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Subject: Welcoming Streets Pilot Project
Date: Wednesday, December 4, 2024 1:21:38 PM
Attachments: [Welcoming Streets City - Region of Niagara Request.docx \(1\).pdf](#)

To whom it may concern,

I am a McMaster University student in my second year of Family Medicine residency. I am emailing regarding the Welcoming Streets Pilot Project being presented tomorrow to the Niagara Regional Council for funding (attached below).

I have spent a significant amount of time during my training working with REACH Niagara and plan to continue this work after finishing my medical training. I believe that initiatives like the Welcoming Streets Pilot Project are important steps forward in cultivating social inclusion, acceptance, and support for people who are homeless. Even though I have seen the value of these principles, I find that they are currently lacking in our region. I believe this program can help address gaps in our region and would encourage you to support it at the upcoming council meeting.

Thank you,

Dr. Josiah Coolen

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Pilot Project: Welcoming Streets

Purpose: Collaborative approach between REACH Niagara, Positive Living Niagara, and the St. Catharines' Downtown Association to build community connections and remove barriers by providing peer-led street outreach to create safer and inclusive communities.

About REACH Niagara:

REACH Niagara is a non-profit, charitable organization that provides low-barrier, judgment-free healthcare. We bring comprehensive care and service directly to shelters, food bank services, domestic violence shelters, and other community organizations through our health clinics. We see people directly in their time of need. Our vision is that 'All individuals who are homeless or marginalized have equitable access to healthcare across the Niagara Region'.

About Positive Living Niagara:

Positive Living Niagara is a non-profit, charitable organization that supports people living with or affected by HIV. With the goal of reducing transmission of HIV, Hepatitis C and other blood-borne pathogens, the StreetWorks program uses a harm reduction approach to care and supports people who use substances through the Needle Syringe Program, peer support, case management, supervised consumption, outreach, and training and distribution of naloxone.

Overall Objectives:

- Connect with people congregating in public spaces to ensure they have access to supports relevant to their lives
- Improve conditions in the neighbourhood by bringing back the sense of community and positive street culture of the past where people work together to support one another
- Monitor the community to ensure everyone is safe, and provide support as needed
- Act as a positive role model for our community
- Help individuals link up to service providers by providing warm transfers to service
- Creating positive representation of equity deserving populations to minimize stigma and stereotypes

Neighbourhood Teams are:

- Ambassadors/peacekeepers – Build relationships with neighbourhoods, businesses, and relevant stakeholders, giving space to have discussion and to identify concerns while working towards solutions
- Proactive and not reactive - Prevent issues before they arise
- Friend - Encourage kindness; getting basic needs met
- Advocates - Support clients to help them achieve their goals by accessing relevant support services; understanding the greater community's concerns and building capacity to better understand the challenges people are facing
- Educators - Provide additional information, resources, and skills-building for the community to empower people to be part of the solution to the dual homelessness and substance use crises

Neighbourhood Teams are not:

- Police or Security – the team will not 'remove' community members from private premises
- Healthcare professionals
- Responsible for the problems people are experiencing
- Not the only solution to the current homelessness and drug use crisis

Proposed Model:

- 1 Block Leader and 1 Peer for each shift
- Responsible for engagement within a defined neighbourhood
- Listen to business and community concerns working towards shared solutions
- Person(s) with Living Experience are given the opportunity for meaningful employment

Length of shifts:

- Mon. - Fri.:
 - 7:00 a.m. - 10:00 a.m.
 - 10:00 a.m. - 1:00 p.m.
 - 1:00 p.m. - 4:00 p.m.
- Block Leader shift would be 7:00 a.m. - 3:00 p.m.

Neighbourhoods (pilot in St. Catharines):

- Downtown core
- Queenston
- Fairview Mall area

Note: The team is meant to be mobile and responsive to needs where there is flexibility in the neighbourhoods being serviced.

Staffing model:

- 2 Part Time Outreach Workers (28 hours/week)
- Persons with Living Experience: 25 - 30 peers

Annual Budget Request

Expenses	Description	Total Cost
Salaries & Benefits: 2 PTEs (28 hours/week) Outreach Workers (includes MERC + benefits)	Operate as Block Leaders; experienced in system navigation	\$128,240 + \$25,000 (in-kind contribution) Total Cost = \$103,240
Materials & Supplies: Water and food		\$4,000
Other Costs: Peer Honorarium (\$25/hour)	Paired with Block Leader; required to have living experience of homelessness and/or substance use	\$19,500
Monthly Cellphone(\$75/month)	Standard monthly cellphone cost to be able to call services in real time	\$900
TOTAL		\$127,640

Total In-kind donations:

- Staff IT requirements - 2 laptops and 1 cellphone
- Staff and peer training and development
- Telus Health Mobile Health Clinic - for morning shift
- \$25,000 from Hydro One for contribution to staff salaries and benefits
- \$12,000 biohazard disposal fees
- Basic necessity supplies

Targets:

- Total # of clients engaged: 45 – 60/month
- Total # of interventions: 90 – 120/month

Pilot Program Indicators (collected at baseline, 6 months, and 1 year):

- Results from community engagement sessions
- # of community members served
- # of community interventions
- # of business engagements
- # of community referrals
- # of supplies distributed
- Client experience surveys
- % of clients who became peers