



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

PHSSC 6-2023

Tuesday, June 6, 2023

1:00 p.m.

Council Chamber - In Person and Electronic Meeting

Niagara Region Headquarters, Campbell West

1815 Sir Isaac Brock Way, Thorold, ON

To view live stream meeting proceedings visit: niagararegion.ca/government/council

	Pages
1. <u>CALL TO ORDER</u>	
2. <u>DISCLOSURES OF PECUNIARY INTEREST</u>	
3. <u>PRESENTATIONS</u>	
3.1. <u>Long-Term Care Redevelopment</u> Henri Koning, Director, Senior Services	3 - 12
3.2. <u>Community Safety and Well-Being Planning in Niagara</u> Michelle Johnston, Program Manager, Community Safety and Well-Being	13 - 23
4. <u>DELEGATIONS</u>	
5. <u>ITEMS FOR CONSIDERATION</u>	
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Motion from Councillor Ip respecting Niagara Community Safety and Well-Being Plan Action Table

6. CONSENT ITEMS FOR INFORMATION

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Housing Services Income Asset Limits

6.2. COM 19-2023

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Canada-Wide Early Learning Child Care Expansion Plan

6.3. COM 21-2023

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Homeless Shelter Capacity Review

7. OTHER BUSINESS

8. NEXT MEETING

The next meeting will be held on Tuesday, July 11, 2023, at 1:00 p.m. in the Council Chamber, Regional Headquarters.

9. ADJOURNMENT

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

Long-Term Care Redevelopment

Public Health and Social Services Committee

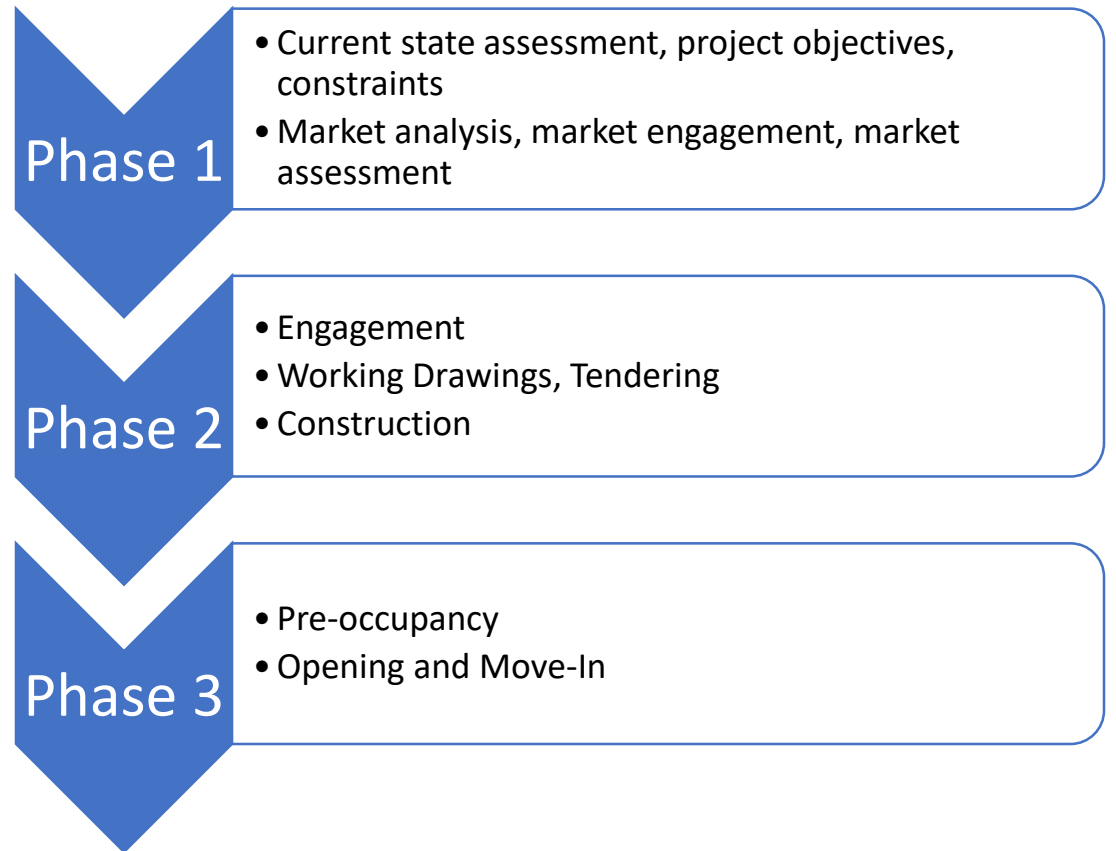
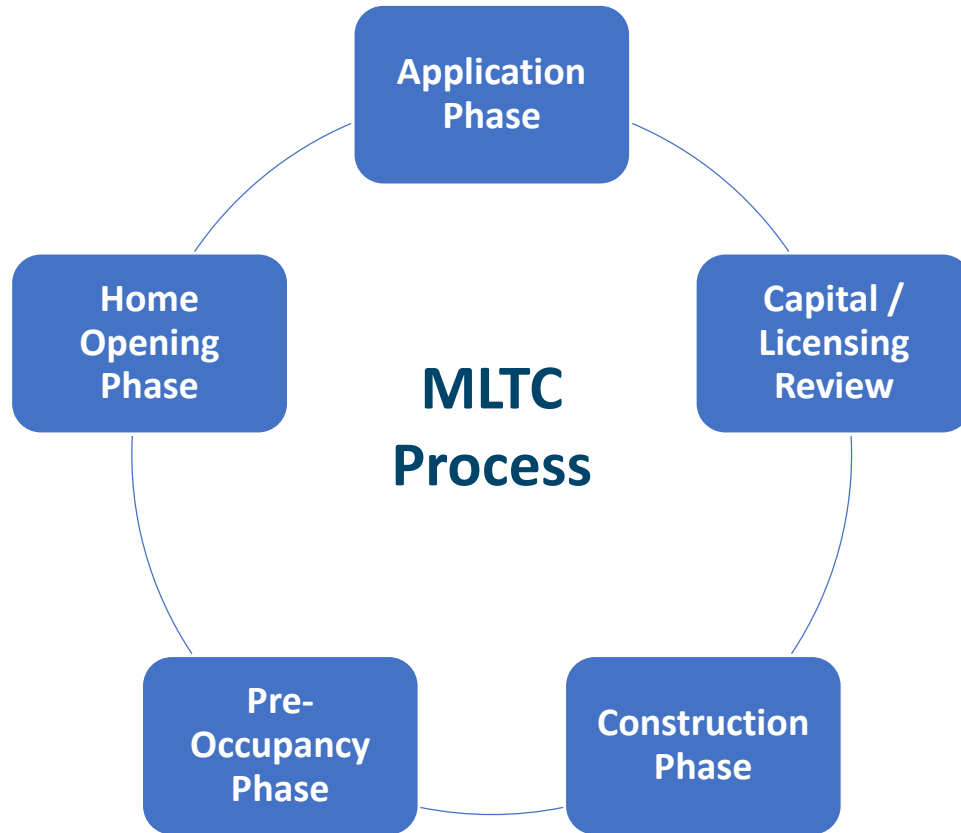
June 6, 2023

Henri Koning, Director Seniors Services

LTC Redevelopment

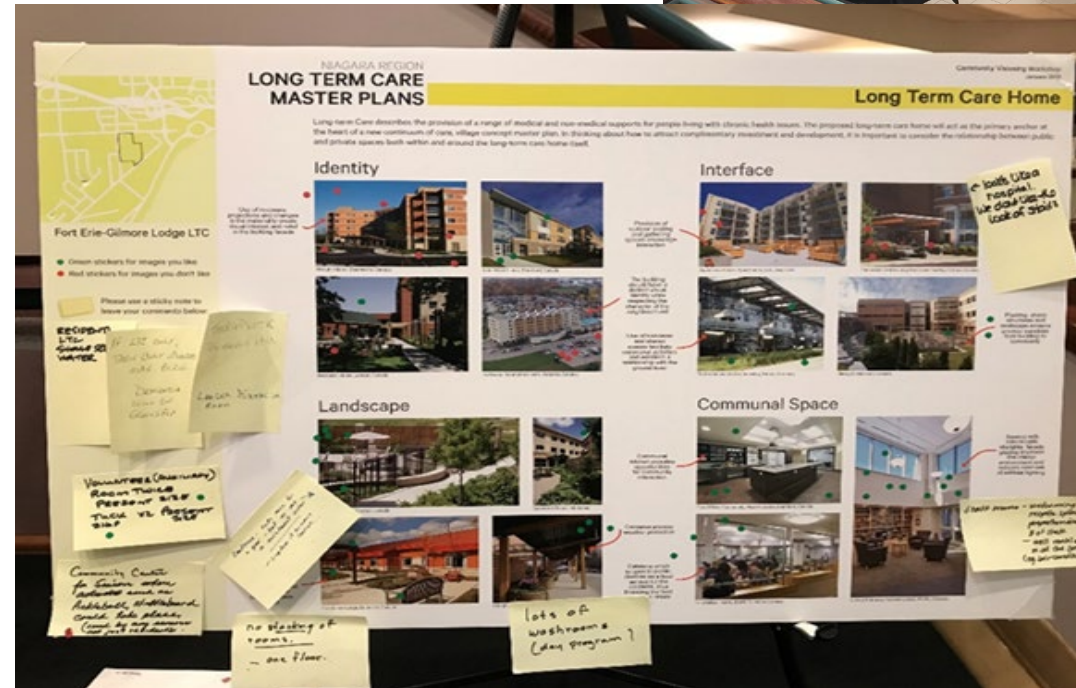
**Presented by: Henri Koning, Director Seniors Services
PHSSC
June 6, 2023**

Ministry of Long-Term Care (MLTC) Process



Redevelopment: Engagement

- Best Practice Consultation with Industry Partners
- Community Visioning Workshops – General Public
- Community Visioning Workshops – Community Partners
- Sessions with Regional Council and Local Area Municipalities
- Residents
- Staff
- Families
- Volunteers
- Students



Design Concepts: Infection Prevention and Control

- Decentralized heating, ventilation and air conditioning (HVAC)
- Built in personal protective equipment (PPE) storage
- Separate vanities in ensuite
- Cohort group of 16 residents
- Spa for every 16 residents
- Soiled and clean utility room for every 16 residents
- Dedicated Infection Prevention and Control Program (IPAC) Manager



Design Concepts: Resident Safety

- Heated sidewalks
- Overhead lifts
- Short hallways
- Clear sightlines
- Single rooms



Design Concepts: Resident Experience

Room design

- Placement and size of window
- Placement of bed
- Accessible storage
- Lighting design
- Accessible outdoor
- Space



Design Concepts: Wellness Centre

- Bring the outdoors in
- Quiet spaces, crafts
- Group exercise, walking
- Community kitchen
- Movement to function
- Flexibility, access to other services/programs



Design Concepts – WELL Building Certification

The WELL Building Standard

- Focused on enhancing people's health and well-being through the built environment

WELL integrates the following factors with leading building design, construction and management practices:

- Environmental health
- Behavioral factors
- Health outcomes
- Demographic risk factors that affect health



The leading tool for advancing
health & well-being in buildings
and communities globally.



Questions?



Community Safety and Well-Being Planning in Niagara

Public Health and Social Services Committee

June 6, 2023

Michelle Johnston, Program Manager

Community Safety and Well-Being

Commissioner's Office

Community Safety and Well-Being Planning in Niagara

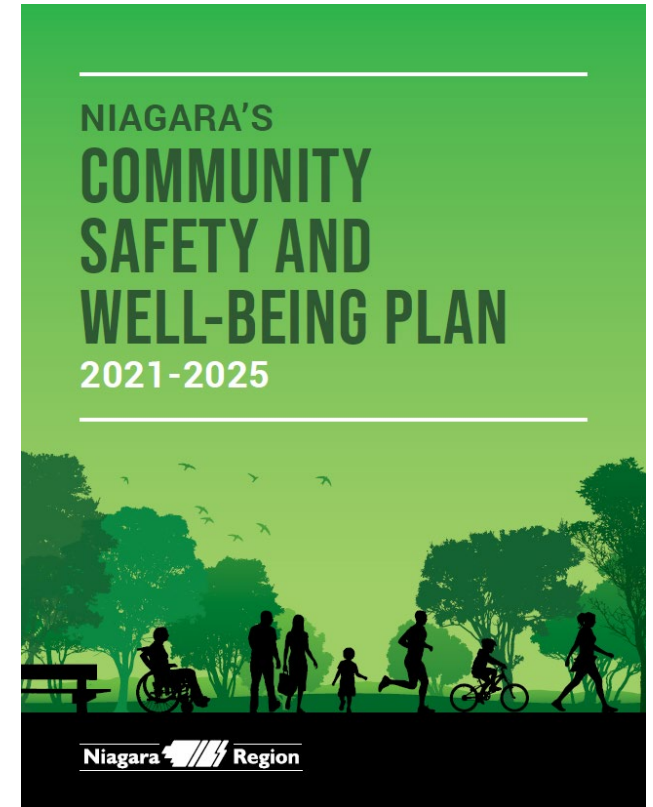
Michelle Johnston, Program Manager
Community Safety and Well-Being
Commissioner's Office

Public Health and Social Services Committee

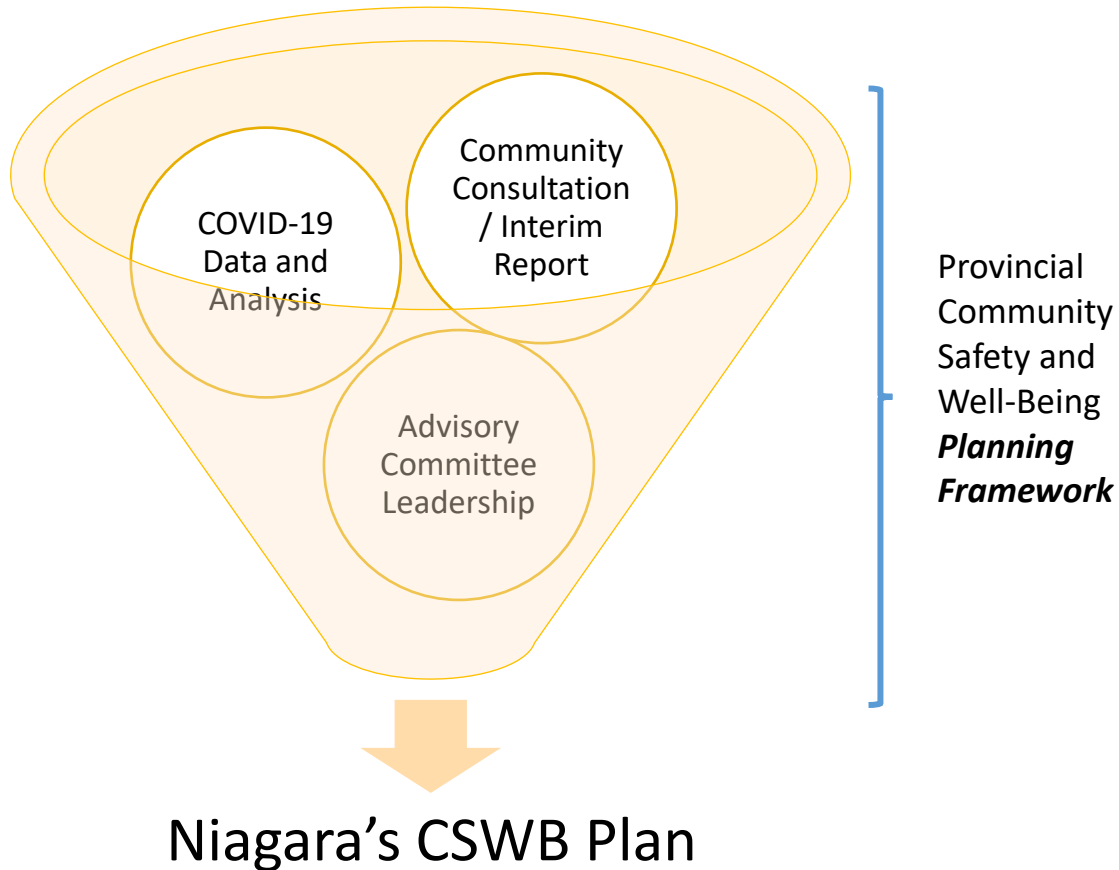
June 6, 2023

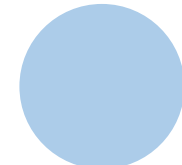
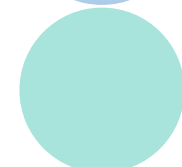
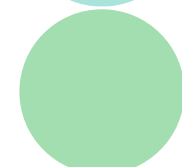
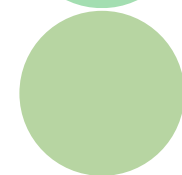
Overview

- Model for multi-sector collaboration and collective impact
- Led by the Advisory Committee
- Responding to priority issues via Action Tables
- Holistic approach with upstream focus
- Mandated under the Police Services Act



Local Approach & Areas of Focus



-  Mental health and addictions
-  Housing and homelessness
-  Poverty and income
-  Systemic discrimination

Niagara's CSWB Plan



'We've got to do better': Toronto readies to launch non-police crisis response pilot



\$11M project will involve community-based nurses, harm-reduction workers and others trained in de-escalation



[Sylvia Thomson](#) · CBC News · Posted: Jun 29, 2021 4:00 AM EDT | Last Updated: June 30, 2021

[Home](#) > [Local News](#)

Vancouver council approves \$16 million for 100 cops, 100 nurses

ABC Vancouver Coun. Mike Klassen: 'This is an extraordinary move for a local government to be moving into this area'



[Mike Howell](#)

Nov 22, 2022 10:17 PM



Early data released on Toronto pilot project with specialists responding to crisis calls



By **Gabby Rodrigues** · Global News

Posted July 22, 2022 11:57 am · Updated July 22, 2022 6:46 pm

[News](#) / [Local News](#)

Ottawa paramedics' mental health team provides care in the community

Service is described as a 'win-win-win' as it gives patients access to appropriate care and frees ambulances to respond to other calls

Elizabeth Payne

Published Jun 10, 2022 · 4 minute read

911 Action Table



MCRRT

Mobile Crisis Rapid Response Team

- Uniformed police officer and mental health worker
- Dispatched through 9-1-1
- St. Catharines, Thorold, Niagara Falls, Niagara-on-the-Lake, Welland* and Pelham*
- 7 days/week
- 12:00 p.m. to 12:00 a.m.



MHART

Mental Health and Addictions Response Team

- Paramedic and mental health nurse
- Dispatched through 9-1-1
- Region-wide
- 7 days/week
- 9:30 a.m. to 9:30 p.m.



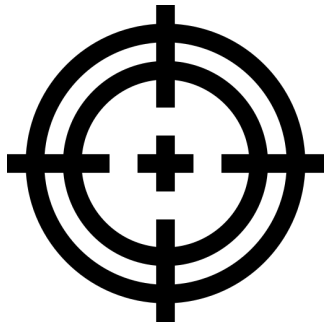
Canadian Mental
Health Association
Niagara
Mental health for all

COAST

Crisis Outreach and Support Team

- Telephone counselling
 - Mental health workers
 - 1-866 number
 - 24/7/365
- Mobile outreach
 - Plainclothes police officer and mental health worker
 - 1-866 number
 - Region-wide
 - Mon. – Sat.: 12:00 p.m. to 7:00 p.m.
 - Sun.: 1:00 p.m. to 5:00 p.m.

911 Action Table: Project Phases



1. Define / Scope

- Concept
- Project Kick-Off
- Process Map



2. Measure

- Empathy Map
- Data Collection (Quantitative and Qualitative)



3. Analyze

- Painpoints
- Root Cause Analysis



4. Improve

- Ideate / Brainstorm
- Process Redesign

Current Phase



5. Close

- Recommendations
- Implementation Plan

911 Action Table: Success Criteria (Define Phase)



1. Our solutions will connect individuals with the most appropriate level of care based on their needs.
2. Our solutions will not eliminate the need for emergency responses or calls to 911 for mental health/addictions.
3. We are willing to invest our existing resources to ensure collaboration, reconsider allocations and support gaps.
4. We are not willing to compromise our values of ensuring safety (public, individuals and staff) and providing a compassionate, dignified approach to service.
5. If our solutions are to be considered a success, we need an integrated, formalized response protocol premised on provider, family and client input *and* that which builds trust in the system.

911 Action Table: Highlights (Measure & Analyze)

- 80% successful diversion rates for both MCRRT and MHART
- Conducted focus groups and interviews with first responders / frontline staff and those with lived experience around:
 - Dispatch – triaging calls
 - Response teams – interventions and outcomes
 - Education, training and tools
 - Barriers and opportunities
- Identified painpoints and their root causes → opportunities for system improvement

911 Action Table: Next Steps (Improve Phase)

- Entering brainstorming phase of identifying solutions
 - Includes presentations from / roadshows to other communities to examine various service delivery models
 - Continues to ensure first responders and those with lived experience shape and inform outcomes
- Will bring forward recommendations in six months time for Council consideration (Dec. 2023)

Subject: Expansion of Niagara EMS Communication (Dispatch) Centre Using New Ministry of Health Funding

Report to: Public Health & Social Services Committee

Report date: Tuesday, June 6, 2023

Recommendations

1. That Regional Council **APPROVE** the addition of three new full time permanent System Status Controller (SSC) positions in Niagara EMS Communications (Dispatch) Centre, funded using newly approved Ministry of Health (Ministry) funding.

Key Facts

- Funding for staff of the Niagara EMS Communications Centre has not significantly increased since the launch of the center in 2005.
- Inbound call volume has nearly doubled since opening of the center and has steadily increased over the last three years, rising to 90,173 calls
- Since this time, several business cases were put forward to the Ministry requesting funding for additional staffing to provide the necessary coverage for inbound volumes and to safely manage emergency calls for the residents of Niagara.
- After being denied increased budget, Regional Council took steps to help properly staff the dispatch center at NEMS by funding three additional positions directly
- On January 19, 2023, Regional Council approved a motion calling on the Ministry of Health to fund four additional system status controller positions, and wrote to the Minister of Health advocating the same (CL-C 1 2023 EMS Communications Centre Staff Funding).
- The latest business case and efforts to petition the Ministry and Minister of Health have resulted in a successful bid to garner increased funding for;
 - Adding three permanent full time SSC positions
 - Increased funding for SSC trainee program
 - Funding for dispatch training facility leased space.

Financial Considerations

The annual estimated cost of the three new System Status Controller positions is \$357,848 inclusive of all benefits. The System Status Controller trainee program estimated cost is \$59,002 inclusive of all benefits. These costs are 100% funded by the Ministry, as per the notices provided in Appendix 1 to this report.

The Ministry has provided a total increase of \$493,061 in base funding for the 2022/2023 fiscal year and beyond. The additional funds provided will be utilized for other expenses in the Dispatch budget, including the permanent relocation of the Dispatch Training Facilities to EMS headquarters at the Niagara Corporate Business Centre (NCBC). This move was made at the beginning of the pandemic to address the small space at the NEMS Ontario St location and accommodate the social distancing measures put in place while maintaining the training class size of six.

The addition of these three SSC positions in NEMS Dispatch, as well as the expansion of the SSC trainee program is completely funded by the Ministry of Health with no implication on the Regional Levy, and no net impact on the Regional operating budget.

Analysis

An increase in call volume into the Communications Centre causes a direct impact on the workload of the individuals staffing the dispatch centre. In 2012, the inbound call volume was 49,922 and has increased year over year to a total of 90,173 in 2022, with no additional staffing added. A direct result is we have seen an increase in mental stress incidents for our staff which also has resulted in more staff being out of the workplace.

Niagara EMS has put programs and strategies in place to prevent and mitigate the increased mental stress and workload. Additional staff can help better distribute the inbound volume and subsequent work associated relieving the day to day pressures and lightening the workload.

Pursuant to Regional Council's January 19, 2023 motion, on February 9, 2023, Chair Jim Bradley sent a letter on behalf of Regional Council to the Minister of Health requesting funding for these additional positions.

Alternatives Reviewed

If the new positions are not created, we anticipate with current trending that inbound call volume will continue to increase, continuing to add to the workload of each staff member. If the funding is not used it must be returned while workload continues to increase leading to increased risk of error and delay in responding to 911 ambulance requests for assistance.

Relationship to Council Strategic Priorities

This recommendation supports creating a healthy and vibrant community by creating a more balanced and distributed workload amongst staff.

Other Pertinent Reports

CL-C 1 2023 EMS Communications Centre Staff Funding

Prepared by:

Rick Ferron
Interim Chief
Niagara Emergency Medical Service
Public Health & 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.
Chief Administrative Officer

This report was prepared in consultation with Michael Leckey, Program Financial Specialist, and reviewed by Rick Ferron, Chief, Niagara Emergency Medical Service

Appendices

Appendix 1 Ministry of Health Agreement with Regional Municipality of Niagara –
Niagara Ambulance Communication Service

Ministry of Health

Office of the Deputy Premier
and Minister of Health

777 Bay Street, 5th Floor
Toronto ON M7A 1N3
Telephone: 416-327-4300
www.ontario.ca/health

Ministère de la Santé

Bureau du vice-premier ministre et
ministre de la Santé

777, rue Bay, 5e étage
Toronto ON M7A 1N3
Téléphone : 416 327-4300
www.ontario.ca/sante



February 13, 2023

eApprove-182-2022-370

Mr. Jim Bradley
Regional Chair
Regional Municipality of Niagara
Niagara Ambulance Communication Service
1815 Sir Isaac Brock Way
Thorold ON L2V 4T7

Dear Mr. Bradley:

Ministry of Health Agreement with Regional Municipality of Niagara effective 31st day of May 2010 (the "Agreement")

I am pleased to advise that the Ministry of Health (ministry) will provide Regional Municipality of Niagara for the Niagara Ambulance Communication Service up to \$493,061 in additional base funding and up to \$1,042,313 in one-time funding for the 2022-23 funding year. This will bring the total maximum funding available under the Agreement for the 2022-23 funding year up to \$7,519,655 to support an increase in operating costs.

I am, therefore, pleased to provide you with a new Budget that, pursuant to section 4.2 of the Agreement, shall replace the Budget in Schedule "B". All terms and conditions contained in the Agreement remain in full force and effect.

The Assistant Deputy Minister of Emergency Health Services Division will write to the Regional Municipality of Niagara shortly to provide details with respect to the 2022-23 funding and associated terms and conditions.

We continue to rely on your strong leadership in alignment with the plan to build a modern and sustainable public health care system and ensure the on-going provision of front-line services that patients rely on every day.

...2

Thank you for your dedication and commitment to improving ambulance services in Ontario as we modernize and strengthen our public health care system and for all that you and your organization are doing to protect the health and safety of the people of Ontario during the COVID-19 pandemic.

Sincerely,

A handwritten signature in black ink, appearing to read 'S. Jones', with a stylized, cursive script.

Sylvia Jones
Deputy Premier and Minister of Health

Enclosure

c: Mr. Ron Tripp, Chief Administrative Officer, The Regional Municipality of Niagara
Ms. Susan Picarello, Assistant Deputy Minister, Emergency Health Services
Division, Ministry of Health (MOH)

Subject: Budget Adjustment – Homelessness Services

Report to: Public Health and Social Services Committee

Report date: Tuesday, June 6, 2023

Recommendations

1. That an operating adjustment to the previously adopted 2023 Regional Municipality of Niagara (Niagara Region) operating budget in the amount of \$2,587,500 gross and \$0 net, to be fully funded through the Ministry of Municipal Affairs and Housing (MMAH) Homelessness Prevention Plan (HPP) funding, **BE APPROVED**.

Key Facts

- The purpose of this report is to obtain approval of the budget adjustment related to an in-year receipt of funding which must comply with Budget Control by-law 2017-63, items 6.6(a) and 6.6(b), requiring Council's approval for any amounts received in excess of \$1 million for operating programs.
- HPP is the name of the provincially funded homelessness program, through which Niagara Region, as the Service Manager, receives direct funding to support efforts in addressing local homelessness needs and specific associated priorities.
- The base budget for HPP for the fiscal year April 1, 2022 to March 31, 2023 of \$11,167,500 was prepared and approved based on the original funding agreement with MMAH.
- On March 24, 2023, the MMAH provided notification of the adjusted final funding allocations for HPP. Niagara will receive the adjusted total amount of \$20,771,400 for the one-year term April 1, 2023 through March 31, 2024
- The updated investment plan was approved by council on May 20, 2023 through CAO 6-2023.
- The operating budget adjustment is for the portion of the funding from April 1, 2023 to December 31, 2023 which totals \$2,587,500 that will be directed to operating (rather than capital) costs. This adjustment, which will largely be directed to community service provision, also includes the costs for the two new permanent full-time equivalents (FTE's) approved through CAO 6-2023 to support the planning, administration and oversight of the expanded homelessness system. The budget adjustment is fully funded, resulting in no levy impact.

Financial Considerations

On March 24, 2023, the MMAH provided notification of the adjusted final funding allocations for HPP. Niagara is expected to receive the adjusted total amount of \$20,771,400, while the previous planning allocation was \$11,167,500 for the one-year term April 1, 2023 through March 31, 2024. This funding will provide more flexibility and increased capacity to meet local needs to prevent and reduce chronic homelessness.

The announcement provides incremental funding of \$9,603,900 for the fiscal year April 1, 2023 to March 31, 2024. Of this amount, \$3,450,000 will be used for operating related costs and the remaining \$6,153,900 will be invested into capital. A second budget adjustment for the capital portion will follow. Funding for the nine months within 2023 (April – December) will be \$2,587,500 which is the required gross operating budget adjustment.

The following is a summary of the budget adjustment:

Funding Description	Amount
Supportive Housing	\$750,000
Emergency Shelter Solutions	\$1,275,000
Long-Term Housing Assistance	\$375,000
2 permanent full-time FTE	\$187,500
Total Budget Adjustment	\$2,587,500

Analysis

This report is being brought to Committee in compliance with by-law 2017-63, Budget Control, requiring Council approval for in year budget adjustments in excess of \$1 million.

The funding received, in addition to those originally budgeted for in the 2023 Niagara Region operating budget, will be reinvested in their respective program areas in accordance with provincial policy.

The incremental funding and proposed budget adjustment will align with provincial expectations, and ensure funding levels in each service category will support the stability in the Niagara homelessness system while allowing for increased capacity to move the system forward in achieving provincially identified priorities. The investment plan for the incremental funding was approved by council on April 20, 2023 through report CAO 6-2023. A summary of services that will be funded under the incremental funding is as follows:

- Support emergency shelters to allow for the ability to respond to the most recent 'shelter capacity review' and to allow for changes in the system whereby seasonal shelters will no longer be offered, but will be replaced with traditional all year, all day housing focused shelter operations.
- Support more clients with housing allowances.
- Support the operations of an additional supportive housing facility, to be established in partnership with Niagara Regional Housing.

To support the increases in system services through expansion associated with the increased funding allocation through the addition of two full time staff. These new positions will be fully funded within the administration dollars available with the adjusted allocation.

Alternatives Reviewed

No alternatives considered as Council has previously approved the investment plan through report CAO 6-2023.

Relationship to Council Strategic Priorities

This recommendation is aligned to Council's strategic priority of ensuring a "Healthy and Vibrant Community." By approving this report, Niagara Region is able to leverage this additional provincial funding and support clients of the homeless systems

Other Pertinent Reports

CAO 6–2023 Homelessness Prevention Plan Investment Plan 2023-2024

Prepared by:

Cathy Cousins, CPA, CA
Director of Homelessness Services &
Community Engagement
Community Services

Recommended by:

Adrienne Jugley, MSW, RSW, CHE
Commissioner
Community Services

Submitted by:

Ron Tripp, P.Eng.
Chief Administrative Officer

This report was prepared in consultation with Stephanie Muhic, Program Financial Specialist.

Appendices

None

Subject: Approval of 2022/2023 Community Services Program Audits

Report to: Public Health and Social Services Committee

Report date: Tuesday, June 6, 2023

Recommendations

1. That the draft audited annual reconciliation return for the Community Support Services Program (Appendix 1 to Report COM 23-2023) for the year ended December 31, 2022, **BE APPROVED**;
2. That the draft audited schedule of Revenue and Expenses for the Reaching Home Program (Appendix 2 to Report COM 23-2023) for the year ended March 31, 2023, **BE APPROVED**;
3. That staff **BE DIRECTED** to coordinate with the auditor to finalize the statements as presented; and
4. That Report COM 23-2023 **BE FORWARDED** to the Region's Audit Committee for information.

Key Facts

- This purpose of this report is to obtain approval for the audited annual reconciliation return ("ARR") and the schedule of revenue and expenses ("financial schedule") for the respective programs in accordance with the federal and provincial funding requirements.
- The ministry submission deadline for both the Community Support Services and Reaching Home funding programs is June 30, 2023.
- As per the Financial Reporting and Forecasting Policy (C-F-020), other financial statements or schedules performed for ministry funding purposes, will be recommended for approval to Council by the Standing Committee with oversight of the program. Upon approval by Council, the department Commissioner, or delegated authority, and the Treasurer will be authorized to sign the auditor's representation letter to obtain the auditor's signed report. The approved statements will then be forwarded to the Audit Committee for information.

Financial Considerations

The ARR of the Community Support Services program (also referred to as Seniors Community Programs) and the financial schedule for the Reaching Home program have been prepared in compliance with the guidelines and policies stipulated by the corresponding ministry. A draft copy of the ARR for the Community Support Services program is attached as Appendix 1 to Report COM 23-2023 and a draft copy of the financial schedule for the Reaching Home program is attached as Appendix 2 to Report COM 23-2023.

The ARR and the financial schedule are prepared specifically for the purposes of meeting the requirements outlined in the service agreements with the funding ministries. These reports are a provincial/federal requirement as noted in the audit report for the programs. The financial schedules are prepared to assist The Regional Municipality of Niagara (Niagara Region) in complying with the guidelines. As a result, the schedule may not be suitable for another purpose.

Analysis

The ARR and the financial schedule were audited by Niagara Region's external auditors, Deloitte. The auditors have indicated that, based on their review, nothing has come to their attention that causes them to believe that this information is not, in all material aspects, in accordance with the requirements identified.

The recommendation for approval of audited schedules performed for ministry funding purposes rest with the Committee to which the department is responsible for the funding reports. Upon approval by Committee and Council, the department's Commissioner and Treasurer will be authorized to sign the auditor's representation letter to obtain the auditor's signed report. These schedules are then forwarded to the Audit Committee for information.

Below is a summary of the results of the audited schedules. These financial schedules are subject to minor wording changes once the schedules are finalized:

- Community Support Service program – this program has an overall surplus of \$288,254 (4.5% of total program funding) as of December 31, 2022, which will be returned to Ontario Health by way of a reduction in its future payments to Niagara Region. The COVID-19 pandemic caused significant interruptions to service, which led to the year-end surplus. Seniors Community Programs provides a

range of services to seniors who want to keep active and stay in their home as long as possible. Most of these services involve in-person group settings and activities, which were restricted for the majority of the year due to the pandemic. Most significantly, the Region's Respite Companion Services, a program aimed at providing meaningful activities tailored to a client's needs in the client's home, operated at reduced capacity during waves of outbreak throughout the year. Adult day programs, many of which are co-located within the Region's long-term care homes, had reduced capacity due to infection prevention and control (IPAC) restrictions, and in-person health and wellness classes transitioned to virtual options (offered at a reduced cost) when restrictions prevented continuation of in-person classes. It should also be noted that Community Programs staff were redeployed to the long-term care homes during January – March to provide additional resident support, to facilitate communication/visits with family and to provide meal time assistance. Many services did resume virtually, however, the interruption to service resulted in the year-end surplus.

- Reaching Home Program (supporting homelessness services) - commenced April 1, 2019, and ends March 31, 2024, and has no funds returnable for the current reporting period.

Alternatives Reviewed

The audited financial schedules are a ministry requirement and therefore no alternatives are available.

Relationship to Council Strategic Priorities

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

Other Pertinent Reports

None.

Prepared by:

Donovan D'Amboise, CPA, CA
Acting Associate Director, Reporting &
Analysis
Corporate Services

Recommended by:

Adrienne Jugley, MSW, RSW, CHE
Commissioner
Community Services

Submitted by:

Ron Tripp, P.Eng.
Chief Administrative Officer

This report was prepared in consultation with Stephanie Muhic, CPA, CA, Program Financial Specialist and Jordan Gamble, CPA, CA, Program Financial Specialist.

Appendices

Appendix 1 Community Support Services Program – 2022 Annual Reconciliation
Return

Appendix 2 Reaching Home Program – 2023 Schedule of Revenue and Expenses

Annual Reconciliation Report
The Regional Municipality of Niagara
Community Services Department
Community Support Service Program

December 31, 2022

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Independent Auditor's Report

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

Opinion

We have audited the accompanying schedules (ARRFin1 and ARRFin2) of the Annual Reconciliation Report of the Regional Municipality of Niagara (the "Region") Community Services Department - Community Support Service Program (the "Program") for the year ended December 31, 2022 and notes to the schedules (collectively referred to as the "schedules").

In our opinion, the accompanying schedules for the year ended December 31, 2022 are prepared, in all material respects, in accordance with the financial reporting provisions in guidelines in Chapters 3 of the Ontario Healthcare Reporting Standards 12.0 and the Community Financial Policy (2016) issued by the Ontario Ministry of Health and Ministry of Long-Term Care (collectively referred to as the "guidelines").

Basis for Opinion

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

Emphasis of Matter - Basis of Accounting

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

Responsibilities of Management and Those Charged with Governanceⁱ for the Schedules

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

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

Auditor's Responsibilities for the Audit of the Schedules

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

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

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

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

IFIS / Recipient #	13115
SRI Organization Code	4165
Report Name	2022-23 Account Reconciliation Report
Ontario Region (formerly LHIN)	Hamilton Niagara Haldimand Brant (Hnhb)
Service Provider Name	Regional Municipality of Niagara
Service Provider Legal Name	Regional Municipality of Niagara

Service Provider Address

Address 1	1815 Sir Isaac Brock Way
Address 2	P.O. Box 1042
City	Thorold
Postal Code	L2V4T7

HSP Contact Name	Jordan Gamble
HSP Contact Position	Program Financial Specialist
HSP Contact Phone Number	905-685-4225, ext. 3815
HSP Contact E-mail Address	jordan.gamble@niagararegion.ca

TOTAL AGENCY

Form ARRfin 1- Total Ontario Health & Ministry Managed- Financial
Regional Municipality of Niagara

		TOTAL HSP
TABLE G: Total Agency Reporting Summary by Fund Type (Total Agency Financials)	Line #	
Total Revenue Fund Type 1	115	-
Total Expenses Fund Type 1	116	-
Net Surplus/Deficit Fund Type 1 (Hospital)	117	-
Total Revenue Fund Type 2 (Above)	118	6,411,099
Total Expenses Fund Type 2 (Above)	119	6,122,845
Net Surplus/Deficit Fund Type 2 (Community Programs)	120	288,254
Total Revenue Fund Type 3	121	-
Total Expenses Fund Type 3	122	-
Net Surplus/Deficit Fund Type 3 (Other)	123	-
Total Revenue for the Provider	124	6,411,099
Total Expenses for the Provider	125	6,122,845
Net Surplus/Deficit	126	288,254

**Form ARRfin2 - OH Managed Programs
Regional Municipality of Niagara**

		OH - CSS	
Table B	Line #	2022-23 Final	Comments (Max 255 Characters)
Funding Initiative		Select Funding Initiative (where applicable)	
Ontario Health Cash Flow:			
Funding - Ontario Health (OH)	1	5,269,463	Base Funding (Calendar Reporting Period - January - December)
Funding - Provincial MOH	2	-	
Funding - Ontario Health One-Time	3	143,933	One-time funding for COVID Costs
Funding - Provincial MOH One-Time	4	-	
Sessional fee funding - OH	5	-	
Sessional fee funding - MOH	6	-	
Total OH funding as per cash flow	7	5,413,396	
Service Recipient Revenue	8	128,482	
Recoveries from External/Internal Sources	9	7,032	
Donations	10	-	
Other Funding Sources and Other Revenue	11	-	
Other revenue adjustments (detailed comments required)	12	-	
Total revenue adjustments	13	135,514	
Total FUND TYPE 2 funding for settlement purposes	14	5,548,910	
Deferred OH funding used to purchase capitalized items in the current year (Enter as Negative Amount)	15	-	
Amortization of donation revenue and OH funding in the current fiscal year	16	-	

**Form ARRfin2 - OH Managed Programs
Regional Municipality of Niagara**

		OH - CSS	
Other Adjustments including OH recovery (detailed comments required)	18	-	
Total Revenue FUND TYPE 2	19	5,548,910	
EXPENSES- Fund Type 2			
Compensation			
Salaries and Wages (Worked + Benefit + Purchased)	20	3,176,258	
Benefit Contributions	21	810,206	
Employee Future Benefit Compensation	22	-	
Nurse Practitioner Remuneration	23	145,397	
Medical Staff Remuneration	24	-	
Sessional Fees	25	-	
Service Costs			
Med/Surgical Supplies and Drugs	26	18,806	
Supplies and Sundry Expenses (excl. Med/Surg Supplies & Drugs)	27	238,991	
Community One Time Expense	28	-	
Equipment Expenses	29	68,905	
Amortization on Major Equip and Software License and Fees	30	-	
Contracted Out Expense	31	396,389	
Buildings and Grounds Expenses	32	439,036	
Building Amortization	33	-	
TOTAL EXPENSES Fund Type 2	34	5,293,988	
Depreciation/Amortization of Capital Assets for the Program and Admin & Support	35	-	
Total Capitalized Purchases and Services in current year	36	-	
(CHC & Home Care purposes only) Inadmissible salary expenses	37	-	
(CHC & Home Care purposes only) Less: Other adjustments	38	-	

Form ARRfin2 - OH Managed Programs

Regional Municipality of Niagara

		OH - CSS	
Total Expenses for Settlement Purposes	39	5,293,988	
Less sessional fee expenses (Enter as Negative Amount)	40	-	
Less one time expenses as per listing below (Negative sum of li	42	- 148,811	
Total operating expenses for settlement purposes	43	5,145,177	
Operating Recovery	44	259,801	
Sessional Fee Recovery	45	-	
One Time Recovery	46	-	
Total Settlement Recovery	47	259,801	
TABLE C: One-Time Expenses	Line #	2022-23 Final	Comments (Max 255 Characters)
Capitalized purchases from One Time funding Section C-1			
	48	-	
	49	-	
	50	-	
	51	-	
	52	-	
	53	-	
	54	-	
	55	-	
	56	-	
	57	-	
	58	-	
	59	-	
	60	-	
	61	-	
	62	-	

		OH - CSS	
Total One-time capitalized purchases from One-time funding	63	-	
Operating expenses from One Time Funding Section C-2			
	64	79,517	Building Renovations
	65	15,535	Building Repairs & Maintenance
	66	14,099	Cleaning
	67	34,585	Equipments
	68	3,091	Furniture & Fixtures
	69	1,983	IT Infastructure
	70	-	
	71	-	
	72	-	
	73	-	
	74	-	
	75	-	
	76	-	
	77	-	
	78	-	
Total One-time operating expenses from One-time funding	79	148,811	
TABLE D: Operating Expenses	Line #	2022-23 Final	Comments (Max 255 Characters)
Capitalized expenses Sourced from Operating Funding (Section D-1) (All capitalized items regardless of amount)			
	80	-	

Form ARRfin2 - OH Managed Programs

Regional Municipality of Niagara

		OH - CSS	
	81	-	
	82	-	
	83	-	
	84	-	
	85	-	
	86	-	
	87	-	
	88	-	
	89	-	
	90	-	
	91	-	
	92	-	
	93	-	
	94	-	
Total Capitalized expenses from Operating Funding		95	-
Non- capitalized one-time expenses > \$5,000 Sourced from Operating Funding (Section D-2)			
	96	-	
	97	-	
	98	-	
	99	-	
	100	-	
	101	-	
	102	-	
	103	-	
	104	-	
	105	-	

**Form ARRfin2 - OH Managed Programs
Regional Municipality of Niagara**

		OH - CSS	
	106	-	
	107	-	
	108	-	
	109	-	
	110	-	
Total Non-Capitalized One-time expenses >\$5,000 from Operating Funding	111	-	
Total One Time Expenses	112	148,811	
TABLE F: Sessional Fees Summary (Enter the # of Sessions Delivered)			
# of Sessions Delivered (From Sessional Fees)	113	0	
Calculated Cost Per Session	114	0.00	

**Form ARRfin2 - OH Managed Programs
Regional Municipality of Niagara**

		OH - SH	
Table B	Line #	2022-23 Final	Comments (Max 255 Characters)
Funding Initiative		Select Funding Initiative (where applicable)	
Ontario Health Cash Flow:			
Funding - Ontario Health (OH)	1	812,036	Base Funding (Calendar Reporting Period - January - December)
Funding - Provincial MOH	2	-	
Funding - Ontario Health One-Time	3	47,952	One-time funding for COVID Costs/PSW Wage Enhancement
Funding - Provincial MOH One-Time	4	-	
Sessional fee funding - OH	5	-	
Sessional fee funding - MOH	6	-	
Total OH funding as per cash flow	7	859,988	
Service Recipient Revenue	8	-	
Recoveries from External/Internal Sources	9	2,201	
Donations	10	-	
Other Funding Sources and Other Revenue	11	-	
Other revenue adjustments (detailed comments required)	12	-	
Total revenue adjustments	13	2,201	
Total FUND TYPE 2 funding for settlement purposes	14	862,189	
Deferred OH funding used to purchase capitalized items in the current year (Enter as Negative Amount)	15	-	
Amortization of donation revenue and OH funding in the current fiscal year	16	-	

Form ARRfin2 - OH Managed Programs
Regional Municipality of Niagara

		OH - SH	
Other Adjustments including OH recovery (detailed comments required)	18	-	
Total Revenue FUND TYPE 2	19	862,189	
EXPENSES- Fund Type 2			
Compensation			
Salaries and Wages (Worked + Benefit + Purchased)	20	613,743	
Benefit Contributions	21	171,126	
Employee Future Benefit Compensation	22	-	
Nurse Practitioner Remuneration	23	-	
Medical Staff Remuneration	24	-	
Sessional Fees	25	-	
Service Costs			
Med/Surgical Supplies and Drugs	26	2,305	
Supplies and Sundry Expenses (excl. Med/Surg Supplies & Drugs)	27	30,876	
Community One Time Expense	28	-	
Equipment Expenses	29	10,808	
Amortization on Major Equip and Software License and Fees	30	-	
Contracted Out Expense	31	-	
Buildings and Grounds Expenses	32	-	
Building Amortization	33	-	
TOTAL EXPENSES Fund Type 2	34	828,857	
Depreciation/Amortization of Capital Assets for the Program and Admin & Support	35	-	
Total Capitalized Purchases and Services in current year	36	-	
(CHC & Home Care purposes only) Inadmissible salary expenses	37	-	
(CHC & Home Care purposes only) Less: Other adjustments	38	-	

Form ARRfin2 - OH Managed Programs

Regional Municipality of Niagara

		OH - SH	
Total Expenses for Settlement Purposes	39	828,857	
Less sessional fee expenses (Enter as Negative Amount)	40	-	
Less one time expenses as per listing below (Negative sum of li	42	- 47,952	
Total operating expenses for settlement purposes	43	780,905	
Operating Recovery	44	33,332	
Sessional Fee Recovery	45	-	
One Time Recovery	46	-	
Total Settlement Recovery	47	33,332	
TABLE C: One-Time Expenses	Line #	2022-23 Final	Comments (Max 255 Characters)
Capitalized purchases from One Time funding Section C-1			
	48	-	
	49	-	
	50	-	
	51	-	
	52	-	
	53	-	
	54	-	
	55	-	
	56	-	
	57	-	
	58	-	
	59	-	
	60	-	
	61	-	
	62	-	

		OH - SH	
Total One-time capitalized purchases from One-time funding	63	-	
Operating expenses from One Time Funding Section C-2			
	64	-	
	65	-	
	66	-	
	67	-	
	68	-	
	69	-	
	70	44,698	Salaries
	71	3,254	Benefit
	72	-	
	73	-	
	74	-	
	75	-	
	76	-	
	77	-	
	78	-	
Total One-time operating expenses from One-time funding	79	47,952	
TABLE D: Operating Expenses	Line #	Comments	
		2022-23 Final	(Max 255 Characters)
Capitalized expenses Sourced from Operating Funding (Section D-1) (All capitalized items regardless of amount)			
	80	-	

Form ARRfin2 - OH Managed Programs

Regional Municipality of Niagara

		OH - SH	
	81	-	
	82	-	
	83	-	
	84	-	
	85	-	
	86	-	
	87	-	
	88	-	
	89	-	
	90	-	
	91	-	
	92	-	
	93	-	
	94	-	
Total Capitalized expenses from Operating Funding		95	-
Non- capitalized one-time expenses > \$5,000 Sourced from Operating Funding (Section D-2)			
	96	-	
	97	-	
	98	-	
	99	-	
	100	-	
	101	-	
	102	-	
	103	-	
	104	-	
	105	-	

**Form ARRfin2 - OH Managed Programs
Regional Municipality of Niagara**

		OH - SH	
	106	-	
	107	-	
	108	-	
	109	-	
	110	-	
Total Non-Capitalized One-time expenses >\$5,000 from Operating Funding	111	-	
Total One Time Expenses	112	47,952	
TABLE F: Sessional Fees Summary (Enter the # of Sessions Delivered)			
# of Sessions Delivered (From Sessional Fees)	113	0	
Calculated Cost Per Session	114	0.00	

PROXY PAY EQUITY ANNUAL REPORT

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

SECTION 1: BASIC PROGRAM INFORMATION

Name of Agency: **Regional Municipality of Niagara**

Vendor #: Reporting Period: from to

Contact Person:		Phone:	
-----------------	--	--------	--

SECTION 2: EXPENDITURE REPORT

Sources of Proxy Pay Equity Funds

Ministry of Health and Long-Term Care

Other (Specify)

TOTAL

0.00

Expenditures

Actual Proxy Pay Equity Expenses

Surplus(Deficit)

0.00 B
A-B

Current Outstanding Liabilities

Total Number of Individuals Receiving Proxy Pay Equity

SECTION 3: CERTIFICATION

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

(Signature of Health Service Provider Authority)

Title:

Certification by Provider Fiscal 2022-23

Having the authority to bind the Health Service Provider, we certify that the information provided in ARRFin1, ARRFin2 and ARRFin3 are complete and accurate

Regional Municipality of Niagara	
N/A	
Name of Signing Officer	Date
Signing Officer***	
N/A	
Title	
N/A	
Name of Signing Officer	Date
Signing Officer***	
N/A	
Title	

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

1. Significant Accounting Policies

Basis of accounting

These schedules have been prepared for the Ontario Ministry of Health, Ministry of Long-Term Care and Ontario Health. They are prepared in accordance with the financial reporting provisions in the guidelines in Chapters 3 of the Ontario Healthcare Reporting Standards 12.0 and the Community Financial Policy (2016) issued by the Ontario Ministry of Health, which approximates Canadian public sector accounting standards, except that they do not provide for employee future benefits and tangible capital assets are expensed as incurred. Since precise determination of many assets and liabilities is dependent upon future events, the preparation of periodic financial information necessarily involves the use of estimates and approximations. These have been made using careful judgments.

Revenue and expenses

Revenue is recognized as amounts become available and are measurable.

Expenses are recognized as they are incurred and measurable.

Capital assets

The historical cost and accumulated depreciation of capital assets are not recorded. Capital assets acquired are reported as expenditures and amortization is not reported on ARRFIn1 and ARRFIn2.

Employee future benefits

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

Schedule of revenue and expenses
The Regional Municipality of Niagara
Reaching Home – Canada's
Homelessness Strategy Program

March 31, 2023

Independent Auditor's Report	1-2
Schedule of revenue and expenses	3
Notes to the schedule of revenue and expenses	4-5

Independent Auditor's Report

To the Members of Council of the Regional Municipality of Niagara and the
Ministry of Employment and Social Development Canada

Opinion

We have audited the accompanying schedule of revenue and expenses of the Regional Municipality of Niagara (the "Region") Reaching Home – Canada's Homelessness Strategy Program (the "Program") for the year ended March 31, 2023 and notes to the schedule (collectively referred to as the "schedule").

In our opinion, the accompanying schedule of the Program for the year ended March 31, 2023 have been prepared, in all material respects, in accordance with the financial reporting provisions of the agreement between the Her Majesty the Queen in Right of Canada, as represented by the Minister of Employment and Social Development Canada and the Regional Municipality of Niagara signed June 12, 2019 (the "guidelines").

Basis for Opinion

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

Emphasis of Matter - Basis of Accounting

We draw attention to Note 1 to the schedule, which describes the basis of accounting. The schedule is prepared to assist the Program in complying with the financial reporting provisions of the agreement between the Ministry of Employment and Social Development Canada and the Regional Municipality of Niagara. As a result, the schedule may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

Responsibilities of Management and Those Charged with Governanceⁱ for the Schedule

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

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

Auditor's Responsibilities for the Audit of the Schedule

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

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

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

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

The Regional Municipality of Niagara
Reaching Home - Canada's Homelessness Strategy Program
Schedule of revenue and expenses
Year ended March 31, 2023

	Notes	2023 \$	2022 \$
Revenue			
Ministry funding	2	3,912,364	4,169,047
Expenditures			
Sub-project costs		3,715,907	4,068,189
Program management & administrative		196,457	100,858
Total expenditures		3,912,364	4,169,047
Excess of eligible expenditures over revenue		—	—

The accompanying notes are an integral part of the schedule of revenues and expenses.

1. Significant accounting policies

Basis of accounting

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

Revenue and expenses

Revenue is recognized as amounts become available and are measurable.

Expenses are recognized as they are incurred and measurable.

Employee future benefits

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

2. Ministry funding

This project commenced April 1, 2019 and will end March 31, 2024. Total maximum amount of Canada’s contribution is \$13,853,313.

The funding allocation under Reaching Home will be used to support priorities and recommendations of the Community Advisory Board (\$13,136,893). There is incremental funding to support initial investments towards the design and implementation of Coordinated Access (\$716,420).

The Regional Municipality of Niagara
Reaching Home – Canada’s Homelessness Strategy Program
Notes to the schedule of revenue and expenses
March 31, 2023

The maximum amount payable by the Ministry in each fiscal year of the project is:

	Designated Community \$	Coordinated Access \$	Total Funding \$
2020	837,176	121,420	958,596
2021	837,176	103,920	941,096
2022	4,065,127	103,920	4,169,047
2023	3,718,784	193,580	3,912,364
2024	3,678,630	193,580	3,872,210
	13,136,893	716,420	13,853,313

WHEREAS, under Niagara's Community Safety and Well-Being Plan (CSWBP), a cross-sector Action Table has been convened to assess opportunities to streamline emergency responses and improve the service experience for those in mental health/addictions crisis and using 9-1-1 as the point of entry; and

WHEREAS there is a recognition across partner agencies and emergency services that mental health and addictions calls often require a response that is not currently contemplated in any of the legislation that dictates how partner agencies and emergency services operate;

NOW THEREFORE BE IT RESOLVED:

That the NCSWBP Action Table **ENSURE** there is appropriate representation and/or consultation from Niagara Emergency Medical Service, Niagara Region Public Health, Niagara Region Community Services, Niagara Regional Police Service, OPENN Advocacy Network, Canadian Mental Health Association - Niagara, and other appropriate community agencies;

That the Niagara CSWBP Action Table **INVESTIGATE** options for responding to mental health calls and crises in Niagara;

That the Niagara CSWBP Action Table **COLLECT** data on how many mental health calls have been responded to by Niagara Regional Police, Niagara Emergency Medical Services, and their respective mental health teams;

That the Niagara CSWBP Action Table **COLLECT** data on the types of mental health calls to which each team is typically responding;

That the Niagara CSWBP Action Table **REPORT** the costs of each service responding to mental health calls;

That the Niagara CSWBP Action Table **RECOMMEND** options for refining triaging of calls to 9-1-1 to ensure the most appropriate emergency service is responding to mental health calls; and

That the Niagara CSWBP Action Table **REPORT** to Public Health and Social Services Committee in January 2024 with their findings and recommendations for the suitable response to mental health calls.

Subject: Housing Services Income and Asset Limits

Report to: Public Health and Social Services Committee

Report date: Tuesday, June 6, 2023

Recommendations

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

Key Facts

- This report provides an update on amendments to *Ontario Regulation 367/11* under the *Housing Services Act, 2011* (HSA) related to local income and asset limits eligibility rules for rent-geared-to-income (RGI) assistance.
- Niagara Region Housing Services administers the role of Service Manager for Community Housing¹ across Niagara.
- Service Manager responsibilities include the management of the Centralized Wait List and legislative oversight of more than 8,600 units of rental housing, to ensure compliance with the HSA. This includes ensuring that RGI households are eligible for assistance at the time of offer of housing and remain eligible for assistance on an annual basis.
- Due to amendments to *O. Reg. 367/11*, Niagara Region Housing Services, as the Service Manager, is required to set local income and asset limit rules to determine eligibility for rent-geared-to-income (RGI) assistance.
- All Service Managers must adhere to the new provincially mandated requirements by July 1, 2023.

Financial Considerations

Income Limits

In accordance with the HSA, Housing Services has the flexibility to set different income limits for units of different types and sizes and for units in different parts of the service

¹ Community Housing refers to the entire spectrum of housing programs and services available through Niagara Region Community Services.

areas to reflect local need and ensure that rent-geared-to-income assistance is targeted to those in greatest need.

Housing Services will continue to have the flexibility to exclude payments from household income, such as universal childcare benefits, based on analysis of local need.

Housing Services' Income Limits have been set to be equal to the Household Income Limits (HILS). HILS is the annual household income limit for a household as set out in Schedule 2, Ontario Regulation 370/11 under the Housing Services Act, 2011 for the size of the unit the household occupies and the area where the unit is located. The Province reviews and updates HILS on an annual basis using data from the Canadian Mortgage and Housing Corporation's annual market rent survey, specific to the housing's size, type, and geographical location.

2023 Household Income Limits (O. Reg. 370/11, s.3, schedule 2)

Area	Bachelor	1 bedroom	2 bedroom	3 bedroom	4+ bedroom
Niagara Region	\$34,000	\$44,000	\$52,000	\$59,500	\$74,500

Asset Limits

Housing Services also has the flexibility to set different asset limits by household size and type and for units of different types and sizes in different parts of their service area, again based on local data and needs analysis. Service Managers are required to set local asset limits at minimum \$50,000.

Housing Services' Asset Limits set for a single-person household is \$50,000 and \$75,000 for a household with two or more members.

Housing Services will be required to apply local income and asset limits as part of determining both initial and continued eligibility for RGI assistance. This includes applicants on waitlists, new RGI applicants, and households in receipt of RGI assistance.

Ontario Regulation 367/11, under the HSA, outlines a list of particular assets to be excluded from the value of household assets. Service Managers can exclude additional assets from the value of household assets and update their local income and asset limit

rules, to ensure consistent and reasonable application of policy. In addition to those legislated excluded assets, Housing Services has excluded Locked-in Retirement Accounts, Life Income Funds and Non-Cashable Guaranteed Investment Certificate(s) to further support the promotion of asset resiliency for seniors in Niagara.

Social assistance clients in receipt of Ontario Works and Ontario Disability Support Programs are required under legislation to be exempt from local asset limit rules in cases where all household members are part of a social assistance benefit unit.

Housing Services will still exercise their flexibility to exempt households in extenuating circumstances from local income and/or asset limit rules, such as those within a special priority policy category (i.e. survivors of domestic violence/human trafficking).

Analysis

Niagara Region Housing Services administers the role of Service Manager for Community Housing across Niagara and is guided by the *Housing Services Act, 2011 (HSA)*. All Service Managers across Ontario are required to set income and asset limits effective no later than July 1, 2023.

Housing Services, in determining the local income and asset limits, contacted other municipal Service Managers through jurisdictional scans, collected relevant data, reviewed their policies, and analyzed and compared their income and asset limit amounts based on the cost of living and affluence of other municipalities. The income and asset limits set by Housing Services are, as a result, consistent with other Service Manager areas.

Based on the analysis of applicants on the Centralized Wait List, the needs of households waiting for affordable housing are largely consistent with “high need households” (deeper poverty as defined by the Ministry). The intent of the policy associated with income and asset limits is to ensure that Niagara Region is providing affordable housing to those households in the greatest need.

Alternatives Reviewed

There is no alternative to set the limits any lower as set out in legislation; however, setting them higher would be inconsistent with other municipal Service Managers and potentially reduce overall access to RGI benefits to those of greatest need.

Relationship to Council Strategic Priorities

Housing Services supports the Council's Priority of a Healthy and Vibrant Community and contributes to Council's direction to develop and implement an affordable housing strategy.

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Subject: Canada-Wide Early Learning Child Care Expansion Plan

Report to: Public Health and Social Services Committee

Report date: Tuesday, June 6, 2023

Recommendations

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

Key Facts

- In late 2022, the Ministry of Education (MEDU) released information on the Canada-Wide Early Learning and Child Care (CWELCC) Access and Inclusion Framework.
- The province's Access and Inclusion Framework sets a foundation for targeted CWELCC expansion to improve access to child care for diverse and underserved populations.
- Niagara Region was initially provided a nominal allocation of 1,951 new child care spaces (382 school-based and 1,569 community-based) to be developed by 2026.
- On May 24, 2023, the MEDU confirmed Niagara Region's allocation of 4,067 new child care spaces (382 school-based and 3,685 community-based).
- Niagara Region's Children's Services was required to identify communities for expansion that supported the provincial priorities of: low-income families, vulnerable and diverse communities, children with special needs, Francophone families, Indigenous families and families requiring flexible care.
- Prioritization of child care expansion in Niagara Region included a review of child care demand and priorities identified by the MEDU, resulting in the identification of 12 priority communities for growth.
- The MEDU requires Niagara Region Children's Services to make its expansion plan public and incorporate space and inclusion plans into its 2023 service plan.
- Children's Services is committed to making the information related to Niagara's CWELCC expansion public in June 2023. An updated Children's Services Service System Plan will be brought forward to the Public Health and Social Services Committee in 2024.

Financial Considerations

For 2023, Niagara Region received \$38.8 million to support the goals of reducing child care fees by 52.75 per cent and supporting workforce compensation. CWELCC funding, including expansion of spaces, is fully funded by the province with no requirement of additional levy contribution.

Analysis

1. Background

The CWELCC program aims to provide greater access to affordable and high-quality child care. Participating CWELCC licensed child care programs have had their fees reduced by 52.75 per cent. This has resulted in the average fee for infant care, the most expensive age group, decreasing from \$57.16 to \$27.01 per day. Niagara Region had one of the highest provincial enrollment rates for CWELCC, with approximately 97 per cent of eligible child care spaces enrolling in the program in 2022. Appendix 1 provides a breakdown of CWELCC eligible spaces by municipality.

CWELCC also seeks to increase the number of child care spaces available for families. The province has committed to the creation of approximately 86,000 new licensed child care spaces in Ontario, of which, approximately 53,000 spaces remain to be created by 2026. In December 2022, the province released a draft Access and Inclusion Framework, which sets a foundation for targeted CWELCC child care expansion. The intention of the Framework is to focus on creating spaces in priority communities that will support access to licensed child care for: low-income families; vulnerable communities; diverse communities; children with special needs; Francophone families; Indigenous families; and families needing flexible models of care.

2. CWELCC Targeted Child Care Expansion

Niagara Region was provided an initial nominal allocation of 1,951 (383 school-based and 1,569 community-based) new child care spaces for CWELCC child care expansion, to be developed by 2026. On May 24, 2023, the MEDU confirmed Niagara Region's allocation of 4,067 new child care spaces (382 school-based and 3,685 community-based).

The MEDU required Niagara Region's Children's Services to identify priority communities for expansion. In addition to the socioeconomic factors identified by the province, an online mapping tool was used to layer child care demand and demographic factors to identify priority communities, including:

- current child care demand and families waiting for care;
- Niagara's Official Plan and population growth areas;
- communities considered "child care deserts" (more than 3 children for 1 child care space available);
- low-income families;
- vulnerable communities (measured with the Early Development Instrument); and
- diverse communities.

Based on these factors, CWELCC child care expansion in Niagara Region will be prioritized in the following 12 communities:

Municipality	Community
Fort Erie	Stevensville
Fort Erie	Crescent Park Area
Grimsby	Casablanca Area
Lincoln	North Beamsville
Lincoln	South Beamsville
Niagara Falls	Chippawa/Rural
Niagara Falls	Beaverdams
Pelham	South Fonthill
St. Catharines	New Western Hill
St. Catharines	Queenston
Thorold	Thorold South/Allenburg/Port Robinson East
West Lincoln	South Grimsby

The identification of priority communities was based on available data sources and reflects current child care demand. Families will continue to access affordable child care at existing CWELCC-enrolled sites in communities that were not identified as priorities. Further, child care expansion in communities not defined as priorities will continue through licensed home child care. There is room for expansion within the licensed capacity of licensed home child care as many childcare centres are operating below current licences capacity, and licensed home child care is permitted to expand up to their licensed capacity. As Niagara Region Children's Services works with child care operators to determine the feasibility of growth in priority communities, monitors supply and demand and receives updated local data, more communities may be considered for expansion.

3. Managing CWELCC Child Care Expansion

CWELCC child care expansion provides an exciting opportunity to expand affordable child care spaces for Niagara families. Expansion also introduces additional complexities that will need to be managed, such as:

a) The Role of Niagara Region Children's Services

The provincial CWELCC expansion framework confines expansion to priority communities and requires Niagara Region Children's Services, as the Early Years and Child Care Service System Manager, to determine where expansion should occur. While this approach provides Children's Services with authority to direct growth, it restricts the autonomy of child care operators. The approach also places additional administrative responsibilities on Children's Services, which is required to approve applications from child care operators and manage the sector's growth of spaces according to established space expansion targets. Children's Services will need to be adequately staffed to manage these additional responsibilities.

b) Provincial Expansion Targets Not Reflective of Demand

Based on the provincial access ratio of 37 per cent or one (1) CWELCC child care space for every three (3) children, Children's Services estimates that approximately 5,258 spaces are required in the priority communities by 2026 (significantly higher than what will be supported and funded by the province). Additionally, as CWELCC improves affordability for current families, the demand for licensed child care will further increase, as community expectations will no doubt increase.

Niagara Region has is pleased to receive more spaces (4,067) than the initial allocation of 1,951. However, the space expansion target is approximately 1,200 spaces short of the estimated spaces required for expansion in the priority communities. Niagara Region Children's Services will continue to advocate to the province to increase child care expansion spaces for Niagara to ensure expansion reflects local need and population growth.

c) Access for Low-Income Families

In 2022, as per provincial CWELCC guidelines, child care operators opting-in to CWELCC were not required to serve fee subsidy or special needs children. Currently, 19 per cent of CWELCC-enrolled child care operators do not have a contract to provide child care fee subsidies beyond the 52.75 per cent reduced fees. Moving forward, new child care centres opened under CWELCC expansion will be required to have a fee subsidy contract and support children with special needs. Current CWELCC child care operators will be offered the option to accept a fee subsidy contract. This will increase the region's number of eligible child care operators that can support low-income families.

d) Workforce Challenges

As of March 31, 2023, the centre-based child care system in Niagara is operating at 64 per cent of its potential licensed capacity, mostly due to a provincial shortage of Registered Early Childhood Educators (RECEs). Difficulty attracting and retaining RECEs is compromising the stability of the child care sector, a problem that is worsening as more spaces are developed. A lack of qualified staff will continue to contribute to long waitlists for child care services in the region.

As outlined in Report COM 10-2023, *Early Years and Child Care Workforce Update*, the MEDU is aware of the workforce issue and is working on the development of a broader strategy. As Niagara Region Children's Services awaits the outcome of those consultations, it will continue to work with child care operators through the locally established Recruitment Table.

4. Next Steps

Niagara Region Children's Services will release the names of priority communities, the expansion application process and the nominal allocation for child care expansion publicly to child care operators in June, 2023. The information will also be posted on the Region's website and public information sessions will be scheduled. Child care

operators that currently have a service contract for child care with the Region will be provided first access to the expansion spaces in priority communities.

Children's Services is required to incorporate the space and inclusion plans into Children's Services' system plan. However, given that the final provincial Access and Inclusion Framework has not been released, and the 2024 funding formula for child care is under development, an updated Children's Services system plan will be brought to the Public Health and Social Services Committee in 2024. This will ensure that the planning captures new provincial requirements and reflects finalized provincial policies and strategies.

Alternatives Reviewed

The CWELCC expansion plan is mandated by provincial policy, guidelines and directives that must be implemented at the local level.

Relationship to Council Strategic Priorities

The provision of accessible and quality early learning programs and services supports economic Growth.

Other Pertinent Reports

[COM10-2023 Early Years and Child Care Workforce Update](#)

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Appendices

Appendix 1 CWELCC Licensed Child Care Spaces by Municipality

Appendix 1 CWELCC Licensed Child Care Centre Spaces by Municipality

Municipality	CWELCC Eligible Child Care Spaces	CWELCC Eligible Child Care Enrolled	Per Cent Enrolled
Fort Erie	590	590	100%
Grimsby	712	697	98%
Lincoln	432	432	100%
Niagara Falls	1399	1375	98%
Niagara-on-the-Lake	211	211	100%
Pelham	351	312	89%
Port Colborne	214	214	100%
St. Catharines	2669	2588	97%
Thorold	232	232	100%
Wainfleet	36	20	56%
Welland	867	849	98%
West Lincoln	100	100	100%
Total	7813	7570	97%

Subject: Homeless Shelter Capacity Review

Report to: Public Health and Social Services Committee

Report date: Tuesday, June 6, 2023

Recommendations

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

Key Facts

- The purpose of this report is to provide Committee and Council with highlights of the “Orgcode: An Examination of Shelter Capacity in Niagara Region” report, attached as Appendix A.
- Staff requested this review and report to support local planning, provide guidance for future investment and inform the upcoming homelessness services procurement process, and support Niagara’s response to the increasing demand on shelter services in Niagara and Ontario.
- Areas of focus in this report are:
 - The replacement of seasonal shelters with permanent shelters
 - Optimizing investments and future shelter enhancements
 - Supporting a professional shelter system
 - Balancing investments in supportive housing with the need for shelter enhancements

Financial Considerations

The recently approved Homelessness Prevention Program (HPP) investment plan (CAO 6–2023) included additional operating funding for the homelessness shelter system. New available operating dollars for the 2023 are \$1,275,000 and are included in COM 22-2023, Budget Adjustment – Homelessness Prevention Plan operating budget adjustment approval reflecting the new HPP funding. No additional funding is being requested.

It should be noted that full implementation of recommended system enhancements would require significant investment beyond what is currently available through the Region’s HPP funding. However, the review offers important direction for future investments and recommendations that maximize the funds that are presently available.

Analysis

OrgCode has undertaken a review of the current shelter system in Niagara and recommended future shelter capacity for Niagara Region. Highlights of the review are in the analysis; however the full report is attached.

Seasonal Shelters

The shelter capacity review supports the decision by staff to move away from seasonal shelters and replace these beds going forward with permanent year-round shelters. These new shelters would also operate 24/7 (rather than the seasonal model that only operates 12 hours per day). Advantages noted of permanent shelters include ability to attract and retain more qualified talent to operate the shelters, and time available with clients during the day to focus on housing searches and connect clients with other necessary community supports. The Review also recommends that shelters should generally be operated by non-profits rather than municipal staff. The business case for this conclusion is that municipal operations are generally more expensive than non-profit operations. Additionally, when properly funded, provided access to training and support and operated under a fee for service model, not-for profit providers can deliver the quality of services the community requires. In establishing these new shelters and working with the professional operators, staff will work to include space for some of the unique needs of residents including couples and residents with pets, subject to the capacity of the respective sites.

These two new shelters, referenced in the Review, will operate in St. Catharines and Niagara Falls, replacing the seasonal shelter beds previously available in these communities. A negotiated request for proposal (NRFP) will be issued for each of the two sites to select an operator for the shelters.

Optimizing Investments and Future Shelter Enhancements

The Review had several other findings and recommendations to support the optimization of the Region's shelter system, to ensure maximum number and quality of beds relative to the return on investment and alignment with the ultimate objective to support people to achieve permanent housing.

Further to the recommendations, the Region will continue to leverage overflow hotel spaces to support families when no family shelter beds are available. Hotel spaces are determined based on pricing, vacancy and family needs, (for example, the selected city may depend on children's school needs).

The Region's contracts for current shelter operations conclude March 31, 2024, and therefore the specifications that are provided during the NRFP process to take place in the fall of 2023, (to allow for new contracts effective April 1, 2024), will reflect the guidance provided in the Review. Changes in specifications will reflect the need to respond to service gaps in the system, (for example, couples and pets), optimize the size of shelters, and ensure sub populations are adequately serviced (for example, youth, seniors, women) within the funding envelope available, and within the responses received to the NRFP.

Again, in alignment with the recommendations, investments in housing allowances were increased by \$800,000 in the HPP investment plan for the year 2022/23. Staff continue to work with agencies and Niagara Region Housing Services who manage the Housing First housing allowances to operationalize the new higher housing allowances to allow more clients to exit shelters to housing and to Housing First programs, where supports are required. The current vacancy rate and rental rates in the community remain challenging, however agencies and staff are committed to work with landlords to optimize this new investment. Should the program require further modifications to be successful, either to support higher allowances or additional allowances, this would need to be considered in the 2024/25 HPP investment plan.

Included within an optimized shelter system are effective and efficient shelter diversion and prevention strategies. Homelessness staff and agencies have been working in recent years to implement these tools. Recent prevention best practice reviews have been undertaken with all participating agencies, and practices will be updated over the remainder of the contract to reflect this. Diversion has recently been enhanced to support the bringing of this program to scale. The NRFP's in the fall of 2023 will have updated scopes of work to reflect these new expectations.

Professional Shelter System

A professional shelter system supports clients to have their shelter and homeless experience to be as brief as possible. Shelters need to ensure that they are operating from a “trauma informed” lens and are “housing focused”. Shelters are not homes, and they are not housing. Shelters are places in which people can safely and with support as needed, work to find permanent housing and end their experience of homelessness.

Staff over the past few years have worked with all providers to understand their training and support needs to ensure all staff have the skills to operate shelters in this manner. Having said that, Niagara’s past homeless system underfunding, has resulted in shelters not being adequately funded to fully move forward with best practices and the staffing necessary to support clients on their journey to housing, particularly in the context of this rental market. As a result, staff will be reviewing funding formulas as we transition into the next NRFP cycle, with consideration to enhancing some funding to further support a professional system, prior to April 1 2024.

In addition, staff will continue to commit to a robust training curriculum developed in partnership with providers, to support agencies with skilled staff, address staff turnover and continue to ensure new and emerging practices and policies are incorporated into the Region’s shelter standards and systems.

Impact of Supportive Housing on Shelter Demand

The Review references the need for an additional 120-180 shelter spaces (inclusive of the 95 converted season spaces referenced earlier) in Niagara, operating as three shelters of 60 beds. The report also notes that this level of additional investment may not be required subject to the number of supportive housing beds added to the system over the next number of years.

Council recently approved the 2023/24 HPP investment plan, which included a capital allocation to support the creation of additional supportive housing units. It is staff’s intention to repeat this process again in the HPP investment plan for 2024/25, creating an additional supportive housing facility. These new facilities would continue to focus on chronically homeless clients who occupied 52% of the shelter bed stays in the year 2022. Homelessness Services will continue to collaborate with Niagara Regional Housing, to create supportive housing units in each of their new builds, to be operated as Housing First units. It should also be noted that Orgcode has also indicated for many

years, that for each new bed of shelter, 6 new supportive housing beds are required in a community to ensure shelter flow-through to housing.

The HPP investment plan also added money to the Strong Communities funding, which is a housing allowance program. This will also support clients to find housing in the community and exit shelters and housing waitlists.

Alternatives Reviewed

The Shelter Capacity Review report will guide future investment in shelters and supportive housing and inform future HPP Investment plans. This report provides Committee and Council with important information, supporting accountability, transparency and a culture of best practice and continuous improvement. Staff recommendations associated with this review take a measured approach, mindful of the HPP funding available. A more expedited and fulsome implementation would require significant additional funding, and additional administrative staffing.

Relationship to Council Strategic Priorities

Other Pertinent Reports

- CAO 6-2023 Homelessness Prevention Program Investment Plan
- COM 22-2023 Budget Adjustment – Homelessness Prevention Plan

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Appendices

Appendix A Orgcode: An Examination of Shelter Capacity in Niagara Region

MAY 8, 2023

ORGCODE CONSULTING INC.

AN EXAMINATION OF SHELTER CAPACITY IN NIAGARA REGION



LAND ACKNOWLEDGEMENT

Niagara Region is situated on treaty land. This land is steeped in the rich history of the First Nations such as the Hattiwendaronk, the Haudenosaunee, and the Anishinaabe, including the Mississaugas of the Credit First Nation. There are many First Nations, Métis and Inuit peoples from across Turtle Island that live and work in Niagara today.

The report was prepared by OrgCode Consulting Inc., which is located in what is known today as Halton Region. This is an area that is rich in the history and modern traditions of many First Nations and the Métis. From the lands of the Anishinabe to the Attawandaron, the Haudenosaunee, and the Métis, these lands surrounding the Great Lakes are steeped in Indigenous history. OrgCode acknowledges the footsteps of Indigenous Peoples that have marked this land for time immemorial. We acknowledge the Mississaugas of the Credit First Nation for being stewards of this traditional territory.

AUTHORSHIP

This report was prepared by OrgCode Consulting Inc.

Data on homelessness services that was used in analysis to reach recommendations was provided by Niagara Region.

Data on housing market conditions comes from the Canada Mortgage and Housing Corporation.

Data on housing waitlists come from Niagara Regional Housing.

Omissions and errors in data analysis are the responsibility of OrgCode Consulting Inc.

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A functional homelessness response system has adequate shelter capacity to respond to the needs for emergency accommodation for people in the community experiencing housing loss that lack safe and appropriate alternatives to shelter such as staying with a friend or family member. Throughout Niagara Region there are currently 13 shelters that receive funding through the Regional Municipality for the purpose of providing emergency accommodation. In its role as Service Manager, the Region has a responsibility to engage in planning and policy development to guide the shelter system.

In recent years, throughout the Region, the Province and across Canada homelessness has been greatly impacted by the pandemic. The volume of people experiencing housing instability and housing loss has increased. Encampments of unsheltered people experiencing homelessness has been on the rise. Shelter capacity has been strained. This is a reflection of a changed reality in the housing market coupled with demands on the likes of mental health and addiction services that struggle to keep pace. The rise in homelessness is not the fault of homelessness services providers in Niagara Region, nor is it a result of poor planning on the part of Niagara Region staff.

The purpose of this report is to understand the shelter system demands and articulate current demand for shelter space. It also examines shelter capacity demands over the coming three years. Because there are a number of policy drivers and funding realities that influence a shelter response in any community, the report is the best possible understanding based upon available data.

THE ROLE OF SHELTERS FOR PEOPLE EXPERIENCING HOMELESSNESS

Shelters do not end homelessness, but they are vital to the community response to make homelessness rare, and if it does occur, brief and safe. Shelters are compassionate facilities that respond to people not only experiencing a housing crisis, but often respond to the needs of people experiencing an emotional crisis and trauma. Staff in shelters are highly trained professionals who know how to balance a response to immediate needs with the ability to focus on solutions to homelessness for each individual, couple or family served.

Shelters in Niagara Region align to the Housing First philosophy. In a nutshell, this means that shelters aim to return people to safe, appropriate housing with the supports needed to sustain housing rather than trying to prepare people for housing. Shelters are not rehabilitation centres. Shelters are not vocational assistance facilities, nor are they employment centres. Shelters are not hospice centres. Shelters are not a place to address every health, mental health, addiction or social issue a household may be experiencing. Shelters are not a place for long-term counselling or therapy.

Shelters are a pathway to re-attach to housing as rapidly as possible. Failure to heed this important lesson results in people staying too long in shelter and experiencing therapeutic incarceration. Shelters should always be viewed as a process to get people housed rather than a destination where people reside for long periods of time. Shelter should never become, de facto, a household's home.

SHELTERS AND THE DESIRE TO PREVENT, REDUCE AND END HOMELESSNESS

Whenever a household that is currently housed is at the precipice of losing their housing, the first step of engagement in a robust system of care of housing loss prevention. Niagara Region, over the past two years, has been updating its

approach to prevention. Whenever it is safe and appropriate to do so, helping people remain in their dwelling rather than enter the shelter system is the preferred response.

In instances where a household cannot be prevented from losing their housing, the next step of engagement is homelessness diversion. In diversion services, trained staff attempt to problem-solve with the household to find safe and appropriate alternatives - either temporary or permanent - rather than coming into the shelter system. This is not about saying no to services. This is about saying yes to the needs of the household without requiring a shelter entry. This is in the best interest of the household (less trauma and life disruption) and in the best interest of the shelter system (less demand on shelter resources).

When a household enters the shelter system because they could be neither prevented nor diverted safely and appropriately, there is emphasis on the household resolving their homelessness as rapidly as possible. Staff within shelter customize the level of supported provided the household based upon his/her/their support needs. Some households will be able to resolve their lack of housing independently of staff, others will need access to resources and perhaps encouragement, and others still will benefit from more intensive engagement and specialized staff that engage in housing solutions.

Like other communities throughout Ontario and all communities in the country that receive federal funding through *Reaching Home*, Niagara Region maintains a By-Name List of people experiencing homelessness that are interested in housing and require assistance. The By-Name List is filtered by the depth of need of the household and the availability of housing and supports. This is different from community (social) housing which, with a small number of exceptions, uses chronological access to rent-geared-to-income housing.

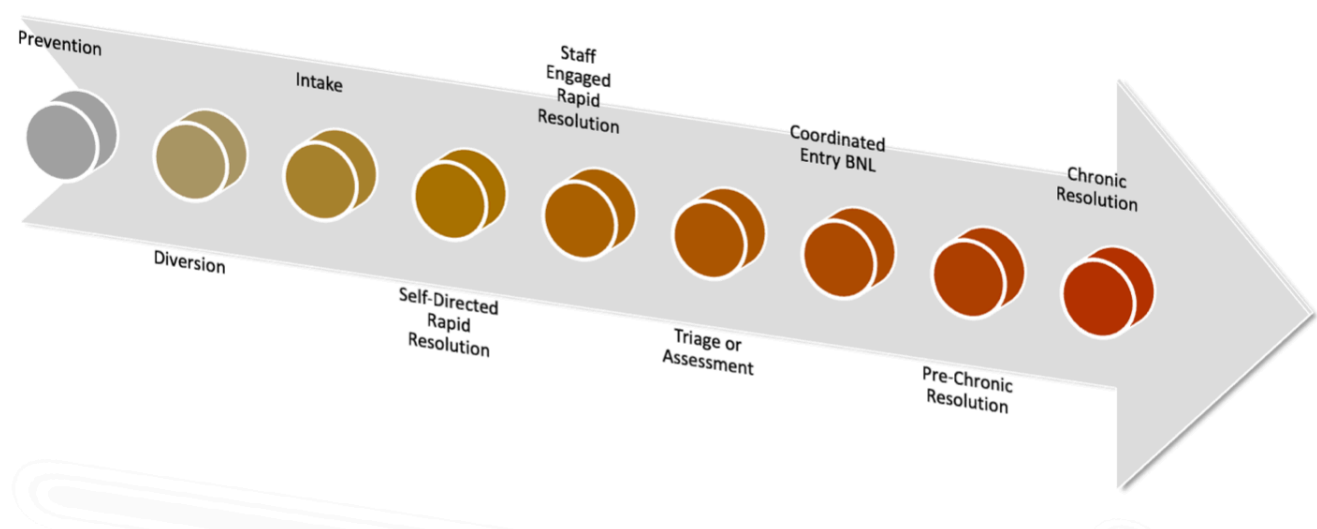
SHELTER USE IS VOLUNTARY

One of the common mistakes communities make is thinking that increasing shelter capacity will automatically eliminate all unsheltered homelessness. This is not true. Shelters are voluntary. To state is casually: just because you build it doesn't mean they have to come. Police cannot pick people up against their will and force people to use shelter. Experiencing homelessness is not illegal in Canada. Furthermore, people experiencing homelessness in Canada do not surrender their rights enshrined in the Charter.

Furthermore, just because someone uses a shelter one night does not mean they will use it the next night. People maintain their freedoms while experiencing homelessness. The decision to use a shelter is done without coercion, threat or intimidation. The decision to continue to use a shelter service is a personal one.

PROGRESSIVE ENGAGEMENT AND SHELTER CAPACITY: INFLOW AND OUTFLOW

For a shelter system to operate well in the pursuit of reducing and ending homelessness, the number of people exiting shelter in any given month (outflow) needs to be greater than the number of people that enter shelter in any given month (inflow). When inflow exceeds outflow, the shelter system gets bottlenecked because there is insufficient capacity to accommodate new people coming in.



The first step in responding to inflow pressures is preventing people from housing loss whenever it is safe and appropriate to do so. This can include things like eviction prevention assistance or conflict mediation. The second step in responding to inflow pressures is diverting people from shelter use whenever it is safe and appropriate to do so. This can include things like finding a friend or family member to stay with while sorting out the next step in figuring out a permanent housing solution.

Upon intake, the emphasis is deepening the understanding of the reasons why shelter is being sought, explaining the shelter services, and orienting the household towards developing even a preliminary plan of action steps they can take towards housing themselves. Self-directed rapid resolution is the opportunity for the household to take care of their own housing needs with passive assistance from staff. Only when the household struggles do staff become more involved in articulating tasks that can be completed towards realizing housing.

If the household is still in a position where they cannot move forward with housing independently, an assessment of housing needs is completed, the household moves onto the By-Name List as part of Coordinated Access, and the household is now in a position to receive additional financial and/or support assistance in sustaining their housing.

On top of this, there needs to be emphasis on assisting existing chronically homeless individuals, couples and families in realizing housing and exiting the shelter system. No shelter should be occupied primarily with people that have been homeless for greater than six months, or have multiple episodes of homelessness within a short period of time.

To maximize the resilience of the household, and given the scarcity of staff resources, this model to assist with realizing housing uses a progressive engagement approach. In a nutshell, this means that staff in shelters increase their intensity of engagement with people who need the assistance the most

rather than trying to assist all households, especially those households that can resolve their own homelessness.

THE PROFESSIONAL DELIVERY OF SHELTER SERVICES

Providing shelter to people experiencing homelessness requires well-trained professional staff that adhere to standards of care and are committed to ending homelessness. Having a big heart or a desire to help others is insufficient on its own. This is especially true for people with complex and co-occurring needs. Without sufficient training and standards of care, well-intentioned people can do more harm than good. It is for this reason that any shelter expansion needs to consider the cost ramifications of paying for a professional workforce. In essence, the funder is paying for housing outcomes, a safe environment, and assurance that staff have the ability to support people that often live with the impacts of trauma, mental illness, substance use, and/or chronic disease.

CORE COMPETENCIES OF STAFF

For sheltering to be successful, staff need to be hired with specific expertise or training must be provided to help them realize the core competencies. At a minimum, every staff person that works in a shelter should know and practice:

- Non-violent crisis intervention
- Privacy and confidentiality
- Ethics and boundaries
- Duty to report
- Shelter standards
- Motivational interviewing
- Trauma-informed care
- First aid and CPR
- Mental health first aid
- Responding to drug poisonings/overdoses
- Cultural safety
- Harm reduction

On top of this, staff need to know how to input data into the Homeless Individuals and Families Information System (HIFIS), know how Coordinated Access works in Niagara Region, know how to make referrals to other organizations and systems, and know the general steps in securing income and housing. There is more to shelter than providing a roof over one's head.

SERVICE ORIENTATION

Professional sheltering, aligned to the objective of being housing-focused in shelter, adheres to a very specific service orientation. The service orientation, which helps differentiate professional sheltering from voluntary or charitable sheltering, places higher expectations on staff to be trained and provide services in a very specific manner that is empowering, resists re-traumatizing people, and advances the objective of ensuring shelter stays are as short as possible. Succinctly, the service orientation requires staff to perform their duties in a manner that is:

- Trauma-informed
- Person-centred
- Harm reducing
- Culturally appropriate and safe
- Progressively engaging
- Non-judgmental and compassionate
- Strengths-based
- Motivational

STAFF TO GUEST RATIOS

Professional shelter services maintain an appropriate staff to guest ratio to ensure adequate engagement with shelter guests and to promote safety. The actual ratio in a shelter can be different from one to another based upon the population served (higher need populations require more staff) and the layout of the facility (larger dormitory accommodations require fewer staff in the likes

of overnight hours). Daytime hours of operation, assuming the shelter is 24/7, require more staff than overnight because daytime staff should be engaged with shelter guests more intensely to help resolve homelessness. Staff to guest ratios are preferably smallest in the afternoon and evening hours when there is greater chance for conflict, drug poisonings, new intakes and people returning to shelter who have been out for the day all happening at the same time. At all hours of the day a minimum of one staff to every twenty-five guests should be maintained, with a lower ratio during daytime and evening hours whenever possible. However, some facilities because of the layout or population served will always need more than 1:25.

ADHERENCE TO STANDARDS

Professional shelters adhere to common standards of service and care. Staff within the shelters are trained to the standards. Shelters are held accountable to the standards by the funder. Standards dictate how aspects of shelter services are to be delivered, from intake through to exits; responding to critical incidents to grievances; food services to maintenance. The standards ensure a level of consistency in services throughout the system of care, regardless of which staff are on shift or which organization is delivering the shelter services.

MONITORING AND CONTINUOUS IMPROVEMENT

Shelters funded through Niagara Region are monitored by Regional staff. The monitoring examines adherence to standards as well as service outcomes. In rare instances, the Region can also be involved in independently examining grievances and provide resolution to conflict between a guest and a shelter operator, across shelter providers, or between a shelter provider and neighbourhood. As the Region examines performance across shelters, opportunities emerge to make improvements in aspects of professional shelter delivery across shelter providers. The Region then can provide specific training to realize an improvement, or update policies or create new policies to inform shelter delivery in the Region. An example of an improvement underway is that the Region is embarking on improving housing results in shelters and is making

training on housing-focused shelter available to all shelter operators in the Region.

DIFFERENT SHELTER APPROACHES FOR DIFFERENT POPULATION GROUPS

Shelter is not “one size fits all”. Shelter is not about “warehousing” people without a safe, appropriate place to stay. Shelter services are customized to the population group being served and the depth of need of the people seeking shelter services.

MEETING THE NEEDS OF UNACCOMPANIED YOUTH

Youth are not “mini-adults”. Shelter services for youth follow a Positive Youth Development model. Meeting the needs of unaccompanied youth also requires a strong emphasis on prevention and diversion. RAFT in Niagara Region is viewed as a leader amongst youth providers in the country for their performance in helping youth avoid homelessness.

MEETING THE NEEDS OF INDIVIDUAL ADULTS

Individual adults without dependents (with them) dominate the shelter landscape in every community. The age of individual adults range from people in their 20s to senior citizens. Within the population there is considerable diversity — everything from people newly experiencing homelessness to people that are experiencing chronic homelessness; people with histories of incarceration to people that have never had conflict with the law; people with compromised health or mental health to people that are rarely, if ever, ill; some people deeply impacted by addiction to people that abstain from using all alcohol or drugs; etc. Developing effective engagement and program models within shelters that serve individual adults presents unique challenges given the diversity within the population.

MEETING THE NEEDS OF FAMILIES

Like individual adults, families are also quite diverse. In addition to the types of needs individual adults may present, families also present diversity in household composition and number of family members. There can be challenges in serving multi-generational families. There can be challenges in sheltering large families in one location. Male-led single head of household families are less popular, but not all family shelter services are designed to meet their needs. And it can be difficult to find suitable accommodation for families in housing so that the family can exit the shelter.

MEETING THE NEEDS OF COUPLES WITHOUT DEPENDENTS (WITH THEM)

Historically in most communities, couples without dependents experiencing homelessness were separated if they were a mixed gender couple, and even in same-gender couples they were not allowed to sleep together. Sheltering tended to address the needs of individual adults and families, but not childless couples. As shelters become more focused on helping households realize housing solutions, if a couple is going to be housed together, they should be sheltered together.

SHELTERING THROUGH A GENDER LENS

The experience of women's homelessness is different from men's homelessness. The experience of homelessness for transgender people is different from cis gender people. The experience of homelessness for non-binary or gender-fluid people is different from cis gender people. The reality, however, is that because individual men make up the majority of people in the shelter system it is through that lens that shelter services have frequently been designed and delivered. However, to truly be effective in meeting the needs of all people that use shelter services there can be a need to deliver shelter services in a manner that allows for separation by gender and gender-specific support services.

MEETING THE NEEDS OF OLDER ADULTS

There are two groups of older adults in the shelter system: those that have aged within the shelter system; and, those that become homeless for the first time in life at a later age. The needs of the groups are different in some respects; however, there is commonality in the types of health and mobility needs that come with age. A shelter system that serves a larger proportion of older adults often requires lower staff to guest ratios and can also require an infusion of health services including Personal Support Workers to assist with activities of daily living independently (for example: clothing, feeding, toileting, showering, etc.).

CULTURALLY APPROPRIATE SHELTER

Shelter provision needs to be culturally appropriate and safe. Otherwise the experience of using shelter can be further traumatizing, needs will go unmet, and/or, people will avoid shelter services and explore less safe options. Examples of population groups that benefit from culturally appropriate shelter include members of the 2SLGBTQIA+ community, Indigenous Peoples, and radicalized minorities.

SHELTERS OPERATED BY NON-PROFITS AND SHELTERS OPERATED BY MUNICIPAL STAFF

The majority of shelters in the country are operated by non-profit organizations. In the majority of communities with shelters either the municipal or provincial/territorial government provides a policy context, standards of care, funding and monitoring of shelters, but do not run the shelters directly.

In Ontario, there are examples of a the Service Manager initiating a shelter and then turning the operations over to a non-profit after the shelter is up and running. There are also examples of shelter systems that expanded during the pandemic with the use of municipal staff that have since retracted operations.

Where municipal staff are involved in shelter delivery as well as non-profit organizations, such as the City of Toronto, municipally operated shelter services

can be more expensive than non-profit counterparts. Just because a municipality operates a shelter itself does not guarantee better housing outcomes. It can, however, be more responsive to emerging needs and allow for increased flex capacity when needed.

Niagara Region has the experience of being a direct shelter operator with the Travelodge in Welland during the height of the pandemic. The Region has since retracted their involvement in shelter operations. Should the Region enter into the space of direct operations again in the future, there should be a sound policy and fiscal rationale to do so. Otherwise, sheltering is likely best left to the community-based sector.

If it is the will of the community to continue to have the non-profit sector be the delivery agent for shelter services, and there is a desire to get positive housing outcomes from shelter, then it will be helpful to move from a “grant mindset” to a “purchased service” mindset, enhance shelter standards, enhance training and expectations of professional services and outcomes, and improve pay so that non-profits can attract and retain top tier talent to work in shelters. Collectively, shelters need to be thought of not as charities but as professional services that end homelessness.

SEASONAL CAPACITY: A MATTER OF ACCEPTING UNSHELTERED HOMELESSNESS IN WARMER MONTHS?

Many communities throughout the country open additional shelter space in the autumn and retract those additional shelter beds come the spring. The intention is simple: to keep people from freezing to death in cold weather. It begs the question, however, of whether a community is willing to accept an increase in unsheltered homelessness in warmer months? And while it is true that cold weather can kill people, so can extremely hot weather. On top of this, with more people in unsupported environments like encampments there is greater risk of death from violence and drug poisoning because there are not staff to intervene. Simply, adding seasonal capacity in colder months may not be good

policy. It is better than a community consider year-round increased capacity to meet needs rather than preferring to provide additional shelter services for just part of the year. Furthermore, recruiting top-tier talent to work in seasonal shelters is very difficult as there is not a sustainable career path in taking on seasonal employment.

LOCATION FOR PROVIDING SHELTER

The location of shelter matters. It should be on a public transit line, and transportation to other services frequently used by people that stay in shelter (for example, Ontario Works office, walk-in clinic, methadone treatment, etc.) should be within proximity, either by walking or public transit. Given the geographic size of the Region, consideration must be given to ensuring not all shelter ends up in the more densely populated parts of the Region. If there is to be shelter expansion in the Region, under-served parts of the Region must be considered.

The Region has to be prepared for considerable NIMBY resistance regardless of where any shelter expansion may be sited. While concerns about increased crime and decreased property values are most often unfounded, these and other objections are expected. There will be pressure to put any shelter expansion far away from anything else, which makes it even harder for people to access the shelter and other services.

TYPES OF BUILDINGS SUITABLE FOR SHELTER

The movement in recent years is towards non-congregate shelters such as converted motels. Emerging evidence seems to suggest a better quality of life and that people otherwise resistant to shelter are more open to the possibility if provided greater privacy and the ability to keep their belongings safer. The tendency, however, in many communities is to take buildings that were constructed for a different purpose (for example, as a school; as a warehouse; as a light-industrial building) and turn it into a shelter. This presents very unique

challenges to provide a safe and appropriate space that incorporates trauma-informed design.

At the current time there are no shelter spaces in the Region that have been designed to be accommodating of people that use wheelchairs or most other forms of mobility assistance. This presents challenges to serving all people.

OPTIMUM SIZE OF SHELTER

There is no perfect shelter size, but there are various considerations into program effectiveness and financial viability based upon the size of the shelter.

In most communities, a shelter is not economically viable until it reaches approximately 25-40 beds. Below this approximate range, the per person costs to provide the intensity of service required to help people exit homelessness is often lacking because there isn't enough funding to justify specific expertise on housing and/or case management services. There is also a lack of economy of scale to appropriately fund food services and/or custodial and maintenance services. A large number of smaller shelters rely on private fundraising considerably to provide services, or else accept that there will be inferior services because of the smaller size of the facility.

While there are several Canadian examples of “monster shelters” that serve hundreds of people nightly, keeping to less than 100 people using any particular shelter per night seems to get better engagement and service outcomes while allowing for economies of scale. It also avoids the logistical challenges of being too big to, for example, serve meals without extensive line-ups sequenced over an hour. Staying at approximately 100 or less also means that staff teams are more likely to get to know the shelter guests and the needs of each person without people slipping between the cracks, remaining anonymous and not getting appropriate housing services.

THE RELATIONSHIP BETWEEN SHELTER CAPACITY AND HOUSING SOLUTIONS

Shelter expansion considerations must analyze available housing solutions. Expanding shelter capacity in a community without concurrently increasing housing opportunities results in a bottleneck in the shelter system because there is no opportunity for outflow. This can lead to consistent pressure to keep adding more beds over time as shelters fill up with people with nowhere to go. Adding shelter beds without adding housing solutions (through subsidies to access existing housing stock, modifying chronological access to make it easier to access existing rent-geared-to-income housing, acquisition of buildings suitable for housing, and new construction) is a recipe for disaster. It is also an ineffective use of scarce financial resources to expand shelter facilities without also expanding housing solutions.

LENGTH OF STAY INFORMS BED TURNOVER AND HOUSING SOLUTIONS REQUIRED

Simply, for each shelter bed added in a community the number of housing solutions required is determined by the frequency with which the bed is expected to turn over during the course of a year. For example, if the average length of stay in a shelter is 60 days, this would mean that six housing solutions are required for every bed added in the shelter system.

THE COST OF SHELTER EXPANSION AND OPERATIONS COMPARED TO INCREASED HOUSING OPTIONS WITH FINANCIAL AND SERVICE SUPPORTS

An argument can be made that rather than expanding shelter capacity, a community aims to assist existing chronically homeless households “stuck” in the shelter system to exit shelter for housing with adequate supports to sustain housing rather than remain in shelter. This allows existing shelter beds to have more turnover and be used truly for emergency purposes rather than becoming long-term lodging. Illustrated in the table below, even at the mid range of a per diem scale in shelters (\$60 per day) it costs \$1,800 per month to keep a

chronically homeless person in shelter. That works out to \$21,600 per year for the same person to stay in a shelter bed. Chronically homeless households in shelter are the most expensive to serve and use a disproportionate amount of shelter resources. Housing and supporting the same household in community is considerable more cost effective, costing about \$14,400 per year.

Per Diem Rates	Cost per Bed per Month	Cost of Providing a Housing Subsidy to the Same Household (rental assistance plus support services)	Difference (savings) if a Housing Subsidy were Provided Instead of a Shelter Bed [Cost per bed per month - Cost of Providing a Housing Subsidy to the same household]
\$40	\$1200	\$1,200	\$0
\$50	\$1500	\$1,200	\$300
\$60	\$1800	\$1,200	\$600
\$70	\$2100	\$1,200	\$900
\$80	\$2400	\$1,200	\$1200

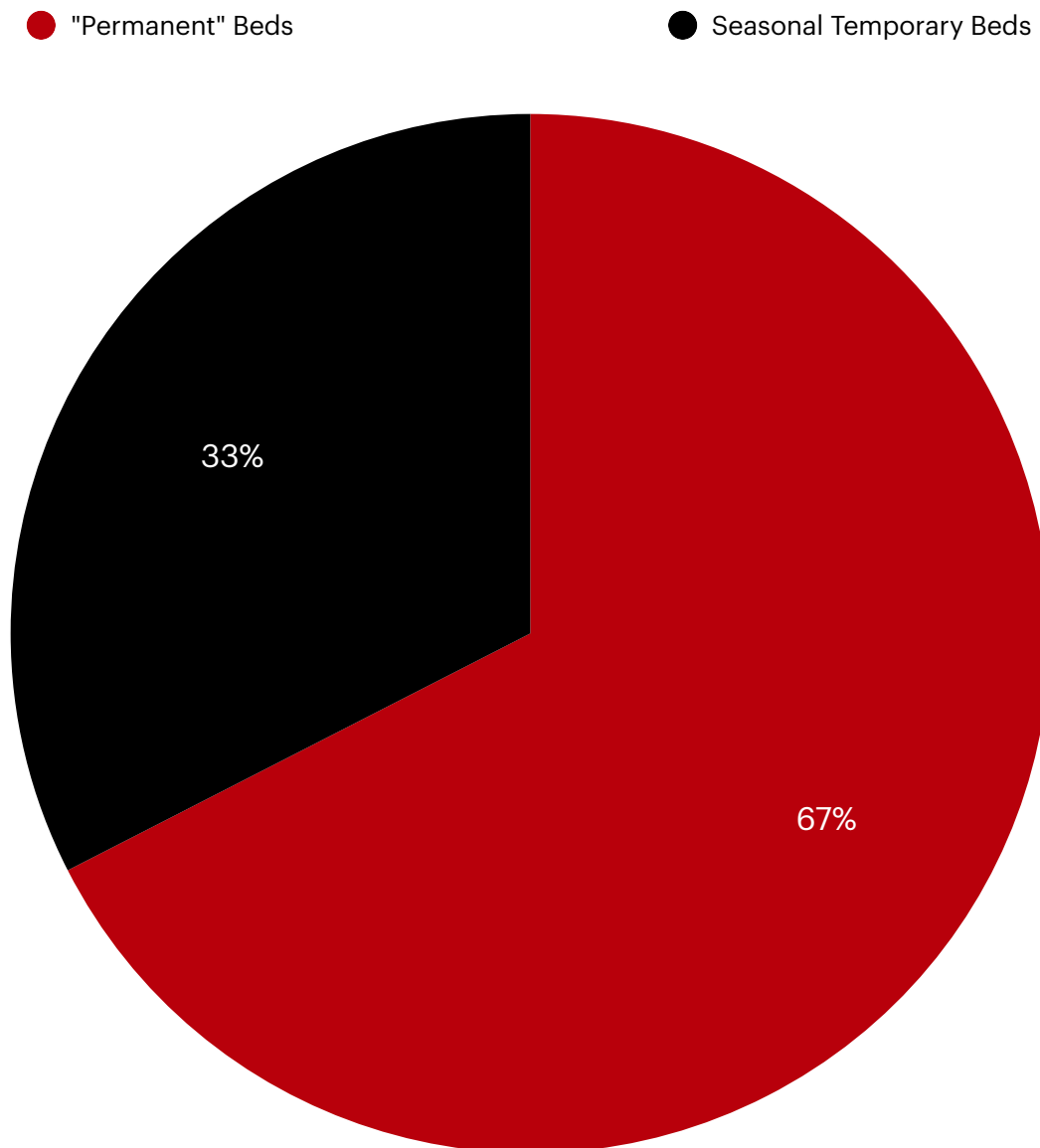
If capital costs for land acquisition, construction or renovation is considered, it is even less expensive to provide housing resources for people already in shelter rather than considerable shelter expansion.

CURRENT CONTEXT: SHELTER CAPACITY, UNSHELTERED HOMELESSNESS & UNKNOWN VOLUME OF “HIDDEN HOMELESSNESS”

To understand the necessary capacity to accommodate people experiencing homelessness in Niagara Region in shelter, there are several factors to consider: turn-aways from shelter; seasonal/temporary shelter use; the number of “permanent” beds in the system; the needs of various population groups; and, rates of unsheltered homelessness not currently accommodated by the shelter system. An unknown factor is how many people in Niagara Region are currently in a “hidden homelessness” situation such as couch-surfing, living in abusive or exploitive relationships rather than using shelter, and over-crowded situations.

SHELTER CAPACITY

There are currently 292 shelter beds in Niagara Region. However, that can be misleading given 95 of those beds are seasonal temporary beds. Almost one-third of the current shelter system in the Region is not in a sustainable position.



SHELTER BED CAPACITY BY SHELTER & SHELTER TYPE APRIL 2023		
Name	Current Capacity	Shelter Type
Nightlight Youth Services	7	Individual
Seasonal Temporary Shelter SC	55	Individual
Salvation Army Booth Centre	26	Individual
YWCA - Culp Street	20	Individual
Matthew House	8	Individual
Casa El Norte	8	Individual
Southridge	55	Individual
The RAFT	12	Individual
Seasonal Temporary Shelter NF	40	Individual
The Hope Centre	18	Household
YWCA - King Street	20	Individual
YWCA Family Shelter	8	Household
YWCA Men & Family Shelter	15	Household
TOTAL BEDS	292	
TOTAL SEASONAL	95	
TOTAL "PERMANENT" BEDS	197	

SHELTER OCCUPANCY CHALLENGES

A shelter system needs to be able to flex capacity. Being 100% full 100% of the time, or close to it, presents too many challenges to meeting the needs of an influx of people seeking shelter. Many shelter systems throughout the country aim to operate at 90% capacity most of the time so that they have a 10% margin to respond to any potential influx. Niagara Region's shelter system is currently strained. Consider, for example, the 7 day rolling average for occupancy in the shelter system in March was 96.8%. That means that on each

of those days almost every bed was full. What that doesn't illuminate, though, is which beds were available. For example, if it were just youth beds or family beds, but it was a single individual seeking shelter, they would not be accommodated. To simply meet the challenge of being at 90% occupancy most of the time, Niagara Region would need to keep the seasonal beds in operation year round, keep the overflow motel operating, and add 34 more beds on top of that.

IMPORTANCE OF PREVENTION AND DIVERSION

While the Region, along with community non-profits, have been working on improving the policy and operational approach to delivering prevention and diversion services at scale throughout the Region, there is a renewed urgency to see full implementation of housing-loss prevention and safe and appropriate diversion.

Prevention activities occur before an individual/couple/family has legally lost their ability to reside at an address, or is facing being asked to leave from a place that previously had been safe and appropriate to stay, but were not on the lease. The goal is sustaining an existing safe, appropriate tenancy or place to stay.

Diversion activities occur once an individual/couple/family has legally lost their housing, but prior to shelter entry. The goal is to explore safe and appropriate alternatives to shelter entry.

Failure to bring prevention and diversion to scale throughout the Region in a timely fashion will put more pressure on the shelter system to expand. However, expansion in the absence of bringing prevention and diversion to scale may lead to the false conclusion that more shelter space is required than otherwise would be had prevention and diversion been fully implemented.

UNSHELTERED HOMELESSNESS CONSIDERATIONS

An examination of street outreach data demonstrates that in the most recent full year of data (2022) there were 218 unique individuals engaged by street outreach that did not use shelter ever and that the shelter system cannot accommodate. Historical data available shows that the number of unique individuals in this situation is increasing in the Region. In 2021 there were 121 total people that fell into this category. To date in 2023 (as of April) there were already 100 unique people identified as the shelter system being unable to accommodate.

The nature of unsheltered homelessness is that there will not be 218 unsheltered people at any one time that are unable to be accommodated by the shelter system. This number will fluctuate throughout the year. Some people will self-resolve their homelessness. Some will move to other communities. Some will go into hospital or rehabilitation services. Some will die.

Furthermore, not everyone experiencing unsheltered homelessness will accept shelter services if offered. This can be based upon perceptions that shelters are not a good place, previous poor experiences in shelter, frustration of having tried to get into shelter and there was no space, or proximity of where the shelter is located compared to where they are located outdoors — amongst other reasons. Undoubtedly, there are also some people experiencing unsheltered homelessness that are not welcome at any of the shelters in the Region because of previous incidents at the shelter when they did access shelter.

RECENT ONTARIO COURT DECISION ON ENCAMPMENTS AND THE RELATIONSHIP TO SHELTERS

Earlier in 2023, the Ontario Support Court Justice Valente ruled that Waterloo Region could not evict and dismantle an encampment on public property. Succinctly, the Justice indicated that removing the encampment would be a violation of Charter Rights of the encampment residents. The Justice focused on the residents' rights to life, liberty and security of the person because of the lack

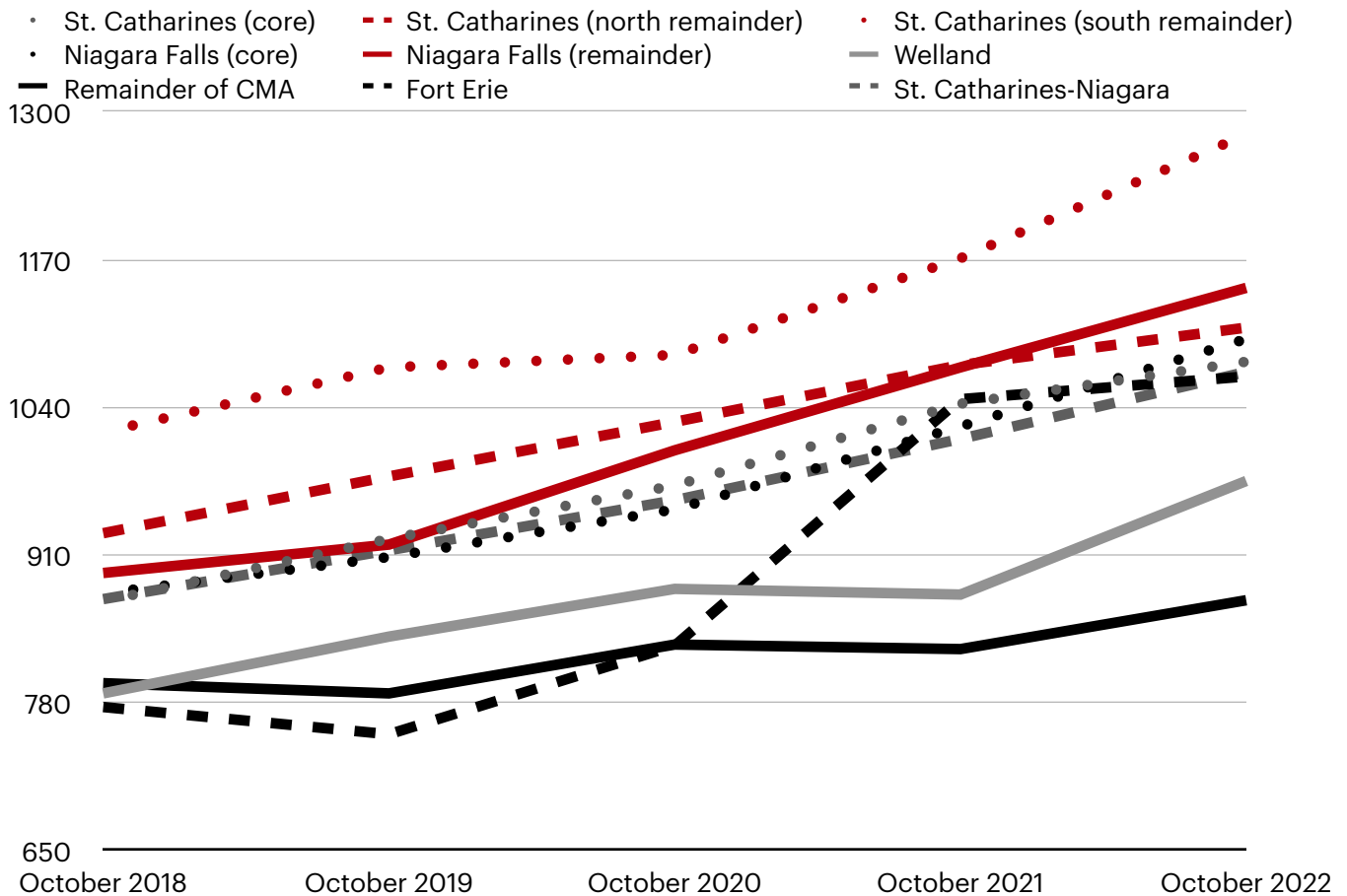
of shelter space. In a nutshell, it was insufficient that there may be a shelter bed available on paper on any given day. The shelter bed had to be operational, available for the specific population group seeking shelter, and accommodating for the individual seeking shelter. The Justice determined shelter spaces must not split couples, must provide supports, must not “impose rules that cannot be followed due to addiction,” and must accommodate mental or physical disability.

The implications for Niagara Region, and other Ontario jurisdictions, are significant. Removal of encampments from public spaces, regardless of whether or not there is a by-law that restricts that type of activity on the space, is not possible without ensuring there is adequate shelter space for the people living in the encampment. Furthermore, the shelter must be sensitive to accommodating couples, must be accommodating of people with disabilities, and must operate in a manner that a person with an addiction can use and be supported by the shelter. Simply, it is not just a matter of adding more shelter beds in Niagara Region, potentially, it is examining the type(s) of beds and how they operate.

CHANGES IN THE LOCAL RENTAL HOUSING MARKET AND INSUFFICIENT INCOME ASSISTANCE RATES ARE LIKELY TO MANUFACTURE MORE HOMELESSNESS

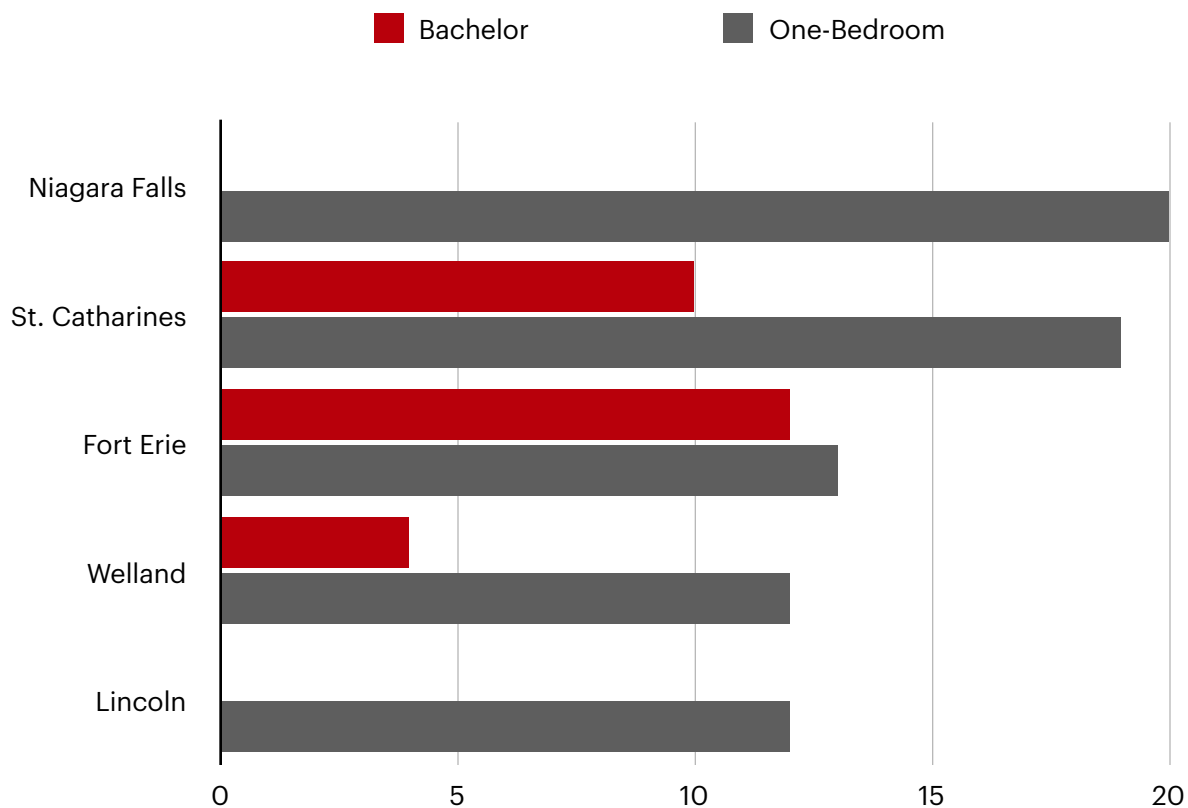
The average market rent for rental apartments in communities within Niagara Region is trending higher, increasingly out of reach for low-income households, especially those on income assistance. In relation to this study, given the majority of people that use shelter in Niagara Region are individual adults without dependents, consider the following trends for one-bedroom apartments:

NIAGARA REGION SHELTER CAPACITY



Meanwhile, income assistance rates, which are set by the Province of Ontario, are insufficient to meet the cost of rental accommodation and other expenses. A person that relies on Ontario Works as their source of income cannot afford average market rent for either a Bachelor or One-Bedroom apartment. For a Bachelor, in Niagara Region, they would need an extra \$100 per month - and that is just for rent (not including utilities, food, clothing, transportation or other household expenses). For a One-Bedroom in Niagara Region, they would need an extra \$338. For people on the Ontario Disability Support Program, in a Bachelor unit they would have \$395 to meet all other expenses in the month after paying rent, and in a One-Bedroom unit would have \$157 to meet all other expenses in the month.

NIAGARA REGION SHELTER CAPACITY



No RGI bachelors in the communities of Niagara Falls or Lincoln.

Average Rent Bachelor Unit St. Catharines-Niagara October 2022	\$833
Average Rent One Bedroom Unit St. Catharines-Niagara October 2022	\$1,071
OW Shelter Allowance - Single w/out Dependents	\$390
% of Rent Shelter Allowance Covers - Bachelor	47%
% of Rent Shelter Allowance Covers - One Bedroom	36%
OW Total Monthly Benefit (incl. Shelter Allowance) - Single w/out dependents	\$733
% of Rent Total Monthly Benefit Covers - Bachelor	88%
% of Rent Total Monthly Benefit Covers - One Bedroom	68%
Amount of money left after paying rent per month on OW - Bachelor	-\$100
Amount of money left after paying rent per month on OW - One Bedroom	-\$338
ODSP Shelter Allowance - Single w/out dependents	\$522

% of Rent Shelter Allowance Covers - Bachelor	62%
% of Rent Shelter Allowance Covers - One Bedroom	49%
ODSP Total Monthly Benefit (incl. Shelter Allowance) - Single w/out dependents	\$1,228
% of Rent Total Monthly Benefit Covers - Bachelor	147%
% of Rent Total Monthly Benefit Covers - One Bedroom	121%
Amount of money left after paying rent per month on ODSP - Bachelor	\$395
Amount of money left after paying rent per month on ODSP - One Bedroom	\$157

Pressures on existing rent-geared-to-income housing, as per Niagara Regional Housing, have long waiting lists. There is an insufficient amount of rent-geared-to-income units available per year to substantially reduce pressures on the shelter system. The wait times (expressed in years) for rent-geared-to-income for a Bachelor or One-Bedroom apartment for a non-senior, without dependents is excruciatingly long.

RECOMMENDATIONS FOR SHELTER CAPACITY IN NIAGARA REGION

1. *Make permanent the 95 beds that were seasonal shelters in St. Catharines and Niagara Falls.*

Niagara Region is not in a position to shed capacity. The data demonstrates the beds are integral to meeting shelter demands within the local shelter system. Going forward, Niagara Region should focus on permanent bed capacity over seasonal capacity. Seasonal shelters take resources away from the permanent system, do not get better results in ending homelessness, and rarely attract or retain top tier talent to work in the field. At least some of the shelter beds made permanent must be accommodating to people with pets to decrease that barrier to shelter access for people that are unsheltered with their animal. Furthermore, at least some of the shelter beds need to be accommodating to people with mobility issues.

2. *Maintain an overflow in motel(s).*

Overflow capacity throughout the year makes complete sense for several reasons. For one, if the shelter system gets full at any point during the year it provides a release valve. In addition, the overflow bed capacity in a motel setting can be instrumental in the event that an encampment on public lands needs to be dismantled for health and safety reasons.

3. *Invest at least \$3 Million in housing subsidies and supports to substantially decrease the number of people experiencing chronic homelessness that currently use shelters in Niagara Region.*

To decrease land acquisition, capital costs and/or renovation costs, and to decrease chronic homelessness within shelters whereby a smaller group of people are consuming a disproportionate amount of shelter resources,

make \$3 Million available exclusively for assisting chronically homeless people exit shelter. The funding would be used to provide intensive supports using smaller caseloads, coupled with financial assistance to provide a portable rent supplement that could be used with any private sector landlord willing to accept the rent supplement. This approach will take substantial pressure off parts of the shelter system, is cheaper than expansion, and helps people recover from their experience of homelessness.

4. Over the next three years, increase the number of shelter beds for individual adults by at least 120 beds, and as many as 180 beds depending upon development of additional Bridge Housing and Permanent Supportive Housing.

The intention of this is twofold: to help the Region prepare for what is likely to be an increase in homelessness because of the lack of affordable housing in the community and low income assistance rates; and, to help respond to unsheltered homelessness. It is recommended that there be a minimum of three separate facilities to realize the 120-180 beds so as to ensure appropriate staff engagement and housing focus within the facilities. At least one of the facilities should be for women, with consideration of non-binary and gender-fluid people being accommodated in the same facility. At least one of the other facilities should be operated by the Indigenous community and cater specifically to the needs of Indigenous People experiencing homelessness. At least part of one of the facilities, if not a facility entirely, should be dedicated to serving the unique needs of older adults. All new facilities should be wheelchair accessible.

The number of shelter beds required is contingent upon implementation of additional Bridge Housing and Permanent Supportive Housing in the Region. The more Bridge Housing and Permanent Supportive Housing the Region is able to implement, the fewer the number of shelter beds that

are required. However, even with more Bridge Housing and Permanent Supportive Housing it is recommended that at least 120 additional shelter beds be added.

5. Over the next three years, increase capacity for couples without dependents (with them) and families by adding a dedicated couple and family shelter that can serve at least 20 couples and families, and upwards of 100 unique individuals in those households.

There is insufficient capacity in the shelter system for couples that do not have children (or at least do not have children with them) and families. Given the expensive rental housing market in Niagara Region there is likely to be an influx in households of various sizes experiencing homelessness. This measure will require selecting a location that can flex accommodation size based upon the size of the family seeking assistance. Historically, shelters throughout the country struggle to accommodate families with four or more children, and also struggles to serve multi-generational families. "Family" should be defined by the household seeking services.

6. Implement prevention and diversion to scale as soon as possible.

To relieve the pressure on the shelter system, it is paramount that housing loss prevention and diversion - two initiatives that the Region has been working on in recent years with the community-based sector - be implemented and brought to scale as rapidly as possible. For both housing loss prevention and homelessness diversion to be as effective as possible at avoiding shelter use it is important that flexible funding be provided to prevention and diversion workers to rapidly resolve situations with a short-term investment in solving the most immediate problems.