

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

PHSSC 2-2025 Tuesday, February 4, 2025 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

1. CALL TO ORDER

2. LAND ACKNOWLEDGEMENT STATEMENT

3. DISCLOSURES OF PECUNIARY INTEREST

4. **PRESENTATIONS**

4.1	Niagara Well-Being Tool Megan Henry, Program Evaluator & Data Analyst Community Safety & Well-Being Community Services & Sandy Dupuis, AD Comm Strategic Priorities	3 - 9
4.2	Canada-Wide Early Learning and Child Care Directed Growth Plan Update Satinder Klair, Director of Children's Services	10 - 25
4.3	Healthy Babies Healthy Children Program Update Christene de Vlaming-Kot, Manager, Early Years & Diane Legros, Manager, Early Years	26 - 39

Pages

5. DELEGATIONS

	5.1	Shelter Beds and Mental Health & Addiction Services in Niagara Region						
		5.1.1 Steven Soos, Resident, City of Welland This delegation has been withdrawn.						
		5.1.2 Cheryl Rowe, Resident, City of Welland This delegation has been withdrawn.						
6.	ITEM	S FOR CONSIDERATION						
	6.1	<u>PHD 2-2025</u> New Housing First Assertive Community Treatment Team	40 - 44					
7.	CONSENT ITEMS FOR INFORMATION							
	7.1	<u>COM 3-2025</u> Seniors Services Quality Improvement Report: October-December 2024	45 - 49					
	7.2	COM 4-2025 Seasonal Shelter	50 - 55					
	7.3	NRH 1-2025 Single Source Acquisition of Modular Trailers for Permanent St. Catharines Shelter Site	56 - 59					
8.	OTHE	ER BUSINESS						
9.	NEXT	MEETING						

NEXT MEETING The next meeting will be held on Tuesday, March 4, at 1:00 p.m. in the Council Chamber, Regional Headquarters.

10. ADJOURNMENT

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



Niagara Well-Being Tool

Public Health and Social Services Committee February 4, 2025

Megan Henry, Program Evaluator & Data Analyst Community Safety & Well-Being Community Services



Niagara Well-Being Tool



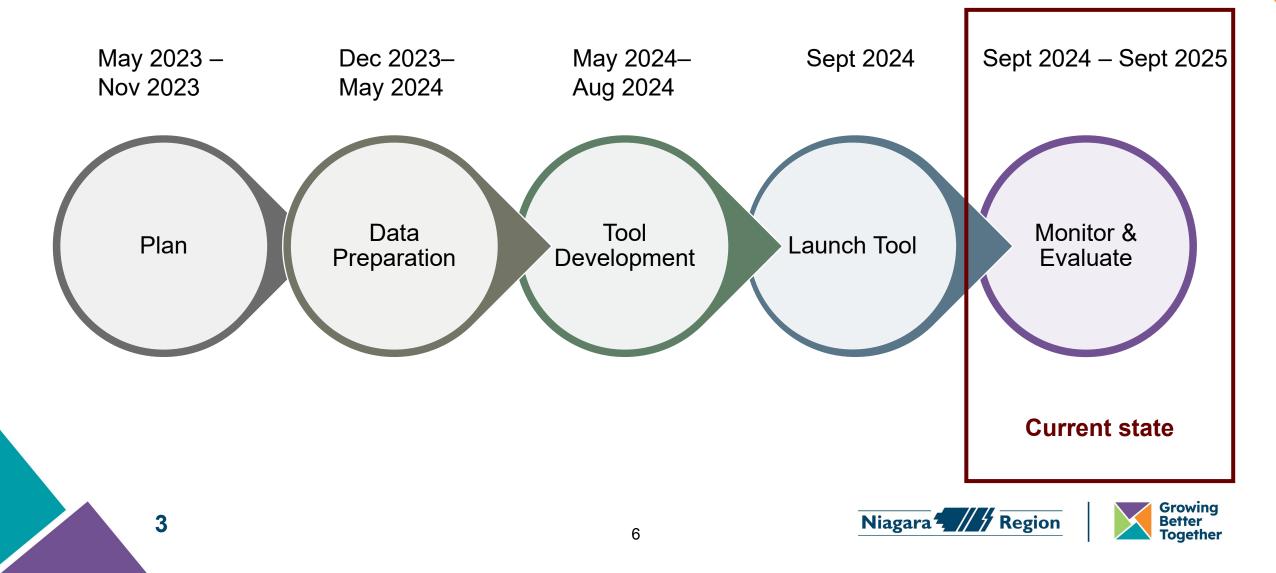
Agenda

- Niagara Well-Being Tool Project Plan
- About the Niagara Well-Being Tool
- Demonstration
- Next Steps





Niagara Well-Being Tool Project Plan



About the Niagara Well-Being Tool

- Publicly available, interactive tool
- Niagara's 12 municipalities and 44 neighbourhoods
- 2016 and 2021 Census data collected by Statistics Canada

7

- 32 indicators presented in four categories:
 - Demographics
 - Education and Employment
 - Housing
 - Income



Demonstration

https://www.niagararegion.ca/community-safety/well-being-tool.aspx





5

Next Steps

- Support community agencies in utilizing the tool
- Monitor and evaluate

6

• Explore additional data sources







Canada-Wide Early Learning and Child Care Directed Growth Plan Update

Public Health and Social Services Committee February 4, 2025

Satinder Klair, Director of Children's Services

Canada-Wide Early Learning and Child Care Directed Growth Plan Update



What is Directed CWELCC Expansion

- The Canada-Wide Early Learning and Child Care (CWELCC) program:
 - Provides targeted funding for new child care spaces

2

- Must align with the Provincial Access and Inclusion Framework
- 4,067 new licensed child care spaces from 2022 to 2026
- Federally and provincially (\$154.6M), and municipally funded (\$3.2M)



Niagara // // Region

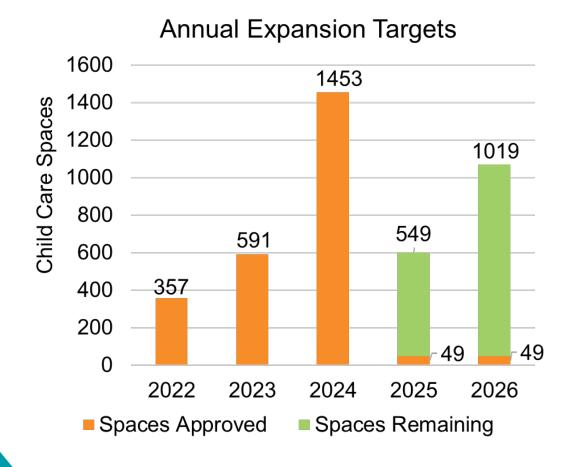
Niagara's Provincial Targets

Type of child care space	2022	2023	2024	2025	2026	Total spaces
School-based spaces	98	0	186	49	49	382
Community-based spaces	259	591	1267	549	1019	3685
Total spaces	357	591	1453	598	1068	4067

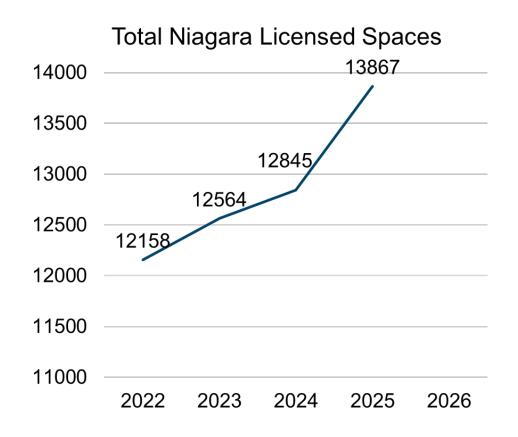




Accomplishments to Date



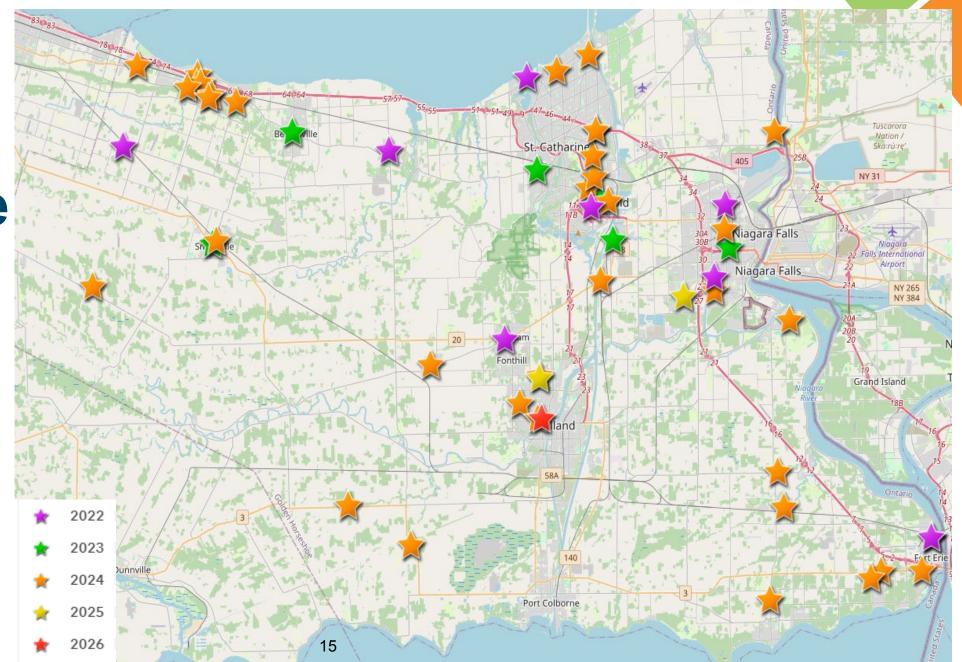
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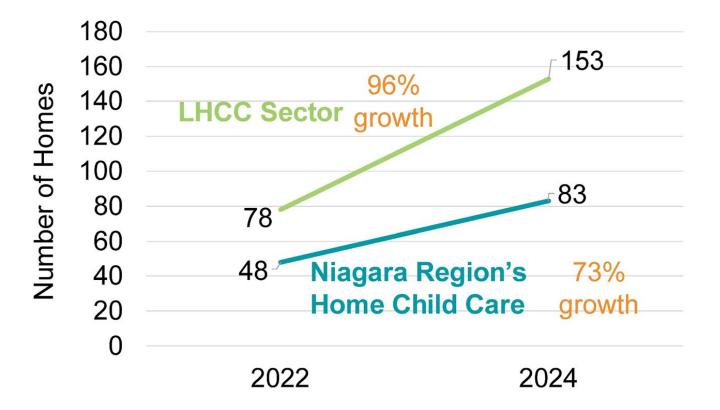


Niagara 7 // / Region

Licensed Child Care Centrebased Growth



Licensed Home Child Care (LHCC) Growth





CWELCC Expansion Impacts: Economic

- Affordable and accessible child care supports regional economic growth
- Estimated \$32 billion in national GDP generated in 2024¹
- Increases women's participation in the workforce

7

• Nationally female labour force participation increasing

¹Powering Growth, Economic Benefits from Canada's \$10-per-day Early Learning and Child Care Program, November 2024





CWELCC Expansion Impacts: Children

- Licensed child care positively impacts a child's abilities
- Strong linkage to long-term benefits
- Strong linkage for lower-income households
- 680 expansion spaces in or near a low-income neighbourhood





CWELCC Expansion Challenges: Non-Profit Support

- Must maintain 81% of child care spaces as non-profit
- Non-profits challenged in securing commercial lending
- Possible Mitigation Strategies

- 1) The Early Learning and Child Care Infrastructure Fund
- 2) Waiving or reducing inspection and licensing fees



CWELCC Expansion Challenges: Process, Permits and Zoning

- Significant delays for fire and other required inspections
- Building permits can take months to process
- Expansion projects require additional studies
- Zoning changes are complex

- Possible Mitigation Strategies
- 1) Prioritize inspections and zoning exemptions for child care
- 2) Child care builds in new development applications





CWELCC Expansion Challenges: Demand

- Lower fees and increasing population resulting in higher demand
- Demand grew by 124% between 2021 to 2025

Possible Mitigation Strategy

- 1) Request additional spaces
- 2) New partnerships with economic development
- 3) Continue to increase operating capacity (Workforce)





CWELCC Expansion Challenges – Workforce

- Approximately 73% of all spaces and 48% of new spaces since 2022 operating
- Approximately 2,300 CWELCC spaces not being used

Possible Mitigation Strategy

- 1) Ontario Child Care Workforce Strategy
- 2) Centralized RECE supply list pilot results
- 3) Professional Advancement Early Childhood Education Program





Council Strategic Priorities

Effective Region

Remaining an employer of choice by transforming service delivery in a way that is innovative, collaborative and fiscally-responsible.

Green and Resilient Region

Focusing on reducing our collective carbon footprint and preparing to adapt to climate change impacts by ensuring current and future infrastructure is resilient.

Equitable Region

Providing opportunities for a safe and inclusive Niagara by listening and responding to our current community needs and planning for future growth.

Prosperous Region

Advocating with senior governments for future growth and enhancing Niagara's transportation network to help support a diverse economy by creating a Region where new and existing businesses can thrive and grow locally, nationally and internationally.



Questions





Appendix A: Priority Communities

Refer to COM 23-2024: Public Health and Social Services Committee – September 10, 2024: *Canada-Wide Early Learning and Child Care Program Directed Growth Priority Neighbourhood Update*

Municipality	Community
Grimsby	Grimsby Beach
Lincoln	Beamsville
Niagara Falls	Beaverdams
Niagara Falls	Drummond/Victoria
Niagara Falls	Stamford
Niagara Falls	Westlane
St. Catharines	Downtown/Haig area
St. Catharines	Facer/Cushman
St. Catharines	Merritton
Thorold	Thorold Propter
Pelham	Fonthill
Port Colborne	Humberstone/Stonebridge
Welland	Eastdale/Cordage
Welland	South Pelham/Chippawa Park area
Welland	Woodlawn/Seaway





Healthy Babies Healthy Children Program

Public Health and Social Services Committee February 4, 2025

Christene de Vlaming-Kot, Manager, Early Years Diane Legros, Manager. Early Years

Healthy Babies Healthy Children Program

Family and Community Health Division

Christene de Vlaming-Kot, Manager Diane Legros, Manager



Healthy Babies Healthy Children (HBHC)

Program Description

- HBHC is a free voluntary home visiting program.
- 100% funded by the Ministry of Children, Community and Social Services.
- Evidence-based program with significant cost benefits over the lifetime of the child.





Healthy Babies Healthy Children (HBHC)

Program Goal

 Optimize newborn and child healthy growth and development and reduce health inequities for families receiving services.







Council's Strategic Priorities 2023-2026







Service Delivery Model

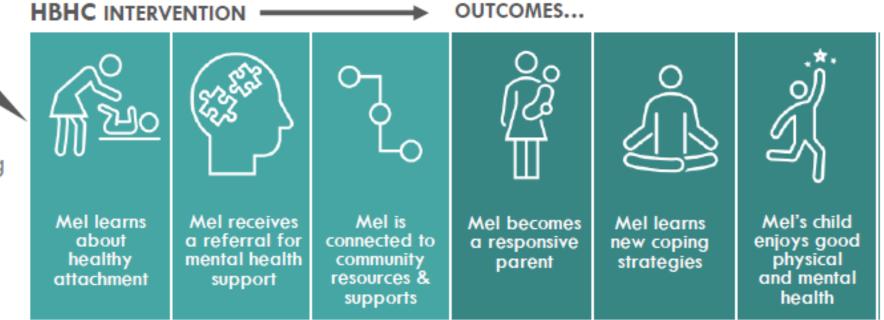
- Screening
- Intake and Assessment
- Home visiting





Mel was **OFFERED** the HBHC screen postpartum.

The Public Health Nurse contacted Mel after receiving the screen. She offered Mel the Healthy Babies Healthy Children (HBHC) Home Visiting Program.











Niagara /// Region

Importance of HBHC program

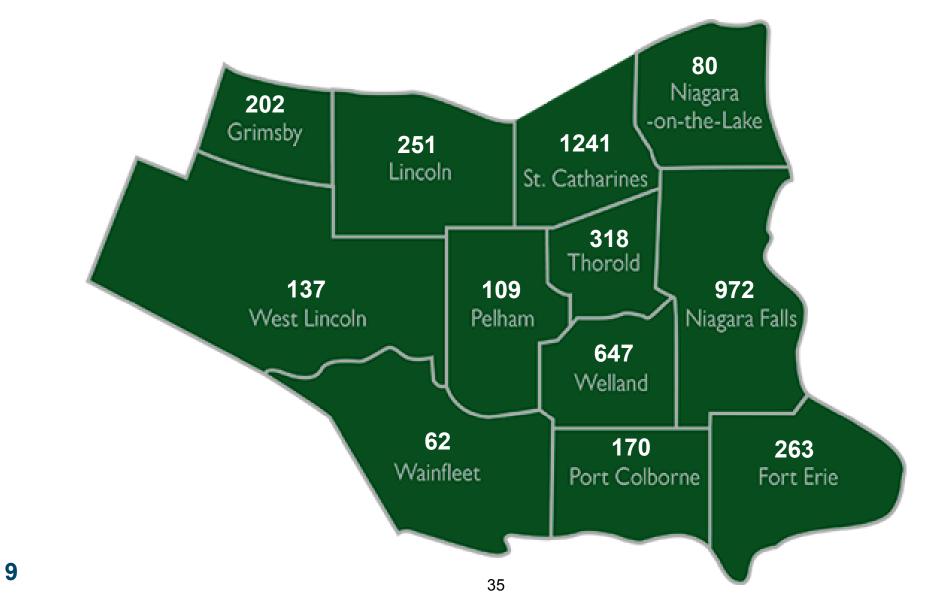
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The HBHC program has been recognized as a best practice for supporting young families and children.

• During the pandemic, senior leadership recognized the importance of maintaining HBHC.



HBHC Screens by Municipality



Program Indicators for 2024

4,452 HBHC screens were completed for babies/children in Niagara



96% of all live births in Niagara received an HBHC screen in 202459% of babies/children screened "with risk"



10

2,255 in person home visits were completed by public health nurses2,548 hours spent in face-to-face interactions with clients





Aligning with Provincial Priorities

Investing in HBHC is a cost-effective approach, with a return on investment of as much as **13 to 1** over the lifetime of the child.

Ministry of Children, Communities and Social Services (MCCSS) increased their investment to Niagara's HBHC program.

• The recent increase to program base funding a great step in furthering provincial investment in the HBHC program; however, this was the first increase since 2008.



11

Questions?

If you have any questions, please contact:

- Christene de Vlaming-Kot, Manager Early Years
 - <u>Christene.devlaming-kot@niagararegion.ca</u>
 - 905-401-8134
- Diane Legros, Manager Early Years
 - <u>Diane.legros@niagararegion.ca</u>
 - 905-401-8162





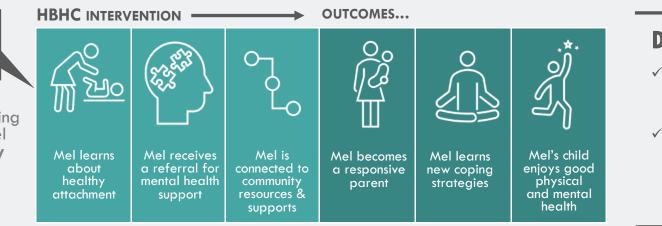
A TALE OF TWO FAMILIES



MEL AND JANE EACH HAVE A BABY. EACH PRESENTS AS HEALTHY AND COPING WELL, BUT HAVE BEEN IMPACTED BY DIFFERENT RISK FACTORS, WHICH CAN LEAD TO POOR OUTCOMES.

MEL WAS **OFFERED** THE HBHC SCREEN **POSTPARTUM.**

The Public Health Nurse contacted Mel after receiving the screen. She offered Mel the Healthy Babies Healthy Children (HBHC) Home Visiting Program.



Did you Know?...

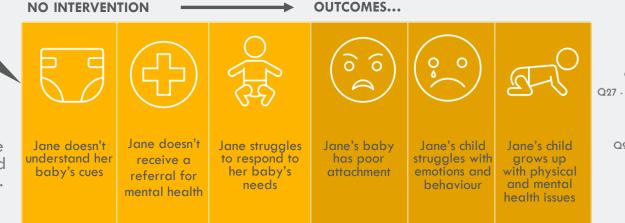
✓ HBHC is a program designed to help children in Ontario have a healthy start in life and provide them with opportunities to reach their potential.

✓ Through HBHC screening*:

- 60% of Ontario families have potential risk factors that can impact healthy development outcomes for children
- 15% have greater than 5 risk factors
 *extracted from BORN Information System 2021/22data n=54,146

JANE WAS **NOT** OFFERED THE HBHC SCREEN POSTPARTUM.

Risk factors were not identified. Without support, Jane is less able to cope with day to day life or develop the responsive relationship needed for optimal child development.



TOP 10 eHBHC RISK FACTORS 2021/22* extracted from BORN Information System



PLEASE COMPLETE THE HEALTHY BABIES HEALTHY CHILDREN SCREENING TOOL WITH EVERY FAMILY



Subject: New Housing First Assertive Community Treatment Team Report to: Public Health and Social Services Committee Report date: Tuesday, February 4, 2025

Recommendations

1. That Regional Council **APPROVE** the posting of up to 12 permanent full-time equivalents (FTE)s in February 2025, in advance of Council's approval of the FTEs planned for the March 2025 committee cycle.

Key Facts

- On January 27, 2025, the Ministry of Health approved a proposal from ten collaborating organizations to establish a Homelessness and Addiction Recovery Treatment Hub (HART Hub) in Niagara.
- The Niagara Region Mental Health program will be funded to establish a new Housing First Assertive Community Treatment Team (HFACTT) in a three-year demonstration project that must initiate service by April 1, 2025.
- The overall budget for the initiative, across all ten partner organizations, is \$18.9 million with approximately \$1.53 million per year allocated to support the HFACTT. No levy contribution will be required to support the HFACTT.
- The purpose of this report is to seek Council's approval to post up to 12 permanent full-time equivalents (FTE's) as soon as possible while concurrently finalizing a funding agreement with the lead agency. None of the positions will be awarded until the HART Hub funding for the Niagara Region Mental Health program has been settled. The filling of the up to 12 positions will be contingent on Council's approval of the March 2025 report.
- 11 of the 12 positions newly funded are unionized positions, represented by ONA Public Health, CUPE 1757, and CUPE 1287. There is language in both ONA Public Health and CUPE 1287 contracts requiring that, after the period of the original posting or a two-year period respectively, the jobs must automatically become permanent.
- There are significant advantages to post all of these 12 jobs permanently including attraction and retention of higher quality candidates, continuity of care and service

across the department, and may avoid future separation costs by utilizing bumping and layoff language in each of the existing applicable collective agreements.

• The Region's Budget Control By-law and Corporate Delegation of Authority Policy requires Council approval for the creation of new permanent FTEs. A full report with financial details and a request to formalize the FTE and budget adjustment required will be presented to Council next month once a suitable funding agreement has been secured.

Financial Considerations

The Niagara Region has not yet entered into a formal funding agreement for the addition of the HFACTT to support the HART Hub to be operated by Gateway Residential and Community Support Services, the lead agency. While the lead agency has secured provincial funding, the Region's Budget Control By-Law and Corporate Delegation of Authority Policy requires Council approval and a confirmed funding source before hiring new permanent FTEs.

To ensure timely implementation of the HFACTT team, this report seeks Council's approval to begin the process of recruiting candidates while concurrently working through the preparation of a funding agreement with the lead agency. However, hiring will remain contingent on securing a suitable agreement.

The estimated funding to be allocated for the 12 permanent FTE's and the contracted Consulting Psychiatrist are \$1.53 million per year starting April 1, 2025. No levy contribution is required. A follow-up report will be presented to Committee in March, providing full financial details and requesting approval for the FTEs once a contract is in place.

Analysis

The HART Hub will serve individuals who are experiencing homelessness who have addictions and/or mental health concerns. Hub efforts will be targeted specifically to clients experiencing chronic sheltered or unsheltered homelessness who have symptoms of mental illness and/or substance use.

HFACTT is an evidence-based multidisciplinary, wrap-around, team approach that supports people with long-standing symptoms of severe mental illness and addictions that directly impact their ability to obtain and retain suitable housing. Most often, they are individuals who have not experienced success in traditional mental health and addictions programming. Individuals receive supportive services in multiple areas: mental and physical health, substance use, education, employment, and support with finding and maintaining safe and affordable housing. Research has found that the Assertive Community Treatment (ACT) model itself has a significant impact in reducing hospitalizations, and when combined with a Housing First approach, it further improves housing stability and successful exits from homelessness.

The Niagara Region Mental Health Program currently has two ACT Teams and is wellpositioned to establish a third specialized team (HFACTT) to assist this population. ACT Teams operate 7 days/week with extended hours outside of regular business hours.

This new multidisciplinary team consists of 12 full time equivalents and one contracted consultant:

- 1 Consulting Psychiatrist (contracted)
- 1 Supervisor (non-union)
- 4 Mental Health Nurses (ONA Public Health)
- 1 Social Worker (CUPE 1757)
- 1 Occupational Therapist (CUPE 1757)
- 1 Peer Specialist (CUPE 1757)
- 1 Program Assistant (CUPE 1287)
- 1 Mental Health Case Worker (CUPE 1757)
- 1 Addiction Case Worker (CUPE 1757)
- 1 Behavioural Specialist (CUPE 1757)

In order to ensure sufficient lead time for the Mental Health program to recruit and onboard the staff needed to fully leverage the HART Hub funding, the postings for the new positions must occur in early February 2025.

Staff will evaluate the HFACTT at meeting its intended goals during the initial three-year phase. If effective, advocacy efforts will be made to secure continued funding. Should this effort be unsuccessful, mechanisms are in place to adjust the FTE count as needed.

Alternatives Reviewed

Regional staff reviewed the implications of waiting to post the new positions until March 2025 when requesting the official funding and FTE approvals by the Board of Health. These timelines would not afford sufficient time to recruit and onboard the new staff to meet the implementation date of April 1, 2025.

Staff also reviewed the option of posting the new positions as temporary for the threeyear duration of the committed funding. However, collective agreement requirements mandate the conversion of positions to permanent after a certain period, depending on the employee group. Additionally, in the current, competitive health human resources environment, it is particularly challenging to recruit mental health program staff to temporary roles, as potential candidates are typically already employed in permanent, full-time positions elsewhere. This could significantly impact the ability to attract qualified candidates and, in turn, affect the quality of care provided to the population supported. Temporary staff often seek out permanent employment elsewhere in the organization, leading to higher turnover rates and service gaps or additional costs associated with recruitment and retraining.

Relationship to Council Strategic Priorities

The approval of 12 permanent full time equivalent positions supports Council Strategic Priorities of fostering Equitable Region, promoting affordability with a diversity, equity and inclusion lens by improving access to affordable and attainable housing for vulnerable populations.

Council has declared states of emergency for homelessness, mental health, and opioid addictions, recognizing the impact on Niagara residents and the need to prioritize resources from the federal, provincial, and local governments.

Other Pertinent Reports

None

Prepared by: Lisa Panetta Associate Director, Mental Health Niagara Region Public Health

Recommended by:

Azim Kasmani, MD, MSc, FRCPC Commissioner and MOH Public Health and Emergency Services

Submitted by: Ron Tripp, P.Eng.

Chief Administrative Officer

This report was prepared in consultation with Jeff Garritsen, Associate Director Labour and Employee Relations and Employee Health; Donovan D'Amboise, Manager Program Financial Support; Rachel Williams, Human Resources Consultant; Diane Vanecko, Director Clinical Services Division.



Subject: Seniors Services Quality Improvement Report: October-December 2024

Report to: Public Health and Social Services Committee

Report date: Tuesday, February 4, 2025

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 quality initiatives for Seniors Services.
- Areas of focus in this report are:
 - Review and Update of Pandemic Plan
 - 2024 Resident and Family Satisfaction Survey
 - Municipal Benchmarking Network Canada (MBNC) Presentation of Seniors Services

Financial Considerations

The Ministry of Long-Term Care (MLTC) and Ontario Health West are the primary sources of funding for the Seniors Services division. Other funding sources include user fees and levy.

Analysis

Review and Update of Pandemic Plan

On October 9, 2024, a comprehensive review and update of the pandemic plan for Niagara Region Long-Term Care Homes was conducted with active participation from interdisciplinary staff and Public Health representatives. This critical initiative ensured that our preparedness strategies are robust, up-to-date, and aligned with the latest Public Health and Ministry of Long-Term Care guidelines. By integrating lessons from past experiences and adopting emerging best practices, the updated plans are designed to effectively mitigate risks, safeguard vulnerable residents, and support staff during future health crises. The collaborative nature of this review process was a cornerstone of its success, fostering consistency and cohesion across all homes. Through open dialogue and shared insights, Seniors Services identified strengths to build upon and addressed gaps to enhance our readiness. Key areas such as infection prevention, outbreak response, and resource allocation protocols were standardized and refined, ensuring that each home is equally equipped to manage potential challenges. This unified approach not only strengthens the resilience of individual homes but also bolsters the entire regional home's capacity to respond swiftly and effectively.

2024 Resident and Family Satisfaction Survey

Resident and family satisfaction surveys were conducted across our long-term care homes from November 18 to December 8, 2024, to gather valuable feedback on the quality of care and services provided. The survey serves as a critical tool to assess residents' experiences and family members' perceptions, offering insights into areas of excellence and opportunities for improvement. By actively seeking this feedback, the Division reaffirms its commitment to delivering person-centred care that aligns with the needs and expectations of those we serve.

The importance of these surveys cannot be overstated, as they directly inform Seniors Services efforts to enhance care quality, improve communication, and foster a supportive environment for residents and their families.

In 2024, the surveys yielded 542 complete and 52 partial responses, with 320 submitted by residents and 222 by families. Ninety-one percent of our residents rated our homes as either good or excellent, while eighty-nine percent of our families provided similar ratings. Based on the survey findings, action plans will be formulated in collaboration with residents and their families to enhance the quality of care, services, programs, and resources provided within the home environment.

The insights will guide actionable changes and drive continuous improvement across all aspects of our operations. Ultimately, this process strengthens trust, ensures accountability, and reinforces our shared goal of providing every resident with safe, respectful, and dignified care.

Municipal Benchmarking Network Canada (MBNC) Conference Presentation of Seniors Services

Seniors Services was selected to present at the MBNC Conference last November 6-7, 2024, at White Oaks Conference Resort in Niagara-on-the-Lake. Henri Koning, Paolo

Varias and Viviana Mendendez presented representing Seniors Services. The presentation focused on the critical need to address rising long-term care (LTC) costs by employing municipal benchmarking as a strategy to achieve value-based care. It highlighted the pressing challenges faced by many LTC homes in the province, including staffing shortages, inflation, and increasing resident needs, which collectively strain financial and operational resources. Seniors Services showcased how analyzing performance metrics and identifying areas for improvement, municipalities managing LTC homes can optimize resource allocation to provide high-quality care at lower costs. Specific examples from the Niagara Region showcased how investments in modern technology, IT infrastructure, and capacity-building initiatives, coupled with standardization efforts to reduce variability, have led to significant cost efficiencies, ensure compliance to regulations and enhanced operational performance.

The presentation highlighted the importance of involving residents and their families in planning and delivering care services. By fostering collaboration, long-term care homes can better align their goals with the needs of the residents they serve, creating a more sustainable and resident-focused model of care. Practical tools and clear insights were shared to help municipalities implement benchmarking strategies effectively. The true value of this presentation lies in its actionable and forward-thinking approach, showing how engaging residents and families can guide operational decisions to meet their needs and expectations and investments in technology to achieve efficiency and improve care delivery.

Alternatives Reviewed

Quarterly quality improvement reports provide committee and council with important information, supporting accountability, transparency and a culture of best practice and continuous quality improvement. As the governing body for the Region's LTC Homes, it is important that Council receives these reports to ensure high quality of care, understand the successes, challenges and opportunities experienced in these facilities and meet legislative accountability requirements of LTC.

Relationship to Council Strategic Priorities

Council Strategic Priorities: Effective Region

Objective 1.1 – Implement continuous improvement and modernized processes to ensure value-for-money in regional services and programs

Objective 1.3 - Deliver fiscally responsible and sustainable core services

Objective 1.4 – Invest and support a skilled and aligned workforce at Niagara Region

Other Pertinent Reports

COM 26-2024 Seniors Services Quality Improvement Report: April-June 2024

(https://niagararegion.escribemeetings.com/PHSSC_Sep10_2024/eSCRIBE%20Docum ents/eSCRIBE%20Attachments/COM%2026-

2024%20Seniors%20Services%20Quality%20Improvement%20Report%20April-June%202024.pdf)

<u>COM 26-2024 Appendix 1 Seniors Services Quality Improvement Report April-June</u> 2024

(https://niagararegion.escribemeetings.com/PHSSC_Sep10_2024/eSCRIBE%20Docum ents/eSCRIBE%20Attachments/COM%2026-

2024%20Appendix%201%20Seniors%20Services%20Quality%20Improvement%20Rep ort%20%20April-June%202024.pdf)

Prepared by:

Alexis Lamsen, RN, GNC, MScN Acting Associate Director, Clinical and Support Services, Community Services Recommended by: Henri Koning, MHSc Commissioner Community Services

Submitted by:

Ron Tripp, P.Eng. Chief Administrative Officer

This report was prepared in consultation with Laura Matthews, Manager Clinical Practice and reviewed by Paolo Varias, Director, Seniors Services.

Appendices

Appendix 1 Supporting Table and Figures

Appendix 1 – Supporting Table and Figures

Table 1. Publicly Reported Performance Indicators, Regional Municipality of Niagara

Quality Indicator	Niagara 2023 Q4	Niagara 2024 Q4	Ontario
Antipsychotic Use Without Psychosis Diagnosis	17.2%	13.5%	19.6%
Daily Physical Restraints	1.5%	1.7%	1.9%
Worsened Stage 2 to 4 Pressure Ulcers	4.8%	4.2%	3.5%
Has Fallen	19.3%	20.8%	15.3%
Worsened Mood from Symptoms of Depression	21%	20.9%	20.4%
Worsened Pain	2.3%	3%	4.2%



COM 4-2025 February 4, 2025 Page 1

Subject: Seasonal Shelter Report to: Public Health and Social Services Committee Report date: Tuesday, February 4, 2025

Recommendations

1. To be received **FOR INFORMATION.**

Key Facts

- The purpose of this report is to provide additional information to Public Health and Social Services Committee (PHSSC) to provide context for a one-time request of \$400,000 for a temporary seasonal shelter at the Budget Review Committee of the Whole December 5, 2024.
- At the January 7, 2025, PHSSC meeting staff provided an update on the status of work in Homelessness Services, including an overview of the shelter system. Staff also provided a presentation that included an overview and update of the homelessness services approach, service focus, current challenges and opportunities and next steps. This report serves to further supplement that information and provide further details.
- Expanding shelter options could address ongoing pressures in some local communities related to unsheltered homelessness and encampments.
- Three options that could add additional shelter spaces in 2025 include (1) opening a seasonal shelter, (2) adding a new temporary permanent shelter similar to Riordon and Ontario Road sites, or (3) expanding the current temporary shelters when they are moved to their permanent locations.
- A Permanent shelter would cost more than a seasonal shelter but would support the outcome of reducing homelessness by assisting persons experiencing homelessness to return to housing.
- The necessary funding for adding an additional shelter currently does not exist in the Niagara Region 2025 operating budget.

Financial Considerations

The necessary funding for adding an additional shelter currently does not exist in the Niagara Region 2025 operating budget.

In prior years before implementing the OrgCode Consulting report recommendations which included a transition from seasonal shelters to permanent shelters, a budget of approximately \$400,000 was required to support a seasonal shelter. However, the current cost to deliver this service is unknown and has likely increased significantly, with inflation and adjustments to funding to shelter agencies to reflect the increasing needs of shelter participants. The Region would need to issue a request for proposal for an operator, and that process would generate a more accurate costing, addressing staffing ratios, rates of pay, insurance rates, rent (subject to property available) and damages. Anticipated costs for a seasonal shelter are significantly less than the anticipated costs for an additional permanent shelter. All options would provide additional spaces for people experiencing homelessness. An investment in permanent shelters would also support a reduction in homelessness, which a seasonal shelter would not.

Analysis

Ontario's homelessness crisis has deepened significantly over the past decade and there is an increasing proportion of people with complex needs who are experiencing chronic (long term) homelessness. In Niagara, 2,609 people experienced homelessness in 2024. This is down slightly (8%) from 2023. Of people experiencing homelessness in Niagara, 55% are chronically homeless.

For most of 2024 Niagara's homeless serving system had 287 shelter spaces, including 204 spaces for singles and 83 spaces for couples and families. The opening of the Ontario Road shelter in Welland in December added an additional 30 net new spaces to the system. Shelter spaces are available in St. Catharines, Niagara Falls and Welland and are available to support people experiencing homelessness in any local area municipality. In 2024 Niagara's shelters did 4,995 intakes for 1,917 unique clients. This is an average of 13-14 intakes per day. Niagara's shelters have been about 92-97% full with fewer spaces available in winter season and more spaces available in the warmer seasons.

Encampments continue to pose a significant issue in some local communities. Sometimes when someone is looking to access a shelter space an appropriate bed is not available. Some turnaways are to be expected as no shelter system is designed to accommodate everyone experiencing homelessness at one time. In 2024 staff were unable to accommodate individuals looking for shelter due to lack of appropriate space, 22 times per month on average.

Also, some people at encampments choose not to access shelter and some face barriers to shelter. The most common barriers to shelter in 2024 were:

- Existing service restriction (90 people)
- Doesn't want to leave street community (77 people)
- No available shelter space for couples (65 people)
- Pets (59 people)
- Shelter environment is retraumatizing (45 people)
- Exacerbation of mental health issues (44 people)

Many of these barriers will persist within the system even if new shelter spaces are added. For example, people who are service restricted for assault, sexual assault, arson or other significant property damage, or solicitation to human trafficking will not be able to access any new shelter spaces while such service restrictions are in place. This is necessary to protect the safety of shelter staff and other people staying in our shelters.

Based on a shelter capacity review completed by OrgCode in 2023, several improvements to Niagara's shelter system have been made or are underway. These include:

- Made permanent the 95 beds that were seasonal in St. Catharines and Niagara Falls (Riordon and Summer Street Shelters) and added beds for a total of 120 permanent beds
- Maintain overflow motels (Interim Family Sheltering in St Catharines and Niagara Falls)
- Increase capacity for couples (Riordon, Summer Street and new South Niagara Shelters)
- Scale up Shelter Diversion at all shelters

The next recommended system improvement to implement is to significantly increase supports and rent supplements to increase the flow of people from encampments and shelters to permanent housing. Improving outflow from shelters to housing is a critical factor in ensuring that Niagara's system is maximizing its current investment in shelters.

Yet, encampments remain a significant and urgent challenge in a number of local communities. Several initiatives are planned or underway to reduce inflow to homelessness through enhanced prevention and diversion. This was supported through recent Canada Ontario Housing Benefit (COHB) funding from the province to assist approximately 70 people to move from unsheltered homelessness and encampments.

There are also three options to improve shelter capacity that could be implemented in 2025. Two of these include addition of a new shelter, either a seasonal shelter or temporary permanent site following the model of the Riordon or Ontario Road shelters.

A comparison of these two options is provided below.

New Seasonal Shelter	New Permanent Shelter	
Is not a strategy to end homelessness	Ultimately can support and end to homelessness	
Meets basic needs only (bringing in people out of the cold)	Meets basic needs while supporting people experiencing homelessness to return to housing	
Not Housing-focused (up to 2% of clients exit to housing)	Housing-focused (up to 86% of clients exit to housing)	
No daytime service hours. People must leave the shelter during the day. During the day people are likely to return to encampments.	24 hour services. Day service provided includes case management, income supports, health supports, mental health and addiction referrals and supports, housing supports and life skills guidance. Day services ensure programming for participants during the daytime hours in	
	lieu of discharge to the street.	
Service restrictions are in effect (zero tolerance for violence or threats of violence, sexual harassment or sexual violence, theft, excessive damage to property, arson, and drug dealing) Favoured by street involved individuals who may be comfortable living unsheltered or at encampments most of the year	Service restrictions are in effect (zero tolerance for violence or threats of violence, sexual harassment or sexual violence, theft, excessive damage to property, arson, and drug dealing) Favoured by individuals interested in solutions that involve returning to housing.	
Does not directly provide supports for mental illness and substance abuse	Does not directly provide supports for mental illness and substance abuse	
Not in current budget. Anticipated cost of \$400,000 for three to four months operation.	Not in current budget. Anticipated capital cost of \$5.5 million and annual operating cost of cost of up to \$2 million.	

New Seasonal Shelter	New Permanent Shelter
Could be implemented in approximately 1	Could be implemented in approximately
month after necessary approvals if an	six months if an appropriate site is
appropriate site is identified.	identified.

Alternatives Reviewed

1. Seasonal shelter

Investment in a seasonal shelter would be structured (length of time it is open) in line with the proposed \$400,000 budget. During a reach out to community organizations, one potential partner to host a seasonal shelter was identified. The interested organization would still need to get governance approval for the initiative, approval for a change of use of the site, insurance etc. in order to move forward. Implementation could be anticipated to open, at best, one month after the completion of all necessary approvals by both the organization and the Region, if such approvals are received. The period of operations of the seasonal site would be in line with a \$400,000 all in budget.

2. Temporary permanent shelter

Investment in an additional temporary permanent shelter is anticipated to cost approximately \$5.5 million in capital and up to \$2 million in annual operating expenses. To implement an additional temporary permanent site a temporary site would need to be sourced within a local municipality and the capital asset procured and delivered. If a site was secured, a temporary permanent shelter could be anticipated to open approximately six months afterward.

3. Increase capacity at future permanent shelter sites

Alternatively, capacity could be increased at existing shelters when the temporary permanent shelters are moved to their permanent sites through the addition of more modules to those that already exist. This could potentially increase the capacity at each site from about 60 people to 80 people. This could be implemented at the time the shelters are relocated to their permanent sites and could be completed in 2025 if permanent sites are provided. This option is estimated to have an incremental capital investment of \$200,000 and an incremental operating cost of \$800,000 for two sites.

Relationship to Council Strategic Priorities

This report supports the council priority of an Equitable Region by providing access to housing and supports for people challenged with homelessness.

Other Pertinent Reports

COM 2-2025 Homelessness Services Update

(https://niagararegion.escribemeetings.com/PHSSC_Jan07_2025/eSCRIBE%20Docum ents/eSCRIBE%20Attachments/COM%202-2025%20Homelessness%20Services%20Update.pdf)

COM 21-2023 Homeless Shelter Capacity Review

https://niagararegion.escribemeetings.com/PHSSC_Jun06_2023/eSCRIBE%20Docume nts/eSCRIBE%20Attachments/COM%2021-2023%20Homeless%20Shelter%20Capacity%20Review.pdfCOM 21-2023 Shelter Capacity

Niagara Region Shelter Capacity May 2023

https://niagararegion.escribemeetings.com/PHSSC_Jun06_2023/eSCRIBE%20Docume nts/eSCRIBE%20Attachments/Appendix%20A%20-%20Niagara%20Region%20Shelter%20Capacity%20May%202023.pdf

Prepared by: Jeffrey Sinclair Manager, Homelessness Services Community Services Recommended by: Henri Koning, MHSc Commissioner Community Services

Submitted by:

Ron Tripp, P.Eng. Chief Administrative Officer

This report was prepared in consultation with Cathy Cousins, Director, Homelessness and Community Engagement and Donovan D'Amboise, Manager Program Financial Support.



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January 23, 2025

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

Dear Ms. Norio,

At their January 17, 2025 meeting, the Niagara Regional Housing Board of Directors passed the following motion as recommended in attached report NRH 1-2025:

Recommendations

Staff recommend that the Board of Directors **APPROVE** the following:

- 1. That the purchase of modular trailers to be used for a permanent shelter in St. Catharines through a single source procurement process, replacing the current temporary shelter located at 29 Riordon Street, **BE APPROVED**;
- 2. That Niagara Regional Housing **BE AUTHORIZED** to enter into all such agreements as may be necessary to acquire, in the name of Niagara Regional Housing, the modular units, and that the Chief Executive Officer is authorized to execute all such agreements.
- 3. That this report **BE FORWARDED** to Public Health and Social Services Committee for information.

Your assistance is requested in moving report NRH 1-2025 through proper channels to Public Health and Social Services Committee.

Sincerely,

Councillor Mat Siscoe Chair



Subject: Single Source Acquisition of Modular Trailers for Permanent St. Catharines Shelter Site

Report to: Niagara Regional Housing (NRH) Board of Directors

Report date: Friday, January 17, 2025

Recommendations

Staff recommend that the Board of Directors **APPROVE** the following:

- 1. That the purchase of modular trailers to be used for a permanent shelter in St. Catharines through a single source procurement process, replacing the current temporary shelter located at 29 Riordon Street, **BE APPROVED**;
- 2. That Niagara Regional Housing **BE AUTHORIZED** to enter into all such agreements as may be necessary to acquire, in the name of Niagara Regional Housing, the modular units, and that the Chief Executive Officer is authorized to execute all such agreements.
- 3. That this report **BE FORWARDED** to Public Health and Social Services Committee for information.

Key Facts

- The current temporary shelter at 29 Riordon Street is located on a property leased by NRH from the City of St. Catharines. The lease term was set for two to three years, with one year already elapsed.
- Since the new St. Catharines site is intended to be a permanent shelter, the acquisition will prioritize newer, top-condition modular trailers to ensure long-term functionality and durability.
- Once the permanent shelter in St. Catharines is operational, the modular trailers currently in use at 29 Riordon Street will be relocated to a site in Niagara Falls, where they will continue to serve as temporary housing.
- Modular trailers have been successfully utilized at two previous sites:
 - 851 Ontario Road, Welland
 - o 29 Riordon Street, St. Catharines
- Modular trailers will be procured ahead of time through single sourcing to ensure flexibility in acquiring units as they become available. This process is essential due to:
 - The limited availability and condition of used modular units (e.g., kitchens, dormitories).

- The need to act quickly when suitable units are identified.
- Early acquisition of trailers allows modifications to be completed in advance, expediting the permit and installation process once the site is finalized.
- Staff will proceed to prepare and tender the required installation work once the trailers are secured and a suitable site has been identified, ensuring competitive bidding.
- A capital project was approved and initiated through the 2025 budget process with funding of \$5.5 million for a new multi-unit permanent shelter in St. Catharines.

Financial Considerations

The estimated capital cost for the acquisition, preparation, and modification of the modular trailers is \$2.0 million, which will be funded through the approved and initiated 2025 capital project for the St. Catharines Permanent Shelter. The approved project budget of \$5.5 million includes the acquisition of land and the installation work required to make the trailers operational for the purpose of the shelter.

The purchase and preparation of the units in advance will streamline the project timeline and reduce delays in establishing a permanent shelter.

Analysis

The single-source procurement approach is recommended due to the urgency and the highly variable nature of available trailers in the market. Unlike previous projects, this proposal requests single-source approval for the trailers only, while installation and site preparation will be tendered to contractors, ensuring competitive pricing and efficiency. This approach reflects lessons learned from prior projects, such as the Welland shelter, where early acquisition would have reduced delays and costs.

Relationship to Board and Council Strategic Priorities

This report aligns with the strategic priority of fostering an Equitable Region, ensuring access to inclusive and permanent housing solutions for vulnerable populations.

NRH 1-2025 25-229 – 4.1. January 17, 2025 Page 3

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Prepared by: Cameron Banach Chief Executive Officer, NRH

Approved by: Mat Siscoe Chair, NRH

This report was prepared in consultation with Cathy Cousins, Director Homelessness and Community Engagement, Dean Pilon, Housing Development Project Manager and Sara Mota, Senior Program Financial Specialist.