



The Regional Municipality of Durham

Health & Social Services Committee Agenda

Council Chambers
Regional Headquarters Building
605 Rossland Road East, Whitby

Thursday, October 3, 2019

9:30 AM

1. Declarations of Interest

2. Adoption of Minutes

- A) Health & Social Services Committee meeting –
[September 5, 2019](#)

Pages 6 - 12

3. Statutory Public Meetings

There are no statutory public meetings

4. Delegations

There are no delegations

5. Presentations

- 5.1 Dr. Pat Abbey, Director, Oral Health, re: The New Ontario Seniors Dental Care Program
- 5.2 Melissa Hutchinson, Manager, Population Health, re: The Opioid Crisis: A Complex, Multifaceted Health and Social Issue

6. Health

6.1 Correspondence

6.2 Reports

There are no Health Reports to consider

7. Social Services

7.1 Correspondence

7.2 Reports

- A) Additional Provincial Funding from the 2019 Community-Based EarlyON Child and Family Centre Capital Program (2019-SS-15) 13 - 22
- B) Unbudgeted Provincial funding from the Ministry of Long-Term Care for a Designated Behavioural Support Transitional Unit for Fairview Lodge Long-Term Care Home in Whitby (2019-SS-16) 23 - 28
- C) Project Update and Adoption of Terms of Reference: Durham Region Community Safety and Well-Being Plan (2019-SS-17) 29 - 42

8. Advisory Committee Resolutions

There are no advisory committee resolutions to be considered

9. Confidential Matters

There are no confidential matters to be considered

10. Other Business

10.1 Notice of Motion re: Opioid Overdose Emergency Resolution

Councillors Carter and Chapman gave notice that they will present the following motion regarding the opioid overdose emergency:

That we recommend to Council:

Whereas the opioid overdose emergency is affecting communities across Ontario, including Durham Region; and

Whereas the prevalence of addiction and the incidence of emergency department visits and deaths associated with opioid use disorder have increased in recent years; and

Whereas addiction to prescription and illegal opioids is negatively affecting individuals, families and entire communities; and

Whereas on September 12, 2019, the Government of Ontario announced its plan to establish the Mental Health and Addictions Division (MHAD) under the leadership of Karen Glass, Assistant Deputy Ministry; and

Whereas the MHAD will lead the development and implementation of Ontario's Mental Health and Addictions Strategy; and

Whereas the Government of Ontario will be consulting key stakeholders and the public on modernizing public health and land ambulance services; and

Whereas public health programs and services demonstrate superior value for money and return on investment; and

Whereas the Federation of Canadian Municipalities (FCM) has identified a need for federal and provincial strategies that are comprehensive, coordinated and address the root causes of the opioid crisis; and

Whereas FCM has recommended an intergovernmental action plan that aligns federal, provincial/territorial and local strategies, responds to specific needs of indigenous communities and rapidly expand all aspects of the collective response; and

Whereas FCM has echoed the recommendations of the Mayor's Task Force on the Opioid Crisis; and

Whereas the Association of Municipalities Ontario (AMO) has identified the following recommendations for a provincial response to addressing the opioid overdose emergency in Ontario:

- i. That the Province publicly affirms the seriousness of the opioid overdose emergency and commit to take all necessary measures to save lives and prevent harm, including the provision of long-term funding for existing programs as well as new funding streams, where necessary;
- ii. That the Province undertakes an 'all of government' effort to develop a comprehensive provincial drug strategy that addresses the opioid overdose emergency, based on a public health approach that addresses the social determinants of health, and that takes a non-discriminatory approach to overdose prevention and harm reduction. This strategy should cascade down to guide local drug strategy development and implementation with accompanying resources so that municipalities in Ontario have comprehensive, multi-faceted, funded drug strategies in place led by dedicated local coordinators. Further, progress toward implementation should be measured with performance indicators and be evaluated for outcomes achieved;
- iii. That the Province examines, and its ministries provide, a coordinated 'all of government' response with adequate funding to address the root causes of addiction, including housing related factors, poverty, unemployment, mental illness, and trauma;
- iv. That the Ministry of Health provides more funding to support, enhance and expand evidence- based consumption, treatment and rehabilitation services, addiction prevention and education, and harm reduction measures in all areas of Ontario;

- v. That the Ministry of Health targets funding for addiction and mental health services that would assist in treating people with mental illness to reduce and/or eliminate self-medication and would provide services to help people overcome their addiction;
- vi. That the Ministry of the Solicitor General provides enhanced funding to enforce laws surrounding illicit drug supply, production, and distribution;
- vii. That the Province enhances funding for diversion programs, mobile crisis intervention teams, and further promote harm reduction approaches among police services;
- viii. That the Ministry of Health examines community paramedicine as a viable option to provide treatment and referral services;
- ix. That the Ministry of Health funds a public education campaign, including on social media, to complement the efforts of individual communities;
- x. That the provincial coordinator work with the Ministry of Education to add a health promoting youth-resiliency program to the school curriculum that includes coping skills to get through obstacles in life, e.g. social competence, conflict resolution, healthy relationships, and informed decision-making;
- xi. That the Ministry of Health fully funds (100%) Naloxone for all municipal first responders (paramedics, police, and fire services) and provide training in its use;
- xii. That the Ministry of Health and the Ministry of Children, Community and Social Services work together with municipal human service system managers to better link social service and health supports including to help people overcome addiction and address mental health;
- xiii. That the Ministry of Health works toward a goal of establishing and maintaining 30,000 supportive housing units in the province; and
- xiv. That the Province advocates to the federal government for appropriate and supportive measures that will support effective provincial and local responses;

Now therefore be it resolved that the Health & Social Services Committee recommends to Regional Council:

- A) That the Government of Canada and Ontario recognize, acknowledge and declare a national health epidemic in respect to the opioid overdose emergency across Canada;**
- B) That AMO's recommendations with respect to Ontario's opioid overdose emergency be endorsed;**
- C) That the Government of Ontario be urged to continue funding the important work of public health units to help address the current opioid crisis;**

- D) That the Government of Canada and Ontario be advised that the opioid emergency is not limited to major urban centres and that federal and provincial representatives work directly with the Region of Durham, to develop and fund a full-suite of prevention and addiction services, affordable social and supportive housing to address the crisis in our communities; and**
- E) That the Prime Minister of Canada, Ministers of Health and Children, Families and Social Development, and Minister Responsible for the Canada Mortgage and Housing Corporation, Durham's MPs, Chief Public Health Officer of Canada, Premier of Ontario, Deputy Premier & Minister of Health, Ministers of Children, Community and Social Services, Finance, and Municipal Affairs and Housing, Durham's MPPs, Chief Medical Officer of Health, AMO, aPHa, FCM, all local municipalities, and all Ontario boards of health be so advised.**

11. Date of Next Meeting

Thursday, November 7, 2019 at 9:30 AM

12. Adjournment

Notice regarding collection, use and disclosure of personal information:

Written information (either paper or electronic) that you send to Durham Regional Council or Committees, including home address, phone numbers and email addresses, will become part of the public record. This also includes oral submissions at meetings. If you have any questions about the collection of information, please contact the Regional Clerk/Director of Legislative Services.

If this information is required in an accessible format, please contact 1-800-372-1102 ext. 2097.

The Regional Municipality of Durham

MINUTES

HEALTH & SOCIAL SERVICES COMMITTEE

Thursday, September 5, 2019

A regular meeting of the Health & Social Services Committee was held on Thursday, September 5, 2019 in Council Chambers, Regional Headquarters Building, 605 Rossland Road East, Whitby, Ontario at 9:30 AM

Present: Councillor Chapman, Chair
Councillor Pickles, Vice-Chair
Councillor Anderson
Councillor Carter
Councillor Dies
Councillor Roy attended the meeting at 9:40 AM
Councillor Wotten

Absent: Regional Chair Henry was absent due to regional business

Staff

Present: P. Abbey, Director, Oral Health, Dental Health
E. Baxter-Trahair, Chief Administrative Officer
C. Boyd, Solicitor, Corporate Services – Legal Services
S. Danos-Papaconstantinou, Commissioner of Social Services
J. Finlayson, Manager, Corporate Communications
D. Holmes, Director, Business Affairs and Finance Management
R. Inacio, Systems Support Specialist, Corporate Services - IT
R.J. Kyle, Commissioner and Medical Officer of Health
M. Laschuk, Director, Family Services
L. MacDermaid, Director, Long Term Care and Services for Seniors
N. Prasad, Committee Clerk, Corporate Services – Legislative Services
A. Robins, Director, Housing Services Division

1. Declarations of Interest

There were no declarations of interest.

Chair Chapman introduced and welcomed S. Danos-Papaconstantinou, Commissioner of Social Services, to the Committee.

2. Adoption of Minutes

Moved by Councillor Carter, Seconded by Councillor Pickles,
(37) That the minutes of the regular Health & Social Services Committee meeting held on Thursday, June 6, 2019, be adopted.

CARRIED

3. Statutory Public Meetings

There were no statutory public meetings.

4. Delegations

There were no delegations to be heard.

5. Presentations

There were no presentations to be heard.

6. Health

6.1 Correspondence

There were no communications to consider.

6.2 Reports

A) Region of Durham Paramedic Services (RDPS) Ambulance/AVL Vehicle Purchases and Standardization (2019-MOH-5)

Report #2019-MOH-5 from R.J. Kyle, Commissioner and Medical Officer of Health, was received.

Moved by Councillor Carter, Seconded by Councillor Pickles,
(38) That we recommend to Council:

- A) That the Demers Ambulances Type III Mystere MX164A ambulance with the PRAN AVL system be adopted as the standard for RDPS for a period of three (3) years effective January 1, 2020; and
- B) That authorization be granted to award a single source agreement to Demers Ambulances for a period of three (3) years effective January 1, 2020 for the purchase of new ambulances and ongoing parts, pending the approval of the Paramedic Services Business Plans & Budgets.

CARRIED

B) Region of Durham Paramedic Services (RDPS) Command and Emergency Response Vehicle Standardization and Upfitting (2019-MOH-6)

Report #2019-MOH-6 from R.J. Kyle, Commissioner and Medical Officer of Health, was received.

Moved by Councillor Carter, Seconded by Councillor Pickles,
(39) That we recommend to Council:

- A) That the General Motors (GM) Chevrolet "Tahoe" be adopted as the standard vehicle for RDPS Command and Emergency Response Vehicles (CERVs) for a further period of three (3) years effective January 1, 2020;
- B) That the current RDPS CERVs custom upfitting package provided by Kerr Industries Limited be adopted as the standard for RDPS for a period of three (3) years effective January 1, 2020; and
- C) That authorization be granted to award a three (3) year extension to the existing agreement with Kerr Industries Limited for the purpose of purchasing custom upfitting packages and/or parts, as approved in the annual Paramedic Services Business Plans and Budgets.

CARRIED

C) Durham Nuclear Health Committee Membership (2019-MOH-7)

Report #2019-MOH-7 from R.J. Kyle, Commissioner and Medical Officer of Health, was received.

Moved by Councillor Carter, Seconded by Councillor Pickles,
(40) That we recommend to Council:

- A) That the following individual be appointed to the Durham Nuclear Health Committee:

Deborah Kryhul, Public Member - Clarington.

CARRIED

D) Provincial Funding for the Ontario Seniors Dental Care Program (2019-MOH-8)

Report #2019-MOH-8 from R.J. Kyle, Commissioner and Medical Officer of Health, was received. A revised page (Schedule "A" to Attachment #1 of the Report) was provided as a handout.

Staff responded to questions with regards to whether the Ontario Seniors Dental Care Program is for emergency or preventative purposes; and clarification of the location of the underserviced areas.

Moved by Councillor Carter, Seconded by Councillor Pickles,
(41) That we recommend to Council:

- A) That annual and permanent unbudgeted 100 per cent Provincial funding from the Ontario Ministry of Health (MOH) in the amount of up to \$1,614,700 (pro-rated at \$1,211,025 for the period April 1, 2019 to December 31, 2019) be received as supplementary to the 2019 Health Department Business Plans and Budgets to provide oral health services to eligible low-income seniors as part of the Ontario Seniors Dental Care Program;
- B) That approval be granted to increase the Public Health staffing complement to be financed from the annual 100 per cent Provincial funding allocation, as follows:

Two full-time dentists (2.0 FTE)	\$314,892
Two full-time dental hygienists (2.0 FTE)	\$231,478
Three full-time dental assistants (3.0 FTE)	\$258,399
One full-time Clerk 2 (1.0 FTE)	\$78,834
One full-time Administrative Assistant 1 (1.0 FTE)	\$92,053
	\$975,656

- C) That annual increases will be funded entirely from program management costs from the additional 100 per cent Provincial funding allocation.

CARRIED

7. Social Services

7.1 Correspondence

There were no communications to consider.

7.2 Reports

- A) Summary Report of 2018 Homelessness and Short-Term Rent Support Programs (2019-SS-11)

Report #2019-SS-11 from S. Danos-Papaconstantinou, Commissioner of Social Services, was received.

Staff responded to questions with regards to possible pilot programs to help those living unsheltered better transition to shelter systems; statistics surrounding shelter beds; the importance of modernization of shelters to better meet the needs of those requiring help; and reasons behind why most of the frequent shelter users in 2018 were single males.

Moved by Councillor Carter, Seconded by Councillor Wotten,
(42) That Report #2019-SS-11 of the Commissioner of Social Services be received for information.

CARRIED

B) Connecting Ontario eHealth Agreement for the Region's Four Long-Term Care Homes (2019-SS-12)

Report #2019-SS-12 from S. Danos-Papaconstantinou, Commissioner of Social Services, was received.

Moved by Councillor Carter, Seconded by Councillor Wotten,
(43) That we recommend to Council:

That the Regional Chair and Regional Clerk be authorized to enter into the Connecting Ontario eHealth Agreement and any subsequent agreements, subject to the concurrence of the Regional Solicitor and Commissioner of Finance, unless amended by eHealth Ontario, thereby requiring review and approval by the Health and Social Services Committee and by Regional Council.

CARRIED

C) Unbudgeted funding from the Federal Government of Canada, Employment and Social Development Canada (ESDC) for a research and innovation project entitled "Rebuilding the village: A novel approach to inclusive early learning and child care environment" (2019-SS-13)

Report #2019-SS-13 from S. Danos-Papaconstantinou, Commissioner of Social Services, was received.

Moved by Councillor Carter, Seconded by Councillor Wotten,
(44) That we recommend to Council:

A) That unbudgeted one-time federal funding in the amount of \$277,625 from Employment and Social Development Canada (ESDC) be received as supplementary to the 2019 Business Plans and Budgets to completing a research and innovation project entitled "Rebuilding the village: A novel approach to inclusive early learning and child care environment";

B) That Federal funding in the amount of \$277,625 be expended in accordance with the funding agreement, which includes costs related to, but not limited to: staff wages, project costs, and capital assets; and

- C) That the Regional Chair and Regional Clerk be authorized to execute the required agreement related to the additional unbudgeted funding.

CARRIED

- D) Additional Provincial Funding from the 2019 Revised Child Care Allocation, and Fee Subsidy Update (2019-SS-14)

Report #2019-SS-14 from S. Danos-Papaconstantinou, Commissioner of Social Services, was received.

Moved by Councillor Carter, Seconded by Councillor Wotten,
(45) That we recommend to Council:

- A) That additional unbudgeted Provincial funding for child care services from the Ministry of Education in the amount of \$2,114,812 for the Regional Municipality of Durham Children’s Services Division be received as supplementary to the 2019 Business Plans and Budgets and allocated as follows:

Program	Expenditure	Amount \$
Purchased Fee Subsidy Spaces	Fee Subsidy	200,000
General Operating Program – Licensed Home Child Care	Provider Payments	141,450
Special Purpose - Projects	Provider Payments	544,931
Wage Enhancement	Provider Payments Provider Payments – Fee Stabilization (discontinued effective March 31, 2019)	1,051,157 (1,976,485)
Child Care Expansion	Provider Payments Tangible Capital Assets: • Laptops (\$48k); Tablets (\$39k); Desktops (\$3k); Monitors (\$1k); Office Furniture (\$9k).	2,053,759 100,000
Total		<u>2,114,812</u>

- B) That the Regional Chair and the Regional Clerk be authorized to execute the Amended Ontario Transfer Payment Agreement.

CARRIED

8. Advisory Committee Resolutions

There were no advisory committee resolutions to be considered.

9. Confidential Matters

There were no confidential matters to be considered.

10. Other Business

10.1 Needle Exchange Program

Staff responded to questions of Councillor Carter with regards to details surrounding the funding of the Needle Exchange Program; expectations and desired outcomes of the Program; and whether it would be valuable to have certain guidelines for the Program. Concerns were raised with regards to the alarming number of discarded needles in the City of Oshawa and the need to make the provincial and federal governments aware of the problem. Discussion ensued with regards to the importance of all Mayors to advocate for opportunities to end the problem. It was requested that Dr. Kyle provide further detailed information about the Needle Exchange Program.

11. Date of Next Meeting

The next regularly scheduled Health & Social Services Committee meeting will be held on Thursday, October 3, 2019 at 9:30 AM in Council Chambers, Regional Headquarters Building, 605 Rossland Road East, Whitby.

12. Adjournment

Moved by Councillor Roy, Seconded by Councillor Dies,
(46) That the meeting be adjourned.

CARRIED

The meeting adjourned at 10:14 AM

Respectfully submitted,

B. Chapman, Chair

N. Prasad, Committee Clerk



The Regional Municipality of Durham Report

To: Health and Social Services Committee
From: Commissioner of Social Services
Report: [#2019-SS-15](#)
Date: October 3, 2019

Subject:

Additional Provincial Funding from the 2019 Community-Based EarlyON Child and Family Centre Capital Program (CBEP)

Recommendations:

That the Health and Social Services Committee, subject to the approval of Finance and Administration Committee, recommends to Regional Council that:

- A) Additional unbudgeted 100 per cent one-time Provincial funding for capital costs associated with EarlyON services from the Ministry of Education in the amount of \$262,166 for the Regional Municipality of Durham Children’s Services Division be received as supplementary to the 2019 Business Plans and Budgets and allocated to renovate and retrofit space for EarlyON programming within a current Early Learning and Child Care building.
 - B) The Regional Chair and the Regional Clerk be authorized to execute the Amended Ontario Transfer Payment Agreement.
-

Report:

1. Purpose

- 1.1 The purpose of this report is to notify Regional Council that on March 4, 2019 the Ministry of Education provided 2018-19 Ontario Early Years Child and Family Centre (OEYCFC) Amending Agreement No.2. This agreement provided a total of \$262,166 in additional one-time 100 per cent money to support a new Community-Based EarlyON Child and Family Centre Capital Program (CBEP), funded through the Canada-Ontario Early Learning and Child Care Agreement. Refer to Attachment #1 - 2019 Ontario Transfer Agreement Amendment – Schedule “D” Budget for full allocation details.

2. Background

- 2.1 Effective 2018, the EarlyON programs became part of the early learning and child care system that the Children's Services Division (CSD) is responsible for managing (2017-COW-196). EarlyON Child and Family Centres (previously known as the Ontario Early Years Centres) provide free drop-in and registered programs for families with children from birth to age six. Programs are available at sites across Durham Region.
- 2.2 On March 4, 2019, the Children's Services Division received notice (2019: EYCC1) from the Ministry of Education (Attachment #2) providing confidential information outlining a CBEP funding allocation for EarlyON Child and Family Centres in Durham Region in the amount of \$262,166. The notice contained instruction that this information could not be communicated publicly until further notice.
- 2.3 On August 28, 2019, the Children's Services Division received notice that the embargo on communication, as outlined in 2019: EYCC1, had been lifted.

3. The Region of Durham's 2019 EarlyON Child and Family Centre CBEP Allocation

- 3.1 Since March 4, 2019, the CSD requested further direction from the Ministry of Education related to allowable CBEP expenditures and sought confirmation to announce and use the allocation. The CSD also gathered community data in a manner that maintained the confidentiality requirements of the Ministry but ensured a project to use the funding that meets the needs of the community was ready to proceed.
- 3.2 The CBEP funding allocations can be used for community-based non-consolidated EarlyON Child and Family Centre capital costs. The funding will support renovations and retrofits to Pickering Early Learning and Child Care Centre to increase the efficiency of the building by allowing both the Regional Child Care program and EarlyON programs facilitated by the YMCA to occur at the site.
- 3.2 This funding supports the commitments made in Ontario's Action Plan under the Canada-Ontario Early Learning and Child Care Agreement (ELCC). The ELCC supports a shared commitment by the Ontario and Federal governments to provide investments in the early years to increase quality, accessibility, affordability, flexibility, and inclusivity with consideration for those more in need.
- 3.3 Attachment #1 – 2019 Ontario Transfer Payment Agreement Amendment – Schedule "D" provides full allocations details for the Budget for the EarlyON Child and Family Centre CBEP.
- 3.4 The Region has been advised by Ministry staff that the CBEP funding allocation must be spent by March 31, 2020.

4. Financial Implications

- 4.1 The Region's Budget Management Policy section 15.2 requires the approval of the applicable Department Head, Treasurer, CAO, Standing Committee, Finance and Administration Committee and Regional Council to expend unanticipated revenues.
- 4.2 On August 28, 2019, the Province notified the Region that the CBEP funding allocation of \$262,166 could now be announced and expended (see Attachment #1). This is an increase over the 2019 allocation of \$4,623,110 for EarlyON Child and Family Centres included in the 2019 Children's Services Business Plans and Budget.

5. Conclusion

- 5.1 In 2018, 12,759 children, 0-6 years old, attended free EarlyON programs, across Durham Region, accompanied by their parents, guardians and/or caregivers. Investments in the early years programs to increase quality, accessibility, affordability, flexibility and inclusivity to families with young children leads to better education, well-being outcomes and strengthens our communities and the economy.
- 5.2 It is recommended that additional unbudgeted ELCC Federal Funding for EarlyON Child and Family Centre CBEP from the Ministry of Education in the amount of \$262,166 for the Regional Municipality of Durham Children's Services Division be received as supplementary to the 2019 Business Plans and Budgets and allocated as outlined in Section 3 of this report.
- 5.3 This report has been reviewed by the Finance Department and the Commissioner of Finance concurs with the financial recommendations.

6. Attachments

Attachment #1: 2019 Ontario Transfer Agreement Amendment – Schedule "D" Budget

Attachment #2: 2019:EYCC1 Memorandum from the Ministry of Education

Respectfully submitted,

Original signed by

Stella Danos-Papaconstantinou
Commissioner of Social Services

Recommended for Presentation to Committee

Original signed by

Elaine C. Baxter-Trahair
Chief Administrative Officer

SCHEDULE "D1"
COMMUNITY-BASED EARLYON CHILD AND FAMILY CENTRE
CAPITAL PROGRAM
BUDGET

<u>Allocation Summary</u>	<u>2019 Allocation</u>
One-time allocation for EarlyON Child and Family Centres	\$ 262,166

Ministry of Education
Mowat Block
Queen's Park
Toronto ON M7A 1L2

Ministère de l'Éducation
Édifce Mowat
Queen's Park
Toronto ON M7A 1L2



2019: EYCC1

MEMORANDUM TO: Chief Administrative Officers, CMSMs and DSSABs
General Managers/Commissioners, CMSMs and DSSABs
Children's Service Managers, CMSMs and DSSABs

FROM: Joshua Paul
Assistant Deputy Minister
Capital and Business Support Division

Shannon Fuller
Assistant Deputy Minister
Early Years and Child Care Division

DATE: March 4, 2019

SUBJECT: **Community-Based Early Years and Child Care Capital Program (CBCP) and Community-Based EarlyON Child and Family Centre Capital Program (CBEP): 2018-19 Funding Allocations for EarlyON Child and Family Centres, and 2018-19 Ontario Early Years Child and Family Centre (OEYCFC) Transfer Payment Agreement Amendment**

Note that all information provided within is confidential and cannot be communicated publicly until further notice. Only senior staff within your Consolidated Municipal Service Manager (CMSM) or District Social Services Administration Board (DSSAB) can be informed of this information prior to this timeframe.

We are pleased to provide you with your CMSM's or DSSAB's CBEP funding allocation for EarlyON Child and Family Centres and accompanying 2018-19 OEYCFC transfer payment agreement amendment for the CBCP and CBEP. This supports the commitments made in Ontario's Action Plan under the Canada-Ontario Early Learning and Child Care Agreement (ELCC).

The ELCC supports a shared commitment by the Ontario and federal governments to provide investments in the early years to increase quality, accessibility, affordability, flexibility, and inclusivity with consideration for those more in need. To support this commitment, in June 2017, the Ontario government received a one-time investment of \$30

million in capital funding over two years for EarlyON Child and Family Centres in community-based, non-consolidated facilities (a facility that is not controlled by the government, and as such does not reflect its financial results on the Province's financial statements). The CBEP EarlyON Child and Family Centre capital funding consists of about \$8.6 million.

This memo provides information for the CBEP funding allocations for EarlyON Child and Family Centres, and the accompanying 2018-19 OEYCFC transfer payment agreement amendment. The ministry recognizes that CMSMs and DSSABs do not know their 2019 child care operating budgets at this time.

CBEP Funding Allocations for EarlyON Child and Family Centres

The CBEP funding allocations for EarlyON Child and Family Centres takes into consideration the requirement for communities to make customized community connections that meet unique local needs. This funding approach uses data elements that are reflective of the key program goals, demographic needs, and is consistent with the data elements used in the ministry's 2018 and 2019 EarlyON Child and Family Centre funding allocations.

The CBEP funding allocations can be used for community-based non-consolidated EarlyON Child and Family Centre capital costs associated with approved Community-Based Early Years and Child Care Capital Program (CBCP) capital projects, first-time equipping, expenses incurred to meet Building Code standards (including minor capital renovations), and supplies to support the delivery and daily operation of programs as well as maintenance costs related to the general upkeep, safety, and maintenance of EarlyON Child and Family Centres, including minor capital renovations. Further details are noted in the 2018-19 OEYCFC transfer payment agreement amendment.

The CBEP funding allocations for EarlyON Child and Family Centres will flow to your CMSM or DSSAB in March 2019 upon receipt and processing of the signed 2018-19 OEYCFC transfer payment agreement amendment or electronic acceptance detailed below. This funding allocation must be spent by **March 31, 2020**. Please refer to your CMSM's or DSSAB's enclosed 2018-19 OEYCFC transfer payment agreement amendment for the operational, accountability, and reporting requirements associated with this funding allocation.

Please refer to Appendix A for your CMSM's or DSSAB's CBEP funding allocation.

2018-19 OEYCFC Transfer Payment Agreement Amendment for the CBCP and CBEP

Your CMSM's or DSSAB's attached 2018-19 OEYCFC transfer payment agreement amendment for the CBCP and CBEP includes the program description (Schedule "C"), the

CBCP and CBEP funding allocations (Schedules “D1” and “D2”), the payment plan (Schedules “E1” and “E2”), and reporting (Schedules “F1” “F2”).

The 2018-19 OEYCFC transfer payment agreement amendment applies to both those CBCP projects previously approved by the ministry in spring 2018 in relation to Memorandum 2017:EYCC15 as well as the CBEP funding allocations noted above.

An electronic acceptance of the 2018-19 OEYCFC transfer payment agreement amendment for the CBCP and CBEP by an individual with signing authority must be submitted to the ministry by **March 22, 2019**, followed by a signed copy as soon as possible thereafter.

Please submit the electronic acceptance of the 2018-19 OEYCFC transfer payment agreement amendment to: EYCU@ontario.ca. Please submit your signed copy of the amending agreement by email to: tpa.edu.earlylearning@ontario.ca.

The ministry will email a scanned signed copy of the completed agreement back to your CSM or DSSAB for your records.

Key Dates

The chart below lists all documents that are required to be submitted to the ministry regarding the CBCP and CBEP, if applicable:

Submission	Due Date
EarlyON Child and Family Centre attestation form	March 1, 2019*
child care floor plan approval letter	March 1, 2019*
electronic acceptance of the 2018-19 OEYCFC transfer payment agreement amendment for the CBCP and CBEP by an individual with signing authority	March 22, 2019
signed copy of the 2018-19 OEYCFC transfer payment agreement amendment for the CBCP and CBEP	as soon as possible

Ministry Contacts

If you have any questions or require additional information regarding the CBCP and/or CBEP funding allocations, please contact Jeff O’Grady, Manager, Capital Policy Branch, at 416-325-2027 or at Jeff.OGrady@ontario.ca.

* Unless ministry-approved extension has been granted.

Thank you for your attention to this matter. We look forward to our ongoing collaboration.

Original signed by:

Original signed by:

Joshua Paul
Assistant Deputy Minister
Capital and Business Support Division

Shannon Fuller
Assistant Deputy Minister
Early Years and Child Care Division

Appendices: Appendix A – CBEP Funding Allocations for EarlyON Child and Family Centres

Enclosure: 2018-19 OEYCFC Amending Agreement

Copy: Jill Dubrick, Director, Early Years and Child Care Programs and Service Integration Branch
Jeff O'Grady, Manager, Early Years Capital Unit, Capital Policy Branch
Ontario Municipal Social Services Association
Association of Municipalities of Ontario

Appendix A – CBEP Funding Allocations for EarlyON Child and Family Centres

CMSM/DSSAB	Funding Allocation
Corporation of the City of Brantford	\$124,144
City of Cornwall	\$100,443
City of Greater Sudbury	\$202,302
The City of Hamilton	\$360,821
Corporation of the City of Kawartha Lakes	\$67,152
Corporation of the City of Kingston	\$173,475
Corporation of the City of London	\$231,325
City of Ottawa	\$586,229
Corporation of the City of Peterborough	\$75,107
Corporation of the City of St. Thomas	\$68,702
Corporation of the City of Stratford	\$55,944
City of Toronto	\$1,639,162
Corporation of the City of Windsor	\$217,633
Corporation of the County of Bruce	\$55,307
Corporation of the County of Dufferin	\$47,011
Corporation of the County of Grey	\$63,996
Corporation of the County of Hastings	\$86,457
Corporation of the County of Huron	\$49,242
Corporation of the County of Lambton	\$139,577
County of Lanark	\$56,364
County of Lennox & Addington	\$49,700
County of Northumberland	\$52,569
County of Oxford	\$65,628
County of Renfrew	\$79,498
County of Simcoe	\$232,534
County of Wellington	\$123,825
District Municipality of Muskoka	\$50,086
Corporation of the Municipality of Chatham-Kent	\$80,696
The Corporation of Norfolk County	\$65,367
Regional Municipality of Durham	\$262,166
Regional Municipality of Halton	\$251,994
Regional Municipality of Niagara	\$248,878
Regional Municipality of Peel	\$716,420
Regional Municipality of Waterloo	\$251,315
Regional Municipality of York	\$553,612
United Counties of Leeds & Grenville	\$61,763
United Counties of Prescott & Russell	\$109,153
Algoma District Services Administration Board	\$66,303
District of Cochrane Social Service Administration Board	\$123,421
District of Nipissing Social Services Administration Board	\$128,273
District of Parry Sound Social Services Administration Board	\$65,898
District of Sault Ste Marie Social Services Administration Board	\$97,102
District of Timiskaming Social Services Administration Board	\$63,790
Kenora District Services Board	\$97,909
Manitoulin-Sudbury District Social Services Administration Board	\$87,567
Rainy River District Social Services Administration Board	\$64,871
District of Thunder Bay Social Services Administration Board	\$144,269

Note: Distribution based on 2018 and 2019 EarlyON Child and Family Centre funding allocations.



The Regional Municipality of Durham Report

To: Health and Social Services Committee
From: Commissioner of Social Services
Report: #2019-SS-16
Date: October 3, 2019

Subject:

Unbudgeted Provincial funding from the Ministry of Long-Term Care for a Designated Behavioural Support Transitional Unit for Fairview Lodge Long-Term Care Home in Whitby

Recommendation:

That the Health and Social Services Committee subject to the approval of the Finance and Administration Committee recommends to Regional Council:

- A) That the following recommendations be adopted, pending approval by the Ministry of Long Term Care and, as such, will only be acted upon once formal approval is received by the Ministry.**
- B) That the 2019 portion of unbudgeted ongoing Provincial funding from the Ministry of Long-Term Care (MOLTC) in the amount of \$475,800 for the period September 1, 2019 to December 31, 2019, be expended in accordance with the funding agreement which includes costs related to, but not limited to: staff wages and project costs associated with the operation of a Designated Behavioural Support Transition Unit; and
- C) Approval be granted to increase the Long-Term Care and Services for Seniors staffing complement by eleven (11) new full-time positions effective November 1, 2019 and increase part time staffing costs to account for 24/7 operations coverage within the Unit; and
- D) The increases in 2019 will be funded entirely from the additional Provincial funding allocation as follows:
- a) One (1) Registered Nurse at an estimated 2019 cost of \$20,158 (annualized cost of \$122,310);

- b) Eight (8) Registered Practical Nurses at an estimated cost of \$115,039 (annualized cost of \$694,976);
 - c) One (1) Personal Support Worker at an estimated 2019 cost of \$12,017 (annualized cost of \$72,615);
 - d) One (1) Social Worker at an estimated 2019 cost of \$19,884 (annualized cost of \$120,127)
 - e) Increase Part-time hours for Recreation Programmer of \$4,549 to support the Unit (annualized cost is \$27,505);
 - f) Increase Part-time hours for Nursing and Personal Care \$59,252 to account for 24,7 operations and coverage within the Unit (annualized cost is \$358,269);
 - g) The annualized costs for incremental staffing costs noted of \$1,423,500 to be funded from the increased Provincial per diem funding; and
- E) That unbudgeted one-time provincial funding in the amount of \$230,748 be used for the purpose of staff training and minor equipment purchases; and
- F) That the Regional Chair and Regional Clerk be authorized to execute any required agreements related to the additional funding.
-

Report:**1. Purpose**

- 1.1 The purpose of this report is to seek approval to expend unbudgeted ongoing operating funding and one-time funding from the Ministry of Long-Term Care to convert the 26-bed secure unit at Fairview Lodge to a 26-bed Behavioural Supports Transition Unit (BSTU).

2. Background

- 2.1 BSTUs are an integral part of the continuum of care designed for individuals expressing responsive behaviours associated with dementia, complex mental health and /or other neurological conditions. The clinical profile for the BSTU resident would include those individuals with a diagnosis of dementia; medically stable, including stable mental illness; ambulatory or ambulatory with the use of an aide; responsive behaviours that cannot be managed in current environment.

- 2.2 Residents at risk for resident-to-resident abuse, resident-to-staff abuse, and those considered high risk for aggression are often difficult to place in long-term care homes. As a result, they remain at risk in the community or remain in hospital as 'alternate level of care'. Neither of those options serve the needs of the individual and potentially put the informal caregiver at risk of harm.
- 2.3 BSTUs are equipped to offer residents higher intensity, specialized care that is person centred and founded in evidence based-practice. After a period of assessment, care planning, treatment, and interventions the residents would be appropriate to safely transition to a long-term care environment.
- 2.4 BSTUs work to support individuals' transitions to long-term care (LTC) homes or community. If higher levels of care are required, specialized complex continuing care units and/or tertiary mental health programs may be considered.
- 2.5 The BSTU will facilitate flow of ALC patients from hospital to LTC homes, improve LTC acceptance rates, provide specialized patient care and reduce the use of high intensity needs funding for supplementary staffing.
- 2.6 Currently, there are no BSTUs in the Central East Local Health Integration Network (CELHIN).

3. Discussion

- 3.1 In March 2019, the CELHIN at the request of the Ministry of Health and Long-Term Care (MOHLTC) approached the Region to consider the creation of a designated BSTU to be located at Fairview Lodge.
- 3.2 The 26-bed secure unit will be converted to a designated BSTU. Residents currently residing in the secure unit who do not meet the criteria for the BSTU will be decanted safely and with consent to another bed either within Fairview Lodge or another LTC home.
- 3.3 Approximately 30 per cent of the current residents in the secure unit at Fairview Lodge would meet the criteria for transitional placement in a BSTU so the Home is already serving this population in a limited capacity without the benefit of funding for additional staffing and other resources.
- 3.4 The conversion of the secure unit at Fairview Lodge to a BSTU will result in a reduction of long-stay secure beds in Durham Region which will negatively impact wait times for secure beds. However, the conversion to a BSTU will support those individuals who currently are unable to be cared for safely in LTC homes due to complex behaviours.

- 3.5 The additional per diem funding will be used to provide additional professional and unregulated staff and supplies needed to manage the care of the residents on the BSTU.

4. Financial Implications

- 4.1 As per section 15.2 of the Region's Budget Management Policy, approval of the applicable Department Head, Treasurer, CAO, applicable Standing Committee, Finance and Administration Committee and Regional Council is required to receive and expend all unanticipated revenue.
- 4.2 The unbudgeted ongoing provincial funding in the amount of \$475,800 will be expended in accordance of the funding agreement, which includes costs related to, but not limited to staff wages and benefits and project costs associated with the operation of a Designated BSTU which includes the following new staff positions:
- a) One (1) Registered Nurse plus additional part time hours (0.4 full-time equivalent);
 - b) Eight (8) Registered Practical Nurses plus part time hours (3.2 full-time equivalent);
 - c) One (1) Personal Support Worker plus part time hours (0.6 full time equivalent)
 - d) One (1) Social Worker
 - e) Additional part time hours for a Recreation Programmer (0.4 full-time equivalent)
- 4.3 The one-time provincial funding in the amount of \$230,748 will be expended for the purpose of staff training and minor equipment purchases.
- 4.4 There are risks to the Region with Provincial funding. In the event that the Province decreases the level of funding or does not adjust the level of funding provided to the Region to accommodate inflationary and contractual increases, or provide sufficient administrative funding to cover the Region's administrative costs to deliver the increased level of service, then the Region's costs would need to increase to maintain the same level of service to the community.
- 4.5 Staff are anticipating a net incremental cost of \$56,302 in 2020 and will adjust expenditures within the 2020 Budget to accommodate for the increased Regional cost. In 2020, Registered Nurse (RN) provincial funding of up to \$106,000 will be utilized to offset some of the net costs, as appropriate.

5. Conclusion

- 5.1 It is recommended that the Health and Social Services Committee recommends to Regional Council that the additional unbudgeted ongoing Provincial funding from the MOLTC in the amount of up to \$475,800 in per diem funding and \$230,748 in one-time funding be received and allocated for the eligible costs as outlined above.
- 5.2 This report has been reviewed by the Finance Department and the Commissioner of Finance concurs with the financial recommendation.

6. Attachments

Attachment #1: Allocation Details – 2019/20 Behavioural Supports Transition Unit

Respectfully submitted,

Original signed by

Stella Danos-Papaconstantinou
Commissioner of Social Services

Recommended for Presentation to Committee

Original signed by

Elaine C. Baxter-Trahair
Chief Administrative Officer

Behaviour Support Transition Unit F Fairview Lodge	2019	2020
Registered Nurse (1)	20,158	122,310
Registered Practical Nurse (8)	115,039	694,976
Personal Support Worker (1)	12,017	72,615
Social Worker (1)	19,884	120,127
Position Cost - Full Time	167,098	1,010,028
Registered Nurse (.4 FTE)	8,221	49,706
Registered Practical Nurse (3.2 FTE)	44,208	267,306
Personal Support Worker (.6FTE)	6,823	41,257
Recreation Programmer (.4 FTE)	4,549	27,505
Position Cost - Part Time	63,801	385,774
Contingency	23,090	140,000
Operating Costs		50,000
One-time Costs	230,748	-
Total Costs	484,737	1,585,802
Per Diem Funding	475,800	1,423,500
One-time funding	230,748	-
RN funding	-	106,000
Total Funding	706,548	1,529,500
Surplus/(Deficit)	221,811	(56,302)

Note: 2020 Staffing costs are based on 2019 rates



The Regional Municipality of Durham Report

To: Health and Social Services Committee
From: Commissioner of Social Services and Commissioner of Planning and Economic Development
Report: [#2019-SS-17](#)
Date: October 3, 2019

Subject:

Project Update and Adoption of Terms of Reference:
Durham Region Community Safety and Well-Being Plan (CSWP)

Recommendation:

That Health and Social Services Committee recommends to Regional Council:

- A) That the Terms of Reference for the CSWP Steering Committee (Attachment #2) be adopted;
 - B) That one Regional Council member, and an alternate, be appointed to the Steering Committee in accordance with the CSWP Terms of Reference (Section 3.2); and
 - C) That a copy of this report be sent to the area municipalities, Durham Regional Police Service (DRPS), and CSWP Steering Committee Members.
-

Report:

1. Purpose

- 1.1 Further to the information provided in Report 2019-COW-15 (Attachment #1), this report provides a project update for the Durham Region's Community Safety and Well-Being Plan (CSWP), including the development of a Terms of Reference (TOR) for the Steering Committee (refer to Attachment #2).

2. Background

- 2.1 Durham Region is developing its CSWP as required by the new legislative amendments to the Police Services Act. This will be undertaken in a collaborative manner with DRPS, a Steering Committee, community partners and members of

the public. The legislated deadline for the adoption of this Plan by Regional Council is January 1, 2021.

3. Governance

- 3.1 The planning process will be led by a Steering Committee, including members of Planning and Economic Development, Social Services, Health, DRPS, and the CAO's office.
- 3.2 An internal core team (co-led by the Commissioners of Social Services and Planning and Economic Development) will act as the conduit to the Steering Committee (see Section 5: Steering Committee). The core team has representation from Planning and Economic Development, Social Services, Health, and DRPS. It will receive oversight and approval from the project's executive sponsors (Regional CAO and DRPS Chief). Regional Council is the CSWP approval body.

4. Area Municipal and Community Partner Involvement

- 4.1 A municipal executive working group will be established to ensure an integrated approach to identifying and addressing local priorities. This group will be comprised of area municipal CAO's (or delegate).
- 4.2 To further understand the issues, community partners will be engaged as part of this project. A list of these community partners is provided in Attachment #3 and is subject to change as the project progresses.

5. Steering Committee

- 5.1 In keeping with the statutory requirements, a multi-sector Steering Committee must be established to guide the development of the Plan. The Steering Committee will include representatives from:
- LHINs or health/mental health services;
 - Educational services;
 - Community/social services;
 - Community/social services to children or youth;
 - Custodial services to children or youth;
 - Regional Council;
 - The Police Service Board or a detachment commander (or delegate); and
 - The chief of police of a police service that provides policing in the area (or delegate).
- 5.2 The internal core team has used the existing Durham Connect Table, Systems Leaders Group as a starting point to meet these requirements.

5.3 A representative from Regional Council and an alternate are requested to be appointed to the Steering Committee to help guide the development of the CSWP.

6. Project Update

6.1 The following key steps have taken place since the last update:

- Inaugural meeting with the core team and development of a work plan.
- Review of other relevant jurisdictions for CSWP best practices.
- Review of Risk-Driven Tracking Database by DRPS to identify key risk factors for Durham.
- Initiation of internal data gathering and scan of existing Regional programs and services.
- Finalizing of Steering Committee TOR.
- Development of project webpage and communication materials (Durham.ca/CSWP).
- Distribution of letters to the Regional Chair, Area Municipal Mayors, Area Municipal CAOs, Steering Committee members and Community Partners to invite them to participate in the development of the CSWP and attend an upcoming Provincial Training Session and Roundtable.

7. Next Steps

7.1 The following outlines the major milestones anticipated for the remainder of the project:

- Host “Provincial Training Session and Roundtable” on November 15, 2019 at Regional Headquarters, LLC from 9:00am – 3:30pm. Invitees include:
 - Regional Chair and Area Municipal Mayors;
 - Steering Committee members;
 - Municipal CAOs; and
 - Community Partners.
- Hold inaugural Steering Committee and Municipal Executive working group meetings (Fall 2019).
- Initiate public consultation through the development of an online survey and open house (Winter 2019/Spring 2020).
- Provide Council with a summary of engagement feedback (Early summer 2020).
- Develop draft CSWP and distribute to Steering Committee and Municipal Executive working group for comments (Late summer 2020).
- Present final CSWP to Council for approval and adoption (Early winter 2020).
- Post the CSWP on the internet within 30 days of adopting it.

8. Conclusion

- 8.1 The CSWP will be developed using a combination of qualitative and quantitative information collected through consultation with Council, Area Municipalities, Steering Committee members, Community Partners and members of the public.
- 8.2 This collaborative approach will result in a CSWP that addresses the priority risk factors for the communities that make Durham a safe, inclusive and supportive place to live, work, learn and play.

9. Attachments

Attachment #1: Report 2019-COW-15

Attachment #2: CSWP Steering Committee Terms of Reference

Attachment #3: Community Partner List (Subject to Change)

Respectfully submitted,

Original signed by

Stella Danos-Papaconstantinou
Commissioner of Social Services

Original signed by

Brian Bridgeman, MCIP, RPP
Commissioner of Planning and
Economic Development

Recommended for Presentation to Committee

Original signed by

Elaine C. Baxter-Trahair
Chief Administrative Officer

If this information is required in an accessible format, please contact 1-800-372-1102 ext. 2666



The Regional Municipality of Durham Report

To: The Committee of the Whole
 From: Commissioner of Social Services and Commissioner of Planning and Economic Development
 Report: #2019-COW-15
 Date: June 12, 2019

Subject:

Initiation of the Durham Region Community Safety and Well-Being Plan (CSWP)

Recommendation:

That the Committee of the Whole recommends to Regional Council:

- A) That this report be received for information; and
 - B) That a copy of this report be sent to the area municipalities, Durham Region Police Service, and CSWP Stakeholders for information.
-

Report:

1. Purpose

- 1.1 On January 1, 2019, legislative amendments to the *Police Services Act, 1990*, mandated that every municipality prepare and adopt a Community Safety and Well-Being Plan (CSWP) in partnership with their police services.
- 1.2 The Minister of Community Safety and Correctional Services has given municipalities two years (until January 1, 2021) to prepare and adopt their CSWP.

- 1.3 The purpose of this report is to advise Council that work is underway to complete a CSWP for Durham Region, on or before January 1, 2021.
- 1.4 A Steering Committee co-led by the Commissioner of Social Services and the Commissioner of Planning and Economic Development will guide the process. The Regional CAO and DRPS Chief are the Executive Sponsors. It may be recommended at a later date that two members of Regional Council be appointed to provide support and public leadership to the project team.

2. Background

- 2.1 Community Safety and Well-Being Plans are intended to formalize the shared responsibility of safe and healthy communities beyond policing. CSWPs required an integrated approach to bring municipalities, First Nations and partners together to mobilize the levers of safety and well-being collectively.
- 2.2 Current and mounting demographic pressure is placing new and different demands on the Region. The anticipated growth that is coming to Durham Region will bring with it fundamental changes to the make-up and character of the Region. The long-term sustainability and health of the Region is critical to community safety and well-being.
- 2.3 Having a made-in-Durham CSWP will produce a number of inherent benefits. Apart from creating a sense of shared ownership for community safety and well-being, the CSWP will:
 - a. Identify the key issues impacting the Region in general, and in particular to the area municipalities and specific areas within them;
 - b. Increase understanding of local risks and vulnerable groups;
 - c. Increase awareness, coordination and access to services;
 - d. Identify priority areas and recommendations for action;
 - e. Determine optimal strategies to improve community safety and well-being;
 - f. Identify the capacity across Durham Region to address community safety and well-being related issues;
 - g. Confirm operating procedures for a more integrated and aligned collaboration process across agencies and geography;
 - h. Reduce the financial burden of crime on society through cost-effective approaches with significant return on investment; and
 - i. Provide a platform for overarching multidisciplinary Regional benefit.

- 2.4 Additionally, this project provides opportunities to enhance many interrelated efforts across the Region, such as strategic planning, economic development and tourism, planning for regional growth, increasing transit ridership, emergency management, health and social services resource allocation, and more.
- 2.5 Some municipalities in Durham Region (such as the Town of Ajax) have had a community safety strategy in place for more than a decade. Various other upper and lower-tier municipalities around the province have also developed CSWPs. Best practices, and lessons learned from these Plans will be analyzed to inform and streamline Durham's process.
- 2.6 The CSWP will be aligned with the *Durham Region Strategic Plan*, Durham Region Works Department's *Vision Zero*, *Priority Neighbourhoods Roundtable*, *the Financial Empowerment Framework*, and other bodies of work underway. The CSWP will most closely align with the Durham Connect Table, led by Durham Regional Police Service.
- a. Durham Region Strategic Plan
 - Establishes the long-term vision for communities in Durham Region, and the Region's role in achieving that vision.
 - b. Durham Vision Zero
 - The Region's Works Department has developed a Strategic Road Safety Action Plan (SRSAP) to reduce the number and severity of collisions and traffic-related incidents.
 - c. Priority Neighborhoods Roundtable and the Financial Empowerment Framework.
 - Work to address the social determinants of health through collaboration, education, community engagement and financial empowerment opportunities.
 - d. Durham Connect
 - A partnership made up of multidisciplinary agencies mandated under provincial, regional, local and community-based organizations to improve community safety and well-being;
 - Provides collaborative deployment of resources and services to reduce imminent harm to individuals and families in Durham who demonstrate

acutely elevated risk factors.

3. Summary of the CSWP

- 3.1 A CSWP involves taking an integrated approach to service delivery by working across a wide range of sectors, agencies, and organizations to assist partners whose mandate is focused on community safety and wellness. The Plan will proactively develop and implement evidence-based strategies and programs to address local priorities, such as risk factors, vulnerable groups, etc. related to crime and complex social issues, on a sustainable basis.
- 3.2 The goal of a CSWP is to achieve the ideal state of a sustainable community, where everyone has a sense of safety, belonging, access to services, and where individuals and families are able to meet their needs for education, health care, food, housing, income and social and cultural expression.
- 3.3 The Ministry of Community Safety and Correctional Services requires the CSWP to include the following, at a minimum:
- a. Local priority risk factors that have been identified based on community consultations and multiple sources of data, such as Statistics Canada, and local sector-specific data, such as the Health Neighbourhoods reports;
 - b. Evidence-based programs and strategies to address those priority risk factors; and
 - c. Measurable outcomes with associated performance measures to ensure that the strategies are effective and positive outcomes are being achieved.
- 3.4 A Risk Driven Tracking Database (RTD) is maintained by the Ministry of Community Safety and Correctional Services. It contains comprehensive data related to situations of acutely elevated risk. The Plan will involve a detailed background assessment of risks in Durham, and how these can be mitigated. DRPS has identified the top three highest-risk factors on the topic of community safety and well-being in Durham (ranked by frequency). These factors, the remaining risk factors known to DRPS, as well as others that are discovered through the process will be considered in the Plan. They are:
1. Mental Health and Cognitive Function;
 2. Anti-social/Problematic Behaviour (non-criminal); and
 3. Substance Abuse and Addiction.

4. A Regional Approach

- 4.1 A Region-wide approach to the development of the CSWP is logical due to its interdisciplinary nature, requiring expertise from various departments and agencies. The following highlight the benefits:
- a. The issue of community safety is intricately linked to many factors. It is a complex problem that requires a collaborative solution. The term “community safety” is one that is generally understood to be administered by police and those who provide services through the criminal justice system. From a broader lens, however, it is closely connected to the work of others in human service sectors, including housing, health/mental health, addictions, victim support, planning, as well as public leadership by elected officials. The approach to community safety and well-being needs to be premised on creating a wider community of practice.
 - b. There is growing recognition that safe communities are sustainable communities. They are healthy, vibrant and attractive places to live, work, invest, play and learn. A Community Safety and Well-being Plan may in fact offer a critical launching pad for a systemic and integrated approach to improving quality of life. It may also offer an important point of leverage for creating broader connections across multiple organizations whose focus ultimately is on improving the quality of life of Durham residents. It may provide a platform for a multi-sector collaborative effort that in turn reduces risk, vulnerability, harm, and increases economic development.
 - c. Championing a Community Safety and Well-being Plan provides an important point of leverage for creating additional benefit across the economic and socio-cultural spectrum. It will provide an opportunity for Durham Region and its partners to identify the issues and the areas of opportunity for collaborative action.

5. The Process and Governance

- 5.1 It is proposed that the planning process be led by a Steering Committee, including members of Planning and Economic Development, Social Services, DRPS (Durham Connect), the CAO's office, and will seek Regional Council's involvement at a later date.

- 5.2 A staff Project Team will act as the conduit for the transfer of information from the Working Groups to the Steering Committee. The Project Team will act in an advisory capacity to the Steering Committee. Its first task will be to create a Terms of Reference, outlining:
- a. The roles and responsibilities for the Steering Committee, Project Team, and Working Groups;
 - b. Project Scope;
 - c. Stakeholders;
 - d. Project Timeline; and
 - e. Deliverables.

Area municipalities will be engaged throughout the process, and the Area Municipal CAO's are in agreement with the Region leading this initiative.

- 5.3 A background assessment and jurisdictional review will be undertaken to better understand the issues at hand, best practices, and lessons learned from various other municipal CSWPs that have already been created across the province.
- 5.4 Plans and resources that already exist (i.e. Durham Connect, Vision Zero) will be leveraged to more closely define CSWP project scope, as well as create opportunities for collaboration and efficiencies.
- 5.5 The Stakeholder List created in the Terms of Reference will be used to shape public engagement on the CSWP. The public engagement will be broad reaching to the entire community, but also focus on vulnerable populations and those who access relevant services.
- 5.6 Risk factors and influential data identified by the Risk Driven Tracking Database, DRPS and Social Services, as well as information obtained through public consultation will be analyzed in detail to find potential efficiencies across the Region.
- 5.7 Crime Prevention Through Environmental Design (CPTED) theory will be leveraged when analyzing priority areas in creating a greater sense of safety in the community.
- 5.8 Appropriate options that could be feasible to address the various goals of the CSWP will be identified with preliminary visions for implementation.
- 5.9 The Steering Committee will be responsible for making decisions concerning the CSWP. The Steering Committee will provide progress reports through the

Commissioner of Social Services, the Commissioner of Planning and Economic Development, and/or the Chief Administrative Officer, to Regional Council. The Committee will build on existing governance models (i.e. Durham Connect), while including DRPS, the CAO's Office, Social Services, Planning and Economic Development, Health, as well as Regional Council.

6. Conclusion

- 6.1 Durham Region is required by the province to develop a Community Safety and Well-Being Plan. This Plan is positioned to demonstrate the need for collaboration and could serve as a collaborative Call to Action. It will align the efforts of all partners – DRPS, municipalities, Regional departments, social service agency partners and affiliate organizations dedicated to community safety and wellness program delivery. It will galvanize all participants to achieve mutually supported goals and agreed-upon actions for community safety and well-being.
- 6.2 Once completed, the Durham CSWP will become a cohesive guide to provide safety, vibrancy and well-being in the Region. It will align other jurisdictional best practices, current Regional programs, and public feedback to create a stronger Durham Region.

Respectfully submitted,

Original signed by

Dr. Hugh Drouin
Commissioner of Social Services

Original signed by

Brian Bridgeman, MCIP, RPP
Commissioner of Planning and
Economic Development

Recommended for Presentation to Committee

Original signed by

Elaine C. Baxter-Trahair
Chief Administrative Officer

Attachment #2: Durham Region Community Safety and Well-Being Plan

Steering Committee - Terms of Reference

1. Background

- 1.1 Durham Region is developing its Community Safety and Well-Being Plan (CSWP) as required by the new legislative amendments to the Police Services Act. This will be undertaken in a collaborative manner with Durham Regional Police Service, a Steering Committee, community partners and members of the public. A consultant has been retained to assist staff in moving this initiative forward to meet the legislated deadline of January 1, 2021.

2. Purpose

- 2.1 The purpose of the CSWP is to ensure municipal government, police services, community-based organizations and other sector representatives work collaboratively to find solutions for issues related to: health, well-being, crime, victimization and community safety.
- 2.2 A CSWP must include the following core information:
- a. Local priority risk factors that have been identified based on community consultations and multiple sources of data, such as Statistics Canada and local sector-specific data;
 - b. Evidence-based programs and strategies to address those priority risk factors; and
 - c. Measurable outcomes with associated performance measures to ensure the strategies are effective and positive outcomes are achieved.

3. Steering Committee Composition

- 3.1 The Region of Durham is required to establish a multi-sectoral Steering Committee to guide the development of the Plan. The Steering Committee will include representatives from:
- LHINs or health/mental health services;
 - Educational services;
 - Community/social services;
 - Community/social services to children or youth;
 - Custodial services to children or youth;
 - Regional Council;
 - The Police Service Board or a detachment commander (or delegate);
 - The chief of police of a police service that provides policing in the area (or delegate).
- 3.2 Regional Council shall appoint a representative and an alternate to help guide the development of the CSWP.

4. Purpose

- 4.1 The Steering Committee will provide leadership in the development of Durham's CSWP. Specifically, the Steering Committee will direct Durham's model for collaboration, planning and action to strengthen the delivery of services that together enhance the health, safety and well-being of Durham residents.

5. Role & Responsibilities

- 5.1 The Steering Committee will be responsible for fulfilling the following key roles:
- a. Directing the development of the CSWP;
 - b. Providing strategic advice and guidance for operationalizing the CSWP, upon approval by Regional Council;
 - c. Strategically discuss the key issues that impact the health, safety and well-being of Durham residents;
 - d. Collectively assess the priority risks identified by the core working group for Durham Region and identify key strategies to address priority risks; and
 - e. Assist the core working group in developing a set of measurable outcomes against which success and progress will be measured.
- 5.2 Chair and Vice Chair will be collectively selected by the Steering Committee.

6. Meetings

- 6.1 Meetings of the Steering Committee will be held quarterly or on an as-needed basis, at the call of the Chair and in alignment with project timelines and key milestone dates. Primary committee members are encouraged to attend all meetings but may appoint a delegate to attend on their behalf. Any appointed delegates should be able to speak on behalf of their respective organization.
- 6.2 Information/reports/minutes will be forwarded electronically.

7. Decision Making

- 7.1 The Committee will endeavor to make decisions by consensus.

8. Support and Resources

- 8.1 The Steering Committee will be supported by a Regional staff core team with representation from Durham Regional Police, Health, Social Services, Planning and Economic Development, and the Consultant.
- 8.2 A staff liaison from the Planning & Economic Development Department, Durham Region will be the primary point of contact for the Region.

Attachment #3: Community Partner List (Subject to Change):

- Region of Durham – various Departments and Divisions
- Durham Regional Police Services
- Boys and Girls Club of Durham
- Brain Injury Association of Durham
- Brock Community Health Centre
- Canadian Mental Health Association Durham
- Carea Community Health Centre
- Catholic Family Services of Durham
- CE - Local Health Integration Network
- City of Oshawa – Municipal Law Enforcement
- Community Care Durham
- Community Development Council Durham
- Community Justice Alternatives
- Community Living Durham North
- Cornerstone Community Association
- Dnaagdawenmag Binnooyiyag Child & Family Services
- Durham Catholic District School Board
- Durham Children’s Aid Society
- Durham Community Legal Clinic
- Durham District School Board
- Durham Mental Health Services
- Frontenac Youth Services
- Herizon House
- Joanne’s House
- John Howard Society of Durham Region
- Kinark Child and Family Services
- Lakeridge Health – Mental Health
- Lakeridge Health – Pinewood
- North House
- Ontario Disability Support Program
- Ontario Shores for Mental Health Sciences
- Refugee Youth Outreach Centre
- Rose of Durham
- Victim Services of Durham
- Youth Justice Services