☑	Youth 13-18	20	0	
Met Targets Established ☑	Adult 19-64	300	386	**Testimonial**
Completed Objectives ☑	Seniors 65 +	5	53	"I thought it was fun to be part of the drama plus I got to make some friends. Life is hard right now, new to the area, money tight etc. I need something to do with my time and to feel important."
Reporting Requirements ☑	**TOTAL**	**325**	**444**	
Site/Program Review ☑				

Result

We did the drama two nights and both nights we were full house. Some of the women feel they have been changed in a good way. They feel the work they did had value and gave them worth.

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Project	Description
Westview Centre4Women	Providing a springboard from "meeting basic needs" to "moving people out of poverty". This project will help women navigate through the barriers step by step and provide opportunities for employment. Women of all colour, sexual orientation, religion or economic status need a place to call their own. This project will offer "no agenda" services to assist in the war against poverty and meet the needs of our community.
Agency	
Westview Centre4Women	
Municipality	
St. Catharines	

Contract Requirements	Number Served			Highest Assets Impact
Contract Amount - $113,050.39		Expected	Actual	**Personal Assets**: Enhanced Self-esteem and Self-confidence, Improved Hope and Motivation
	Children 0-12	150	224	**Physical Assets**: Increased Food Security
Within Budget ☑	Youth 13-18	50	69	**Social Assets**: Low Income People are Engaged in their Community, Support Networks, Information Network
Met Targets Established ☑	Adult 19-64	1500	1877	
Completed Objectives ☑	Seniors 65 +	50	385	
Reporting Requirements ☑	**TOTAL**	**1,750**	**2,555**	**Human Assets**: Enhanced Life Skills
Site/Program Review ☑				**Financial Assets**: Reduced Cost

				Testimonial
				"I have been one of the first people to ever attend WC4W and I just want to share how much I love it. I still drop in when I can, I try to support the women as often as I can and show I care. The program really helps with loneliness and the pantry helps me get food at affordable prices."

Result

Local agencies are calling us to do presentations specifically on our services that lead to change, or are asking us to explain the results we obtained with specific participants. We had four BBQ's at Montebello Park inviting all our participants and their families, which was incredibly successful. We worked with John Deere to improve our garden project. We started a monthly potluck brunch the first Sunday of every month. We believe this program has been key in combating loneliness.

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MEMORANDUM

COM-C 1-2019

Subject:	**Ministry of Health and Long-Term Care Announcement: 'New Plan for Health Care Reform'**
Date:	**March 19, 2019**
To:	**Public Health & Social Services Committee**
From:	**Adrienne Jugley, Commissioner, Community Services**

On February 26, 2019, the provincial government announced initial details regarding health care reform in Ontario, including the introduction of legislation *(The People's Health Care Act, 2019)* that would, if passed, integrate multiple existing provincial agencies into a single health agency – **Ontario Health**, and support the establishment of local **Ontario Health Teams** with the aim of connecting health care providers and services to patients and families. The following provides a brief outline of the proposed changes:

Ontario Health

Ontario Health would oversee health care delivery and is proposed to improve clinical guidance and offer support for providers to enable better quality of care for patients.

The creation of Ontario Health would dissolve and re-incorporate a number of existing bodies, including:
   o Cancer Care Ontario
   o Health Quality Ontario
   o eHealth Ontario
   o Trillium Gift of Life Network
   o Health Shared Services Ontario
   o HealthForce Ontario Marketing and Recruitment Agency
   o Local Health Integration Networks (LHINs)

If the legislation is passed, it is proposed that the consolidation of agencies and provincial services into the Ontario Health agency would be implemented over a number of years.

Ontario Health Teams

Ontario Health Teams would be responsible for the delivery of all of the care for their patients, understanding their health care history and needs, and directly connecting them to services, including: primary care; hospitals; home and community care; palliative care; residential long-term care; and mental health and addictions services.

It is proposed that, as Ontario Health Teams are established, people will continue to be able to choose who provides their care and will also have more care choices available through technology. With safeguards in place to protect personal health information, it is proposed that patients would also have an option to securely access digital health services, such as having access to their electronic health records and virtual care options.

Within the legislation, care providers are viewed to also benefit from the expansion of digital tools, enabling them to more quickly and comprehensively access the information they need, such as specialist advice and clinical supports.

If the legislation is passed, Ontario Health Teams will be established in phases across the province. Ontario Health Teams will focus on existing local health care providers partnering or working together to provide coordinated care, or teams of providers serving a specialized patient population such as specialty pediatrics or patients with complex health needs.

It is expected that by maturity, 30-50 local Ontario Health Teams would be operational, each serving an approximate geography of 300,000 patients.

Impact to Community Services

- Niagara Region's Community Services Department operates eight long-term care homes and provides a range of seniors' community programs, largely funded by the Ministry of Health and Long-Term Care, and the HNHB LHIN respectively. It is anticipated that the changes envisioned through this new legislation will impact those services.

- At this time, the details related to "*The People's Health Care Act, 2019*" are still preliminary. It is anticipated that there will be opportunities to learn more about the specific implications for the long-term care sector and seniors community programs over the next several months, in addition to further understanding responses from local health stakeholders and provincial health care associations.

As the details of these changes are better understood, along with the implications for Niagara Region's services, we will share this information with Regional Council. Also, please find attached the Ontario Government's news release for your information.

Respectfully submitted and signed by

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Adrienne Jugley, MSW, RSW, CHE
Commissioner, Community Services
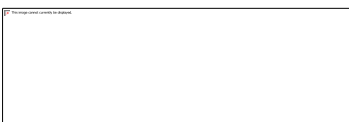
NEWS

Ministry of Health and Long-Term Care

Ontario's Government for the People to Break Down Barriers to Better Patient Care

Renewed, connected and sustainable health care system will reduce hallway health care by focusing resources on patient needs

February 26, 2019 9:00 A.M.

TORONTO — Today, Christine Elliott, Deputy Premier and Minister of Health and Long-Term Care, delivered the Government of Ontario's long-term plan to fix and strengthen the public health care system by focusing directly on the needs of Ontario's patients and families.

"The people of Ontario deserve a connected health care system that puts their needs first," said Elliott. "At the same time the people of Ontario deserve peace of mind that this system is sustainable and accessible for all patients and their families, regardless of where you live, how much you make, or the kind of care you require."

Ontario's new plan would improve access to services and patient experience by:

- Organizing health care providers to work as one coordinated team, focused on patients and specific local needs. Patients would experience easy transitions from one health provider to another (for example, between hospitals and home care providers, with one patient story, one patient record and one care plan).
- Providing patients, families and caregivers help in navigating the public health care system, 24/7.
- Integrating multiple provincial agencies and specialized provincial programs into a single agency to provide a central point of accountability and oversight for the health care system. This would improve clinical guidance and support for providers and enable better quality care for patients.
- Improving access to secure digital tools, including online health records and virtual care options for patients - a 21st-century approach to health care.

"If we expect real improvements that patients will experience first-hand, we must better coordinate the public health care system, so it is organized around people's needs and outcomes. This will enable local teams of health care providers to know and understand each patient's needs and provide the appropriate, high-quality connected care Ontarians expect and deserve," said Elliott.

Ontario's renewed patient-centric approach is paired with historic investments in long-term care for seniors and improved mental health and addictions services for families. Ontario is investing $3.8 billion over 10 years to establish a comprehensive and connected system for mental health and addictions treatment, and adding 15,000 new long-term care beds over five years and 30,000 beds over 10 years.

"Our government is taking a comprehensive, pragmatic approach to addressing the public health care system," said Elliott. "By relentlessly focusing on patient experience, and on better connected care, we will reduce wait times and end hallway health care. Ontarians can be confident that there will be a sustainable health care system for them when and where they need it."

QUICK FACTS

- The government intends to introduce legislation that would, if passed, support the establishment of local Ontario Health Teams that connect health care providers and services around patients and families, and integrate multiple existing provincial agencies into a single health agency – Ontario Health.
- The entire process will be seamlessly phased in to ensure that Ontarians can continue to contact their health care providers as usual throughout the transition process.
- The government has consulted with patients, families, nurses, doctors and others who provide direct patient care, including the Premier's Council on Improving Healthcare and Ending Hallway Medicine and its working groups, the Minister's Patient and Family Advisory Council, and health system and academic experts.
- Ontario currently has a large network of provincial and regional agencies, clinical oversight bodies and 1,800 health service provider organizations. This creates confusion for both patients and providers trying to navigate the health care system.

LEARN MORE
- Read the Premier's Council report: Hallway Health Care: A System Under Strain

- Ontario's plan to build a connected public health care system. Learn more.

Available Online
Disponible en Français

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Niagara Regional Housing

February 15, 2019

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

Dear Ms. Norio:

At their February 15, 2019 meeting, the Niagara Regional Housing Board of Directors, passed the following motion as recommended in attached report NRH 4-2019:

> *That Niagara Regional Housing Quarterly Report October 1 to December 31, 2018 be APPROVED and FORWARDED to the Public Health and Social Services Committee and subsequently to Regional and Municipal Councils for information.*

Your assistance is requested in moving report NRH 4-2019 through proper channels to Regional Council.

Sincerely,

Mayor Walter Sendzik
Chair

Q4 (October 1 to December 31, 2018) to Board of Directors

Recommendation:

That Niagara Regional Housing Quarterly Report October 1 to December 31, 2018 be APPROVED and FORWARDED to the Public Health and Social Services Committee and subsequently to Regional and Municipal Councils for information.

Submitted by:

Approved by:

Donna Woiceshyn
Chief Executive Officer

Walter Sendzik
Chair

Directors:

Henry D'Angela, Chair
Regional Councillor
Thorold

Betty Ann Baker - Secretary
Community Director
St. Catharines

Tim Rigby
Regional Councillor
St. Catharines

James Hyatt, Vice-Chair
Community Director
St. Catharines

Betty Lou Souter
Community Director
St. Catharines

Walter Sendzik
Regional Councillor
St. Catharines

Karen Blackley, Treasurer
Community Director
Thorold

Paul Grenier
Regional Councillor
Welland

Selina Volpatti
Regional Councillor
Niagara Falls

NRH Niagara Regional Housing

Q4 (October 1 to December 31, 2018)

HIGHLIGHTS:

Application Activity

567 received & processed

Work Orders

3,203 issued

Capital Program

48 jobs/projects ongoing

15 public tenders closed

35 contract orders issued

Rent Arrears

= **$24,135.76**

or

2.03% of the monthly rent charges

Community Resources & Partnerships

offered supports to

254 new referrals

46 partners

Non-Profit Housing Programs

66% deemed HEALTHY

Rent Supplement / Housing Allowance

1,370 units

Niagara Renovates

Inspections are complete. 46 homeowners will receive 2018/2019 funding.

Welcome Home Niagara

19 homeowners received assistance

Housing First Project

27 Individuals / families housed

Appeals

= **12**

6 upheld
5 overturned
1 no decision required

New Development

Carlton - to be complete March 2019

Roach - construction began

Q4 (October 1 to December 31, 2018)

VISION

That the Niagara community will provide affordable, accessible and quality housing for all residents

MISSION

To expand opportunities that make affordable housing an integral part of building healthy and sustainable communities in Niagara

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As the administrator of social housing for Niagara Region, Niagara Regional Housing (NRH) works to fulfill our vision and mission through six main areas of responsibility:

1. Public Housing (NRH Owned Units)
2. Non-Profit Housing Programs
3. Rent Supplement Program
4. Affordable Housing Program
5. Service Manager Responsibilities
6. Housing Access Centre and Centralized Waiting List

Definitions can be found in the attached Reference Sheet.

1. Public Housing (NRH Owned Units)

DAY-TO-DAY MAINTENANCE:

In Q4, **3,203 work orders** were issued, representing $1,036,642.12. $69,018.54 of this amount was charged back to tenants who were held responsible for damages.

	2017-Q4	2018-Q1	2018-Q2	2018-Q3	2018-Q4
# of work orders issued	2,993	2,566	2,768	3,216	3,203

CAPITAL PROGRAM:

The Capital Program is responsible for maintaining the Public Housing (NRH Owned Units) asset and planning for future sustainability.

In Q4, 35 contract orders were issued, 15 public tenders closed and purchase orders issued $2,919,719.64.

The Capital Program was responsible for 39 capital projects valued at $2,500,000 and nine SHAIP funded Capital projects valued at $1,168,000 including:

- Parking lot replacement – one project
- Installation of Heat Control System – eight projects
- Roof replacement – one project
- Designated Substance Survey – one project
- Bathroom renovations – one project
- Foundation repairs – one project
- Investigation of basements – nine projects
- Balcony door replacement - one project
- Design and tender for Domestic Hot Water replacements - three projects

As of December 31, 2018, $6,400,000 of the $7,000,000 budgeted (excluding emergency) has been committed and/or actually spent (91%).

As of December 31, 2018, $1,922,182 of the available $2,537,580 Social Housing Apartment Improvement Program (SHAIP) funding was committed and/or actually spent (76%).

TENANT MOVE OUTS:

Move Outs By Reason

Health	4	NRH Transfer	13
Long Term Care Facility	8	Moved to Coop or Non-Profit	1
Deceased	10	Bought a House	1
Private Rental	10	Left Without Notice	3
Voluntarily Left Under Notice	3	Other/None Given	9
Eviction – Tribunal	3	Cease to Qualify	0
		TOTAL	**65**

In Q4, there were **65 move outs**. Three involved eviction orders granted under the Ontario Landlord Tenant Board (LTB) – Arrears (two), Disruptive Behavior (one). One of the evictions was enforced by the Sherriff.

	2017-Q4	2018-Q1	2018-Q2	2018-Q3	2018-Q4
# of move outs	81	67	83	89	65

Q4 (October 1 to December 31, 2018)

ARREARS:

	Dec 31, 2017	Mar 31, 2018	Jun 30, 2018	Sept 30, 2018	Dec 31, 2018
Rent charges for the month	$1,150,372.27	$1,167,751.69	$1,136,607.00	$1,165,765.00	$1,187,770.00
Accumulated rent arrears	$49,045.27	$48,660.91	$35,055.56	$23,378.86	$24,135.76
Arrears %	4.26%	4.17%	3.08%	2.01%	2.03%

INSURANCE:

In Q4, there was one claim settled and one property damage claim expected to exceed the $25,000 deductible.

COMMUNITY RESOURCES AND PARTNERSHIPS:

In Q4, we had partnerships with **46 community agencies** across Niagara. As a result of these partnerships, more than 200 support and enrichment activities were offered to tenants at NRH sites. Each partnership contributes to tenant lives and, in turn, the success of the Public Housing community as a whole:

- In October of 2018, NRH began a year-long partnership with McMaster University in seven NRH senior communities. The Cardiovascular Health Awareness Program (CHAP) provides on-site blood pressure and diabetes risk assessments to participating seniors. Based on these assessments, volunteers provide health presentations, educational resources and referrals. The study is designed to determine if CHAP services help to improve the health of older adults and lead to fewer emergency and hospital visits.

Also during Q4, NRH Community Programs Coordinators (CPCs) offered support to **254 new referrals of tenants in need of assistance**. Of those new referrals, **56% were considered medium-high need**. In particular, there were more requests for help with arrears. There was also a continued increase in the number of tenants needing help with clutter and bed bugs.

2. Non-Profit Housing Programs

As administrator of social housing for Niagara Region, NRH provides legislative oversight for 61 Non-Profit Housing Programs (non-profit and co-operative). Operational Reviews are conducted to determine the overall health of each.

	2017-Q4	2018-Q1	2018-Q2	2018-Q3	2018-Q4
Healthy	43	41	41	41	40
Routine Monitoring	18	18	18	18	17
Intensive Monitoring	1	1	1	1	2
Pre-PID (Project in Difficulty)	1	1	1	1	1
PID (Project in Difficulty)	1	1	1	1	1
TOTAL	**64**	**62**	**62**	**62**	**61**

NRH Housing Programs staff continue to work with Federal Housing Providers as they move toward End of Operating Agreements (EOA). On December 31, 2018, the Operating Agreement with Fairview Seniors in St. Catharines expired; a Rent Supplement agreement was successfully negotiated to preserve 14 Rent-Geared-to-Income units.

3. Rent Supplement Program

In Q4, there were **1,370 Rent Supplement/Housing Allowance units** across Niagara. In the Rent Supplement program, tenants pay 30% of their gross monthly income directly to the private landlord and NRH subsidizes the difference up to the market rent for the unit. The Housing Allowance program is a short term program that provides a set allowance to help applicants on the wait list.

	2017-Q4	2018-Q1	2018-Q2	2018-Q3	2018-Q4
Fort Erie	26	27	28	28	28
Grimsby	26	26	26	26	26
Lincoln (Beamsville)	2	13	12	12	11
Niagara Falls	219	228	229	230	230
Niagara-on-the-Lake	-	-	-	-	-
Pelham	24	23	23	22	21
Port Colborne	47	51	53	51	53
St. Catharines	600	657	700	719	732
Thorold	29	32	37	54	53
Welland	199	202	201	197	201
West Lincoln	14	14	15	15	15
TOTAL	**1,186**	**1,273**	**1,324**	**1,354**	**1,370**

Variances in the number of Rent Supplement/Housing Allowance units reflects the general management of the program and required take-up/deletion of units due to End of Operating Agreements (EOA), move out of tenants, and/or new units/landlords. Totals will be increasing in the future as some Non-Profit Housing Programs transition into a Rent Supplement agreement upon expiry of their operating agreement. It is unknown which areas will be affected.

4. Affordable Housing Program

NIAGARA RENOVATES PROGRAM:

The Niagara Renovates program provides assistance to low-to-moderate income homeowners for home repairs, accessibility modifications and the creation of secondary suites in single family homes.

NRH received $500,000 through the Investment in Affordable Housing - Extension (IAH-E) program for homeowner and secondary suite repairs and $626,300 for multi-unit repairs, totaling $1,006,300 for the 2018/2019 period.

Niagara Renovates inspections for 2018-2019 funding are complete. Inspections included all areas inside and outside of the home to ensure compliance with program guidelines. Issues were identified and a detailed Inspection Report was provided to the homeowner. **46 homeowners will receive funding** during this period.

HOMEOWNERSHIP PROGRAM – "WELCOME HOME NIAGARA":

The Homeownership program assists low-to-moderate income rental households to purchase their first home by providing a down payment loan.

In Q4, **19 homeowners** received assistance through Welcome Home Niagara. **Two of these were NRH tenants.**

	2017-Q4	2018-Q1	2018-Q2	2018-Q3	2018-Q4
# of homeowners assisted	13	5	9	14	19

HOUSING FIRST PROGRAM:

The Housing First program helps people move quickly from homelessness to their own home by providing supports to help difficult to house individuals find and keep housing.

In Q4, **27 individuals/families** were housed through the Housing First program. Since 2012, Housing First has helped 371 individuals/families.

	2017-Q4	2018-Q1	2018-Q2	2018-Q3	2018-Q4
# of individuals/families housed	22	17	14	9	27
# of Housing First units (at quarter end)	148	165	170	178	184

165

Q4 (October 1 to December 31, 2018)

RENTAL HOUSING (NEW DEVELOPMENT):

NRH New Development

Carlton Street, St. Catharines	Amount	Units
Investment in Affordable Housing-Extension (IAH-E), Year 3	$5,806,000	45
Investment in Affordable Housing-Extension (IAH-E), Year 4	$2,888,000	23
Social Infrastructure Fund (SIF), Year 1	$2,387,817	17
Roach Avenue, Welland		
Social Infrastructure Fund (SIF), Year 3	$1,200,000	8
TOTAL	**$12,281,817**	**93**

At the end of Q4:

Carlton Street

- Envelope work – EIFS (Exterior Insulation and Finish Systems) is complete with some minor deficiencies. Caulking is 98% complete. Flashing of roof parapet is incomplete.
- Civil work – sidewalks poured, asphalt base coat complete
- Landscaping – postponed until spring 2019, topsoil installation 80% complete
- 1st floor – boarding in progress - 60% complete, framing, boarding, taping and sanding to continue
- 2nd floor – apartments - painting of rooms 95% complete, millwork progressing in a stop start fashion due to manufacturing delays at the plant, flooring 90% complete, wall tiles installation on going, electrical devices - 80% complete, plumbing fixture installation ongoing
- 3rd floor – apartments - painting, flooring 95% complete, plumbing fixtures installation on going. Not ready for deficiency inspection.
- 4th floor – apartments - painting 95% complete, flooring complete, handicap washroom floor tiles complete, wall tile installation 90% complete, millwork 90% complete, no further progress in the hallways. Finishing trades 90% complete. Not ready for deficiency inspection.
- 5th floor – apartments - painting generally complete, millwork 95% complete, door installation complete, plumbing and electrical fixtures complete, first coat of paint applied in hallways, T bar ceiling 90% complete, hallway floors incomplete
- Drywall crew – a critical trade that needs continued monitoring. Sufficient human resources is the key to achieving schedule goals.
- Elevator installation progressing, 80% complete
- Commissioning of mechanical system started, cleaning and flushing of lines has started
- Project expected to be complete in March 2019

Roach Avenue

- Revised final permit drawings issued December 14, 2018
- Foundation work – basement walls poured, footings on north side being excavated

- 1st floor – core slab delivered and installed December 14, 2018
- Water proofing of basement walls commencing in December
- Project approximately one month behind schedule

Additional New Development

Investment in Affordable Housing-Extension (IAH-E), Year 2 funding has been allocated to three non-profit organizations and will result in the creation of 40 units for seniors and mental health consumers in Niagara:

	Amount	Units
Gateway Residences of Niagara, Huron Street, Niagara Falls	$720,000	9
Thorold Municipal Non-Profit, Ormond Street, Thorold	$1,228,912	14
Stamford Kiwanis, Barker Street, Niagara Falls	$1,089,088	17
TOTAL	**$3,038,000**	**40**

At the end of Q4:

- Gateway Residence of Niagara and Thorold Municipal Non-Profit – complete and operational
- Stamford Kiwanis – approximately 60% complete. Financing has been approved. Construction to resume in 2019. Occupancy and substantial completion expected summer 2019.

5. Service Manager Responsibilities

APPEALS:

In Q4, **12 appeals** were heard (three more than in 2017-Q4).

- Eight related to ongoing RGI eligibility
  - Six for failure to provide information
    - One where Committee allowed extra time to remove commercial vehicles, and prove they are not getting income from child's business and that child is living at different address. OVERTURNED.
    - One where Committee allowed extra time to provide completed self-employment verification forms for most current three months and proof of having applied for income from Ontario Works. OVERTURNED.
    - Four related to undeclared change-illegal occupant(s). Two UPHELD; two OVERTURNED.
  - One where tenant owed former arrears. Committee allowed extra time to enter into repayment agreements and provide current income information. OVERTURNED.
  - One related to review of Rent-Geared-to-Income eligibility and confirmation that rent was calculated correctly. NO DECISION REQUIRED.

- Four for decisions made by Housing Access (one for Special Priority status and three for Urgent status). All UPHELD.

	2017-Q4	**2018-Q1**	**2018-Q2**	**2018-Q3**	**2018-Q4**
# of appeals	9	19	9	15	12

INVESTMENTS:

See Appendix A – Investment Report

6. Housing Access Centre & Centralized Waiting List

APPLICATION ACTIVITY:

# of Applications Received & Processed	567	# of Eligible Applications	538
# of Special Provincial Priority Status Applications	86	# of Ineligible Applications	29
# of Urgent Status Applications	104	# of Cancelled Applications	436
# of Homeless Status Applications	163	# of Applicants Housed	120

In Q4, **436 households were removed** from the Centralized Waiting List because they were no longer eligible, they found alternate housing or we were unable to make contact.

Q4 (October 1 to December 31, 2018)

CENTRALIZED WAITING LIST:		2017-Q4	2018-Q1	2018-Q2	2018-Q3	2018-Q4
		# of households				
A	**Rent-Geared-to-Income (RGI) waiting list:**					
	Niagara resident RGI waiting list	4,344	4,287	4,562	4,642	4,616
	Applicants from outside of Niagara	657	639	692	758	761
TOTAL RGI waiting list:		**5,001**	**4,926**	**5,254**	**5,400**	**5,377**
	Housing Allowance: a set allowance to help applicants on the waiting list with affordability in the private market until housed in an RGI unit	505	569	605	618	639
A1	**RGI waiting list demographics:**					
	Seniors	2,061	2,064	2,173	2,236	2.218
	Adults no dependents	1,703	1,630	1,727	1,764	1.761
	Adults with dependents	1,237	1,232	1,354	1,400	1.398
A2	**RGI list further segmented** (#'s included in A & A1):					
	SPP – Special Provincial Priority (Ministry Priority): helps victims of violence separate permanently from their abuser	101	122	129	129	131
	URG – Urgent (Local Priority): for applicants with mobility barriers and/or extreme hardship where their current accommodation puts them at extreme risk and/or causes hardship	99	104	120	123	116
	HML – Homeless (Local Priority): provides increased opportunity for placement to homeless households	832	842	894	947	954
	SUP – Supportive/Transitional: provides targeted, provisional services to assist individuals to transition beyond basic needs to more permanent housing	19	17	17	13	13
B	**In addition, NRH manages:**					
	Overhoused: households who are living in subsidized accommodation with more bedrooms than they are eligible for	143	152	167	171	168
	Transfer: households who are currently living in subsidized accommodation and have requested a transfer to another provider	513	518	525	547	535
TOTAL RGI households on waiting list managed by NRH:		**5,657**	**5,596**	**5,946**	**6,118**	**6,080**
C	**NRH maintains a waiting list for market rent units (62 Non-Profit Housing Programs):**					
	Market: applicants who have applied for a market rent unit in the Non-Profit Housing Programs portfolio	591	578	597	629	647
TOTAL households on waiting list managed by NRH:		**6,248**	**6,174**	**6,543**	**6,747**	**6.727**
TOTAL individuals on waiting list managed by NRH:		**10,449**	**10,380**	**11,052**	**11,496**	**11.488**

Note: the above chart includes only those who apply to the Centralized Waiting List and does not capture the full number of those in need of affordable housing in Niagara.

Q4 (October 1 to December 31, 2018)

ESTIMATED WAIT TIMES:

CITY	SENIORS Age 55 and older		SINGLES Age 16-54		HOUSEHOLDS WITH DEPENDENTS			
	Bachelor	1 Bed	Bachelor	1 Bed	2 Bed	3 Bed	4 Bed	5 Bed
	YEARS							
Fort Erie	-	9	2	8.5	2	1	5	-
Grimsby	-	4	-	-	-	-	-	-
Lincoln	-	4.5	-	12	9	8	-	-
Niagara Falls	4	6	-	16	5	3	7	14
Niagara-on-the-Lake	-	6.5	-	-	-	-	-	-
Pelham	-	3.5	-	-	-	-	-	-
Port Colborne	-	4.5	-	13	3	3	3	-
St. Catharines	-	6.5	9	13	3.5	3	9	12
Thorold	-	6.5	-	10	6	8	-	-
Welland	-	5	6	15	5	2.5	7	2
West Lincoln	-	4	-	-	5.5	7	-	-

- no units of this size available in this community   **January 2018**

Please note:

- wait time information can fluctuate and is an approximation only
- wait times may not reflect the actual time one may wait for affordable housing

Quarterly Report on Cash / Investments / Reserves for Period Ending December 31, 2018

	This Quarter Balance	Last Quarter Balance	Variance $	Variance %	Comments
BANK ACCOUNTS					
Current Bank Account: Royal Bank account used for day-to-day operations for the owned units. Also to cash flow various short terms programs funded by Prov and Fed gov't usch as development, homeownership and capital repair programs.	**$6,693,118.16**	**14,961,182.38**	**(8,268,064.22)**	**-55.26%**	Since the February 2016 transition to PeopleSoft, day-to-day accounts payable transactions are paid by the Region through PeopleSoft. Reconciliation of the due to the Region account will be performed on a regular basis to transfer amounts due to the Region.
Investment Bank Account: Used to hold funds "In Trust" for designated Housing Providers for capital work.					Interest earned at a rate of RBC Prime minus 1.70% on balances in bank and investment accounts.
A CMHA: Reserves held for CMHA Units.	4,592.36	4,592.36	-	0.00%	
B Ganawageh Capital Fund:	97,971.49	97,971.49	-	0.00%	Withdrawals are made in accordance with approved procedures. Current quarter interest.
C Due (From) Current Account	277,719.84	275,734.45	1,985.39	0.72%	
Total Investment Bank Accounts	**380,283.69**	**378,298.30**	**1,985.39**	**0.52%**	

Quarterly Report on Cash / Investments / Reserves for Period Ending December 31, 2018

	This Quarter Balance	Last Quarter Balance	Variance $	Variance %	Comments
INVESTMENT VEHICLES - FUND ACCOUNTING					
Various investment vehicles are used to protect and optimize the cash that is held for specified purposes. Investments are both short-term and long-term in nature. These funds are intended to ensure continued growth without capital erosion by inflation.					
Current Instruments:	2 Year GIC, $521,565; due date is 05/16/2019; interest rate of 1.26% to 1.63%				
RBC Investment Savings = $4,437,374.76	2 Year GIC, $497,000; due date is 08/15/2019; interest rate of 1.45% to 2.25%.				
	2 Year GIC, $188,000; due date is 08/17/2020; interest rate of 2.65% to 2.74%				
	2 Year GIC, $376,000; due date is 08/20/2020; interest rate of 2.60% to 2.65%				
	2 Year GIC, $264,280; due date is 08/21/2020; interest rate of 2.53%				
1 PASS THROUGH FEDERAL/PROVINCIAL PROGRAM FUNDING					
A AHP - New Development	65,375.90	65,375.90	-	0.00%	
2 ADMINISTRATION FUNDING					
B Affordable Housing Prog & Housing Allowance Prog	-	-	-	0.00%	
C IAH - Admin Fee	1,090,167.09	199,517.61	890,649.48	446.40%	
3 RECONCILIATION					
D Due (From)Current Account	5,160,310.63	6,024,337.39	(864,026.76)	-14.34%	Due to current account
Total	**6,315,853.62**	**6,289,230.90**	**26,622.72**	**0.42%**	

Q4 Report on Reserves as at December December 31, 2018

Description	Balances at December 31, 2017	Year-to-date Net Transfers from (to) Operating	Year-to-date Capital Transfers	Balance at December 31, 2018
NRH Owned Units Public/Local Housing Corp:	$ 4,327,035	$ 389,782	$ (596,001)	$ 4,120,816
Niagara Regional Housing:				
Emergency Capital Funding for Housing Providers	1,924,871			1,924,871
Title Normalization for NRH Owned Units	712,381			712,381
New Initiatives, other social housing purposes and any new deposits are added to this category	4,513,047	-	(1,110,000)	3,403,047
Niagara Regional Housing TOTAL:	7,150,299	-	(1,110,000)	6,040,299
Total NRH Capital Reserves	$ 11,477,334	$ 389,782	$ (1,706,001)	$ 10,161,115
NRH Rent Supplement:	$ 302,301	$ (24,000)		278,301
Total NRH Stabilization Reserves	$ 302,301	$ (24,000)	$ -	$ 278,301
NRH Employee Future Benefits:	$ 792,733	$ -	$ -	792,733
Total Future Liability Reserves	$ 792,733	$ -	$ -	$ 792,733
Total	$ 12,572,368	$ 365,782	$ (1,706,001)	$ 11,232,149

* 2018 Budget amounts
Interest no longer applied by approval of Regional Council (CSD 02-2013).

503 NRH Owned Units Public/Local Housing Corp: This reserve was set-up by the Board of Directors as a Reserve Fund in September 2004 for capital expenses related to the NRH owned units.

502 Niagara Regional Housing
This reserve includes three major elements: (1) Emergency Capital Funding for Housing Providers - *intent to support capital repair program for housing providers; surplus from housing programs should be directed to this component of the reserve* (2) Title Normalization for NRH Owned Units (3) New Initiatives / New Development - *$2.29M is restricted to future development/intensification in Niagara Falls (see 2017 Year-End Transfer) - expected to cover $810k - 100% costs related to 2019 NF capital project; remainder unrestricted; **Potential acquisition / intensification effort identified by NRH SMT utilizing Provincial SIF funds currently utilizes $275k of unrestricted balance***

NRH Rent Supplement: This fund was set-up by the Board of Directors in December 2008 (year end) for a new Rent Supplement program. This Rent Supplement program is budgeted annually and withdrawal from the Reserve matches that year's expenditures.

NRH Employee Future Benefits: This fund was set-up by the Board of Directors in 2011 to fund Employee Future Benefits. (retiree benefits, sick leave, vacation. etc.).