

**Subject:** Niagara's Homelessness Addiction and Recovery Treatment (HART) Hub

**Report to:** Public Health and Social Services Committee

**Report date:** Tuesday, March 4, 2025

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## **Recommendations**

1. That report COM 9-2025 **BE RECEIVED** for information.

## **Key Facts**

- The purpose of this report is to provide Council with an overview of the Homelessness Addiction and Recovery Treatment (HART) Hub demonstration project.
- The Ministry of Health has selected Niagara Region as the location for one of twenty-seven new HART Hubs that will be funded over the next 3 years. Gateway Residential and Community Support Services will be the Health Service Provider lead.
- The objective of a HART Hub is to provide a comprehensive, integrated care model that addresses mental health, addictions, housing, and employment needs.
- Niagara's proposed HART Hub was developed based on local data, local need, and evidence based best practices. Treatment and supports will be provided to adults experiencing chronic homelessness with mental health and/or substance use challenges, whose unique needs are often unmet through traditional programs.

## **Financial Considerations**

A collaboration of ten community partners, including Niagara Region submitted a funding application to the Ministry of Health for a 3-year, HART Hub demonstration project and have been awarded with an investment of \$18.9 million. The Ministry of Health and Ontario Health have communicated that they will be in contact on next steps for hub implementation in the weeks following the general election that is scheduled for February 27, 2025. Further updates to Council will be provided in line with future communication from the Ministry of Health and Ontario Health.

## **Analysis**

Niagara Region's proposed HART Hub is an evidence-based, collaborative, and integrated model specializing in mental health and addiction treatment for individuals experiencing chronic homelessness. Local data, needs, and evidence-based best practices were used to inform the development of the Hub model for Niagara.

In 2023, a Needs Based Planning (NBP) Report was released to highlight the existing gaps in core mental health and addictions services in Niagara. Gaps identified in the report include:

- Mental health and substance use community services
- Peer and family supports
- Intensive case management services (including Assertive Community Treatment)
- Supportive housing
- Specialized addictions medicine

As a result of the shortage of mental health and addiction community-based treatment, residents of Niagara are over-utilizing crisis and emergency services to respond to critical mental health and addiction concerns.

Building on these locally identified gaps, evidence was used to inform key components of Niagara's HART Hub model. These key components are presented below.

### **Housing First ACT**

The Housing First philosophy is effective in housing and promoting stability and recovery in individuals experiencing homelessness (Hwang, S., Stergiopoul, V., O'Campo, P. and Gozdzi, A., (2012)). Housing First is a recovery-oriented approach to ending homelessness that centers on quickly moving people experiencing homelessness into independent and permanent housing and then providing additional support and services as needed. Support in Housing First typically involves either Intensive Case Management (ICM) or Assertive Community Treatment (ACT). Niagara currently offers Housing First with ICM but does not have any programming approaches that utilizes ACT. Housing First ACT (HFACT) is an evidence-based, multidisciplinary, wrap-around, team approach that supports people with severe mental illness and addictions in the community. 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.

## **Primary Care for Addictions Medicine**

Individuals experiencing homelessness face numerous barriers to accessing traditional primary care services, including lack of proof of health insurance, difficulty making appointments, fear of discrimination from health care providers, lack of transportation, long wait times, and competing priorities, such as food and shelter needs (Khandor E., Mason K., Chambers C., et al, (2011)). Evidence has shown that primary care practices are well-suited for implementing evidence-based treatments to address alcohol and other substance use disorders (Edelman EJ., Oldfield BJ., Tetrault JM., (2018)). It is suggested that team-based care that incorporates outreach and flexibility in scheduling is likely to achieve best results (Justin EJ., Chen J., Briggs ES., et al, (2023)).

## **Indigenous Specific Supports**

Indigenous people are disproportionately impacted by homelessness, mental health, addictions, and the overdose crisis. Through partnership with a local Indigenous provider, clients identifying as Indigenous will have access to culturally relevant and supportive services, including access to traditional medicines and cultural support. The Indigenous provider will assess the needs of the individual by providing on-site services and connecting to local Indigenous service providers for the relevant ongoing supports. This will allow the Indigenous community to determine community needs and gaps, putting Indigenous health in Indigenous hands.

## **Social Isolation in Homelessness**

Lastly, evidence has demonstrated experiences of isolation and loneliness in individuals experiencing homelessness (Lachaud, J., Yusuf A., Maezler F., et al, (2024)). Once housed, experiences of isolation and homelessness can be exacerbated given the removal of connection to the homelessness community. A trend of return to homeless serving spaces after newly housed has been noticed, with social isolation identified as the reason. By providing connection to community and opportunities for productivity, individuals are at greater likelihood of maintaining housing. A unique feature of Niagara's Hub will be the addition of a Clubhouse model. Clubhouse models are evidence-based and have been found to be effective in promoting employment, reducing hospitalization, and improving quality of life. Clubhouse model supports the concept of work-ordered day, which parallels the typical business hours of the working community. Additionally, Clubhouse offers two types of employment programs for members: transitional employment and supported employment.

### **Niagara's Lived Expert Advisory on Homelessness**

Engagement was completed with Niagara's Lived Expert Advisory on homelessness, who provided feedback and suggestions on the model. The committee identified the following as priorities:

- Access to psychiatry
- Access to primary care
- Supports to "navigate" the system
- Judgement free and accessible supports
- Treatment for both mental illness and substance use
- Supports once housed to enhance success and stability in housing

### **Niagara's HART Hub Model**

Niagara's HART Hub Model was developed in collaboration with community partners and providers and the funding application was submitted with the support of the Niagara Ontario Health Team – Equipe Sante Ontario (NOHT-ESON). Niagara's HART Hub will be led by Gateway Residential and Community Support Services as the Health Service Provider (HSP) lead. In this role, Gateway will be responsible for coordinating services with all service partners. Collaborating partners and providers include:

- Community Addictions Services of Niagara
- Canadian Mental Health Association Niagara
- De dwa da dehs nye>s Aboriginal Health Services
- Good Shepherd
- Niagara Health
- Niagara Region Homelessness Services
- Niagara Region Mental Health
- Oak Centre
- REACH Niagara
- Quest Community Health Centre

Niagara's HART Hub will provide alternate levels of care, based on identified need, and will provide supports to individuals across the region. All hub providers will use a trauma informed approach to service delivery, with peer supports available from the onset of connection and strengthened throughout the client journey. Clients may access supports on site or receive mobile services within their own community.

Niagara's HART Hub will provide services for adults who are experiencing chronic homelessness and have mental health and/or substance use challenges. Clients of the Hub's unique needs are often unmet through traditional programs.

Gateway Residential and Community Support Services, the Health Service Provider Lead, will provide leadership and administration, housing support, and outreach services to connect clients to the Hub.

For individuals considered high need, a dedicated team will be established to deliver a Housing First Assertive Community Treatment (HFACT).

For moderate level needs, clients will have access to a primary care model with wrap around supports including mental health and addictions treatment, case management, nursing, peer support, primary care and access to psychiatry.

All clients will have access to the Clubhouse model, to promote recovery and provide access to employment opportunities.

A local Indigenous health provider will provide on-site culturally relevant services and make connections to local Indigenous service providers for ongoing supports.

Once clients have been stabilized and/or require ongoing supports, they will be connected to a local community health centre.

Supportive housing is a key component of this model, providing opportunities within all levels of care. Highly supportive housing, a net new service in Niagara, will be available to some Hub clients who require intensive supports 24/7. Highly supportive housing has a high staff to client ratio and includes supports with activities of daily living. Additionally, housing allowances and housing units will be used to increase capacity in existing supportive housing programs, provided by local mental health and addictions agencies.

All clients will be supported with access to Rapid Access to Addiction Medicine (RAAM), and withdrawal management services. Clients who require/desire residential treatment will be supported through the required pathways.

In collaboration with Gateway Residential and Community Support Services, Niagara Region will be supporting the next steps to implement this innovative and collaborative Hub.

## **Alternatives Reviewed**

An alternative recommendation is to continue with existing services in place. Niagara's Needs Based Planning report identifies large and significant gaps in community mental health and addictions services. Individuals experiencing homelessness face significant barriers in accessing traditional healthcare services. With this collaborative hub model, Hub service providers will meet clients "where they are at" to provide treatment and supports in the community. Additionally, with separate funding sources for the homelessness and health sectors, there is a resulting disconnect between systems, with each having their own mandates and targets. There are currently limited mechanisms in place to align these two systems. A more integrated approach is needed, which can be achieved through the Hub.

## **Relationship to Council Strategic Priorities**

This recommendation is aligned with Council's strategic priority of ensuring an "Equitable Region" by listening and responding to community needs and planning for future growth.

## **Other Pertinent Reports**

### [COM 2-2025 Homelessness Services Update](#)

[https://niagararegion.escribemeetings.com/PHSSC\\_Jan07\\_2025/eSCRIBE%20Documents/eSCRIBE%20Attachments/COM%202-2025%20Homelessness%20Services%20Update.pdf](https://niagararegion.escribemeetings.com/PHSSC_Jan07_2025/eSCRIBE%20Documents/eSCRIBE%20Attachments/COM%202-2025%20Homelessness%20Services%20Update.pdf)

### [NOHT-ESON MHAWG PHSSC Presentation](#)

[https://niagararegion.escribemeetings.com/PHSSC\\_May09\\_2023/eSCRIBE%20Documents/eSCRIBE%20Attachments/NOHT-ESON%20MHAWG%20PHSSC%20Presentation.pdf](https://niagararegion.escribemeetings.com/PHSSC_May09_2023/eSCRIBE%20Documents/eSCRIBE%20Attachments/NOHT-ESON%20MHAWG%20PHSSC%20Presentation.pdf)

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