

Subject: Data Update on Council's Declared States of Emergency

Report to: Public Health and Social Services Committee

Report date: Tuesday, March 5, 2024

Recommendations

1. That Regional Council **RECEIVE** the following report for information.

Key Facts

- The purpose of this report is to provide Council with data to inform its discussion regarding the future of the three declared States of Emergency on homelessness, mental health, and opioid addictions, as directed by Regional Council at its July 25 meeting.
- The below data included in this report represent the most current metrics available to give an overall picture of Niagara's status in relation to the three main areas of mental health, homelessness and opioid addiction. None of these metrics or trends can be conclusively said to be the result of Council's declared States of Emergency.
- Regardless of whether or not Niagara remains in a State of Emergency, Regional staff in Public Health, Community Services and Niagara EMS, as well as many local community partners, will continue to advance initiatives that address opioid addiction, mental illness and homelessness across Niagara.

Financial Considerations

This report has no direct financial implications, however the time of Regional Emergency Operations Centre members, as well as ongoing departmental work associated with opioid addictions, mental health and homelessness represent indirect costs.

Analysis

When Council declared its States of Emergency, no threshold or key metrics were benchmarked or established. The below data is therefore not presented in order to justify or recommend a particular course of action in relation to the States of Emergency, but simply to provide Council with the context and data necessary to determine next steps.

This data also does not seek to quantify the efficacy or contribution that the declaration of the States of Emergency may have had on opioid addiction, mental illness and homelessness, but rather serves to give a general update on the health of the community in those regards.

Opioid Addictions

Overall, in 2023, instances of opioid-related overdoses, emergency department visits and deaths in Niagara remained relatively stable compared to 2022, following higher numbers seen in 2021.

- In 2023, there were 734 suspected opioid overdoses responded to by Niagara EMS. This is an increase over 2022 (663) but lower than 2021 (1005).
- From January to June 2023, Niagara hospitals saw an average of 46 Niagara residents per month attend the emergency department for a suspected opioid overdose. This is consistent with visits recorded in 2022 (49 per month) and lower than 2021 (82 per month).
- Confirmed opioid deaths for all of 2023 are not yet available, however preliminary data shows that there were 77 confirmed and 12 probable opioid-related deaths from January to September 2023. From January to December of 2022, there were 122 confirmed opioid-related deaths in Niagara.

Data sources include Niagara EMS data, Public Health Ontario's Interactive Opioid Tool, and the Office of the Chief Coroner for Ontario. Data on opioid-related deaths can vary slightly based on data source, as the definitions and geographies used for data collection vary slightly between sources.

Mental Health

While there are a number of community agencies that offer services and support to those struggling with mental illness, the following data comes solely from Niagara Region's Mental Health program, and offers a view of the state of the mental health system through this lens.

While mental health caseload numbers remained stable, Niagara Region Mental Health (NRMH) has noted a significant increase in the percentage of clients suffering from more complex mental illness, and who require more intensive community health services.

- The LOCUS (Level of Care Utilization System) is an evidence-based assessment that points to the most appropriate level of care required by a client. Niagara Region Mental Health services are best suited to provide service to clients at levels 3 and 4.
- In 2023, 28 per cent of Niagara Region Mental Health clients required Level 3
 care (High Intensity Community Based Services). This is an increase over 2022,
 when 19 percent of clients required Level 3 care. This highlights a growing need
 in Niagara for more intensive community-based mental health resources and
 supports for people facing serious mental health challenges.
- Demand for Level 4 (medically monitored non-residential) and Level 5 (medically monitored residential) care has held steady at 10 per cent and 35 per cent respectively, highlighting a continued need for intensive services for individuals with the most serious and persistent mental illness, the target demographic for Niagara Region Mental Health's Assertive Treatment (ACT) Teams

Niagara Region Mental Health, meant to be 100 per cent provincially funded, has been chronically underfunded by the province, receiving only two base funding increases in the past 12 years, which has not kept up with inflation. NRMH has been subsidized year over year by the Regional Levy to avoid service cuts, **totaling \$2,564,872 since the 2018/19 fiscal year**. While NRMH is grateful for the 5 per cent increase to base funding for the 2023/24 fiscal year, **total shortfall is still forecasted at \$1,230,000**.

In addition to advocating for increases to base funding that close this gap, Niagara Region also continues to advocate to the provincial government for additional funding to support a needed expansion of NRMH's ACT teams. The Ontario Association for ACT & FACT (OAAF) recommends that a community the size of the Niagara have four to five ACT teams; Niagara currently has only two.

Homelessness

As Niagara Region is the provincially mandated service manager for homelessness supports in Niagara, the data below includes information reflecting the full continuum of services in Niagara.

In 2023 the number of people experiencing homelessness in Niagara increased, as well as the number of people experiencing chronic homelessness¹.

- The number of people experiencing homelessness increased 12% from 1099 in December 2022 to 1231 in December 2023.
- The number of people experiencing chronic homelessness increased 8% from 550 in December 2022 to 594 people in December 2023.
- Despite a challenging rental market move-ins to housing for those experiencing Chronic Homelessness remained high, averaging 28 move-ins monthly.
- A sustained decrease in Chronic Homelessness is a significant milestone. Niagara's current efforts aim to reduce chronic homelessness to 11% below baseline, a reduction to 439 people.

Niagara Region continues to monitor homelessness using a real time By-Name List of all people known to be experiencing homelessness. A By-Name List is a key part of a coordinated access system, which is required by Reaching Home and aligns with Niagara's participation in Built for Zero Canada. Niagara's homeless serving system continues to focus on initiatives and assets intended to increase returns to housing for people experiencing chronic homelessness. Such initiatives include Housing Focused Shelters, Bridge Housing, Housing First, Home for Good, and Permanent Supportive Housing.

Alternatives Reviewed

None

Relationship to Council Strategic Priorities

Highlight how the recommendation will strategically enforce/improve that priority (why this report is being brought forward).

¹ Chronic Homelessness is defined as being currently homeless and having experienced homelessness for 180 days (6 months) in the last year or 540 days (18 months) in the last three years.

See https://www.niagararegion.ca/priorities/ for more information of Council's 2023-2026 Strategic Priorities:

- Effective Region
- Green and Resilient Region
- Equitable Region
- Prosperous Region

Other Pertinent Reports

- CAO 9-2023
- COM-C 14-2023

Prepared by:

Andrew Korchok
Manager, Communications &
Engagement
Public Health & Emergency Services

Recommended by:

Dr. Azim Kasmani Medical Officer of Health and Commissioner Public Health and Emergency Services

Submitted by:

Ron Tripp, P.Eng. Chief Administrative Officer

This report was prepared in consultation with Associate Director of Mental Health Lisa Panetta, Manager of Homelessness Services Jeff Sinclair, Manager of Homelessness Services Maggie Penca, Data Analyst Megan Henry, Program Evaluation and Data Advisor Kristina Nickel and reviewed by Community Services Commissioner Adrienne Jugley and Medical Officer of Health and Commissioner of Public Health and Emergency Services Dr. Azim Kasmani