



City of Hamilton

EMERGENCY & COMMUNITY SERVICES COMMITTEE REVISED

Meeting #: 22-014
Date: December 1, 2022
Time: 1:30 p.m.
Location: Council Chambers
Hamilton City Hall
71 Main Street West

Tamara Bates, Legislative Coordinator (905) 546-2424 ext. 4102

1. CEREMONIAL ACTIVITIES

2. APPROVAL OF AGENDA

(Added Items, if applicable, will be noted with *)

3. DECLARATIONS OF INTEREST

4. APPROVAL OF MINUTES OF PREVIOUS MEETING

4.1 September 22, 2022

5. COMMUNICATIONS

6. DELEGATION REQUESTS

6.1 Medora Uppal, YWCA Hamilton, respecting housing an homelessness for women and gender diverse people (for a future meeting)

6.2 Request for capital as well as operational funding spread over 3-years for Tiny Homes Project, a program to provide tiny, warm cabins for those experiencing homelessness in our city (for today's meeting)

a. Julia Kollek, Hamilton Alliance for Tiny Shelters

b. Heather McLean, Hamilton Jewish Family Services

- c. Daniel A. Bednis, Hamilton Alliance for Tiny Shelters
- d. Don Seymour, Wesley
- *e. Brenda Duke, Gibson and Landsdale Area (GALA) Community Planning Team
- *f. Scott Gervais
- *g. Madeleine "Mandi" Ann Lowthian Smith, We Are Ward Three Too!
- *h. Michael Pasquali
- *i. Marianne McNanny
- *j. Amber Ross
- *k. Tanya Clemente

*6.3 Jean L. Fair, putting so many social services in Ward 3 when the problems are spread throughout the city to varying degrees (for today's meeting)

7. DELEGATIONS

8. PRESENTATIONS / STAFF PRESENTATIONS

8.1 Seniors Advisory Committee - Annual Report

*8.2 Housing Sustainability and Investment Roadmap Update (HSC22053/FCS22087/PED22212) (City Wide)

*8.3 Hamilton Veterans Committee - 2022 Annual Report

9. CONSENT ITEMS

9.1 Standardization of Resident Lifting and Hygiene Equipment (HSC22052) (Wards 7 and 13)

9.2 2022 Ministry of Health Ambulance Service Review Findings (HSC22055) (City Wide)

10. PUBLIC HEARINGS

11. DISCUSSION ITEMS

11.1 Seniors Advisory Committee - Citizen Committee Report - Seniors Advisory Committee Roles and Responsibilities of New Members

11.2 2023 Budget Submission - Seniors Advisory Committee (HSC22054) (City Wide)

11.3 2023 Budget Submission – Housing and Homelessness Advisory Committee (HSC22056) (City Wide)

*11.4 Hamilton Alliance for Tiny Shelters Proposal (HSC22015(a)) (City Wide)

*11.5 Hamilton Veterans Committee 2023 Budget Submission (PED22210) (City Wide)

12. MOTIONS

13. NOTICES OF MOTION

14. GENERAL INFORMATION / OTHER BUSINESS

15. PRIVATE AND CONFIDENTIAL

16. ADJOURNMENT



EMERGENCY & COMMUNITY SERVICES COMMITTEE MINUTES 22-013

1:30 p.m.

Thursday, September 22, 2022

Council Chambers

Hamilton City Hall

71 Main Street West

Present: Councillors B. Clark (Chair), N. Nann and E. Pauls,

Regrets: Councillor T. Jackson – City Business, Councillors S. Merulla and T. Whitehead – Personal

THE FOLLOWING ITEMS WERE REFERRED TO COUNCIL FOR CONSIDERATION:

1. Seniors Advisory Committee - Citizen Committee Report respecting Extreme Heat Mitigation (Item 10.1)

(Nann/Pauls)

WHEREAS, the Ontario Human Rights Commission (OHRC) has issued a statement (https://www.ohrc.on.ca/en/news_centre/ohrc-statement-human-rights-extreme-heat-waves-and-air-conditioning) on human rights, extreme heat waves and air conditioning as of August 19, 2022 stating that while under the *Residential Tenancy Act, 2006* (RTA), tenants have access to vital services such as heat, hot and cold water, electricity and fuel, it does not include air conditioning;

WHEREAS, the OHRC has stated this current RTA puts at risk many Ontarians, such as people with disabilities, older people and low income, youngsters under the age of 4, Indigenous, Black and racialized communities from protection from extreme heat. People with disabilities, older adults and children under the age of 4 years are at most risk for heat illness and death. This leaves many Ontarians without protection from extreme heat;

WHEREAS, the OHRC calls on the provincial government to include air conditioning as a vital service under RTA regulations and to establish a provincial maximum temperature to ensure that vulnerable Code-protected tenants are protected against threat of eviction for using safely installed cooling units;

WHEREAS, at the Federal level, Canada has committed to reaching net-zero emissions by 2050 under the Paris Agreement and to cut emissions of methane by at least 30% below 2020 levels by 2030 through the Global Methane Pledge;

WHEREAS, there is a growing trend across Canada to ban heat from fossil fuels with some cities setting target dates to ban fossil fuel use to reach zero-emissions (Vancouver 2025) as well as some provinces already making it illegal to replace existing furnaces with fossil burning fuels to reach near-zero emissions and drastically cut methane (Quebec);

WHEREAS, the City of Hamilton committed to plans for transforming buildings to low carbon emitting and has prioritized a 13 Climate Change Impact Adaption Plan (<https://www.hamilton.ca/city-initiatives/strategies-actions/climate-change-action>), one being to help vulnerable populations from experiencing climate related risks of extreme heat and cold;

WHEREAS, heating residences with fossil fuels create 85% of Greenhouse Gas emissions mainly from natural gas that is itself 95% methane gas;

WHEREAS, the City of Hamilton has already officially approved to seek a grant to design a Home Efficiency Retrofit Opportunity (HERO) Program (<https://www.environmenthamilton.org/hamiltonhero>) for Hamilton that will allow homeowners to get a low-interest loan to make quality of life and energy conservation improvements to their homes that they would not otherwise be able to afford; and

WHEREAS, the City of Hamilton has already become the owner of the world's largest residential building retrofitted to Passive House standards (https://passivehouse-international.org/index.php?page_id=150). The Ken Soble CityHousing Hamilton building has achieved 94% reduction of greenhouse gas emissions and 91% reduction in heating energy demand to support resident health and climate resilience. This building uses heat pumps to heat and cool apartment units. CityHousing Hamilton is a true model for addressing extreme heat and housing crises.

THEREFORE, BE IT RESOLVED:

- (a) That the Seniors Advisory Committee requests that the City of Hamilton advocate to the Government of Ontario to change the building code to make heat pumps (heat and cooling units) and electrification mandatory in all new building and retrofit housing; and
- (b) That the City of Hamilton expand the extreme heat interventions to other CityHousing Hamilton facilities and to low income rental units in the near future as per those already put in place by Public Health's Extreme Heat Working Group in 181 Jackson Street West, 200 Jackson Street West, 191 Main Street West and 95 Hess Street South.

Result: Motion CARRIED by a vote of 3 to 0, as follows:

YES - Ward 3 Councillor Nrinder Nann
 ABSENT - Ward 4 Councillor Sam Merulla
 ABSENT - Ward 6 Councillor Tom Jackson
 YES - Ward 7 Councillor Esther Pauls
 YES - Chair - Ward 9 Councillor Brad Clark
 ABSENT - Ward 14 Councillor Terry Whitehead

2. Support for the Sexual Assault Centre (Hamilton and Area) to Receive Increased and Sustainable Provincial Funding (Item 11.1)

(Nann/Pauls)

WHEREAS, since 1975, the Sexual Assault Centre (Hamilton and Area) (SACHA) has provided advocacy and direct support for survivors of recent or historical sexual violence;

WHEREAS, the number of survivors needing access to crisis counselling and long-term counselling programs continues to increase year upon year;

WHEREAS, SACHA has provided abuse prevention education available for all residents in the City of Hamilton including school boards, universities, public institutions, not-for profit organizations, unions, and community groups, with increasing demands for workshops;

WHEREAS, ongoing underfunding of SACHA has reduced the number of resources available to provide these services due to highly specialized skill requirements that are unmatched by low wages and inadequate benefits relative to other mental health funded positions;

WHEREAS the current COVID-19 pandemic has resulted in a drastic increase in the number of people in the community requiring the services of SACHA; and

WHEREAS the Regional Municipality of Waterloo (June 22, 2022), the Council of the Corporation of the Town of Bracebridge (Dec 22, 2021; motion 21-GC-317), and the City of Kingston (August 9, 2022) have all passed resolutions calling on the provincial government to fulfill the 30% increase commitment announced in 2018 that has not been budgeted to date;

THEREFORE, BE IT RESOLVED:

That the Mayor, on behalf of Council, advocate to the provincial government to increase the base funding for the Sexual Assault Centre (Hamilton Area) (SACHA) by 30% to address current needs and plan for increases to enable sustainability, by writing a letter to Premier Doug Ford and Hon. Merrilee Fullerton, Minister of Children, Community, and Social Services, with copies to Members of Provincial Parliament representing Hamilton ridings and the Association of Municipalities of Ontario.

Result: Motion CARRIED by a vote of 3 to 0, as follows:

YES - Ward 3 Councillor Nrinder Nann
 ABSENT - Ward 4 Councillor Sam Merulla
 ABSENT - Ward 6 Councillor Tom Jackson
 YES - Ward 7 Councillor Esther Pauls
 YES - Chair - Ward 9 Councillor Brad Clark
 ABSENT - Ward 14 Councillor Terry Whitehead

3. Support for Ministry-Funded Essential Supports and Services Organizations in Hamilton (Added Item 13.1)

(Clark/Nann)

That the General Manager, Healthy and Safe Communities, and Housing Division staff be directed to work with organizations in Hamilton that provide essential supports and services that receive Violence Against Women funding from the Ministry of Children, Community and Social Services (Good Shepherd, Interval House, Mission Services and the Native Women's Centre) to meet with the Assistant Deputy Minister of Children, Community and Social Services in order to advocate to the Ministry to increase funding supports for these organizations.

Result: Motion CARRIED by a vote of 3 to 0, as follows:

YES - Ward 3 Councillor Nrinder Nann
 ABSENT - Ward 4 Councillor Sam Merulla
 ABSENT - Ward 6 Councillor Tom Jackson
 YES - Ward 7 Councillor Esther Pauls
 YES - Chair - Ward 9 Councillor Brad Clark
 ABSENT - Ward 14 Councillor Terry Whitehead

FOR INFORMATION:

(a) APPROVAL OF AGENDA (Item 2)

The Committee Clerk advised the following changes to the agenda:

6. DELEGATION REQUESTS

6.1 Sexual Assault Centre (Hamilton and Area), respecting Asking for City of Hamilton to endorse a resolution calling upon the Province of Ontario to provide increased and sustainable funding to local Sexual Assault Centre (SACHA) – for today's meeting

6.1(d) Miranda Jurilj - **WITHDRAWN**

6.1(f) Miriam Sager

(Nann/Pauls)

That the agenda for the September 22, 2022 Emergency and Community Services Committee meeting be approved, as amended.

Result: Motion CARRIED by a vote of 3 to 0, as follows:

YES - Ward 3 Councillor Nrinder Nann
ABSENT - Ward 4 Councillor Sam Merulla
ABSENT - Ward 6 Councillor Tom Jackson
YES - Ward 7 Councillor Esther Pauls
YES - Chair - Ward 9 Councillor Brad Clark
ABSENT - Ward 14 Councillor Terry Whitehead

(b) DECLARATIONS OF INTEREST (Item 3)

There were no declarations of interest.

(c) APPROVAL OF MINUTES OF PREVIOUS MEETING (Item 4)**(Nann/Pauls)**

That the Minutes of the August 11, 2022 meeting of the Emergency and Community Services Committee, be approved, as presented.

Result: Motion CARRIED by a vote of 3 to 0, as follows:

YES - Ward 3 Councillor Nrinder Nann
ABSENT - Ward 4 Councillor Sam Merulla
ABSENT - Ward 6 Councillor Tom Jackson
YES - Ward 7 Councillor Esther Pauls
YES - Chair - Ward 9 Councillor Brad Clark
ABSENT - Ward 14 Councillor Terry Whitehead

(d) COMMUNICATIONS (Item 5)**(Pauls/Nann)**

That the correspondence from David Steckham, respecting his resignation from the Hamilton Veterans Committee, be received.

Result: Motion CARRIED by a vote of 3 to 0, as follows:

YES - Ward 3 Councillor Nrinder Nann
ABSENT - Ward 4 Councillor Sam Merulla
ABSENT - Ward 6 Councillor Tom Jackson
YES - Ward 7 Councillor Esther Pauls
YES - Chair - Ward 9 Councillor Brad Clark
ABSENT - Ward 14 Councillor Terry Whitehead

(e) DELEGATION REQUESTS (Item 6)**(Nann/Pauls)**

That the following Delegation Requests, be approved, for today's meeting:

- (a) Sexual Assault Centre (Hamilton and Area) (SACHA), Asking for City of Hamilton to endorse a resolution calling upon the Province of Ontario to provide increased and sustainable funding to local Sexual Assault Centre (SACHA):
 - 1. Jessica Bonilla/Dampney (Item 6.1(a))
 - 2. Sabreina Dahab (Item 6.1(b))
 - 3. Maria Felix Miller (Item 6.1(c))
 - 4. Sarah Adjekum (Item 6.1(e))
 - 5. Miriam Sager (Added Item 6.1(f))

Result: Motion CARRIED by a vote of 3 to 0, as follows:

YES - Ward 3 Councillor Nrinder Nann
ABSENT - Ward 4 Councillor Sam Merulla
ABSENT - Ward 6 Councillor Tom Jackson
YES - Ward 7 Councillor Esther Pauls
YES - Chair - Ward 9 Councillor Brad Clark
ABSENT - Ward 14 Councillor Terry Whitehead

(f) CONSENT ITEMS (Item 7)**(Pauls/Nann)**

That the following Advisory Committee Minutes, be received:

- (a) Hamilton Veterans Committee (Item 7.1(a))
 - 1. April 27, 2021 (Item 7.1(a)(a))
 - 2. May 25, 2021 (Item 7.1(a)(b))
 - 3. June 29, 2021 (Item 7.1(a)(c))
 - 4. July 27, 2021 (Item 7.1(a)(d))
 - 5. September 28, 2021 (Item 7.1(a)(e))
 - 6. October 26, 2021 (Item 7.1(a)(f))
 - 7. November 30, 2021 (Item 7.1(a)(g))

8. February 22, 2022 (Item 7.1(a)(h))
 9. March 29, 2022 (Item 7.1(a)(i))
 10. April 26, 2022 (Item 7.1(a)(j))
 11. May 31, 2022 (Item 7.1(a)(k))
- (b) Seniors Advisory Committee (Item 7.1(b))
1. June 3, 2022 (Item 7.1(b)(a))

Result: Motion CARRIED by a vote of 3 to 0, as follows:

YES - Ward 3 Councillor Nrinder Nann
 ABSENT - Ward 4 Councillor Sam Merulla
 ABSENT - Ward 6 Councillor Tom Jackson
 YES - Ward 7 Councillor Esther Pauls
 YES - Chair - Ward 9 Councillor Brad Clark
 ABSENT - Ward 14 Councillor Terry Whitehead

(g) PUBLIC HEARINGS / DELEGATIONS (Item 9)

(i) Sexual Assault Centre (Hamilton and Area) (SACHA), Asking for City of Hamilton to endorse a resolution calling upon the Province of Ontario to provide increased and sustainable funding to local Sexual Assault Centre (SACHA) (Added Item 9.1)

1. Jessica Bonilla-Dampney (Added Item 9.1 (a))

Jessica Bonilla-Dampney addressed Committee respecting Asking for City of Hamilton to endorse a resolution calling upon the Province of Ontario to provide increased and sustainable funding to local Sexual Assault Centre (SACHA).

2. Sabreina Dahab – Video Delegation (Added Item 9.1 (b))

Sabreina Dahab addressed Committee by pre-recorded video, respecting Asking for City of Hamilton to endorse a resolution calling upon the Province of Ontario to provide increased and sustainable funding to local Sexual Assault Centre (SACHA).

3. Maria Felix Miller (Added Item 9.1 (c))

Maria Felix Miller addressed Committee respecting Asking for City of Hamilton to endorse a resolution calling upon the Province of Ontario to provide increased and sustainable funding to local Sexual Assault Centre (SACHA).

4. Sarah Adjekum (Added Item 9.1 (d))

Sarah Adjekum addressed Committee respecting Asking for City of Hamilton to endorse a resolution calling upon the Province of Ontario to provide increased and sustainable funding to local Sexual Assault Centre (SACHA).

5. Miriam Sager (Added Item 9.1 (e))

Miriam Sager addressed Committee respecting Asking for City of Hamilton to endorse a resolution calling upon the Province of Ontario to provide increased and sustainable funding to local Sexual Assault Centre (SACHA).

(Nann/Pauls)

That the following Delegations, be received, and referred to the consideration of Item 10.1, Sexual Assault Centre (Hamilton and Area) (SACHA), Asking for City of Hamilton to endorse a resolution calling upon the Province of Ontario to provide increased and sustainable funding to local Sexual Assault Centre (SACHA):

1. Jessica Bonilla-Dampthey (Added Item 9.1(a))
2. Sabreina Dahab (Added Item 9.1(b))
3. Maria Felix Miller (Added Item 9.1(c))
4. Sarah Adjekum (Added Item 9.1(d))
5. Miriam Sager (Added Item 9.1(e))

Result: Motion CARRIED by a vote of 3 to 0, as follows:

YES - Ward 3 Councillor Nrinder Nann
 ABSENT - Ward 4 Councillor Sam Merulla
 ABSENT - Ward 6 Councillor Tom Jackson
 YES - Ward 7 Councillor Esther Pauls
 YES - Chair - Ward 9 Councillor Brad Clark
 ABSENT - Ward 14 Councillor Terry Whitehead

For further disposition of this matter, refer to Item 2.

(h) ADJOURNMENT (Item 15)

(Pauls/Clark)

That there being no further business, the Emergency and Community Services Committee be adjourned at 2:52 p.m.

Result: Motion CARRIED by a vote of 3 to 0, as follows:

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YES - Chair - Ward 3 Councillor Nrinder Nann
ABSENT - Ward 4 Councillor Sam Merulla
ABSENT - Ward 6 Councillor Tom Jackson
YES - Ward 7 Councillor Esther Pauls
YES - Ward 9 Councillor Brad Clark
ABSENT - Ward 14 Councillor Terry Whitehead

Respectfully submitted,

Councillor B. Clark
Chair, Emergency and Community Services
Committee

Tamara Bates
Legislative Coordinator
Office of the City Clerk

Bates, Tamara

Subject: FW: Webform submission from: Request to Speak to a Committee of Council

Submitted on Tue, 11/01/2022 - 16:35

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee
Emergency & Community Services Committee

Will you be delegating in-person or virtually?
In-person

Will you be delegating via a pre-recorded video?
No

Requestor Information

Requestor Information
Medora Uppal
YWCA Hamilton
75 MacNab Street South
Hamilton, Ontario. L8P3C1
muppal@ywcahamilton.org

Preferred Pronoun
she/her

Reason(s) for delegation request
YWCA Hamilton -- addressing housing an homelessness for women and gender diverse people

Will you be requesting funds from the City?
Yes

Will you be submitting a formal presentation?
Yes

Bates, Tamara

Subject: FW: Webform submission from: Request to Speak to a Committee of Council

Submitted on Thu, 11/10/2022 - 16:06

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee
Emergency & Community Services Committee

Will you be delegating in-person or virtually?
In-person

Will you be delegating via a pre-recorded video?
No

Requestor Information

Requestor Information
Julia Kollek
Hamilton Alliance for Tiny Shelters
HAMILTON, Ontario.

Preferred Pronoun
she/her

Reason(s) for delegation request
Presentation requesting ~~foundational funding~~ **capital as well as operational funding spread over 3-years** for our program to provide tiny, warm cabins for those experiencing homelessness in our city.

Will you be requesting funds from the City?
Yes

Will you be submitting a formal presentation?
Yes

Bates, Tamara

Subject: FW: Webform submission from: Request to Speak to a Committee of Council

Submitted on Wed, 11/16/2022 - 14:18

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee
Emergency & Community Services Committee

Will you be delegating in-person or virtually?
In-person

Will you be delegating via a pre-recorded video?
No

Requestor Information

Requestor Information
Heather McLean
Hamilton Jewish Family Services
30 King Street East
Dundas, Ontario. L9H 5G6
ed@hamiltonjfs.ca
9056279922

Preferred Pronoun
she/her

Reason(s) for delegation request
Attending in support of Hamilton Alliance for Tiny Shelters

Will you be requesting funds from the City?
No

Will you be submitting a formal presentation?
No

Bates, Tamara

Subject: FW: Webform submission from: Request to Speak to a Committee of Council

Submitted on Tue, 11/22/2022 - 11:03

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee
Emergency & Community Services Committee

Will you be delegating in-person or virtually?
In-person

Will you be delegating via a pre-recorded video?
No

Requestor Information

Requestor Information
Daniel A Bednis
HATS - Hamilton Alliance for Tiny Shelters
Carlisle, ON

Preferred Pronoun
he/him

Reason(s) for delegation request
To present HATS budget inclusive of new request for funding of the Hamilton Tiny Shelters program.
I will be presenting with Julia Kollek and Don Seymore

Will you be requesting funds from the City?
Yes

Will you be submitting a formal presentation?
Yes

Bates, Tamara

Subject: FW: Webform submission from: Request to Speak to a Committee of Council

Submitted on Tue, 11/22/2022 - 11:07

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee
Emergency & Community Services Committee

Will you be delegating in-person or virtually?
In-person

Will you be delegating via a pre-recorded video?
No

Requestor Information

Requestor Information
Don Seymour
Wesley
52 Catharine
Hamilton, Ontario. l8r1j1
don.seymour@wesley.ca

Preferred Pronoun
he/him

Reason(s) for delegation request
To support HATS request for funding.

Will you be requesting funds from the City?
No

Will you be submitting a formal presentation?
No

Bates, Tamara

Subject: FW: Webform submission from: Request to Speak to a Committee of Council

Submitted on Thu, 11/24/2022 - 08:11

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee
Emergency & Community Services Committee

Will you be delegating in-person or virtually?
In-person

Will you be delegating via a pre-recorded video?
No

Requestor Information

Requestor Information
Brenda Duke
Gibson and Landsdale Area (GALA) Community Planning Team
Hamilton, Ontario

Preferred Pronoun
she/her

Reason(s) for delegation request
To speak to the committee regarding The Hamilton Alliance for Tiny Shelters (HATS) on December 1, 2022

Will you be requesting funds from the City?
No

Will you be submitting a formal presentation?
No

Bates, Tamara

Subject: FW: Webform submission from: Request to Speak to a Committee of Council

Submitted on Sun, 11/27/2022 - 14:49

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee
Emergency & Community Services Committee

Will you be delegating in-person or virtually?
In-person

Will you be delegating via a pre-recorded video?
No

Requestor Information

Requestor Information
Scott Gervais
Hamilton, Ontario

Preferred Pronoun
he/him

Reason(s) for delegation request
Would like to speak regarding the HATS application

Will you be requesting funds from the City?
No

Will you be submitting a formal presentation?
No

Bates, Tamara

Subject: FW: Webform submission from: Request to Speak to a Committee of Council

Submitted on Mon, 11/28/2022 - 13:45

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee
Emergency & Community Services Committee

Will you be delegating in-person or virtually?
In-person

Will you be delegating via a pre-recorded video?
No

Requestor Information

Requestor Information
Madeleine "Mandi" Ann Lowthian Smith
We Are Ward 3 Too!
Hamilton , On.

Preferred Pronoun
she/her

Reason(s) for delegation request
~~Speaker/part of the presentation scheduled for Dec 1/22~~ **Hamilton Alliance for Tiny Shelters Initiative**

Will you be requesting funds from the City?
No

Will you be submitting a formal presentation?
Yes

Bates, Tamara

Subject: FW: Webform submission from: Request to Speak to a Committee of Council

Submitted on Mon, 11/28/2022 - 21:09

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee
Emergency & Community Services Committee

Will you be delegating in-person or virtually?
In-person

Will you be delegating via a pre-recorded video?
No

Requestor Information

Requestor Information
Michael Pasquali
Hamilton , Ontario

Preferred Pronoun
he/him

Reason(s) for delegation request
I would like to have a voice in the ***Hamilton Alliance for Tiny Shelters*** funding decisions made in our ward.

Will you be requesting funds from the City?
No

Will you be submitting a formal presentation?
No

Bates, Tamara

Subject: FW: Webform submission from: Request to Speak to a Committee of Council

Submitted on Mon, 11/28/2022 - 20:07

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee
Emergency & Community Services Committee

Will you be delegating in-person or virtually?
In-person

Will you be delegating via a pre-recorded video?
No

Requestor Information

Requestor Information
Marianne McNanny
Private citizen and homeowner of Ward 3
Hamilton , Ontario

Preferred Pronoun
she/her

Reason(s) for delegation request
I would like to talk about the proposed safe and stable shelters which the Hamilton Alliance of Tiny Shelters (HATS) would like to see come to fruition at 647 Barton Street East.

Will you be requesting funds from the City?
No

Will you be submitting a formal presentation?
No

Bates, Tamara

Subject: FW: Webform submission from: Request to Speak to a Committee of Council

Submitted on Mon, 11/28/2022 - 19:33

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee
Emergency & Community Services Committee

Will you be delegating in-person or virtually?
In-person

Will you be delegating via a pre-recorded video?
No

Requestor Information

Requestor Information
Amber Ross
Hamilton, Ontario

Preferred Pronoun
she/her

Reason(s) for delegation request
In support of the Hamilton Alliance for Tiny Shelters program.

Will you be requesting funds from the City?
No

Will you be submitting a formal presentation?
No

Bates, Tamara

Subject: FW: Webform submission from: Request to Speak to a Committee of Council

Submitted on Tue, 11/29/2022 - 16:04

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee
Emergency & Community Services Committee

Will you be delegating in-person or virtually?
In-person

Will you be delegating via a pre-recorded video?
No

Requestor Information

Requestor Information
Tanya Clemente
Hamilton , Ontario

Preferred Pronoun
she/her

Reason(s) for delegation request
HATS

Will you be requesting funds from the City?
No

Will you be submitting a formal presentation?
No

Bates, Tamara

Subject: FW: Webform submission from: Request to Speak to a Committee of Council

Submitted on Mon, 11/28/2022 - 17:42

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee
Emergency & Community Services Committee

Will you be delegating in-person or virtually?
In-person

Will you be delegating via a pre-recorded video?
No

Requestor Information

Requestor Information
Jean L. Fair
Hamilton, Ontario

Reason(s) for delegation request
The totally selfish act of putting so many social services in Ward 3 when the problems are spread throughout the city to varying degrees. I speak about Mission Services and our community; we deserve much better treatment from city hall and the rest of this city.

Will you be requesting funds from the City?
No

Will you be submitting a formal presentation?
No



EMERGENCY AND COMMUNITY SERVICES COMMITTEE

Presentation by

Seniors Advisory Committee

December 1, 2022

2022 Seniors Advisory Committee (SAC)

Mission and Membership

- SAC is a credible communication vehicle regarding the quality of life for all seniors in the City of Hamilton.
- SAC provides a forum for consumers and deliverers of seniors' services and facilitates to identify issues, explore possible remedies, and work to implement them.
- Membership is comprised of up to 19 members and currently SAC has a full compliment of members.
- Members have a variety of backgrounds and interests.

2022 Monthly Meeting Activity

Quorum

- Reached quorum at all monthly meetings

Attendance

- Average of 15 members at each meeting

Delegations/Presentations

- Received 10 in total

Citizen Committee Reports

- Submitted 5 to Emergency and Community Services Committee

Age-Friendly Hamilton

- SAC is a full partner with the City of Hamilton and the Hamilton Council on Aging in the development, governance and implementation of Hamilton's Plan for an Age-Friendly Community (2021-2026) and Hamilton's Plan for an Age-Friendly City (2014-2019).
- SAC has member representation on both the Age-Friendly Collaborative Committee (AFCC) and Age-Friendly Governance Committee (AFGC).

Working Groups and Committees

- SAC has 4 active working groups that are aligned with the objectives of Hamilton's Age-Friendly Plan:
 - ✓ Communications
 - ✓ Elder Abuse
 - ✓ Housing
 - ✓ Getting Around Hamilton
- SAC also has membership on several external committees/groups, including Vision Zero, Our Future Hamilton, McMaster Institute for Research on Aging, Ontario Health Coalition, Senior of the Year Awards, International Day of Older Persons and the Seniors Kick-off event.

Achievements

- **Heat Mitigation-** Research on global heat mitigation strategies and local by-laws, as well as the submission of a Citizen Committee Report to E&CS Committee which included recommendations.
- **City's New Website-** Feedback submitted to the City's Communications and Web staff with suggestions for improvement. i.e. Homepage has a direct link to landing page with seniors' resources, larger font size, easier to navigate site and landing page.
- **Working Groups-** Chairs of all working groups attended various Age-Friendly Collaborative Committee meetings to present on achievements from their prospective working group.

Additional Achievements

- **Elder Abuse-** Collaborated with Hamilton Police Services' (HPS) Seniors Support Officer to provide more information on elder abuse on HPS' website.
- **Secondary Dwelling Units-** supported this concept for lots designated for single family homes.
- **Brochure and Banner-** Developed a promotional brochure and banner for engagement events with seniors.
- **Events-** Participated in the Seniors Kick-off, International Day of Older Persons, Seniors Awards and Advisory Committee for Persons with Disabilities' (ACPD) Accessibility Fair.
- **Support-** provided funding support for the Seniors Kick-off, International Day of Older Persons and Seniors Awards.

Contacts

Penelope Petrie

Chair, Seniors Advisory Committee

Lisa Maychak

Staff Liaison, Seniors Advisory Committee

Project Manager, Age-Friendly City

City of Hamilton

Lisa.Maychak@hamilton.ca



QUESTIONS?





Hamilton

THANK YOU



Hamilton

INFORMATION REPORT

TO:	Chair and Members Emergency and Community Services Committee
COMMITTEE DATE:	December 1, 2022
SUBJECT/REPORT NO:	Housing Sustainability and Investment Roadmap Update (HSC22053/FCS22087/PED22212) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Patrick Byrne (905) 546-2424 Ext. 2903 James O'Brien (905) 546-2424 Ext. 3728
SUBMITTED BY:	Angie Burden General Manager Healthy and Safe Communities Department
SIGNATURE:	
SUBMITTED BY:	Jason Thorne General Manager Planning and Economic Development Department
SIGNATURE:	
SUBMITTED BY:	Mike Zegarac General Manager Finance and Corporate Services Department
SIGNATURE:	

COUNCIL DIRECTION

Emergency and Community Services Committee at its meeting of August 11, 2022 approved the recommendation report "Housing Sustainability and Investment Plan" (HSC22042) which endorsed the initiative and included the direction to report quarterly on prioritized actions underway and overall plan progress.

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OUR Culture: Collective Ownership, Steadfast Integrity, Courageous Change, Sensational Service, Engaged Empowered Employees.

**SUBJECT: Housing Sustainability and Investment Roadmap Update
(HSC22053/FCS22087/PED22212) (City Wide) - Page 2 of 6**

INFORMATION**Executive Summary**

This report provides an update on the progress of the Housing Sustainability and Investment Roadmap (HSIR)¹. The Roadmap is a “whole of community, whole of City government” approach designed to respond to new and growing pressures along the housing continuum to deliver best possible affordable housing outcomes for Hamiltonians. The work builds on the Housing and Homelessness Action Plan and recognizes the urgent need for a prioritization framework and change in how the City and community partners work together to identify and deliver on shared affordable housing goals. The roadmap will focus on four pillars of affordable housing: acquisition, new development, maintaining current supply of existing units and supports to keep people housed. Since Council endorsement of the concept in August 2022, the HSIR project charter has been completed and an executive summary is attached as appendix A. City divisions are working to identify and prioritize actions for the roadmap and through Hamilton’s CityLAB fall Semester in Residence program, students are engaging stakeholders from various sectors as a first phase of understanding challenges, opportunities, and initiatives underway in the community. The City has engaged the Canadian Housing Evidence Collaborative (CHEC) for advice and consultant expertise on the HSIR development. Development of the roadmap and the implementation of prioritized near-term actions will continue through Q1 2023. The final roadmap will be brought to Council for endorsement. Implementation will continue and progress reported throughout 2023 and 2024.

Background

Following strategic discussions in May and June 2022 among the City’s Senior Leadership Team, and several city division focus groups and conversations with key stakeholders from Hamilton Anchor Institutions, Hamilton is Home (not-for-profit affordable housing coalition) and the Coalition of Hamilton Indigenous Leaders, (HSC22042) City Council gave direction to initiate a whole of community, corporation-wide, community stakeholder approach to develop a Housing Sustainability and Investment Roadmap (HSIR) in response to the current housing crisis.

The Project Charter and work on the roadmap to date has been developed by a core team across city divisions that represent Planning and Economic Development, Finance and Corporate Services, and Healthy and Safe Communities departments, with advice and input from the Canadian Housing Evidence Collaborative and their academic team, as well as the Hamilton Community Foundation and CityLAB to ensure community

¹ Note the change of language from ‘Plan’ to ‘Roadmap’ in this report. The change reflects the intention of an action-oriented tactical roadmap that will deliver specific and quantifiable outcomes.

**SUBJECT: Housing Sustainability and Investment Roadmap Update
(HSC22053/FCS22087/PED22212) (City Wide) - Page 3 of 6**

perspective in this early phase of development. We have sought input on the approach from a wide variety of stakeholders, including a number of anchor institutions across sectors. The City already participated – with the support of a number of anchor institutions – on a proposal regarding needs for High Acuity Several Supportive Housing. For HSIR, we have again engaged the CEO-level leaders of a number of anchor institutions, and several have already indicated to us that they are willing to participate cross-sectoral action and collaboration on a broader set of affordable housing actions with the City. We expect to garner more support, especially as we work with community partners to finalize specific actions that will be prioritized in the HSIR.

Through the CityLAB Hamilton Fall 2022 Semester in Residence program, students are contributing to the development of the roadmap and are engaging with community sector stakeholders to identify and explore key issues related to affordable housing in support of the whole of community approach.

Canadian Housing Evidence Collaborative (CHEC)

The mission of the Canadian Housing Evidence Collaborative (CHEC – www.chec-ccrl.ca) is to accelerate evidence-based solutions that advance Canada’s National Housing Strategy to ensure every Canadian has “housing that meets their needs and that they can afford”. Housed at McMaster University, CHEC acts as a key liaison between the leading network of housing researchers in Canada and the Canada Mortgage and Housing Corporation, and a trusted, independent voice for evidence-informed housing policy in Canada. CHEC brings together a network of more than 30 academics from across Canada and beyond who are engaged in independent, in-depth research exploring connections between housing and other policies, community organization and government action, and the full diversity of households and people in Canada. Partners include more than 50 organizations representing some 2,000 policymakers, housing providers and equity-seeking groups committed to growing Canada’s supply of safe, adequate, accessible and affordable housing. Led by its Director, Dr. Jim Dunn, an expert in housing, inequality and health, and Steve Pomeroy, Executive Advisor to CHEC, CHEC acts as a research hub focused on knowledge mobilization and capacity building for all areas of housing research in Canada. CHEC brings innovative concepts, rigorous data and research, and practical co-production of knowledge to bear on the most challenging housing problems Canada faces.

CityLAB Hamilton

CityLAB Hamilton is a partnership between the City, McMaster University, Mohawk College, and Redeemer University that builds relationships and matches projects between City staff, students, and faculty to help meet the City’s Strategic Priorities. The CityLAB Semester in Residence is a level 4, 15-unit course designed for passionate, motivated, and enthusiastic students from McMaster and Redeemer that

**SUBJECT: Housing Sustainability and Investment Roadmap Update
(HSC22053/FCS22087/PED22212) (City Wide) - Page 4 of 6**

leverages challenges faced by the City and integrates them into the experiential learning coursework. With a focus on community engagement, the course offers support to facilitating dialogue related to complex problems and multi-stakeholder engagements.

Scope

The scope of the project is affordable housing, including rental housing with a focus on below-market, affordable, social, non-market, public and subsidized housing, whether units are purpose-built rental or secondary use. The scope also includes below-market priced ownership housing (including mortgage-assisted, income-restricted, in both the public and non-market sectors). Excluded is luxury above-market rental housing and non affordable ownership housing.

The broadest definition of affordable housing is being used to scope the HSIR as per the August 8th report to Council (HSC22051 / PED22183) will include housing forms and tenures that are within the parameters of that report.

The roadmap will be focused on four areas:

1. New development of affordable housing
2. Acquisition of affordable housing
3. Maintaining the supply of currently affordable housing
4. Supports to keep people housed.

The HSIR requires commitment to action by both the City and Community to engage about the different levers that impact affordable housing and the 4 areas of focus for the roadmap. As informed by internal and external stakeholders, and through the work of the core team, city policies and processes will be reviewed and opportunities identified and implemented. As the work broadens and deepens to include a “whole of community approach”, potential levers available to Community stakeholders will be identified and community sectors will be provided opportunity to participate in a shared vision and commit to actionable changes to create more affordable housing and maintain the current supply in the Hamilton community.

Project Objectives

The roadmap will address the following five objectives:

1. Create an evidence-based assessment and gap analysis of the best options and the best mix of action for supporting the creation of new affordable housing,

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**SUBJECT: Housing Sustainability and Investment Roadmap Update
(HSC22053/FCS22087/PED22212) (City Wide) - Page 5 of 6**

acquiring and retaining existing affordable housing, and delivering appropriate supports. This approach will involve urgent action within the City and with external partners, and account for the multiple, complex pressures on housing affordability (e.g., financialization, gentrification, etc).

2. Initiate, strengthen, and modify City processes to maximize opportunities, remove barriers, improve responsiveness and timeliness, within and across divisions related to affordable housing construction, acquisition, and retention.
3. Identify levers available to community sectors, and encourage contributions and commitments where appropriate and possible to ensure best possible outcomes, including the alignment of community and City initiatives and efforts to ensure best possible outcomes along the continuum to maximize impact.
4. Develop tools and frameworks to help funders and investors understand where to invest their resources for maximum impact. This includes City investment, and investment by other sectors, including private and philanthropic.
5. Develop and strengthen coordination of efforts and relationships between City and Community and upper levels of government.

Governance

Critical to a successful whole of community, whole of city government approach, will be a governance model that effectively aligns existing work in the community and in City government. A governance model for implementation is under development through the advice of CHEC and community stakeholders and will be presented as a deliverable in the final roadmap. Central to the new governance model, a Housing Secretariat will be established, comprised of city and community representatives. Recruitment for a temporary Director of Housing Secretariat will be underway in December 2022, responsible for the mandate to lead this work through a “whole of city, whole of community approach”. This director will lead the final development of the roadmap and implementation of the HSIR. A broad community advisory is also required, and planning is underway regarding how to best convene a representative membership and terms of reference that would ensure success.

Community Sectors

Community sectors identified as influencers of affordable housing and engaged as critical partners as part of the whole of community approach include development sector and private industry, education (boards of education and higher education/academic institutions), landlords, including the Federation of Rental Housing Providers in Ontario,

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**SUBJECT: Housing Sustainability and Investment Roadmap Update
(HSC22053/FCS22087/PED22212) (City Wide) - Page 6 of 6**

Philanthropy, Healthcare, non-profit housing providers and operators, housing advocates, upper levels of government and individuals with lived experience.

CityLAB Hamilton – Semester in Residence Fall 2022 Progress Update

Over the Course of the 2022 Fall Semester, CityLAB Hamilton’s Semester in Residence Program has worked in close collaboration with the project core team to conduct public engagement and explore key issues along the housing continuum. The program’s 30 students and 3 instructors have completed 4290 hours in direct support of the development of the HSIR. The below contributions from CityLAB will help to inform the creation of the HSIR as it moves into the next phase:

- **surfaced and summarized user-identified challenges or barriers** with a particular focus on equity deserving groups and residents most impacted by the housing crisis. Students reviewed data and demographics of specific populations and produced journey maps for how each would navigate the housing system including possible solutions to the challenges they face.
- **identified innovative approaches to policy, process, or service models for housing** that both reflect Hamilton-based challenges and innovative municipal models provincially, federally, and globally
- **provided opportunity for City staff and community leaders to share their knowledge, learn from and with each other, and co-design possible models for future collaboration** in pursuit of shared goals. Each of six teams planned and facilitated a dialogue conversation with a different groups of stakeholders.
- **provided rapid research to identify short- medium- and long-term actions to complex problems** identified within the City’s internal asset mapping process over summer 2022 that reflect insights from both community leaders and residents with lived experience.
- **hosted drop-in Lunch and Learns** including a screening of the TVO documentary “Priced Out: Canada’s Rental Crisis”

This work included a final report, infographic, 3 minute video presentation and a transition report, which will feed into and inform the development of the HSIR. Results will be shared with the HSIR core team and Secretariat. CityLAB will foster continuation of the work through other course projects as appropriate in the Winter 2023 semester.

APPENDICES AND SCHEDULES ATTACHED

Appendix “A” to Report HSC22053/FCS22087/PED22212 - Executive Project Charter



Project Charter

1. General Information			
Project Name	Housing Sustainability and Investment Roadmap Executive Charter		
Location of Project	City-Wide		
Project Type	City Initiative/Whole of Community Approach	Ward(s)	All
Project Start Date	Initiated August (HSC22042)	Acct/Project ID	N/A
Charter Prepared by	James O'Brien	Date (YYYY/MM/DD)	Nov 7th, 2022

1.0 Project Background

The conditions of the housing market in Hamilton have changed markedly over the past decade. These changes have included significant price increases in new and resale homes, and similar cost increases in average rents across the region. Hamilton has even been identified as the third *least affordable city* in Canada in which to live. Of particular concern is housing (ownership and rental) for people with moderate and low incomes, and resulting movement of individuals into emergency and shelter systems as unaffordability continues across the housing continuum. To response to this changed and changing landscape, the City's strategic plans for affordable housing issues (e.g. Keys to the Home, Housing and Homelessness Action Plan) require additional detail, concrete tactics, bold new ideas and ready-to-implement strategies to address the current reality and the resulting pressure on Hamilton's citizens.

Following strategic discussions among the City's Senior Leadership Team, and staff-initiated conversations with City division focus groups, key community stakeholders from Hamilton anchor institutions across sectors, Hamilton is Home (not-for-profit housing umbrella group) and the Coalition of Hamilton Indigenous Leaders, (HSC22042) City Council gave direction to initiate a City-wide and whole of community, approach to develop a Housing Sustainability and Investment Roadmap (HSIR) in response to the current housing crisis, with the goal of positioning Hamilton in the best way possible to deliver on affordable housing outcomes.

2.0 Project Description

This initiative will focus on the urgent action needed to accelerate and coordinate current activities related to construction, acquisition, and retention of affordable housing units, as well as the increased provision of housing-based supports to ensure successful tenancies in affordable housing. Actions will focus both on opportunities within the City and with community organizations working in sectors whose contributions and commitments are required for successful housing outcomes.

3.0 Scope of Project

The scope of HSIR will include affordable housing forms and tenures that meet the definitions in the August 8th report to GIC¹ and the August 11th communication update to Council provided by the City's Chief Planner.

4.0 Guiding Principles

¹ [GIC report](#)



Project Charter

- We acknowledge and respect that the City and each community sector has a different role and opportunities to contribute to improved outcomes related to affordable housing.
- We will be action-oriented and focus on immediate and near-term actions while at the same time building a short- to long-term roadmap that enables us to quantify deliverables to measure our success.
- We will use this initiative to better leverage our collective efforts in order to optimize resources, investments and outcomes.
- The Project plan will include ways to better integrate and execute work that is underway and planned, and also bold new ideas.
- We will hold each other accountable to working differently, have honest conversations and be courageous about change that is needed.
- Each sector may need to make decisions that others do not agree with. While we will strive for shared vision, appropriate contributions and commitments, this is not work by consensus. –Leaders and governing bodies hold ultimate decision-making for their own organizations.
- We will use this process to build capacity in individuals and teams so we have increased expertise in the various components and functions required to create and maintain affordable housing.
- This initiative is not intended to create additional workload for teams, but will focus on prioritizing actions, and changing way we do our work.

Project Objectives

1. Create an evidence-based assessment and gap analysis of the best options and the best mix of action for supporting the creation of new affordable housing, acquiring and retaining existing affordable housing, and delivering appropriate supports. This approach will involve urgent action within the City and with external partners, and account for the multiple, complex pressures on housing affordability (e.g., financialization, gentrification, etc).
2. Initiate, strengthen, and modify City processes to maximize opportunities, remove barriers, improve responsiveness and timeliness, within and across divisions related to affordable housing construction, acquisition, and retention.
3. Identify levers available to community sectors, and encourage contributions and commitments where appropriate and possible to ensure best possible outcomes, including the alignment of community and City initiatives and efforts to ensure best possible outcomes along the continuum to maximize impact.
4. Develop tools and frameworks to help funders and investors understand where to invest their resources for maximum impact. This includes City investment, and investment by other sectors, including private and philanthropic.
5. Develop and strengthen coordination of efforts and relationships between City and Community and include actions to influence upper levels of government.

5.0 Project Deliverables

Project Charter

Development of a shared understanding and vision for how affordable housing supply can be influenced and change implemented among sector leaders.

Major Deliverable	Description & Products or Deliverables
<p>1. Report findings of the housing “eco-system” in Hamilton.</p>	<p>Brief research and analysis aimed at understanding the housing crisis in Hamilton including challenges and opportunities for the demand and supply and the levers each sector has to impact the continuum.</p> <p>1.1 Inventory existing social and community housing units.</p> <p>1.2 Profile of existing affordable units within the private market and affordability of new units being produced by private market.</p> <p>1.3 Comparison of current and future demand against supply and identification of gaps/needs</p> <p>1.4 Inventory of existing municipal tools that support housing development and a complete environmental scan to identify what other jurisdictions are doing that might be relevant to Hamilton</p> <p>1.5 Financial analysis of the impact on the Housing eco-system of changing economic conditions including fluctuations in interest rates, inflation and supply chain challenges and resulting considerations and recommendations for maximizing investment and co-investment from municipalities and other sectors.</p>
<p>2. Housing Sustainability and Investment Roadmap</p>	<p>A Roadmap that centres on an evidence-based assessment of the best options and the best mix of action for supporting the creation of new affordable housing, acquiring and retaining existing affordable housing, and delivering appropriate supports: This will include:</p> <ol style="list-style-type: none"> a. Decision-making framework including values, prioritization, and an opportunity cost lens. b. Specific details on how many new units need to be created for different groups within the population c. Community Housing Retention Strategy – including costing and program tools d. Affordable private market retention strategy – including costing and program tools e. Strategy for development of new community housing

Project Charter

	<ul style="list-style-type: none"> f. Including statement of number of units, tenure, unit size, location including costing and program tools: g. Municipal Finance strategy h. Non-financial impacts to housing development analysis i. Identification of levers by sector, potential contributions and commitments that will create a whole of community approach and maximize outcomes along Hamilton's affordable housing continuum
3. Communication and Engagement Plan	Create a communication and engagement plan that informs the development and implementation of the HSIR. This work includes public launch, will ensure transparency of process and content, regular reports to Committee and Council, engage the partners identified by sector, upper levels of government, people with lived experience, and the broader community.
4. Governance model for implementation of roadmap	<p>4.1 Creation of City division and Community Governance structure, including Affordable Housing Secretariat and Secretariat Director and appropriate team that spans City government and community sectors</p> <p>4.2 terms of reference for decision making and levels of influence for each area.</p> <p>Governance model should outline interaction of city staff tables with external sector groups. Roles and responsibilities document highlights areas of decision making and vision roles for secretariat, advisory think tank, and other created groups as well as structures to ensure integration of efforts across City divisions and encourage alignment across community stakeholders with respect to initiatives underway, new opportunities identified and implemented.</p>

6.0 Assumptions, dependencies, Drivers, Constraints, and/or Risks**Key Driver:**

- Urgency about the current housing crisis in Hamilton
- Need for a systematic approach towards creating and maintaining affordable housing that is responsive to new and changing landscape.
- Need for quantifiable tactics to ensure that we have a way to measure our progress towards visionary and aspirational documents
- Scarcity of city/municipal resources - Need to ensure all resources that are invested efficiently in affordable housing – used to best possible outcomes

Project Charter

- Housing is a high priority for many sectors – the City and many community partners are asking how they can best use their resources (time, money, assets, etc.) to support affordable housing in Hamilton.
- Need for integrated and aligned efforts to solve complex challenges

Key Assumptions:

- That Housing will be a Term of Council Priority for the newly elected Council.
- That Council will prioritise Investing in Affordable Housing for the social, political and economic benefits that it brings for City residents
- That senior leadership within City Government and community sectors are in support of efforts to address Hamilton's housing crisis through the development and implementation of a Housing Sustainability and Investment Roadmap
- That the required resources will be made available for implementation of tactics associated with the Roadmap
- That through consultations with the community stakeholders, sufficient information will be received to support the development of the roadmap and updates
- That developing a whole of community approach will facilitate better conversations with upper levels of government related to Hamilton's need and assistance required at the provincial and federal level
- That partnerships and collaboration with local, provincial and federal stakeholders will be strengthened through this process.

Risks:

- Discussions and comments from stakeholders may exceed the relatively narrow scope of the Roadmap.
- The current housing market volatility including high interest rates and inflation may overly influence responses during the profile development
- HSIR leadership is not successful in engaging stakeholders to embrace the Roadmap as a shared vision

Constraints:

- There is a short timeline for completing the project, and constraints on staff capacity
- Financial constraints



HOUSING SUSTAINABILITY AND INVESTMENT ROADMAP

Emergency and Community Services

December 1, 2022

James O'Brien, Manager – Housing Sustainability and Investment Roadmap, Housing Services

Lucas Holler – McMaster University, Student

Rhea Saini – McMaster University, Student

Hamilton's Housing Crisis

2016 to 2021
41%
Rental price increase

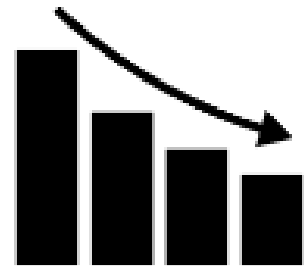


22%
increase in incomes



2016: renter needed \$25,600 annual income to afford average 1-bedroom unit
2021: renter needed \$48,000 annual income to afford average 1-bedroom unit

Rising rents, stagnating flow through housing continuum due to Unattainable homeownership increases demand/pressure on affordable rental housing market



Hamilton's Housing Crisis

As a service manager the City of Hamilton has a decreasing return on the dollars invested and dollars leveraged from other levels of government into the local housing system due to inflationary impacts including substantial rise in building, real state costs, and construction costs. In addition to ongoing increasing maintenance of current system.

Between 2019 and 2022 \$605M invested Hamilton's housing and homelessness system. Municipal investment funding almost half of the budget at nearly \$264 (Provincial \$193M; Federal contribution \$148M). Municipal investment increased by 45% since 2019

**Over \$500 million is needed to protect current social housing by 2032
Additional and improved investments, tools and initiatives, and
innovations are required**



Housing Roadmap

“The Roadmap will focus on short term strategies, tactics and concrete actions that can be undertaken immediately, while working towards mid-to long-term strategies... as well as current and new investments...”

BASED ON 4 PILLARS:

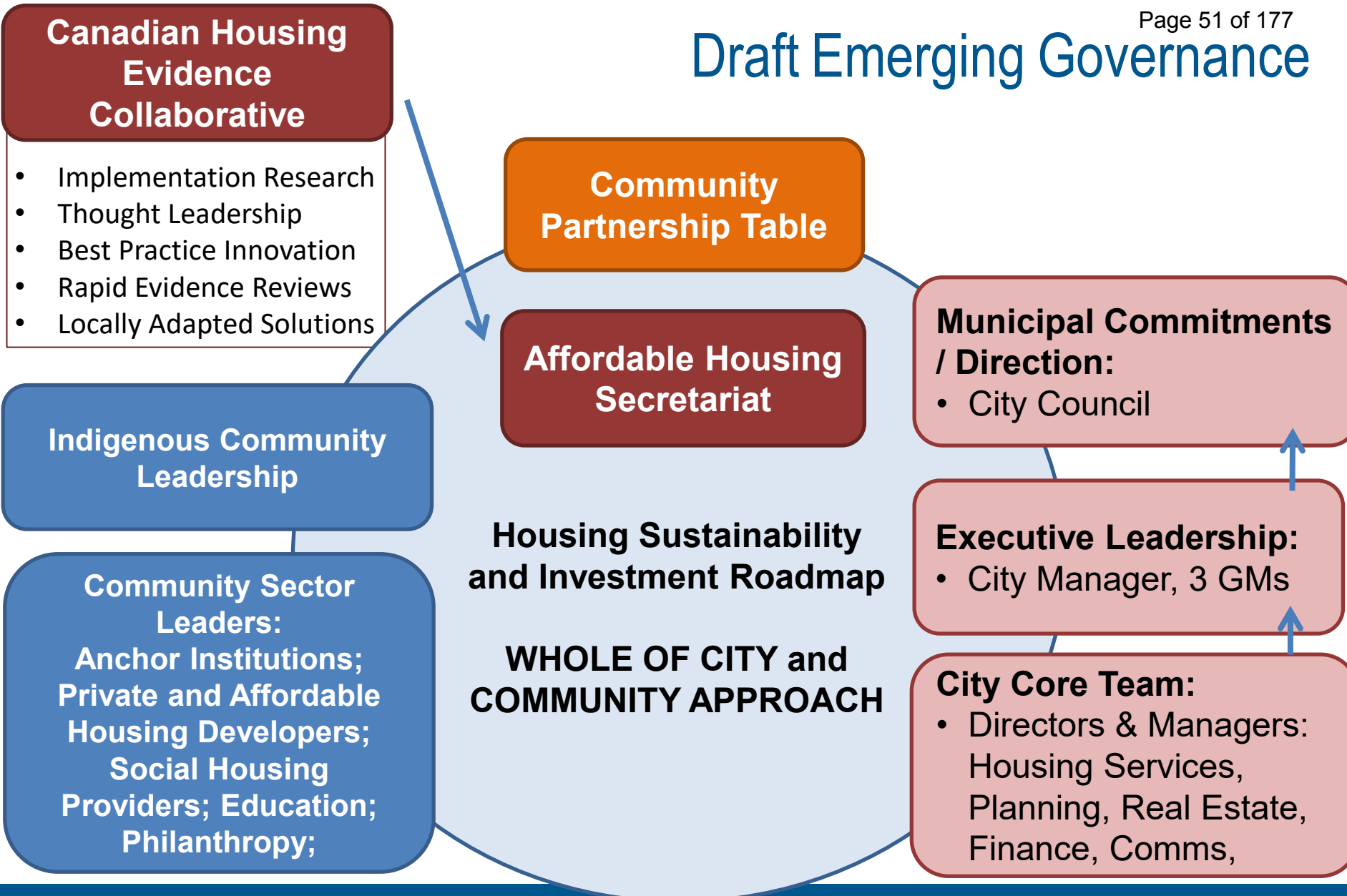
New construction

Acquisition

Preservation/Maintaining Existing

Provision of housing-based supports

Draft Emerging Governance



Housing Sustainability and Investment Roadmap

Approach: A whole of City-Community Approach that aligns existing and future work of City government and community sectors to

- Quantify the gap between supply and demand across the continuum
- Develop a tactical road map to prioritize and guide actions and investments to maximize affordable housing outcomes

Guiding Principles:

- Action based, nimble and responsive
- Systemic focus – short term and long term actions
- Building on past work
- Collective Accountability
- Working in new and innovative ways

Housing Roadmap – Objectives

1. Create an evidence-based assessment and gap analysis
2. Initiate, strengthen, and modify city processes
3. Identify levers and potential contributions and encourage commitments across all sectors whose actions influence the health of the housing continuum.
4. Develop tools and frameworks to enable stakeholders to maximize investment impact.
5. Develop and strengthen coordination and relationships between City and Community stakeholders.



CityLAB Overview

- **Social Innovation Hub** seeking to create a healthy, sustainable, and equitable Hamilton
- **CityLAB Semester In Residence Program (SIR)** is comprised of 30 students across faculties
- Focused on investigating the **Housing Crisis in Hamilton**



In less than **5** years,

2,405 students

68 faculty members

88 City staff

have created **145** projects & contributed
52,992+ student hours

Meeting with City of Hamilton Staff

- 7 meetings with 15 staff across several departments from September – December 2022

Stakeholders Conversations & Dialogue

- 44 stakeholders, including:
 - Non-Profit Organizations
 - Community Leaders
 - Developers & Landlords

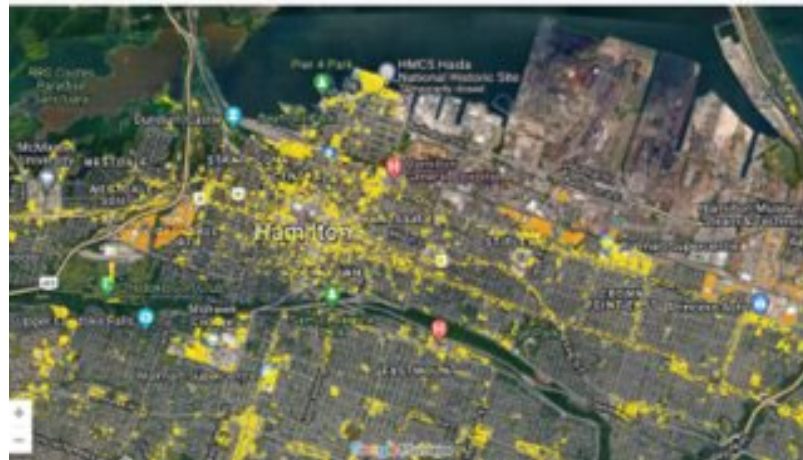
Best Practice Exemplars

New Westminster, Vancouver, Quebec City



Hamilton





- 1) Maintain & Preserve Existing Stock**
 - Policies
 - Incentives
 - By-Laws & Enforcement
- 2) Utilizing Land Leases to maintain municipal land as an asset**
- 3) Consolidating City Resources & creation of an endowment fund**

Housing Roadmap - Timeline and Implementation

Jan 2023 – March 2023 Creation of Affordable Housing Secretariat and finalize roadmap

Director and Community Lead Positions Start

Council report with gap analysis



March 2023 – March 2025 Implementation

Focus on 3-4 new items that can be actioned quarterly

October – December 2022 Develop Roadmap



Hamilton

Hamilton Veterans Committee

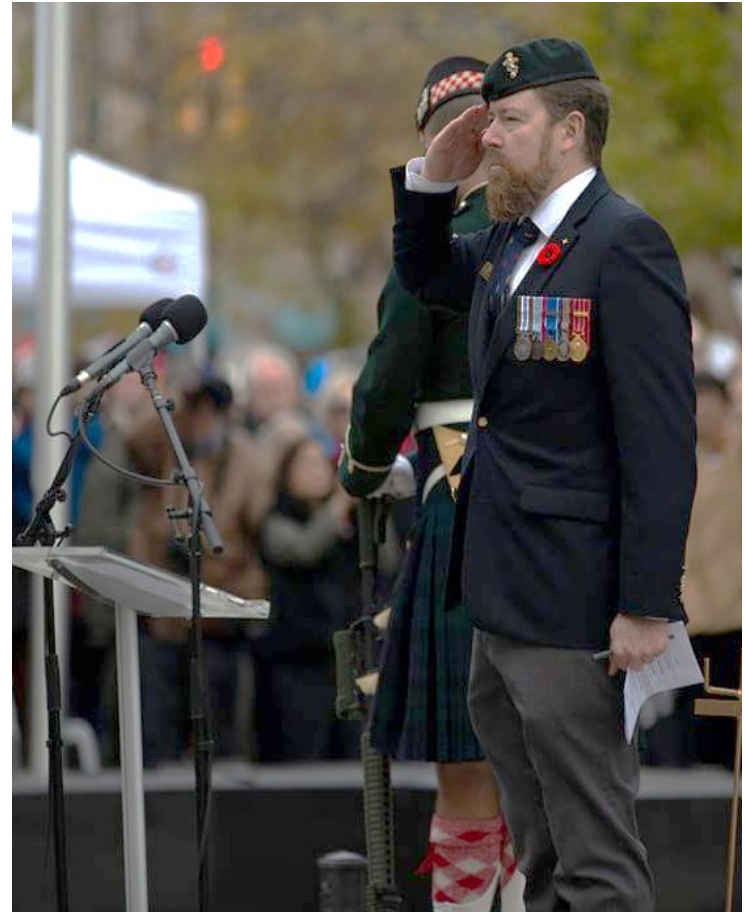


Hamilton

Hamilton Veterans Committee

Mandate

- Reporting to Council, the Hamilton Veterans Committee oversees the planning and delivery of military remembrance and commemoration activities on behalf of the City of Hamilton.
- Provide input on projects and issues that are of concern to Hamilton Veterans.
- Maximize the Engagement of Youth in Remembrance activities.





Hamilton

Hamilton Veterans Committee



Remembrance Day & Memorial Services

- Provide direction, coordination and funding for Hamilton Remembrance Day and Decoration Day Parades and Memorial Services.
- Services have become inclusive of Hamilton's changing demographics.
- Advise the City on protocol in dealing with military traditions (i.e. why we have two official downtown services).
- The HVC is the only veterans committee in Canada that advises a municipal Council.



Hamilton

Digital Community Programming



Hamilton Veterans Committee

Previous and Ongoing Projects

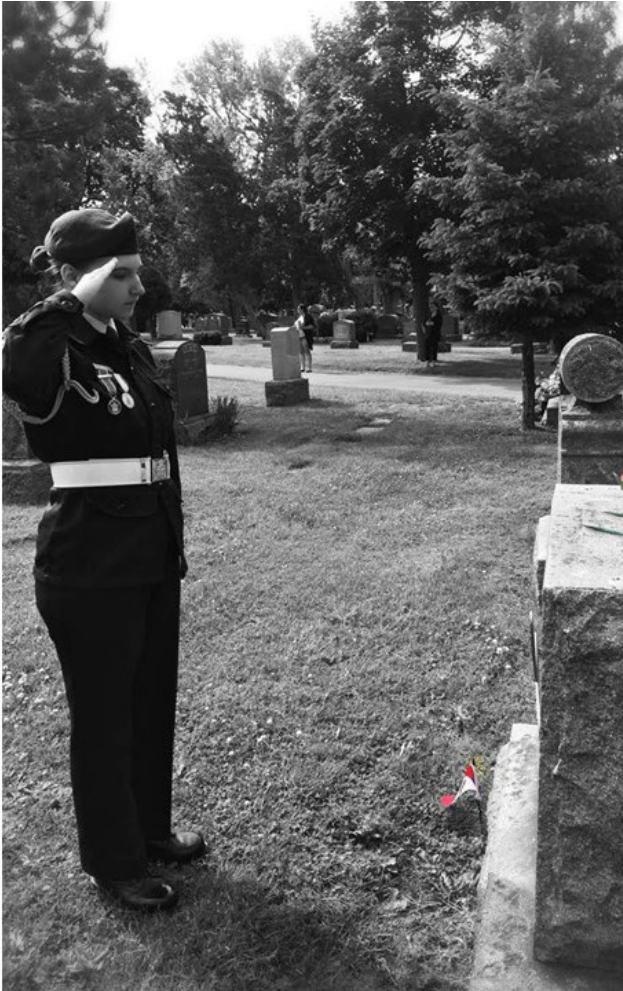
- Addition of video screens at services to make ceremonies accessible.
- Broadcast live video coverage through community television.
- Commemorated James Street North & South as “Veterans Way of Remembrance”.
- Hamilton Wreath Project
- Cadet units now lead Decoration Day services to ensure passing on of traditions to youth.





Hamilton

Hamilton Veterans Committee



Future Goals

To continue to work with Veterans organizations across the City to establish one collective voice for all Veterans at the City of Hamilton.

- Outreach through existing Veterans network
- Adding resource members to committee

To expand engagement and education of youth in our city on the sacrifices made by Veterans in order to preserve their legacy.

- Re-focusing administrative commitments
- Introducing youth engagement initiatives at the community level

To ensure Veterans young and old from every branch of service are recognized in Hamilton.



Hamilton Veterans Committee

Would Like to Thank

The Hamilton City Council.



- For the approval of the changes this committee requested to expand youth engagement as part of our mandate.
- For it's HSR waiver for buses chartered for HVC hosted events.
- For it's continuous support of Veterans related issues.



Hamilton

Hamilton Veterans Committee



Thank You

9.1



CITY OF HAMILTON
HEALTHY AND SAFE COMMUNITIES DEPARTMENT
Long Term Care

TO:	Chair and Members Healthy and Safe Communities Committee
COMMITTEE DATE:	December 1, 2022
SUBJECT/REPORT NO:	Standardization of Resident Lifting and Hygiene Equipment Including Related Accessories, Supplies and Maintenance. (HSC22052) (Wards 7 and 13)
WARD(S) AFFECTED:	Wards 7 and 13
PREPARED BY:	Holly Odoardi (905) 546-2424 Ext. 1906
SUBMITTED BY:	Angela Burden General Manager Healthy and Safe Communities Department
SIGNATURE:	

RECOMMENDATION

- (a) That Council approve the standardization of ARJO® resident lifting and hygiene equipment and ARJO accessories and supplies required for the use of the resident lifting and hygiene equipment manufactured by Arjo Canada Incorporated, pursuant to Procurement Policy #14 - Standardization, at Macassa and Wentworth Lodges until January 30, 2028.
- (b) That Council approve the standardization of Arjo Canada Incorporated to perform the agreement work of annual maintenance on ARJO® equipment at Macassa and Wentworth Lodges until January 30, 2028.
- (c) That the General Manager, Healthy and Safe Communities Department be authorized to negotiate, enter into and execute any required Contract and any ancillary documents required to give effect thereto with Arjo Canada Incorporated, in a form satisfactory to the City Solicitor.

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OUR Mission: To provide high quality cost conscious public services that contribute to a healthy, safe and prosperous community, in a sustainable manner.

OUR Culture: Collective Ownership, Steadfast Integrity, Courageous Change, Sensational Service, Engaged Empowered Employees.

SUBJECT: Standardization of Resident Lifting and Hygiene Equipment Including Related Accessories, Supplies and Maintenance. (HSC22052) (Wards 7 and 13) - Page 2 of 5

EXECUTIVE SUMMARY

In November 2016, Council approved Report CES16047, allowing the continued the standardization of ARJO® equipment and maintenance services until November 2021. In January 2022, Procurement Policy #11 was completed for an extension to the contract for Arjo Inc. to January 2023. Report HSC22052 is seeking approval until January 2028 for standardization of ARJO® resident lifting and hygiene equipment and ARJO accessories and supplies and the annual maintenance on ARJO® equipment. ARJO® lifting and bathing systems have been in use at both lodges for approximately 24 years.

The lifting and handling of residents while providing routine care is a high-risk activity for both staff and residents. Limiting our lifting and handling equipment to a standardized selection of products minimizes risk to resident, staff and exposure by the City.

Statistically, healthcare workers have one of the highest incidences of work-related injuries. Because of this trend, the Ministry of Labour (MOL) and the Ministry of Long Term Care (MLTC) continue to monitor this risk with their presence in health care facilities. This increased presence results in higher expectations of accountability on behalf of staff and management. Healthcare organizations such as Macassa Lodge and Wentworth Lodge are required to demonstrate due diligence in identifying and mitigating risks related to the safety of staff and residents. The Fixing Long Term Care Act (2021) and Regulations also extends this requirement for due diligence to the governing bodies of healthcare facilities.

In order to meet these expectations, it is recommended that Macassa and Wentworth Lodges (the Lodges) continue to use one manufacturer, Arjo Canada Incorporated (“Arjo Inc.”), for all resident lifting and bathing equipment. Arjo Inc. is the manufacturer and sole distributor of ARJO® brand equipment. It is also recommended that the preventative maintenance program for this equipment be single sourced to the manufacturer.

Alternatives for Consideration – See Page 5

FINANCIAL – STAFFING – LEGAL IMPLICATIONS

Financial:

Standardized, quality equipment, properly maintained and used by well-trained staff is an essential component of maintaining health and safety standards for residents and staff, and providing high quality care for residents in long term care. Any variability in

SUBJECT: Standardization of Resident Lifting and Hygiene Equipment Including Related Accessories, Supplies and Maintenance. (HSC22052) (Wards 7 and 13) - Page 3 of 5

pricing between manufacturers is off-set by the value of reduced risk and reduced potential for injury of residents and staff. There is a budget within the lodges for this expenditure, and this expense can be accommodated within the existing budget. On average the Lodges purchase between \$120,000 to \$250,000 annually depending on cycle of equipment replacement and need for additional equipment based on resident assessed needs.

Staffing:

There are no staffing implications.

Legal:

Macassa and Wentworth Lodges have an obligation under both health and safety legislation and Fixing Long Term Care (Act 2021) and Regulations to ensure the safety of residents and staff. Where risk can be clearly identified, all reasonable mitigation must be applied in order to reduce liability should an error occur.

HISTORICAL BACKGROUND

In November 2016, Council approved Report CES16047, allowing the continued the standardization of ARJO® equipment and maintenance services until November 2021. In January 2022, Procurement Policy #11 was completed for an extension to the contract for Arjo Inc. to January 2023. This extension was necessary so that Lodge staff could maintain their focus on providing enhanced care to the residents and support the staff during the COVID-19 pandemic.

ARJO® lifting and bathing systems have been in use at both lodges for approximately 24 years. ARJO® equipment is made and distributed by Arjo Inc. This equipment includes electronic lifts, shower chairs, bath chairs and their accessories: slings, batteries and weigh scales. The life expectancy for these products can range from 10 years to 14 plus years.

The equipment has been consistently reliable, easy to use, has few repair problems and minimal down time due to repairs. ARJO® equipment was specified for installation in the redevelopment projects at the Lodges. On a yearly basis, a portion of the lifting and bathing equipment requires routine replacement or upgrading. For example, there were 8 lifts ordered in 2020 and an additional 11 lifts ordered in 2021 as a result of the Annual Health and Safety audit of all equipment completed by Arjo.

Currently, there are one hundred and three pieces of ARJO® equipment in use at Macassa Lodge with an estimated replacement value of \$1,307,700. Forty-four pieces

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SUBJECT: Standardization of Resident Lifting and Hygiene Equipment Including Related Accessories, Supplies and Maintenance. (HSC22052) (Wards 7 and 13) - Page 4 of 5

of equipment are in use at Wentworth Lodge with an estimated replacement value of \$605,627.

Maintenance agreements are established annually with Arjo Inc. to provide a preventative maintenance program for ARJO® equipment at the Lodges.

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

City of Hamilton Purchasing Policy By-law as amended, Section 4.14 - Policy #14: Policy for Standardization.

Standardization is a management decision-making process that examines a specific common need or requirement and then selects a good and/or service that best fills that need to become the standard. When the establishment of a standard will result in a single source purchase, that purchase shall also be approved by the Council.

RELEVANT CONSULTATION

The Directors of Nursing, Macassa Lodge and Wentworth Lodge were consulted regarding the report content related to risk, research and operational issues and are supportive of the recommendations.

The Corporate Services Department, Procurement Section was consulted regarding the report recommendations, relevant policies and content, and are supportive of the recommendations.

ANALYSIS AND RATIONALE FOR RECOMMENDATION

Resident Lifting Equipment

Residents and staff are at highest risk of injury during episodes of lifting or transferring a resident. Safe operation of the equipment requires:

- a) That staff must have a high degree of familiarity with the equipment. Risk management practices in high risk areas of healthcare indicate that minimizing the variety of devices used by staff reduces risk.
- b) The provision of a thorough and detailed staff orientation / training program with annual refreshers. Limiting equipment to one manufacturer simplifies the training

SUBJECT: Standardization of Resident Lifting and Hygiene Equipment Including Related Accessories, Supplies and Maintenance. (HSC22052) (Wards 7 and 13) - Page 5 of 5

for staff, increases comfort and competence in the use of equipment and reduces the chance of error.

- c) The correct use of compatible slings. Industry experts state that it is strongly advised not to mix and match products from different manufacturers. It is important to use a sling and lift from the same manufacturer to maintain a safe transfer.
- d) The availability of a robust preventative maintenance program. In order to eliminate confusion, to ensure timely response to service calls, for a well-organized preventative maintenance program and for liability and warranty reasons, limiting equipment to one manufacturer are the recommendations.

ALTERNATIVES FOR CONSIDERATION

The alternative to standardizing to the ARJO® product would be the introduction of equipment, accessories and supplies made by another manufacturer.

Financial:

Savings, if any, in the cost of an alternative product would be offset and may be exceeded by the cost of additional staff education and inefficiencies in the maintenance program.

Staffing:

There are no staffing implications.

Legal:

The potential for human error and subsequent injury to residents and/or staff would increase the risk of exposure to litigation.

ALIGNMENT TO THE 2016 – 2025 STRATEGIC PLAN

Healthy and Safe Communities


Hamilton is a safe and supportive City where people are active, healthy, and have a high quality of life.

APPENDICES AND SCHEDULES ATTACHED

None



INFORMATION REPORT

TO:	Chair and Members Emergency and Community Services Committee
COMMITTEE DATE:	December 1, 2022
SUBJECT/REPORT NO:	2022 Ministry of Health Ambulance Service Review (HSC22055) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Michael Sanderson (905) 546-2424 Ext. 7741
SUBMITTED BY:	Michael Sanderson Chief, Hamilton Paramedic Service Healthy and Safe Communities Department
SIGNATURE:	

COUNCIL DIRECTION

Not Applicable

INFORMATION

In accordance with the Ambulance Act the City of Hamilton is required to undergo periodic certification by the Ministry of Health (MOH). This certification is intended to ensure the operation of its ambulance service meets all regulatory requirements and applicable standards. A certification review has been successfully completed every three years since 2001.

The Ministry of Health Review Team conducted the most recent mandatory scheduled periodic review of the Hamilton Paramedic Service with all required materials and processes completed by June 1, 2022.

On July 12, 2022, the Ambulance Service Review Team Leader conducted an “exit interview” with Hamilton Paramedic Chief Michael Sanderson and senior members of the Paramedic Service management team. The meeting was very positive, and the review team provided a general overview of the service review findings.

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SUBJECT: 2022 Ministry of Health Ambulance Service Review (HSC22055) (City Wide) – Page 2 of 2

On September 26, 2022, the City of Hamilton received the draft “Ambulance Service Review Preliminary Draft Report” containing a detailed description of the service review observations. Accompanying correspondence from the Senior Manager, Inspections and Certifications, provided the following introduction and comments:

“Congratulations on successfully meeting the legislated requirements for certification as a land ambulance operator in the Province of Ontario.”

“Hamilton Paramedic Service is to be commended for its efforts in the following areas:

- Preparation for the certification inspection
- Quality Assurance/CQI”

The MOH advised that “opportunities for improvement” were identified in the report as “observations” and requested a response to the report within 30 days. A detailed written response to all observations was submitted on October 19, 2022.

The draft report identified three observations that were minor in nature. There were no critical observations or findings of deficiency.

A response was provided October 12, 2022 addressing all three observations.

Subsequent to receipt of our response on October 29, 2022, the MOH issued a renewed Certificate authorizing continued operation of a land ambulance service in accordance with the Ambulance Act.

It is expected that the Hamilton Paramedic Service will next undergo the certification process in the spring of 2025.

Managers, supervisors, paramedics, and support staff of the Hamilton Paramedic Service deserve significant recognition for their excellent performance through the review process which occurred in the midst of the major ongoing pandemic response.

APPENDICES AND SCHEDULES ATTACHED

Appendix “A” to Report HSC22055: Ambulance Service Review Preliminary Draft Report, September 26, 2022

Appendix “B” to Report HSC22055: Hamilton Paramedic Service Response to September 26, 2022 Service Review Preliminary Draft Report, October 12, 2022

MINISTRY OF HEALTH

Ambulance Service Review Preliminary Draft Report

Hamilton Paramedic Service

September 26, 2022

**Ministry of Health**Emergency Health Regulatory and
Accountability Branch590 Rossland Rd. E.
Whitby ON L1N 9G5
Tel.: 905-665-8086**Ministère de la Santé**Direction de la réglementation et de la
responsabilisation des services de santé
d'urgence590 rue Rossland E.
Whitby ON L1N 9G5
Tél.: 905-665-8086

September 26, 2022

Michael Sanderson
Chief, Hamilton Paramedic Service
1227 Stone Church Rd E
Hamilton, ON L8W 2C6

Dear Chief Sanderson:

Congratulations on successfully meeting the legislated requirements for certification as a land ambulance operator in the Province of Ontario.

I am pleased to enclose the Ambulance Service Review Preliminary Report which summarizes the off-site inspection that was concluded on July 12, 2022.

Hamilton Paramedic Service is to be commended for its efforts in the following areas:

- Preparation for the certification inspection
- Quality Assurance/CQI

Opportunities for improvement have been identified in the report as observations. Your response to the Preliminary Report is requested within 30 days. The ministry recognizes the challenges your service is currently facing as a result of the COVID-19 pandemic and looks forward to working collaboratively with you in this regard. Should you require additional time to provide the requested documents, please advise me at your earliest convenience.

Once again, congratulations to you and your team.

Sincerely,

A handwritten signature in blue ink, appearing to read "Michelle Johnson".

Michelle Johnson
Senior Manager
Inspections and Certifications

Cc: Stuart Mooney, Director, EHPMDB
Robin Souchuk, Field Manager, Southwest Field Office, EHPMDB

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Introduction

Due to these unprecedented times and the COVID-19 pandemic, a preliminary means of assessing an ambulance service's compliance with legislation, for recertification has been developed to provide an off-site Preliminary Review, until normal review activities recommence.

The *Ambulance Act* (the Act) stipulates that no person shall operate an ambulance service unless the person holds a certificate issued by the certifying authority. The Act further stipulates that a person shall be issued a certificate by the certifying authority only if the person has successfully completed the certification process. The ministry conducts an Ambulance Service Review prior to the expiration of an existing certificate to confirm that the provider meets legislated certification standards.

Legislated standards include:

- Advanced Life Support Patient Care Standards
- Ambulance Service Communicable Disease Standards
- Basic Life Support Patient Care Standards
- Land Ambulance Certification Standards
- Ontario Ambulance Documentation Standards
- Ontario Provincial Land Ambulance & Emergency Response Vehicle Standards
- Patient Care & Transportation Standards
- Provincial Equipment Standards for Ontario Ambulance Services
- Patient Care Model Standards

In Ontario, the Patient Care Standards legislated under the Act are designed to ensure that the highest levels of safety are in place for every patient being treated/transported by paramedics and are issued by the Ministry of Health with input from:

- Ontario physicians specializing in Emergency Medicine
- Ontario Association of Paramedic Chiefs
- Ontario Base Hospital Advisory Group
- Provincial Medical Advisory Committee

The Ambulance Service Review focuses upon three main areas which are represented in this report:

- Patient Care
- Quality Assurance
- Administration

Subsections within each area provide the legislative requirements, inspection methodologies, followed by the Review Team observations.

Ambulance Service Review Overview

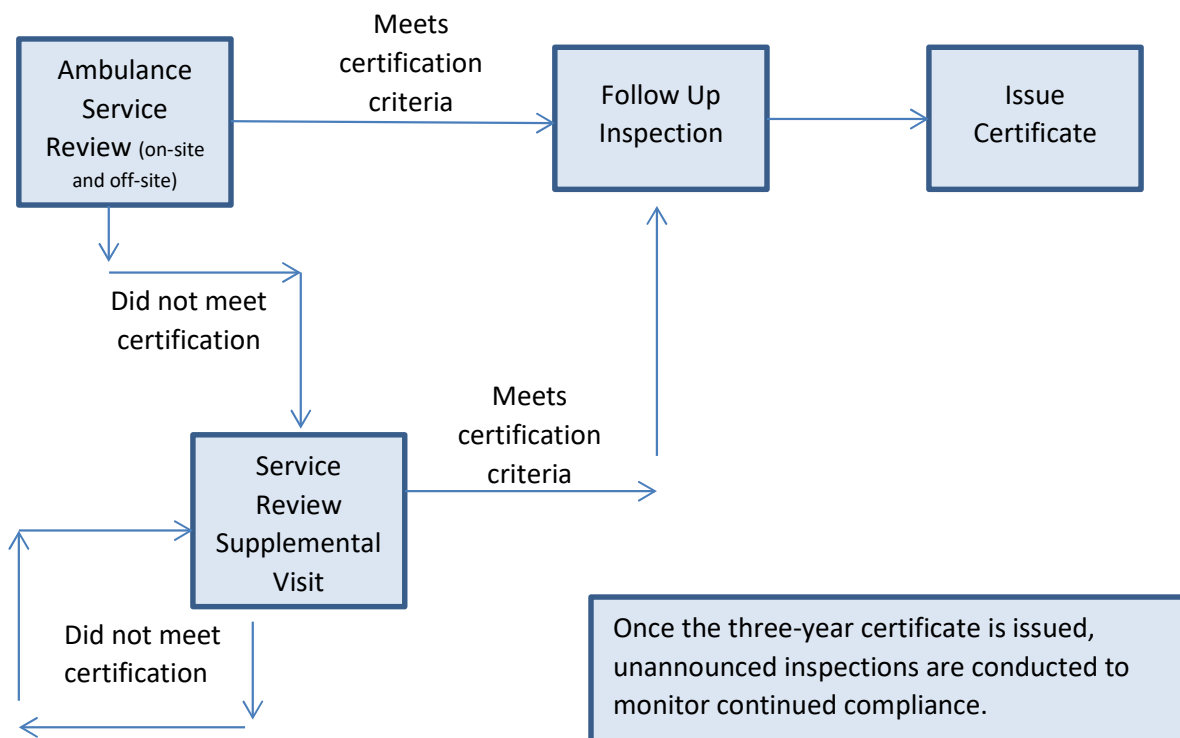
Certification Process: Ambulance Service Providers undergo an Ambulance Service Review every three years. The certification of a service is not extendable under the Act.

A Service Provider due for an Ambulance Service Review this year (2022) will be contacted by the Inspections and Certifications Unit, to discuss the new off-site Preliminary Review process and confirm the date that the supporting documentation is required by. Service Providers are asked to complete the modified Team Checklist and provide the supporting documentation requested to demonstrate compliance with legislation and standards.

With every Service Review, an exit meeting is conducted with the Service Provider. Upon completion of the off-site review, the Team Leader will contact the Service Provider to arrange for a mutually agreed date and time to discuss the review observations. Continued consultation/assistance and a draft report are provided to assist the Service Provider.

When a service meets certification standards, it is issued a three-year certificate to operate an ambulance service. When an ambulance service operator does not initially meet certification standards, the ministry conducts a Service Review Supplemental Visit to re-evaluate the service’s success in meeting certification standards.

The diagram below graphically represents the certification process.



To meet certification standards, a Service Provider must meet two thresholds:

1. 90%+ for Patient Care (which represents 70% of the overall inspection)
AND
2. 90%+ overall score (Patient Care 70%, Quality Assurance 20%, Administration 10%)

Preliminary Review: The preliminary review will be conducted off-site and requires the Service Provider to complete the Preliminary Review Team Checklist and provide comments and supporting documentation to the Team Leader as requested. Once all documents have been received and evaluated, a final exit (virtual) meeting will be scheduled with the Service Provider to discuss the review observations.

Upon completion of the exit meeting, the off-site portion of the review is concluded. A Preliminary Draft Report is prepared and provided to the Service Provider. Upon successful completion of the Preliminary Review process, a renewed Certificate is issued for a further three years. The Service Provider will have the opportunity to respond to the observations in the Preliminary Draft Report.

On-site Review Team: Each Review Team will be comprised of persons experienced in management, operational and patient care delivery aspects of providing ambulance service. Team members are selected for their experience and are trained by the Emergency Health Regulatory and Accountability Branch as quality surveyors. Composition of each Review Team is specific to the size and type of service being reviewed.

Currently the Review Team is comprised of service representation from approximately 70 percent of Ontario Paramedic Services. The on-site team will include but is not limited to, one ministry Team Leader, Service Chiefs, Deputy Chiefs, Commanders, Deputy Commanders, Superintendents, Primary, Advanced and Critical Care Paramedics, all of whom are considered seasoned subject matter experts in their field, working together to ensure excellence in ambulance services to all Ontarians.

Upon completion of the on-site review, a report is provided to the Service Provider in draft. The Service Provider is provided an opportunity to respond to the draft report. The response process is an opportunity for the Service Provider to identify potential inaccuracies and provide a response to address any noted observations. Once the Service Provider's response has been received, the ministry will coordinate with the Service Provider a suitable time for a Follow Up Inspection. A Follow Up Inspection is conducted to ensure the noted observations have been addressed by the Service Provider.

A final report culminating the Preliminary Review observations, response from the Service Provider and Follow Up Inspection, is then provided to the Service Provider. Currently the on-site review has been suspended due to the COVID-19 pandemic.

Other Inspection Types: In addition to the Ambulance Service Review on-site inspection, three other types of inspections are conducted:

Service Review Supplemental Visit

Inspection conducted when a service has been found not to meet certification standards during an Ambulance Service Review.

Follow Up Inspection

Inspection conducted after a service has been found to meet certification standards, to confirm actions planned by a service to address observations of the Ambulance Service Review process, have been addressed.

Unannounced Inspection

Inspection undertaken without prior notice, conducted throughout the three-year certificate period.

Inspection Methodologies: The Ambulance Service Review Team will utilize a number of activities and processes to evaluate the success of a Service Provider in meeting the requirements of the legislation and standards. The team may utilize some or all of the following methods:

- Interviews: Interviews with the Service Provider and other service staff will be conducted. Also, interviews may be held with hospital staff, Base Hospital staff, Ambulance Dispatch staff and staff of the municipality or delivery agent, where appropriate.
- Documentation Review: Files pertinent to the delivery of ambulance service will be reviewed including: staff qualifications, policies & procedures, Incident Reports, Ambulance Call Reports, vehicle and equipment maintenance records, staff training records and other relevant standards related documents.
- Ride-Outs: In order to provide the broadest possible assessment of the patient care provided by a service, team members will conduct ride-outs with paramedics on every priority call and Canadian Triage Acuity Scale category call opportunity that presents. Observations will be recorded and combined with the documented patient care information provided by the crews as well as any feedback from the receiving facility. This information is utilized to evaluate that the provision of patient care is consistent with the patient care standards.
- Observation and Examination: To accurately determine compliance with the legislation and standards the Review Team will conduct various examinations of service vehicles, equipment, supplies and documents. For example, the team will ensure ambulances and ERVs are constructed and equipped in accordance with the standards.

- **Exit Meeting:** Upon completion of the Ambulance Service Review, the Team Leader and designated team members will meet with the Service Provider to provide a brief verbal overview of the observations from the Review. These meetings will provide an opportunity for the Service Provider to be informed of any areas that require prompt attention. The meetings will also serve to provide the Service Provider an early indication of their success in meeting the requirements of the Ambulance Service Reviews.
- **Reports:** Following the Ambulance Service Reviews, the Review Team Leader will prepare and submit a written summary to the ministry. The observations will determine if a Service Provider has met the requirements of the legislation and standards. The written report in draft will then be forwarded to the Service Provider for comment and for the preparation of an action plan to address any observations noted within the reports. The draft reports forwarded to the Service Provider will indicate that their service has:

Satisfied the Requirements:

- The Service has met the requirements of the Preliminary Review.
- A Preliminary Draft Report has been provided indicating the Service Provider has been successful in meeting the requirements to be certified as a land ambulance operator in the Province of Ontario.
- Response to the Preliminary Draft Report from Service Provider.
- A renewed 3-year certificate is provided.
- A report in draft has been provided indicating the Service Provider has been successful in meeting the certification requirements.
- Response to Ambulance Service Review Draft Report from Service Provider.
- Follow Up Inspection completed.
- Final Report transmitted.

Not Satisfied the Requirements:

- The Service has not met the requirements of the Preliminary Review.
- To assist the Service Provider, the Review Draft Reports will include observations on how the service can meet the certification requirements.
- Continued collaboration and consultation are available to assist a Service Provider.
- Review Team resources are available to assist a Service Provider if required or requested in preparing for the Supplemental Visit.

Summation

The Service has been in operation since July 1, 2000. The certificate for Hamilton Paramedic Service expires on October 29, 2022. As required to renew their certificate, Hamilton Paramedic Service participated in the Ambulance Service Preliminary Review. The Ambulance Service Preliminary Review found that Hamilton Paramedic Service has **met** the requirements of the *Land Ambulance Certification Standards*.

Hamilton Paramedic Service operates from eighteen stations, including headquarters and provides primary and advanced paramedic patient care. The Service employed two hundred ninety-two primary care paramedics and eighty-five advanced care paramedics. The Service responded to approximately 104,605 calls in 2021. At the time of the Ambulance Service Review, the Service had thirty-five front line ambulances, ten mechanical spares, seven emergency response vehicles and one emergency support unit.

The Service provides ambulance service to the residents of Hamilton, Stony Creek, Mount Hope, Waterdown, Binbrook, Dundas and Ancaster, as well as the surrounding areas. Headquarters is located at 1227 Stone Church Rd E, Hamilton. Hamilton Paramedic Service is dispatched by Hamilton CACC and has a Base Hospital agreement with the Hamilton Health Sciences, Centre for Paramedic Education and Research.

The Service is to be commended for making staff available during the course of the Review and the Review Team would like to thank Hamilton Paramedic Service staff for their assistance throughout the Review.

Patient Care

Subsections:

- ACR Review – ALS/BLS Patient Care Standards,
- Paramedic Ride-Outs,
- Training,
- MOH ID Cards,
- Communicable Disease Management,
- Vehicle – Equipment Restraints,
- Communication – Communication Service Direction,
- Patient Care Equipment and Supplies,
- Medications,
- Patient Care Devices and Conveyance Equipment Maintenance,
- Vehicle – Staffing, and
- Vehicle – Maintenance/Inspection.

ACR Review – ALS/BLS Patient Care Standards

Legislated Requirement: ACR documentation of patient care delivered by paramedics is one avenue used to confirm that ALS/BLS Patient Care Standards are properly performed and that the appropriate CTAS level was assigned according to patient condition as per the *Prehospital CTAS Paramedic Guide*. Subsection III Operational Certification Criteria of the *Land Ambulance Certification Standards* (a) states, as a condition of employment, each employee and volunteer in the applicant/operator's service, who is required to provide patient care, will provide such patient care in accordance with the standards set out in the *Basic Life Support Patient Care Standards* and where applicable, the *Advanced Life Support Patient Care Standards* published by the Ministry as those documents may be amended from time to time.

Inspection Methodologies: The Review Team obtained and reviewed reports and records, submitted by the Service Provider. No On-Site Review was conducted.

Observations: The Review Team reviewed the supporting documentation submitted by the Service Provider and noted the Service Provider's ACR audit process is designed to monitor paramedic compliance with the ALS/BLS Patient Care Standards. The Service Provider does audit each paramedic's ACRs to determine if patient care provided was appropriate and consistent with ALS/BLS standards.

The Service Provider's QA/CQI of ACRs includes:

- Recommendations are provided to staff after auditing ACRs for appropriateness and consistency with ALS/BLS standards.
- Recommendations resulting from an ACR audit for appropriateness and consistency with ALS/BLS standards are addressed to mitigate reoccurrence.
- The Service Provider works with Base Hospital to review and investigate calls.
- Recommendations resulting from the review and investigation of a call are addressed to mitigate reoccurrence.

Paramedic Ride-Outs

Legislated Requirement: The diagnostic modalities employed by paramedics are spelled out in standards of practice or practice guidelines set out in the BLS Patient Care Standards, the ALS Patient Care Standards and the Base Hospital Medical Directives.

Subsection III Operational Certification Criteria of the *Land Ambulance Certification Standards* (a) states, as a condition of employment, each employee and volunteer in the applicant/operator's service, who is required to provide patient care, will provide such patient care in accordance with the standards set out in the *Basic Life Support Patient Care Standards* and where applicable, the *Advanced Life Support Patient Care Standards* published by the ministry as may be amended from time to time.

Inspection Methodologies: No On-Site Review was conducted.

Observations: No On-Site Review was conducted.

A priority 4 call is a threat to life and or limb, priority 3 is an emergency call of serious illness or injury, and should be performed without delay, priority 2 is a routine call that must be completed at a specific time, priority 1 is a routine call that may be delayed without detriment to the patient. Non patient carried calls are those where a patient was not transported.

Training

Legislated Requirement: Training and Continuing Medical Education ensure paramedic competencies and abilities in the provision of patient care. Subsection III Operational Certification Criteria of the *Land Ambulance Certification Standards* (k) states, all reasonable measures are taken to ensure that each emergency medical attendant and paramedic employed in the applicant/operator's land ambulance service maintain competence in the use of the patient care, accessory and communications equipment required for the proper provision of service in accordance with the Basic Life Support and Advanced Life Support Patient Care Standards.

Inspection Methodologies: The Review Team obtained and reviewed reports and records, submitted by the Service Provider. No On-Site Review was conducted.

Observations: The Service Provider has processes in place to ensure paramedic knowledge and skills are maintained, which includes:

- Annual evaluation demonstrating compliance with the current legislation and standards.
- Evaluation results are communicated to and acknowledged by staff.
- New staff members undergo an evaluation of their patient care skills prior to their first unsupervised shift.
- Training for new, updated and additional equipment.
- Training on changes/updates to standards and/or legislation.

All paramedics employed by the Service Provider are included in the QA/CQI Program. The paramedic files reviewed by the Review Team demonstrated that the components of patient care equipment knowledge and skills are demonstrated and evaluated. A remedial training program is in place for staff who demonstrated deficiencies in the use of patient care equipment.

Documentation demonstrated the Service Provider works with the Base Hospital to:

- Ensure staff regularly demonstrates proficiency in patient care skills.
- Provide remedial training to employees whose patient care skills are considered deficient.
- Ensure identified staff attended and successfully completed remedial training for patient care skills deficiencies.
- Ensure staff regularly demonstrates proficiency in performing Controlled Acts.
- Provide remedial training for employees whose certification has been suspended or revoked.
- Ensure identified staff attended and successfully completed remedial training.

MOH ID Cards

Legislated Requirement: Ministry issued ID Cards are required to be carried by the paramedic at all times while on duty.

Paramedic MOH ID Cards with the Service Specific Number permit a means for the paramedic to log onto the ambulance dispatch environment; provides a recognizable identifier to the general public and allied agencies; and further provides a paramedic required ID for access to secure areas such as correctional facilities and airports.

Subsection III Operational Certification Criteria of the *Land Ambulance Certification Standards* (g.1) states, each emergency medical attendant and paramedic employed by the applicant/operator in his or her ambulance service is assigned a unique identification number issued by the Director.

Section (g.2) also states that the unique identification number referenced in clause (g.1) shall appear on a photo identification card that conforms to Schedule 1 of this standard, and the photo identification card shall be on the person of the emergency medical attendant or paramedic while on-duty.

Inspection Methodologies: No On-Site Review was conducted.

Observations: No On-Site Review was conducted.

Communicable Disease Management

Legislated Requirement: The Service Provider, management team and staff, have an obligation to ensure infection control and occupational health and safety measures are in place to prevent transmission of infectious diseases.

The *Patient Care and Transportation Standards*, Communicable Disease Management, section 1 part B, subsection 2(b) states in part, each operator shall ensure that appropriate measure(s) are employed by staff to protect themselves and patients from transmission of communicable disease between employees and patients, and (c) each EMA, paramedic and ambulance student takes appropriate infection control and occupational health and safety measures to prevent transmission of all infectious agents to and from themselves and does not knowingly expose himself or herself or his or her patients to any communicable disease in the course of work, without taking the precautions set out in this standard.

Inspection Methodologies: The Review Team obtained and reviewed reports and records, submitted by the Service Provider. No On-Site Review was conducted.

Observations: There was documentation indicating the Service Provider monitors and enforces Communicable Disease Management.

There was documentation demonstrating the Service Provider has identified a person who is designated to implement Section 1, part B, Communicable Disease Management of the PCTS, for the service.

Vehicle - Equipment Restraints

Legislated Requirement: Staff, passengers, patients and equipment must be secured within the vehicle while the vehicle is in motion to ensure that in an unforeseen circumstance, unsecured equipment, supplies and/or persons do not become projectiles. The PCTS, Section 2 - Patient Transport subsection 3 states, each EMA and Paramedic shall ensure that each item of equipment transported in an ambulance or ERV is properly restrained in the ambulance or ERV. The PCTS, Section 1 - Patient Care, part A General, subsection 8 states, each person transported in an ambulance or ERV is properly restrained in the ambulance or ERV.

Inspection Methodologies: No On-Site Review was conducted.

Observations: No On-Site Review was conducted.

Communication - Communication Service Direction

Legislated Requirement: To ensure continuity of operations and response by appropriate service resources, the Service Provider and staff must provide the Ambulance Dispatch Centre their deployment plan, care provider levels of training (Primary/Advanced Care), vehicle availability, resource-call contingencies, tiered response agreement and follow the direction of the Ambulance Dispatch Centre at all times.

Subsection III Operational Certification Criteria of the *Land Ambulance Certification Standards* states in part, no employee of the applicant/operator's land ambulance service shall refuse or disregard the direction of a Communications Officer in regard to any request for ambulance service. The Communication Service that normally directs the movement of the ambulances and ERVs will be kept informed at all times as to the availability and location of each employee, ambulance or emergency response vehicle. The standard also states in part, that each paramedic employed in the applicant/operator's land ambulance service maintain competence in the use of the patient care, accessory and communications equipment required for the proper provision of service.

The *Basic Life Support Patient Care Standards v 3.3*, Patient Transport Standard states in part, the Paramedic shall make a decision regarding the appropriate receiving health care facility and initiate transport of the patient as confirmed or directed by an Ambulance Communications Officer (ACO). If confirmation or direction cannot be obtained by an ACO, the paramedic must transport to the closest or most appropriate hospital capable of providing the medical care required by the patient.

Inspection Methodologies: The Review Team obtained and reviewed reports and records, submitted by the Service Provider. No On-Site Review was conducted.

Observations: As part of the Service Provider's deployment strategies to ensure continuity of operations, the Service notified the Communication Service:

- Whenever an ambulance or ERV was removed from service.
- Whenever an ambulance or ERV was returned to service.
- Whenever an ambulance or ERV was involved in a collision.

There was documentation demonstrating there is clear direction to paramedic staff regarding transport of a patient when directed by the Communication Service, i.e. hospital availability. There was also documentation demonstrating clear direction to paramedic staff regarding transport of a patient when not directed to a destination by the Communication Service.

Patient Care Equipment and Supplies

Legislated Requirements: The Patient Care Standards have been developed with the assistance and input from Ontario physicians specializing in Emergency Medicine, the Ontario Association of Paramedic Chiefs (OAPC), the Ontario Base Hospital Advisory Group and the Provincial Medical Advisory Committee (PMAC). To ensure patient care meets the legislated standards, equipment and supplies utilized by paramedics must meet and be maintained to the standards.

The *Provincial Equipment Standards for Ontario Ambulance Services* specify the minimum quantities and specifications of each piece of equipment that are required to be carried on a land ambulance or emergency response vehicle.

Subsection III Operational Certification Criteria of the *Land Ambulance Certification Standards* states in part, each vehicle used as an ambulance or ERV in the applicant/operator's service shall contain as a minimum the accessory and patient care equipment set out in the document titled *Provincial Equipment Standards for Ontario Ambulance Services*, published by the ministry as may be amended from time to time. Further, each land ambulance or ERV used in the applicant/operator's service and the patient care and accessory equipment contained therein shall be maintained in a safe operating condition, in a clean and sanitary condition, and in proper working order.

Inspection Methodologies: The Review Team obtained and reviewed reports and records, submitted by the Service Provider. No On-Site Review was conducted.

Observations: The Service Provider has a policy regarding cleaning and sanitization of equipment and the patient care compartment. The Service Provider monitored and enforced the cleaning and sanitization policy.

The Service Provider identified patient care and accessory equipment in need of repair, removed it from service and responded to identified deficiencies/concerns. There was documentation demonstrating that patient care and accessory equipment repairs had been completed.

Medications

Legislated Requirements: To ensure patient care provided by paramedics meets the legislated standards, the equipment, supplies and medications utilized must meet and be maintained to the standards.

Subsection III Operational Certification Criteria of the *Land Ambulance Certification Standards* states in part, a valid agreement is in effect between the applicant/operator and the designated Base Hospital Program, for each area in which the applicant/operator proposes to provide land ambulance service, for the delegation of Controlled Acts by paramedics employed by the applicant/operator.

Further, each vehicle used as an ambulance or ERV in the applicant/operator's service shall contain as a minimum the accessory and patient care equipment set out in the document titled *Provincial Equipment Standards for Ontario Ambulance Services*. Also, each land ambulance or ERV used in the applicant/operator's service and the patient care and accessory equipment contained therein shall be maintained in a safe operating condition, in a clean and sanitary condition, and in proper working order.

Inspection Methodologies: No On-Site Review was conducted.

Observations: No On-Site Review was conducted.

Patient Care Devices and Conveyance Equipment Maintenance

Legislated Requirements: To ensure patient care provided by paramedics meets the legislated standards, the equipment, supplies and medications utilized must meet and be maintained to the standards.

Subsection III Operational Certification Criteria of the *Land Ambulance Certification Standards* states in part, each vehicle used as an ambulance or ERV in the applicant/operator's service shall contain as a minimum the accessory and patient care equipment set out in the document titled *Provincial Equipment Standards for Ontario Ambulance Services*, published by the ministry as may be amended from time to time. Each land ambulance or ERV used in the applicant/operator's service and the patient care and accessory equipment contained therein shall be maintained in a safe operating condition, in a clean and sanitary condition, and in proper working order.

Inspection Methodologies: The Review Team obtained and reviewed reports and records, submitted by the Service Provider. No On-Site Review was conducted.

Observations: The Service Provider has a preventative maintenance program in place for conveyance equipment and patient care devices. All patient care devices requiring regular inspection and/or calibration (e.g. oxygen delivery systems, suction equipment, and defibrillator) were included within the Service Provider's Preventative Maintenance program. The service's oxygen testing equipment had not always been calibrated according to the manufacturer's specifications (*no calibrations done in 2020 and 2021*). **(Observation: 1)**

The Service Provider's Preventative Maintenance program also included all conveyance equipment (e.g. stretchers, power load systems, stair chairs, etc).

Vehicle - Staffing

Legislated Requirements: The Upper Tier Municipality (UTM)/Delivery Agent (DA) is obligated to ensure provision of service to meet community needs. Further, the Service Provider must ensure each vehicle designated as a PCP, ACP or CCP response vehicle, must be staffed accordingly to meet their service commitment/deployment plan.

Subsection 6 (1) (b) of the Act states in part that every upper tier municipality shall be responsible for ensuring the proper provision of land ambulance services in the municipality in accordance with the needs of persons in the municipality.

The *Patient Care and Transportation Standards*, Section 1 - Patient Care, part A states in part, each operator and each emergency medical attendant ("EMA") and paramedic employed or engaged as a volunteer by the operator, shall ensure that:

- (1) Each emergency response vehicle ("ERV") responding to a request for service is staffed with at least one person who is qualified as an EMA or paramedic under the regulations.
- (2) Each ambulance responding to a request for service is staffed with at least one primary care paramedic and one EMA qualified under the regulations.
- (4) Each ambulance that is designated by an ambulance service operator as an advanced care paramedic ambulance is staffed with at least one advanced care paramedic and one primary care paramedic when responding to a request for service or while transporting a patient.

Inspection Methodologies: The Review Team obtained and reviewed reports and records, submitted by the Service Provider. No On-Site Review was conducted.

Observations: The Service Provider has access to spare vehicles to maintain service. There were no incidents where a replacement vehicle was required.

Vehicle - Maintenance/Inspection

Legislated Requirements: The UTM/DA is obligated to ensure provision of service meets community needs. To meet community needs, the Service Provider must ensure each vehicle is equipped according to the equipment standards, each vehicle meets the vehicle standards, and that equipment, supplies and vehicles are maintained according to manufacturer's specifications.

Subsection III Operational Certification Criteria of the *Land Ambulance Certification Standards* states in part, only ambulances and emergency response vehicles that comply with the applicable version at time of manufacture of *Ontario Provincial Land Ambulance and Emergency Response Vehicle Standards*, published by the ministry as may be amended from time to time, are or will be used in the applicant/operator's ambulance service. It also states, each land ambulance and ERV used in the applicant/operator's service and the patient care and accessory equipment contained therein shall be maintained in a safe operating condition, in a clean and sanitary condition, and in proper working order.

Inspection Methodologies: The Review Team obtained and reviewed reports and records, submitted by the Service Provider. No On-Site Review was conducted.

Observations: Each vehicle is included within the Service Provider's Vehicle PM program.

The Service Provider ensured that communication equipment remains operational at all times. The Service Provider works co-operatively with the communication service to ensure communication equipment repairs are completed. The Service Provider provides the Communication Service access to radios and communication equipment upon request.

The Service Provider has a policy that states staff will use only the designated radio call identifier when using ministry telecommunication devices.

Documentation regarding vehicle safety demonstrated:

- Staff completed a checklist ensuring general safety features were functional.
- Paramedics could comment on the checklist regarding vehicle deficiencies or safety concerns.
- Staff checked each vehicle at least once per shift.
- The Service Provider audits checklists for completeness, accuracy and vehicle deficiencies or safety concerns.
- Safety concerns raised by staff are resolved.
- Repairs or items requiring replacement were completed in a timely manner.

Quality Assurance

Subsections:

- Quality Assurance/CQI,
- Employee Qualifications, and
- ACR - IR Documentation.

Quality Assurance/CQI

Legislated Requirements: A Service Provider's QA/CQI Program provides a Service Provider continued oversight in their quality of patient care and provision of service delivered to the public.

Subsection 6 (1) (b) of the Act states in part that every upper tier municipality shall be responsible for ensuring the proper provision of land ambulance services in the municipality in accordance with the needs of persons in the municipality.

Subsection 3 (1) of Regulation 257/00 made under the Act requires that the operator of an ambulance service meets the requirements of the *Land Ambulance Certification Standards*.

Section III Operational Certification Criteria of the *Land Ambulance Certification Standards* subsection (r) states in part, incident reports, ambulance call reports and collision reports are made in accordance with *Ontario Ambulance Documentation Standards*, published by the Ministry of Health as may be amended from time to time, respecting each incident, complaint, investigation, and collision relating to the applicant/operator's service, employees, agents and to each patient served.

The *Ontario Ambulance Documentation Standards*, Part 4 – Documentation Requirements stipulates the ACR documental requirements.

Inspection Methodologies: The Review Team obtained and reviewed reports and records, submitted by the Service Provider. No On-Site Review was conducted.

Observations: The Service Provider has a Quality Assurance program in place to ensure compliance with legislated requirements. The Service Provider's Quality Assurance program included:

- Ambulance Call Report audits,
- Service form completion audits,
- Incident Report audits,
- In Service CME, and
- Base Hospital Certification.

The Service Provider responds to recommendations made by quality assurance programs to ensure optimal provision of service.

As part of the QA/CQI Program, the Service Provider investigates and responds to patient care and service delivery complaints. The Service Provider addresses recommendations resulting from an investigation with staff to mitigate reoccurrence.

Employee Qualifications

Legislated Requirements: In Ontario, to work as a Paramedic, an individual must meet the qualification requirements delineated by *Ontario Regulation 257/00*. There are three levels of paramedic practice in Ontario with each level building on the competencies and skills of the prior level and assuming its scope of practice.

Section III Operational Certification Criteria of the *Land Ambulance Certification Standards* states in part, a personnel record is maintained for each emergency medical attendant and paramedic employed by the applicant/operator. The record shall include evidence of qualification as described in Part III of O. Reg. 257/00.

The *Ambulance Service Communicable Disease Standards* stipulates the immunization requirements for employment in Ontario.

The *Patient Care and Transportation Standards* delineate influenza immunization and reporting requirements.

Inspection Methodologies: The Review Team obtained and reviewed reports and records, submitted by the Service Provider. No On-Site Review was conducted.

Observations: Hamilton Paramedic Service maintains a mechanism to help ensure each employee record includes documentation that demonstrates each employee meets the minimum employment standards according to legislation.

As of December 17, 2021, EMAs and paramedics must:

- a) provide a valid certificate signed by a physician or delegate that states that he or she has been vaccinated against influenza, or that such vaccination is medically contraindicated; or
- b) provide a written statement that he or she has taken the educational review and has not been, and does not intend to be, vaccinated against influenza.

The Service receives Influenza Immunization status of each employee no later than directed by EHRAB each year.

Each operator shall, no later than January 14, 2022, report to the local Senior Field Manager of the Emergency Health Program Management & Delivery Branch, the following:

- a) the total number of active EMAs and paramedics employed by the operator;
- b) the number of EMAs and paramedics that have provided a valid certificate signed by a physician or delegate that states that he or she has been vaccinated against influenza;
- c) the number of EMAs and paramedics that have provided a valid certificate signed by a physician or delegate that states that vaccination is medically contraindicated;
- d) the number of EMAs and paramedics that signed the written statement that he or she has taken the annual educational review and has not been, and does not intend to be, immunized against influenza.

The Service Provider did not always report to the Field Office the Influenza Immunization status of each employee no later than directed by EHRAB each year (*reports due in 2020, 2021 and 2022 were all sent late*). **(Observation: 2)**

ACR – IR Documentation

Legislative Requirement: ACRs document the patient care delivered by paramedics and are used to confirm that ALS/BLS Patient Care Standards are properly performed. The ACR forms part of the patient record and must be completed according to the *Ontario Ambulance Documentation Standards* and the ACR Completion Manual.

The *Land Ambulance Certification Standards* subsection (r) states in part, incident reports, ambulance call reports and collision reports are made in accordance with *Ontario Ambulance Documentation Standards*, published by the Ministry of Health as may be amended from time to time, respecting each incident, complaint, investigation, and collision relating to the applicant/operator's service, employees, agents and to each patient served.

The *Ontario Ambulance Documentation Standards*, Part 3 – Patient & Patient Care Documentation Requirements and Part 4 – Documentation Requirements stipulate ACR documental and distribution requirements.

Inspection Methodologies: The Review Team obtained and reviewed reports and records, submitted by the Service Provider. No On-Site Review was conducted.

Observations: The Service Provider audits ACRs to determine if they are complete and accurate as per the ACR Completion Manual/OADS. As a result of their audit, the Service Provider makes recommendations to staff respecting compliance with the ACR Completion Manual/OADS. Further, the Service Provider addresses recommendations to mitigate reoccurrence. There was documentation demonstrating staff review the ACR Completion Manual and OADS as part of the Service Provider's QA/CQI Program.

As part of their responsibility, the Service Provider identifies any incomplete or outstanding Ambulance Call Reports. The Service Provider ensured such reports were completed as required under the OADS.

There was documentation demonstrating the Service Provider works with their Base Hospital to review Ambulance Call Report audit findings where paramedic performance and/or ALS/BLS Standards patient care deficiencies were identified. Audit findings by the Base Hospital and the Service Provider are compared for discrepancies. Audit findings where paramedic performance and/or ALS/BLS Standards patient care deficiencies were identified are investigated and were resolved/remediated.

It was noted that Ambulance Call Reports were distributed according to the Act, Regulations and OADS. It was also noted that Ambulance Call Reports were secured from unauthorized access. The Service Provider maintains Ambulance Call Reports on file for a period of not less than five years.

As part of their QA/CQI process, the Service Provider audits Ambulance Call Reports to determine if an Incident Report was to have been completed as determined by the OADS.

The Service Provider audits Incident Reports for completeness and accuracy. Documentation demonstrated the Service Provider makes recommendations to staff after auditing Incident Reports regarding completeness and accuracy. Recommendations resulting from the audit are addressed to mitigate reoccurrence.

It was noted that Incident Reports were secured from unauthorized access and are maintained on file for a period of not less than five years. Completed Incident Reports are transmitted to the Field Office according to OADS timeframes.

Administrative

Subsections:

- Response Time Performance Plan,
- Service Provider Deployment Plan,
- Ambulance Service ID Card Program,
- Base Hospital Agreement,
- Policy and Procedures, and
- Insurance.

Response Time Performance Plan

Legislated Requirement: A Service Provider is required to establish a Response Time Performance Plan, to monitor, enforce and where necessary, update their plan as required to ensure patients categorized as the most critical, receive response and assistance in the times established within their plan.

Part VIII of *Ontario Regulation 257/00* made under the Act states in part, no later than October 1st in each year, that every upper-tier municipality and delivery agent responsible under the Act for ensuring the proper provision of land ambulance services shall establish, for land ambulance service operators selected by the upper-tier municipality or delivery agent in accordance with the Act, a performance plan for the next calendar year respecting response times.

An upper-tier municipality or delivery agent shall ensure that the plan established under that subsection sets response time targets for responses to notices respecting patients categorized as Canadian Triage Acuity Scale (CTAS) 1, 2, 3, 4 and 5, and that such targets are set for each land ambulance service operator selected by the upper-tier municipality or delivery agent in accordance with the Act.

An upper-tier municipality or delivery agent shall ensure that throughout the year the plan established under that subsection is continuously maintained, enforced and evaluated and where necessary, updated whether in whole or in part.

An upper-tier municipality or delivery agent shall provide the Director with a copy of the plan established under that subsection no later than October 31st in each year, and a copy of any plan updated, whether in whole or in part, no later than one month after the plan has been updated.

An upper-tier municipality or delivery agent shall provide the Director with the percentages for the preceding calendar year, required under Part VIII of *Ontario Regulation 257/00*, section 23, subsection 7(1), (2) and (3), no later than March 31st of each year.

Inspection Methodologies: The Review Team obtained and reviewed reports and records, submitted by the Service Provider. No On-Site Review was conducted.

Observations: The Service Provider has an established Service Response Time Performance Plan with response time targets for patients categorized as Canadian Triage Acuity Scale (CTAS) 1, 2, 3, 4 and 5. The Service Provider provides the Director of EHRAB with a copy of the Response Time Performance Plan no later than October 31st of each year.

The Service Provider did demonstrate that they met their Response Time Performance Plan.

Documentation demonstrates the Service Provider, throughout the year, continuously maintains, enforces, evaluates and where necessary, updates their Response Time Performance Plan. There was also documentation demonstrating the Service Provider investigates those instances where their Service Response Time Performance Plan had not been met. Further, documentation demonstrates that recommendations resulting from investigations as to why the Response Time Performance Plan had not been met are addressed to mitigate reoccurrence.

The Service Provider established their Response Time Performance Plan by October 1st of each year. Updates are provided to the Director no later than one month after the plan was updated.

There was also documentation to demonstrate that by March 31st of each year the Service Provider reported to the Director the following for the preceding calendar year:

- The percentage of times that a person equipped to provide defibrillation arrived on-scene for sudden cardiac arrest patients, within six minutes.
- The percentage of times the ambulance crew arrived on-scene for sudden cardiac arrest or other CTAS 1 patients, within eight minutes.
- The percentage of times the ambulance crew arrived on-scene for patients categorized as CTAS 2, 3, 4 and 5, within the response time targets set by the UTM or delivery agent.

Service Provider Deployment Plan

Legislated Requirement: A Service Provider's Deployment Plan and strategies provide the Service Provider oversight to ensure in part, the continuity of operations and provision of service meets community needs.

Subsection 6 (1) (b) of the Act states in part that every upper tier municipality (UTM) shall be responsible for ensuring the proper provision of land ambulance services in the municipality in accordance with the needs of persons in the municipality.

Section III Operational Certification Criteria of the *Land Ambulance Certification Standards* subsection (i.1) states in part, the communication service that normally directs the movement of the ambulances and emergency response vehicles in the applicant/operator's service, will be kept informed by the employees of the applicant/operator at all times as to the availability and location of each employee, ambulance or emergency response vehicle.

Further, the Act, section 7.0.1 (1) states, the Minister may issue operational or policy directives to the operator of a land ambulance service where it is in the public interest to do so. Subsection (3) states, an operational or policy directive may be general or particular in its application and may include, but not limited to:

- (a) conveyance of persons by ambulance to destinations other than hospitals; and
- (b) responsibilities in addition to the provision of ambulance services, including,
 - (i) providing treatment by paramedics to persons who may not require conveyance by ambulance,
 - (ii) ensuring treatment provided by paramedics is in accordance with the prescribed standard of care, and
 - (iii) other responsibilities to facilitate the adoption of treatment models for persons with lower acuity conditions.

Inspection Methodologies: The Review Team obtained and reviewed reports and records, submitted by the Service Provider. No On-Site Review was conducted.

Observations: The Service Provider has provided a copy of their deployment plan to the Field Office suitable for implementation by the Communication Service. Documentation demonstrates the service does not always have sufficient staff at each level of qualification to meet their written deployment plan (*service provider records showed down staffing occurred over various dates*).

(Observation: 3)

To ensure continuity of operations, the Service Provider does notify the Communication Service of any changes to their staffing pattern. The Service Provider notifies the Communication Service before implementing or revising policies or procedures that may affect the dispatching/deployment of ambulances or ERVs.

The Service Provider had a letter signed by the Director, EHRAB, for approval to implement the new Patient Care Models used by the service. Documentation demonstrates staff have been trained on the new Patient Care Models. The Service Provider had signed agreements in place with alternate receiving facilities e.g. Mental Health facility, etc. The Service Provider had notified the CACC of the Patient Care Models.

Ambulance Service ID Card Program

Legislated Requirements: A paramedic in Ontario is required to obtain a ministry issued, service specific ID card prior to the provision of patient care. The ID card must be carried on their person at all times while on duty. The ID card process ensures the paramedic meets qualification requirements and provides the paramedic an ability to log onto the ambulance dispatch environment. The ID card is a provincially accepted ID for access to restricted areas otherwise not available to the general public and must be returned to the ministry upon employment separation.

Section III Operational Certification Criteria of the *Land Ambulance Certification Standards* subsection (g) states in part, each emergency medical attendant and paramedic employed by the applicant/operator in his or her ambulance service is assigned a unique identification number issued by the Director. The unique identification number shall appear on a photo identification card and the photo identification card shall be on the person of the paramedic while on-duty.

Section III, Schedule 1, also states in part, ambulance service identification cards are and remain the property of the ministry. Upon release from employment, the identification card must be surrendered to the employer and returned to the ministry.

Ambulance Service Identification Card Program, Operating Protocols and Processes stipulates, the ministry is to be notified of an employee's release by way of either email or facsimile so that the Human Resources Inventory database may be updated.

Inspection Methodologies: The Review Team obtained and reviewed reports and records, submitted by the Service Provider. No On-Site Review was conducted.

Observations: The Service Provider has provided their baseline employee record information to the ministry.

Documentation demonstrates the Service Provider notifies the ministry of each instance of employee hiring and separation, including the separation date. It was noted that newly hired paramedics commence patient care activities only after receipt of their service specific identification number and card.

The ministry is notified in each instance an identification card is lost. The Service Provider recovered and returned the paramedic's service specific identification card to the ministry on each occasion of employment being terminated or separated from the service.

Base Hospital Agreement

Legislated Requirement: Each Service Provider must have an Agreement in place with their regional Base Hospital for medical oversight. Each Base Hospital has a framework within which its medical director provides guidance and medical advice, quality assurance, advanced care skills training, certification of paramedics and the delegation of Controlled Acts.

Base Hospital Policies and Medical Directives are established specifically to enable delegation to paramedics in accordance with legislated requirements, regulations, standards, College of Physician and Surgeons of Ontario (CPSO) and provincial guidelines. The Base Hospital Program has been providing pre-hospital medical oversight for over thirty years.

Section III Operational Certification Criteria of the *Land Ambulance Certification Standards* subsection (I) states in part, a valid agreement is in effect between the applicant/operator and the designated Base Hospital Program, for each area in which the applicant/operator proposes to provide land ambulance service, for the delegation of Controlled Acts by paramedics employed by the applicant/operator.

Inspection Methodologies: The Review Team obtained and reviewed reports and records, submitted by the Service Provider. No On-Site Review was conducted.

Observations: The Service Provider has a written performance agreement with the Base Hospital that includes:

- Providing medical direction and training to all paramedics.
- Monitoring quality of patient care given by those paramedics.
- Delegation of controlled acts to paramedics.

Policy and Procedure

Legislated Requirement: A Service Provider has in place, policies and procedures which impact directly or indirectly on patient care. Policies and procedures are monitored and enforced to ensure compliance with standards and legislation.

- The Act states in part that every upper tier municipality shall be responsible for ensuring the proper provision of land ambulance service in the municipality in accordance with the needs of persons in the municipality.
- The PCTS states, no person smokes any cigar, cigarette, tobacco or other substance while in an ambulance or emergency response vehicle.
- The PCTS also states in part, that no paramedic, while on duty, takes or consumes any liquor within the meaning of the *Liquor Control Act*, or any drug which could impair his or her ability to function as a paramedic; or reports for duty while under the influence of any liquor within the meaning of the *Liquor Control Act*, or any drug which impairs his or her ability to function as a paramedic; or responds to a request for ambulance service while apparently under the influence of liquor or drugs or is apparently suffering the effects of liquor or drugs.
- The *Ambulance Service Communicable Disease Standards* states in part, each operator shall ensure that; employees are aware of current communicable disease risks and follow all aspects of the ASCDS.
- The Act, Part III Discharge of Responsibilities states in part, an upper-tier municipality shall ensure the supply of vehicles, equipment, services, information and any other thing necessary for the proper provision of land ambulance services in the municipality in accordance with this Act and the regulations.

- The Act further states the requirements respecting the disclosure of personal health information. Personal health information has the same meaning as in the *Personal Health Information Protection Act, 2004*.
- Part VI of *Ontario Regulation 257/00* made under the Act states in part, the operator of an ambulance service shall ensure that the remains of a dead person are not transported by ambulance unless, the remains are in a public place and it is in the public interest that the remains be removed; arrangements are made to ensure that an alternative ambulance is readily available for ambulance services during the time that the remains are being transported; and no patient is transported in the ambulance at the same time as the remains are transported.
- Part VI of *Ontario Regulation 257/00* made under the act also states in part, an ambulance may be used to transport the remains of a dead person for the purpose of tissue transplantation on the order of a physician if a physician at the hospital where the tissue is being delivered acknowledges the order.

Inspection Methodologies: The Review Team obtained and reviewed reports and records, submitted by the Service Provider. No On-Site Review was conducted.

Observations: The Service Provider has a Policy and Procedure document. New and updated Policies and Procedures are communicated to staff. The Service Provider monitors and enforces Policies and Procedures to ensure optimal provision of service.

The Service Provider had policies covering the following areas:

- Prohibiting staff from responding to calls under the influence of alcohol or drugs.
- Prohibiting staff from reporting to work under the influence of alcohol or drugs.
- Prohibiting staff from consuming alcohol or drugs while at work.
- Prohibiting any person from smoking any cigar, cigarette, tobacco or other substance while in an ambulance or ERV.
- Regarding transport of a person's remains as per legislation.
- Regarding the disposal of bio-medical materials/waste.
- That students are to be free from communicable diseases.
- That students are to be immunized.
- Staff will immediately notify the Communication Service in the case of any accident involving an ambulance or ERV.
- Outlining the legislative parameters of sharing and disclosure of personal health information.
- Governing the protection of personal information of patients.
- Directing staff in the release of confidential information to allied agencies.
- Directing staff in the release of confidential information to the public.

There was documentation to demonstrate Service Policies relating to drugs, alcohol and tobacco are complied with. There was documentation to demonstrate that immunizations and communicable disease requirements for students/observers are monitored and enforced. There was further documentation to demonstrate Service Policies relating to the release of confidential information are complied with.

Insurance

Legislative Requirement: To mitigate risk and exposure to paramedics, staff and their management team, Service Providers must have appropriate insurance coverage as outlined in *Ontario Regulation 257/00*.

Part VII of *Ontario Regulation 257/00* made under the Act states in part, if the operator of a land ambulance service that is an applicable enterprise uses or permits the use of a land ambulance or emergency response vehicle that is not owned by the Province of Ontario, the operator shall obtain and maintain in good standing a contract of automobile insurance under Part VI of the *Insurance Act* in respect of the vehicle, under which, the operator and every driver are insured and delineates all insurance requirements.

Inspection Methodologies: The Review Team obtained and reviewed the Service insurance policy coverage, submitted by the Service Provider. No On-Site Review was conducted.

Observations: It was noted the Service Provider's insurance policy was current and valid. Further, the insurance coverage was at least equal to that outlined in legislation.

The insurance policy includes and covers:

- Each ambulance, ERV and ESU,
- The Service Provider and every driver,
- An amount equal to at least \$5,000,000, in respect of any one incident,
- Liability for loss of or damage to, resulting from bodily injury to or the death of any passenger carried, getting into or alighting from the ambulance or ERV,
- Liability for loss of or damage to, the property of a passenger carried in an ambulance or ERV, and
- Liability while the ambulance is used for carrying passengers for compensation or hire.

Appendix G Abbreviations

Glossary of Abbreviations			
ACRONYM	MEANING	ACRONYM	MEANING
ACP	Advanced Care Paramedic	ERV	Emergency Response Vehicle
ACR	Ambulance Call Report	ESU	Emergency Support Unit
ACS	Ambulance Communications Service	HRI	Human Resources Inventory
ACO	Ambulance Communications Officer	IC	Inspections and Certifications
AEMCA	Advanced Emergency Medical Care Assistant	IR	Incident Report
ALS	Advanced Life Support	LAISC	Land Ambulance Implementation Steering Committee
ASCDS	Ambulance Service Communicable Disease Standards	LACS	Land Ambulance Certification Standards
ASR	Ambulance Service Review	MOHLTC	Ministry of Health and Long-Term Care
BLS	Basic Life Support	MOH	Ministry of Health
CACC	Central Ambulance Communications Centre	OAPC	Ontario Association of Paramedic Chiefs
CCP	Critical Care Paramedic	OADS	Ontario Ambulance Documentation Standards
CME	Continuing Medical Education	OBHAG	Ontario Base Hospital Advisory Group
CO	Communications Officer	OEM	Original Equipment Manufacturer
CPR	Cardiopulmonary Resuscitation	OPLA & ERVS	Ontario Provincial Land Ambulance & Emergency Response Vehicle Standard
CPSO	College of Physician and Surgeons of Ontario	PCTS	Patient Care and Transportation Standards
CQI	Continuous Quality Improvement	PMAC	Provincial Medical Advisory Committee
CTAS	Canadian Triage & Acuity Scale	QA	Quality Assurance
DA	Delivery Agent	RTPP	Response Time Performance Plan
DSSAB	District Social Services Administration Board	P&P	Policy and Procedure
EHPMDB	Emergency Health Program Management & Delivery Branch	PCP	Primary Care Paramedic
EHRAB	Emergency Health Regulatory and Accountability Branch	PESFOAS	Provincial Equipment Standards for Ontario Ambulance Services
EMA	Emergency Medical Attendant	RFO	Regional Field Office EHPMDB
EMCA	Emergency Medical Care Assistant	UTM	Upper Tier Municipality
EMS	Emergency Medical Service(s)	VIN	Vehicle Identification Number
EORR	Education, Operational Readiness and Regulations		



Hamilton Paramedic Service

Response to Ambulance Service Review Preliminary Draft Report

Ambulance Service Review Dates: Offsite concluded June 1, 2022

Ambulance Service Review Preliminary Draft Report Date: September 26, 2022



October 12, 2022

Hamilton Paramedic Service
Response to September 26, 2022 Service Review Preliminary
Draft Report

Background:

As per Part V, Section 8 of the *Ambulance Act*, no person shall operate an ambulance service unless the person holds a certificate issued by the certifying authority. Further, the legislation states that the certifying authority will only issue a certificate if the person has successfully completed the certification process prescribed by the regulations.

The current Hamilton Paramedic Service certificate to operate an ambulance service expires on October 29, 2022. The legislation states a certificate shall be renewed by the certifying authority only if, before the expiry of the certificate, the operator successfully completes the certification process prescribed by the regulations. The certification process is entitled "Ambulance Service Review".

Hamilton Paramedic Service received preliminary notice from the Emergency Health Services Branch (EHSB) of the Ministry of Health and Long-Term Care (MOHLTC) that the Ambulance Service Review would be conducted virtually with a submission deadline of June 1, 2022. Prior to the review dates, Hamilton Paramedic Service received the "Team Checklist, Self-Assessment and Resource Tool" and commenced preparations.

On July 12, 2022, the Ambulance Service Review Team leader (A) conducted an "exit interview" virtually with Hamilton Paramedic Chief Michael Sanderson and senior members of the Paramedic Service management team. The meeting was positive, and the review team provided a general overview of the service review findings.

On September 26, 2022, the City of Hamilton received the draft "Ambulance Service Review Preliminary Draft Report" containing a detailed description of the service review observations. Accompanying correspondence from Ms. Michelle Johnson, Senior Manager, Inspections and Certifications provided the following introduction:

"Congratulations on successfully meeting the legislated requirements for certification as a land ambulance operator in the Province of Ontario."

"Hamilton Paramedic Service is to be commended for its efforts in the following areas:

- Preparation for the certification inspection*
- Quality Assurance/CQI"*

The MOHLTC advised that "opportunities for improvement" have been identified in the report as "observations" and requested a response to the report within 30 days.

The following is the formal Hamilton Paramedic Service response to the draft report.

Overall Finding of the Service Review

The City of Hamilton, and the men and women of Hamilton Paramedic Service, appreciate and respect the summary finding that the service they provide meets the requirements of the Ambulance Service Review Standards as outlined in the draft "Ambulance Service Review Preliminary Draft Report":



October 12, 2022

Hamilton Paramedic Service
Response to September 26, 2022 Service Review Preliminary
Draft Report

The Hamilton Paramedic Service would like to thank Aaron Lemieux for his professionalism and assistance during the virtual review process.

Hamilton Paramedic Service takes great pride in the delivery of quality patient care to the communities we serve. We therefore place great significance on the observations made during the virtual review process. We were pleased to receive various commendations through the report as confirmation from these observers that our corporate pillars of collective ownership, sensational service, and engaged empowered employees were fulfilled.

This statement is an accolade to the dedication and professionalism of the Paramedics, Supervisors, Managers and support staff employed by Hamilton Paramedic Service.

Response to Observations

In the following sections, each of the observations will be listed in association with a response from Hamilton Paramedic Service (HPS).

Observation 1 (Patient Care Devices and Conveyance Equipment Maintenance):

The Service Provider has a preventative maintenance program in place for conveyance equipment and patient care devices. All patient care devices requiring regular inspection and/or calibration (e.g. oxygen delivery systems, suction equipment, and defibrillator) were included within the Service Provider's Preventative Maintenance program. The service's oxygen testing equipment had not always been calibrated according to the manufacturer's specifications (no calibrations done in 2020 and 2021).

HPS Response: As outlined in the observation, HPS takes pride in our preventative maintenance program and have taken the initiative to make this program, and its associated tracking, more robust. We acknowledge that record of calibration for the testing device was absent for the years 2020 and 2021. There was a record of calibration available for 2022 and we have ensured that the testing unit(s) are now being tracked for preventative maintenance schedules.

ACTION: HPS has corrected the deficiency and we have added the identified equipment to our Operative IQ system for scheduled maintenance cycles.

Observation #2 (Employee Qualifications):

The Service Provider did not always report to the Field Office the Influenza Immunization status of each employee no later than directed by EHRAB each year (reports due in 2020, 2021 and 2022 were all sent late).

HPS Response: HPS strives to meet the deadlines outlined by EHRAB in relation to the reporting requirements for Influenza Immunization status of our paramedic staff. The challenges HPS faces is in relation to when the EHRAB notification is received to when the

October 12, 2022

Hamilton Paramedic Service
Response to September 26, 2022 Service Review Preliminary
Draft Report

deadline is set to occur. Notifying 400+ staff and receiving their declarations is a time-consuming process that may be mitigated by having the EHRAB notification sent out earlier than the normal timelines.

ACTION: HPS will endeavour to meet future submission deadlines for Influenza Immunization status for each employee. Where a paramedic has not provided a response to the declaration it will be assumed that they have provided a negative response and we will report to the Ministry accordingly.

Observation #3 (Service Provider Deployment Plan):

The Service Provider has provided a copy of their deployment plan to the Field Office suitable for implementation by the Communication Service. Documentation demonstrates the service does not always have sufficient staff at each level of qualification to meet their written deployment plan (service provider records showed down staffing occurred over various dates).

HPS Response: HPS, as with other ambulance providers, faced many challenges with the COVID-19 pandemic. The forefront of these challenges was staffing in response to Provincial mandates surrounding isolation, exposures, and symptomatic illness to name a few. Staffing continues to be a systemic issue with ambulance providers provincially and attempts are being made to mitigate this.

ACTION: HPS continues, on a yearly basis, to request additional ambulances/staff as part of the budgetary process with our City Council. HPS will continue to conduct yearly recruitments to fill vacancies and to meet any Council approved ambulance/staff additions.

CONCLUSION

Thank you for the opportunity to respond to this Draft Report. We would be pleased to meet to further discuss any issues, or to provide any required confirmation documentation, as needed to conclude the 2022 Ambulance Service Review Process.

Appendix A to SAC-CCR SAC Roles and Responsibilities
Page 1 of 3

City of Hamilton Seniors Advisory Committee
Committee Recruitment 2022 - 2026
Roles & Responsibilities of New Members

Mission Statement

The Seniors Advisory Committee shall be a credible communication vehicle regarding the quality of life for all seniors in the City of Hamilton. It will provide a forum for consumers and deliverers of seniors' services and facilities to identify issues, explore possible remedies, and work to implement them.

Values

The Committee believes that all seniors should have multiple opportunities for healthy ageing, and a full range of supports to assist them.

Mandate

The Seniors Advisory Committee is empowered by City Council and is responsible to City Council for its activities; it reports to City Council, on issues and concerns pertaining to seniors in Hamilton, through the Emergency & Community Services Committee.

Committee Members Roles and Responsibilities:

The members of the Seniors Advisory Committee responsibilities include, but are not limited to the following:

- Attend and actively participate in monthly meetings and notify the Chair if unable to attend a meeting.
- Members who are absent for three (3) consecutive meetings, without advanced notification, could and/or may be asked to resign from the committee.
- Demonstrate leadership in action through participation in events and activities.
- Form working groups, from within the Seniors Advisory Committee membership, to deal with specific issues as they arise or to work on projects related to the well-being of seniors.
- Examine and advise on issues brought forward by members of the community including businesses, residents, education sector, local organizations and special interest groups.
- Provide input and advise to Council and City staff on issues related to seniors and on the implementation of Hamilton's Age-Friendly Plan.
- Act as an ambassador for seniors and participate in seniors-related events in Hamilton, i.e. International Day of Older Persons, Seniors Kick-off, Senior of the Year Awards.
- Read agendas and minutes prior to meetings and keep well informed of committee projects.
- Liaise with City Councillors to keep them informed of Seniors Advisory Committee projects.

Membership Composition

The Seniors Advisory Committee is comprised of two (2) members of Council and up to 19 citizen members. Committee members will serve a four (4) year term, to coincide with the term of Council. Meetings are typically held between 10:00 am to 12:00 pm on the 1st Friday of each month, or

Appendix A to SAC-CCR SAC Roles and Responsibilities
Page 2 of 3

at the call of the Chair. A Chair and Vice-Chair will be elected and/or appointed by the voting membership of the committee.

Committee Leadership

The various positions within the Committee and the specific responsibilities associated with each are as follows:

Committee Chair:

Plays a leadership role in planning and coordinating the committee's work. The Chair is responsible for maintaining order and decorum during meetings and generally ensuring that the committee work proceeds smoothly in conjunction with the committee's work plan.

Elected by the committee members, the Chair shall:

- Preside at committee meetings and make sure meetings run smoothly by establishing meeting guidelines, involving all committee members in discussions and resolving conflicts.
- With the Vice Chair and the staff liaison, assist with the preparation of meeting agendas and familiarize themselves with agenda items prior to each meeting.
- Ensure the committee complies with procedural By-laws and operational policies.
- Maintain contact with working groups, helping them to stay on track and providing any additional support to accomplish their assigned goals.
- Build a sense of collaboration, creativity, and team ownership between Committee members.
- Represent the Seniors Advisory Committee at public functions.

Vice-Chair:

Elected by the committee members, the Vice-Chair shall:

- Support the Chair in the responsibilities and activities listed above.
- With the Chair and staff liaison, assist with the preparation of meeting agendas and familiarize themselves with agenda items prior to each meeting.
- In the absence of the Chair at Committee meetings or events, the Vice-Chair will fulfill the obligations and responsibilities of the Chair.

Secretary:

- Provide relevant information, ideas and opinions as a participant in the meeting.
- Record without note or comment all resolutions, decisions and other proceedings at the meeting (as per the Municipal Act, 2001).
- Keep an accurate set of minutes of each meeting.
- Keep an up-to-date membership/contact list.
- Distribute minutes to members and notify them of upcoming meetings.
- Keep a list of all advisory committees and members.
- Help the Chair with preparing the agenda, advice on meeting procedure, reference materials and information retrieved from the records.
- Make meeting and physical set-up arrangements (Note: room bookings with City Facilities will be coordinated through the Committee's Staff Liaison).

Staff Liaison:

Appendix A to SAC-CCR SAC Roles and Responsibilities

Page 3 of 3

A City of Hamilton staff member will be assigned to support the ongoing functions of the Seniors Advisory Committee and will:

- Record decisions and other proceedings at each meeting without note or comment.
- Keep an accurate set of minutes for each meeting.
- Keep an up-to-date membership/contact list.
- Distribute minutes and agendas to members and notifying them of upcoming meetings.
- Assisting the Chair and Vice Chair with preparing the agenda, providing advice on meeting procedure, reference materials and information retrieved from the records.
- Coordinate, develop and deliver the Orientation Session for committee members at the beginning of the term.
- Provide technical advice from the Healthy & Safe Communities Department for the preparation of discussion materials, reports, correspondence, etc.
- Arrange for presentations from City staff, community members or external stakeholders on topics relevant to seniors.
- Liaise with City staff for advice and information required by the committee, including procedural advice from the Legislative Coordinator in the Office of the City Clerk.
- Arrange for printing of agendas, minutes, reference material and distribution required by the Committee
- Arrange for the booking of the meeting room.
- Coordinate the annual review of the Committee's Terms of Reference, Roles and Responsibilities, Work Plan and Budget Request to City Council.
- Arrange for parking passes and bike parking access, if required.
- Forward notices of resignation to the Legislative Coordinator for inclusion in the appropriate Emergency and Community Services Committee agenda.

Qualifications

Members of the Seniors Advisory Committee are expected to possess the following qualifications, experience, and abilities:

- An interest, passion, or desire to improve the quality of life for seniors living in Hamilton.
- Demonstrated tact, diplomacy and a commitment to reducing barriers to participation, access or inclusion on the basis of race, ethnicity, ancestry, citizenship/immigration status, country of origin, religion, gender, sexual or gender orientation, ability, health status, receipt of public assistance, political affiliation, record of offences, level of literacy, mental health status, age, socio-economic class, type of housing, neighbourhood of residence, language, family status, or any other personal characteristics.
- Shall reside in the City of Hamilton and have an interest in seniors-related issues.
- It is preferable to have at least one member residing in each ward and that the committee reflect the diversity of the City of Hamilton on the basis described above.



CITIZEN COMMITTEE REPORT

To:	Emergency & Community Services Committee
From:	Seniors Advisory Committee <hr style="width: 20%; margin-left: auto; margin-right: 0;"/> (Penelope Petrie, Chair)
Date:	September 20, 2022
Re:	Seniors Advisory Committee Roles and Responsibilities of New Members

Recommendation:

That the “Seniors Advisory Committee Roles and Responsibilities of New Members” attached as Appendix “A”, be approved for new Seniors Advisory Committee members selected for the 2022-2026 term of City Council.

Background:

At the September 9, 2022 Seniors Advisory Committee meeting it was carried by committee members, the roles and responsibilities of new members under item 13 (General Information/Other Business- 13.6), for Council to approve.

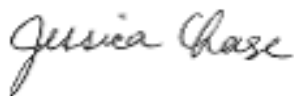
Analysis/Rationale:

The purpose of having this information for new members is to ensure that all new Seniors Advisory Committee members selected for the 2022-2026 term of Council are provided a thorough orientation regarding their roles and responsibilities, so they can fulfill the expectations of their role as an advisory committee member.

Attached as Appendix A: Seniors Advisory Committee Roles and Responsibilities of New Members



CITY OF HAMILTON
HEALTHY AND SAFE COMMUNITIES DEPARTMENT
Children's and Community Services Division

TO:	Chair and Members, Emergency and Community Services Committee
COMMITTEE DATE:	December 1, 2022
SUBJECT/REPORT NO:	2023 Budget Submission - Seniors Advisory Committee (HSC22054) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Lisa Maychak (905) 546-2424 Ext. 1721 Rachelle Ihekwoaba (905) 546-2424 Ext. 5909
SUBMITTED BY:	Jessica Chase Director, Children's and Community Services Division Healthy and Safe Communities Department
SIGNATURE:	

RECOMMENDATION(S)

That the Seniors Advisory Committee 2023 base budget submission attached as Appendix "A" to Report HSC22054 in the amount of \$3000 be approved and referred to the 2023 budget process for consideration.

EXECUTIVE SUMMARY

In accordance with the process for submission of budgets for the Volunteer Advisory Committees, the Seniors Advisory Committee budget for 2023, in the amount of \$3000 is being submitted for approval.

Alternatives for Consideration – See Page 2

FINANCIAL – STAFFING – LEGAL IMPLICATIONS

Financial: The base budget request for 2023 for the Seniors Advisory Committee is \$3000 which is an increase of \$500 over the budget requested and approved for 2022.

Staffing: N/A

OUR Vision: To be the best place to raise a child and age successfully.

OUR Mission: To provide high quality cost conscious public services that contribute to a healthy, safe and prosperous community, in a sustainable manner.

OUR Culture: Collective Ownership, Steadfast Integrity, Courageous Change, Sensational Service, Engaged Empowered Employees.

**SUBJECT: 2022 Budget Submission - Seniors Advisory Committee (HSC22054)
(City Wide) - Page 2 of 3**

Legal: N/A

HISTORICAL BACKGROUND

At their September 9, 2022 meeting, the Seniors Advisory Committee considered their budget needs for 2023. Their budget submission is attached as Appendix "A" to Report HSC22054. The budget includes incidental costs to support the Committee as well as additional costs for specific events, programs and initiatives.

The Seniors Advisory Committee is requesting an additional \$500 for 2023 with the total amount requested being \$3000. The additional \$500 is being requested for additional costs related to the return to in-person meetings, such as parking for committee members and meeting refreshments. The committee also plans to do additional engagement work with seniors in the community in 2023.

In accordance with the volunteer committee budget process, the budget is recommended for approval.

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

The Seniors Advisory Committee is able to put surplus funds from each year into a reserve, for future purposes and request the use of those funds, in future years, for specific activities. The possibility gives the Committee the opportunity to plan ahead to undertake specific projects or initiatives, in future years, while minimizing increases in their budgets. The Seniors Advisory Committee has not yet determined all of their activities for 2023. Should additional funding be required in 2023 and be available in the Seniors Advisory Committee reserve, requests for reserve funding will be made at the appropriate time.

RELEVANT CONSULTATION

The Seniors Advisory Committee discussed their 2023 budget needs at their September 9, 2022 committee meeting.

ANALYSIS AND RATIONALE FOR RECOMMENDATION

The recommendation will provide funding for the operations of the Seniors Advisory Committee to enable them to continue to fulfil their terms of reference.

ALTERNATIVES FOR CONSIDERATION

None

OUR Vision: To be the best place to raise a child and age successfully.

OUR Mission: To provide high quality cost conscious public services that contribute to a healthy, safe and prosperous community, in a sustainable manner.

OUR Culture: Collective Ownership, Steadfast Integrity, Courageous Change, Sensational Service, Engaged Empowered Employees.

**SUBJECT: 2022 Budget Submission - Seniors Advisory Committee (HSC22054)
(City Wide) - Page 3 of 3**

ALIGNMENT TO THE 2016 – 2025 STRATEGIC PLAN

Community Engagement & Participation

Hamilton has an open, transparent and accessible approach to City government that engages with and empowers all citizens to be involved in their community.

Economic Prosperity and Growth

Hamilton has a prosperous and diverse local economy where people have opportunities to grow and develop.

Healthy and Safe Communities

Hamilton is a safe and supportive city where people are active, healthy, and have a high quality of life.

Clean and Green

Hamilton is environmentally sustainable with a healthy balance of natural and urban spaces.

Built Environment and Infrastructure

Hamilton is supported by state-of-the-art infrastructure, transportation options, buildings and public spaces that create a dynamic City.

Culture and Diversity

Hamilton is a thriving, vibrant place for arts, culture, and heritage where diversity and inclusivity are embraced and celebrated.

Our People and Performance

Hamiltonians have a high level of trust and confidence in their City government.

APPENDICES AND SCHEDULES ATTACHED

Appendix “A” to Report HSC22054: Seniors Advisory Committee 2023 Budget Submission

OUR Vision: To be the best place to raise a child and age successfully.

OUR Mission: To provide high quality cost conscious public services that contribute to a healthy, safe and prosperous community, in a sustainable manner.

OUR Culture: Collective Ownership, Steadfast Integrity, Courageous Change, Sensational Service, Engaged Empowered Employees.

CITY OF HAMILTON

2023

ADVISORY COMMITTEES

BUDGET SUBMISSION FORM

SENIOR ADVISORY COMMITTEE

Appendix A to Report HSC22054
Page 2 of 5

Appendix A to Report HSC22054
Page 1 of 5

PART A: General Information

ADVISORY COMMITTEE MEMBERS:

Penelope Petrie	Kamal Jain
David Broom	Noor Nizam
Marian Toth	Maureen McKeating
Marjorie Wahlman	Dahlia Pet grave
Carolann Fernandes	Sarah Shallwani
Anne Elliot	Barry Spinner
Aref Alshaikhahmed	Kathryn Wakeman
Sheryl Boblin	Alexander Huang
Steve Benson	Tom Manzuk
Peter Lesser	

MANDATE:

The Seniors Advisory Committee is a Council mandated advisory committee of the City of Hamilton. To be a credible communication vehicle that will reflect and translate the ongoing needs that affects the quality of life for all older persons. It will provide a forum for consumers and deliverers of services and facilities to identify issues, explore possible remedies, and work to implement them.

PART B: Strategic Planning

STRATEGIC OBJECTIVES:

Appendix A to Report HSC22054**Page 2 of 5**

- To assist Council in decision making as it pertains to senior's issues in Hamilton.
- To respond and advocate concerns affecting policies, services and facilities for seniors delivered by and funded by all levels of government.
- To promote and disseminate all decisions relating to access, the provision of services programs and facilities for seniors in the City of Hamilton.
- To liaise with other organized groups when there are matters of mutual concerns.
- To promote and advocate, wherever appropriate, the concept of healthy aging by encouraging improved and responsive programs and services in a timely fashion.

ALIGNMENT WITH CORPORATE GOALS:

Please check off which Council approved Strategic Commitments your Advisory Committee supports			
1) Community Engagement & Participation	X	2) Economic Prosperity & Growth	X
3) Healthy & Safe Communities	X	4) Clean & Green	X
5) Built Environment & Infrastructure	X	6) Culture & Diversity	X
7) Our People & Performance			

PART C: Budget Request**INCIDENTAL COSTS:**

Monthly meeting expenses (photocopying, refreshments, committee member parking), postage, and gifts for committee members who resign or who are on an approved sick leave (limit of \$25 per member).	\$1,500.00
SUB TOTAL	\$1,500.00

Appendix A to Report HSC22054
Page 3 of 5

SPECIAL EVENT/PROJECT COSTS:

Support for seniors related events (International Day of the Older Person, Seniors Month Kick-off Event, Senior of the Year Award, etcetera, as well as advertising and promotional items for participation at events for seniors.	\$1,500.00
SUB TOTAL	\$1,500.00

TOTAL COSTS	\$ 3,000.00
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Funding from Advisory Committee Reserve (only available to Advisory Committees with reserve balances)	\$N/A
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TOTAL 2023 BUDGET REQUEST	\$ 3,000.00
PREVIOUS YEAR (2022) APPROVED BUDGET (2022 Request \$)	\$2,500.00

CERTIFICATION:

Please note that this document is a request for a Budget from the City of Hamilton Operating budget. The submission of this document does not guarantee the requested budget amount. Please have a representative sign and date the document below.

Representative's Name: Penelope Petrie, Chair

Signature: _____

Date: _____

Telephone #: 905-383-3558



CITY OF HAMILTON
HEALTHY AND SAFE COMMUNITIES DEPARTMENT
Housing Services Division

TO:	Chair and Members Emergency and Community Services Committee
COMMITTEE DATE:	December 1, 2022
SUBJECT/REPORT NO:	2023 Budget Submission - Housing and Homelessness Advisory Committee (HSC22056) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	James O'Brien (905) 546-2424 Ext. 3728
SUBMITTED BY:	Michelle Baird Director, Housing Services Division Healthy and Safe Communities Department
SIGNATURE:	<i>Michelle Baird</i>

RECOMMENDATION(S)

That the Housing and Homelessness Advisory Committee 2023 base budget submission attached as Appendix "A" to Report HSC22056 in the amount of \$1,000 be approved and referred to the 2023 budget process for consideration.

EXECUTIVE SUMMARY

The Housing and Homelessness Advisory Committee has prepared and approved their budget submission for 2023 in the amount of \$1,000. This submission is consistent with the 2022 approved budget for the committee.

Alternatives for Consideration – Not Applicable

FINANCIAL – STAFFING – LEGAL IMPLICATIONS

Financial:

The budget request is the same as the approved budget for the Housing and Homelessness Committee for 2022. The \$1,000 will be used for meeting costs, including meeting rooms, refreshments, photocopying, parking, printing and transportation and a proposed 2023 committee orientation event.

OUR Vision: To be the best place to raise a child and age successfully.

OUR Mission: To provide high quality cost conscious public services that contribute to a healthy, safe and prosperous community, in a sustainable manner.

OUR Culture: Collective Ownership, Steadfast Integrity, Courageous Change, Sensational Service, Engaged Empowered Employees.

SUBJECT: 2022 Budget Submission - Housing and Homelessness Advisory Committee (HSC22056) (City Wide) - Page 2 of 3

Staffing:

N/A

Legal:

N/A

HISTORICAL BACKGROUND

The Housing and Homelessness Advisory Committee was established by the Emergency and Community Service Committee in November 2015 (Report CES15053) with a mandate to:

- Communicate and work to address the needs of citizens within the community for whom barriers exist to accessing safe, suitable, and affordable housing, including the supports needed to enable citizens to obtain and retain their homes, and;
- Support the City of Hamilton's 10-year Housing and Homelessness Action Plan by providing information, advice, and recommendations to the Emergency and Community Services Committee regarding the Action Plan's successful and implementation.

At their November 25, 2022 meeting, the Housing and Homelessness Advisory Committee gave consideration to their 2023 budget needs. Their budget submission is attached as Appendix "A" to Report HSC22056. This budget covers meeting costs, including meeting rooms, refreshments, photocopying, parking, printing and transportation and a proposed orientation event for 2023. The committee is requesting the same budget they had in 2022 in the amount of \$1,000 for 2023.

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

The committee will outline a meeting schedule for 2023 if struck by Council, and this budget will provide them support to undertake specific activities in their workplan. This includes transportation and parking support for committee members and speakers as the committee moves back to in-person meetings. The committee has previously used their budget for information gathering events and in 2023, plan to host an orientation event related to affordable housing for their incoming members.

RELEVANT CONSULTATION

The Housing and Homelessness Advisory Committee discussed their 2023 budget needs at the November 25, 2022 meeting. After a thoughtful discussion they approved a budget submission that was consistent with their 2022 budget.

**SUBJECT: 2022 Budget Submission - Housing and Homelessness Advisory
Committee (HSC22056) (City Wide) - Page 3 of 3**

ANALYSIS AND RATIONALE FOR RECOMMENDATION

This budget allocation will provide funding for the operation of the Housing and Homelessness Advisory Committee and enable them to fulfil their mandate. The committee is not asking for an increase to their budget.

ALTERNATIVES FOR CONSIDERATION

None

ALIGNMENT TO THE 2016 – 2025 STRATEGIC PLAN

Community Engagement and Participation

Hamilton has an open, transparent and accessible approach to City government that engages with and empowers all citizens to be involved in their community.

Healthy and Safe Communities

Hamilton is a safe and supportive City where people are active, healthy, and have a high quality of life.

APPENDICES AND SCHEDULES ATTACHED

Appendix “A” to Report HSC22056: Housing and Homelessness Advisory Committee
2023 Budget Submission

CITY OF HAMILTON

2023

ADVISORY COMMITTEES

BUDGET SUBMISSION FORM

Housing and Homelessness Advisory Committee

Appendix A to Report HSC22056
Page 2 of 6

Appendix A to Report HSC22056

Page 1 of 6

PART A: General Information**ADVISORY COMMITTEE MEMBERS:**

Eileen Campbell	Leisha Dawson
Morgan Stanek	Sandy Leyland
Violetta Nikolskava	Michael Slusarenko
Thomas Mobley	Michael Power
Tony Manganiello	Rhonda Mayer
Shaun Jamieson	Mary-Ellen Crechiola
Julia Verbitsky	Lance Dingman

MANDATE:

Communicate and work to address the needs of citizens within the community for whom barriers exist to accessing safe, suitable, and affordable housing, including the supports needed to enable citizens to obtain and retain their homes, and;

Support the City of Hamilton's 10-year Housing and Homelessness Action Plan by providing information, advice, and recommendations to the Emergency & Community Services Committee regarding the Action Plan's successful and meaningful implementation.

PART B: Strategic Planning**STRATEGIC OBJECTIVES:**

Appendix A to Report HSC22056

Page 2 of 6

The following objectives have been established for the HHAC to facilitate its efforts in achieving the mandate.

1. Assist with the coordination and implementation of Council approved recommendations, including the City of Hamilton's 10-year Housing and Homelessness Action Plan.
2. Ensure that recommendations regarding issues relating to people who are experiencing homelessness or who may be at risk of becoming homeless are brought forward to Council in a timely manner.
3. Devise and recommend to Council innovative and preventative measures to assist in addressing homelessness within the community;
4. Identify emerging trends, potential gaps and best practices in emergency housing needs.
5. Provide Council and staff with information, advice, and recommendations about residential landlord and tenant issues and policies that would improve the overall well-being of tenants in Hamilton and support landlords in the provision of safe, quality, and affordable rental units.
6. Identify housing-related supports available in the community and facilitate relationship-building between community partners, citizens and government to ensure that people have the individualized supports needed to help them obtain and retain housing.
7. Regularly update Council about homelessness and affordable housing issues through the discussion and analysis that takes place at HHAC.
8. Respond to requests and direction from staff and Council.
9. Collaborate and cooperate with other City of Hamilton committees and community groups doing work around issues that impact homelessness and affordable housing to stay apprised of relevant initiatives and contribute information and advice as needed.

ALIGNMENT WITH CORPORATE GOALS:

Please check off which Council approved Strategic Commitments your Advisory Committee supports			
1) Community Engagement & Participation	X	2) Economic Prosperity & Growth	
3) Healthy & Safe Communities	X	4) Clean & Green	
5) Built Environment & Infrastructure		6) Culture & Diversity	
7) Our People & Performance			

Appendix A to Report HSC22056
Page 3 of 6

PART C: Budget Request

INCIDENTAL COSTS:

Meeting costs – meeting room, refreshments, photocopying, printing, parking, transportation	1,000
SUB TOTAL	\$1,000

SPECIAL EVENT/PROJECT COSTS:

N/A	0
SUB TOTAL	\$0

TOTAL COSTS	\$1,000
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Funding from Advisory Committee Reserve (only available to Advisory Committees with reserve balances)	\$2,995
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TOTAL 2023 BUDGET REQUEST (net of reserve funding)	\$ 1,000
PREVIOUS YEAR (2022) APPROVED BUDGET (2022 Request \$)	\$1,000

CERTIFICATION:

Please note that this document is a request for a Budget from the City of Hamilton Operating budget. The submission of this document does not guarantee the requested budget amount. Please have a representative sign and date the document below.

Representative's Name: _____

Appendix A to Report HSC22056
Page 4 of 6

Signature:

Date:

Telephone #:



CITY OF HAMILTON
HEALTHY AND SAFE COMMUNITIES DEPARTMENT
Housing Services Division

TO:	Chair and Members Emergency and Community Services Committee
COMMITTEE DATE:	December 1, 2022
SUBJECT/REPORT NO:	Hamilton Alliance for Tiny Shelters Proposal (HSC22015(a)) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Nadia Zelisko (905) 546-2424 Ext. 2548 Greg Tedesco (905) 546-2424 Ext. 7168 Rob Mastroianni (905) 546-2424 Ext. 8035
SUBMITTED BY:	Michelle Baird Director, Housing Services Division Healthy and Safe Communities Department
SIGNATURE:	

RECOMMENDATION(S)

- (a) That respecting the request for a City of Hamilton contribution to the Hamilton Alliance for Tiny Shelters (HATS) Council approve an immediate contribution of \$100 K for the year ended December 31, 2022 to be funded from the projected 2022 Housing Services Division surplus or the Tax Stabilization Reserve #110046, if the division surplus is not realized;
- (i) That funding as approved in recommendation (a) be based on the following conditions:
- (1) That staff be directed to work with HATS to identify and outline standards around performance metrics and outcomes as a condition of funding including, but not limited to: eligibility and entry criteria, gender-specific considerations including specific supports for women, trans-feminine, trans-masculine and non-binary individuals, identification of formalized community partnerships with health- and social service sectors, equity and inclusion, and demonstrated exits into safe permanent housing; and agreed upon by HATS for first year of operations;

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OUR Mission: To provide high quality cost conscious public services that contribute to a healthy, safe and prosperous community, in a sustainable manner.

OUR Culture: Collective Ownership, Steadfast Integrity, Courageous Change, Sensational Service, Engaged Empowered Employees.

SUBJECT: Hamilton Alliance for Tiny Shelters Proposal (HSC22015(a)) (City Wide)
- Page 2 of 11

- (2) Confirmation that matching funds have been received or committed to; and,
 - (3) That a detailed exit strategy has been created and agreed to should HATS not be able to ensure site safety and adequate operational funding.
- (b) That consideration of a contribution up to a maximum of \$100 K annually to HATS toward the establishment and operation of temporary tiny cabins for the 2-year period of January 2023 to December 2024, be referred to the 2023 Council Operating budget deliberations to be funded from the Operating Levy over the next 2 years:
 - (i) That staff be directed to work with HATS to identify and outline standards around performance metrics and outcomes as a condition of funding including, but not limited to: eligibility and entry criteria, gender-specific considerations including specific supports for women, trans-feminine, trans-masculine and non-binary individuals, identification of formalized community partnerships with health- and social service sectors, equity and inclusion, and demonstrated exits into safe permanent housing;
 - (ii) That funding as approved in recommendation (b) be cash flowed in 6 month increments upon the following conditions:
 - (1) Confirmation that performance metrics have been achieved as outlined in recommendation (b)(i);
 - (2) Confirmation that matching funds have been received or committed to; and,
 - (3) That a detailed exit strategy has been created and agreed to should HATS not be able to ensure site safety and adequate operational funding.
- (c) That staff be directed to evaluate and assess program outcomes and efficacy and report back to the Emergency and Community Services Committee at the 6- and 12-month marks;
- (d) In the event that the initial proposed site for HATS at 647 Barton St. East is at any point deemed not viable to proceed, that staff be directed to return to Council with a report identifying how these funds may be redirected in alignment with Council approved strategies such as the Housing and Homelessness Action Plan

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and Coming Together to End Homelessness: Hamilton's System Planning Framework;

- (e) That the General Manager of the Healthy and Safe Communities Department or their designate be directed and authorized, on behalf of the City of Hamilton, to enter into, execute and administer all agreements and documents necessary to implement the grant outlined above on terms and conditions satisfactory to the General Manager of the Healthy and Safe Communities Department or their designate and in a form satisfactory to the City Solicitor

EXECUTIVE SUMMARY

The proposal put forward by HATS demonstrates a willingness and desire by community to contribute to solutions for chronically unsheltered residents in Hamilton. There remain distinct challenges and concerns around the operationalizing of such an intervention, including concerns around the health and safety of HATS residents and the potential for specific efforts and investment in 'tiny cabins' to divert resources from permanent solutions for people experiencing chronic homelessness.

Given the ongoing challenges surrounding unsheltered homelessness, providing HATS immediately with \$100 K contribution will provide them opportunity to raise additional funding required to begin operations. Providing conditional support to HATS for up to an additional 2-years, with evaluation and assessment of program outcomes to be brought back to Committee and Council at 6- and 12-months, and annually thereafter, may provide the City of Hamilton a unique opportunity to pilot this approach on a temporary basis and assess if or how it may fit within Hamilton's system of care. An overview of the updated HATS proposal, reviewed by Housing Services staff in preparation of this report, is included in Appendix "A" to Report HSC22015(a).

The HATS group should be commended for organizing and building collective action through their proposal. Housing Services recognizes that this intervention is reflective of ongoing systemic challenges and inequities across Canada as it relates to housing and homelessness. This is demonstrated by the rise in, and visibility of, unsheltered homelessness and encampments throughout many Canadian cities during COVID-19. While HATS has mobilized to address a gap further intensified during COVID-19, this initiative should serve as further impetus for the City of Hamilton, as well as community partners and other levels of government, to rapidly prioritize and invest in deeply affordable permanent housing solutions. This report seeks to inform council of the risk and opportunities to invest in 'tiny cabins' at the identified site, as well as other investments in line with a Housing First philosophy and a rights-based approach to housing that can have positive impact in homelessness as they deliberate this decision.

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Housing Services remains committed to seeking out and supporting innovative solutions to address homelessness in Hamilton. As a temporary emergency response, this intervention should not take away from our core focus on prioritizing investment and resource allocation in permanent housing that is safe, suitable and affordable to the individual. Housing Services remains committed to adapting the emergency system to enable flexibility to meet ongoing needs where possible, while also enhancing prevention, diversion and permanent housing placement supports. These efforts are strengthened through collaborative work with local Indigenous leadership, as well as a commitment to include and learn from the perspective of people with lived expertise. Through this, it remains critical that we continue to invest in and enhance a diversity of housing-focused interventions, grounded in a Housing First philosophy and a rights-based approach to housing, in order to shift from emergency response to long-term approaches to ending homelessness.

Alternatives for Consideration – See Page 10

FINANCIAL – STAFFING – LEGAL IMPLICATIONS

Financial:

As noted in recommendation (a), an immediate funding source is required, and therefore the initial contribution will be funded by the 2022 Housing Services Division Surplus, or the Tax Stabilization Reserve #110046, if the division surplus is not realized, and is subject to meeting the conditions outlined in recommendation (a)(i).

In addition, as noted in recommendation (b), a funding source is required to support the conditional funding for up to 2 years. Therefore, the HATS request will be referred to the 2023 Council Operating Budget deliberations to be funded from the Operating Levy in 2023 and 2024.

Should the conditions set out for HATS in recommendation (a) and/or (b) not be met, Housing Services Division will bring a report forward to Council with a recommendation for the use of the remaining levy base available. As noted in recommendation (d), the remaining levy base will be allocated to support prevention and housing placement support services in alignment with Council approved strategies such as the Housing and Homelessness Action Plan and Coming Together to End Homelessness: Hamilton's System Planning Framework

Staffing: N/A

Legal: N/A

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HISTORICAL BACKGROUND

On February 17, 2022, the Emergency and Community Services Committee approved Report HSC22015 Proposal by Hamilton Alliance for Tiny Shelters, which directed staff to share information gathered in the report with HATS to inform their planning for a potential site in Hamilton. This report included a full breakdown and analysis of considerations related to planning and development approvals for the HATS proposal.

On August 11, 2022, the Emergency and Community Services Committee approved Report (HSC20020(f)) Adaptation and Transformation of Services Update 6. This report outlined an interim plan for homelessness emergency system service levels for additional pressures in 2022 and to the end of March 2023. Up to the end of 2022, this included: a conditional grant to Mission Services for capital improvements to a new men's emergency shelter location; and ancillary costs associated with the rental of hotel rooms for expanded temporary emergency shelter for single men and women. From January to March 2023, approved recommendations included: interim capacity of up to 100 additional beds in the women's emergency shelter system as needed; maintaining increased interim emergency shelter capacity of up to 24 beds in the men's system; and continuation of enhanced drop-in services including but not limited to Living Rock, Mission Services, Wesley and the YWCA.

On November 21, 2022, General Issues Committee (Budget) approved the following motion: That the General Manager of the Healthy & Safe Communities Department be directed to meet with the Hamilton Alliance for Tiny Shelters (HATS) and report to the Emergency & Community Services Committee meeting of December 1, 2022; with respect to the proposal put forward by HATS at the November 21, 2022 General Issues Committee, with regard to policy and responsibility within the duty of the Healthy & Safe Communities Department.

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

The Housing Services Division is the designated Community Entity (CE) responsible for local implementation of the federal Reaching Home strategy and the Service Manager for the provincial Homelessness Prevention Program (HPP) and related investments. Housing Services works in partnership with the CE for the Reaching Home Indigenous funding stream, the Coalition of Hamilton Indigenous Leadership (CHIL). Under the Reaching Home directives, the City is mandated to achieve core requirements that help strengthen an evidence-based and integrated approach across the homelessness sector. Similarly, HPP requirements include a set of performance indicators have been developed to monitor and track progress on the achievement outcomes, including the goal of measuring a reduction in homelessness and chronic homelessness.

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Housing Services Division remains guided by and grounded in existing Council approved strategies, such as the Housing and Homelessness Action Plan and Coming Together to End Homelessness: Hamilton's System Planning Framework. These strategies are deeply aligned with Reaching Home and HPP requirements and represent evidence-based community strategies towards ending homelessness that build on a foundation established through many years of collaboration. This includes a rights-based approach and a Housing First philosophy underpinned by the following principles:

- rapid housing placement with supports and no readiness requirements;
- participant choice and self-determination;
- recovery orientation separating housing provision from treatment services;
- individualized and client-driven supports; and,
- social and community integration.

From a policy perspective, as currently constituted the proposal by HATS does not fit within the typical housing continuum, as it is neither emergency shelter or permanent housing. The proposed intervention continues to reflect a broader, long-term failure of public policy at all levels to ensure that all individuals have access to adequate housing and supports. Framed as a new solution for those who may face barriers accessing existing homeless serving system supports, the proposed intervention is more reflective of a 'managed encampment' site. Should this proposal be implemented, it is critical that it should be time-limited to ensure this does not become embedded as a permanent intervention. At the same time, collective efforts to rapidly prioritize and invest in deeply affordable permanent housing solutions should be prioritized, in alignment with Federal and Provincial housing and homelessness commitments.

As Service Manager Hamilton will continue to seek out perspectives and learnings from similar initiatives in Ontario municipalities / regions including but not limited to: 'sleeping cabins' in Kingston; outdoor shelter model development in Waterloo Region; A Better Tent City in Kitchener; and, temporary outdoor shelters in London.

RELEVANT CONSULTATION

Staff from Hamilton Fire Department, including the Chief Fire Prevention Officer, previously met with representatives from HATS with the primary goal of understanding the parameters of the project, and how Hamilton Fire could be of assistance. Discussion included the possibility of a site visit to visualize the space and to provide template documents and supporting information that would allow HATS to make informed decisions regarding structure placement and access controls for emergency response. Hamilton Fire also indicated that they would advise on how to create a fire safety plan for the premises, and possible considerations for fire safety awareness training for any employees or property managers that may work at the site. If the project moves ahead,

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the property/location would be subject to emergency police / fire / paramedic response for persons or property anywhere within City boundaries.

The City of Hamilton Paramedic Service met with HATS representatives in October 2022 and reviewed their planned implementation plan. At this time, Hamilton Paramedic Service have no concerns with their proposal as there are no resource implications for the paramedic service; HPS response would be through usual service levels such as social navigator program and 911 response if/as needed.

Staff from Housing Services communicated with Hamilton Police Services (HPS) in November 2022, and HPS confirmed that with regards to the Rapid Intervention Support Team (RIST) and HATS, there will be no additional police resources dedicated to HATS. HPS indicated that if RIST is supporting clients at the site, they will continue to support them and that there may be proactive visits in a supportive role, however nothing enforcement related.

ANALYSIS AND RATIONALE FOR RECOMMENDATION

The interim response actions proposed by the HATS group represent a strong community desire to explore practical solutions to support the ongoing needs of unhoused residents living encamped in Hamilton. As Housing Services implements key actions to support implementation of a phased transition plan for the homeless serving system, including emergency supports, the HATS project has the potential to provide an additional base layer of support over a temporary period to unsheltered populations who may face barriers to accessing the current interventions within this system.

Critical to the recommendation to provisionally support the HATS proposal for the period between 2022 to 2024, pending a review of efficacy at 6- and 12-months, is the expectation that staff work with HATS to identify and outline specific measurable performance metrics, standards and outcomes as a condition of temporary funding. At minimum, quantitative and qualitative approaches should examine safety and well-being for unsheltered residents, progress toward as well as consistent exits into safe permanent housing. People with lived expertise of unsheltered homelessness should be the key focus of evaluation efforts and should continue to inform further adaptations and interventions in housing and homelessness services and identified solutions should be evidence-based and informed by intersectional, culturally safe and trauma-informed approaches.

Additional practical items to consider and address immediately and throughout the design and implementation of the HATS proposal should it go forward include:

- clear identification of admission and selection criteria, with a prioritization of chronically unsheltered individuals who face barriers to accessing the current homeless serving system;

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- a recognition of the systemic over-representation of Indigenous persons experiencing homelessness and the need to prioritize autonomy and self-determination, with connections to housing and supports that are culturally appropriate, rooted in the spirit and actions of reconciliation;
- gender based analysis to inform accessibility, safety and supports for women, trans-feminine, trans-masculine and non-binary adults;
- identification of an overall safety and well-being site plan for HATS residents, staff (on- and off site) and the neighbouring community, including but not limited to an assessment of risk and safety factors linked to human trafficking, weapons and fire;
- explicit reference of and commitment to addressing diversity and inclusion considerations and implications on support structure, implementation and operation as to consistently explore who may be impacted (i.e. considerations around gender, gender identity and expression, race, ability, sexual orientation, immigration status, socioeconomic status, etc.), how they are impacted and why.

As outlined above, the intervention proposed by HATS should remain time limited, prompting collective action to seek out and implement permanent housing solutions through a whole-of-community approach to support person-centred solutions for unsheltered residents.

Lastly, it is important to recognize that in the long-term, emergency based ‘tiny cabins’ should not be viewed as a permanent solution to addressing issues related to permanent housing. If resources are disproportionately directed at emergency interventions over time without additional investment in and focus on permanent housing solutions, temporary emergency responses may become more permanently entrenched within our system. As such it is critical that we continue to practically pursue housing-focused interventions, grounded in a Housing First philosophy and a rights-based approach to housing.

Alignment with Housing Services Strategic Priorities

Housing Services will continue to engage with HATS to gather important information and context related to the proposed project to address practical considerations and concerns related to health and safety, equity and inclusion, alignment with a Housing First philosophy, and connections to permanent housing solutions. Recommendations and decisions proposed by Housing Services continue to be rooted in the goal of ensuring safe, dignified and secure permanent housing solutions for all Hamiltonians, and as such, temporary and conditional support for the HATS initiative allows for an assessment period to practically explore a clear demonstration of connectivity with departmental goals and strategies.

We remain committed to adapting the emergency system to enable flexibility to meet ongoing needs where possible, while also enhancing prevention, diversion and

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permanent housing placement supports. Ongoing policy and planning considerations related to conditional support of HATS will be assessed through an analysis of alignment with Divisional responsibilities and commitments through agreements such as the Federal Reaching Home Program and the Provincial Homelessness Prevention Program, as well as Hamilton's Housing and Homelessness Action Plan (HHAP) and Coming Together to End Homelessness: Systems Planning Framework.

The HHAP, updated in 2020 following extensive community consultation and review, identified shared core values that guide Housing Services and will assist in determining strategic policy alignment through the implementation of the HATS proposal, including:

- rights based and anti-discrimination: efforts must acknowledge inequalities related to racism, oppression and discrimination and intentionally work to eliminate them;
- person-centred supports: people are supported in ways that make sense for their unique circumstances and their economic, cultural and gendered realities;
- risk and protective factors: successful community responses to homelessness and housing insecurity work to increase the protective factors and decrease the risk factors in people's lives;
- evidence based, measurable and impact-driven: people in our community deserve housing and homelessness responses that are based on intentional planning and good evidence and that have measurable positive impacts and outcomes;
- efficient and effective use of community resources: human and financial resources spent to address housing and homelessness are investments in our community that reduce public costs in other areas;
- integrated and comprehensive community planning: to ensure integrated planning is authentic, transparency and communication must be at the core of our work; and,
- place and neighbourhoods: place matters. People will exercise choice over where they live. A full range of quality housing options contributes to neighbourhoods that are healthier and more dynamic. Healthy neighbourhoods are also a place where community and less formal supports can flourish and support people to feel connected and included in all elements of civic life.

Additional considerations for continuation of funding or support throughout the proposed period between 2022 to 2024 should continue to be assessed through the lens of the core values listed above, as well as through accountability and business processes in line with Divisional benchmarking that outline clear and transparent evaluation metrics aligned with achieving measurable outcomes in reducing homelessness.

Next Steps

Housing Services Division is currently in the process of updating Standards for the Emergency Shelter System, working closely with shelter operators and people with lived expertise. Consultations are ongoing until the end of 2022, with updated Standards expected in February 2023. Also, as a part of this process is a review of the size of the emergency system, including analysis of shelter built-form and related best-practice.

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Emergency sheltering remains one component of a well-functioning, integrated system of care for people experiencing homelessness, and investments in housing placement support would ideally occur in a 4:1 ratio alongside investment in emergency shelter. Hamilton's current emergency shelter system remains a vital resource for unhoused residents in Hamilton (from October 2021 through October 2022, 3044 unique individuals accessed the shelter system) and offers extensive support for meeting basic needs, case management supports to build and work towards housing goals, and connections to a range of health and community services.

Recognizing the impacts of trauma on individuals, families and communities and the complex mental health, addictions, and system involvement background of many individuals at risk of or experiencing homelessness, there remains a critical and persistent need to support those experiencing chronic homelessness with complex needs through a permanent supportive housing intervention, combining housing, intensive case management and clinical health services. Staff continue to explore strategies and actions to address persistent mental health and addictions issues for those seeking emergency shelter and housing supports, while also continuing to advocate for additional investments from other levels of government to adequately support those with complex needs in our community.

ALTERNATIVES FOR CONSIDERATION –

Should Council wish to invest in Hamilton's homelessness serving system in other ways, alternative interventions for a similar annual investment of \$100 K could include one of:

- housing loss prevention and housing placement support, including: first or last month's rent, rental or utility arrears for approximately 90 singles, 55 families or 25 couples at risk of, or experiencing homelessness, including Indigenous community members supported directly by Indigenous service providers. These households may otherwise need emergency shelter;
- portable housing allowances of \$350/month for approximately 23 households to secure permanent housing, with support from existing Intensive Case Management and Rapid Re-housing programs to maintain their tenancy; or,
- continued funding to support access to health, mental health or addictions support essential to maintain housing for a minimum of 15-20 clients of Intensive Case Management and Rapid Re-housing programs.

ALIGNMENT TO THE 2016 – 2025 STRATEGIC PLAN

Healthy and Safe Communities

Hamilton is a safe and supportive City where people are active, healthy, and have a high quality of life.

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Built Environment and Infrastructure

Hamilton is supported by state-of-the-art infrastructure, transportation options, buildings and public spaces that create a dynamic City.

APPENDICES AND SCHEDULES ATTACHED

Appendix "A" to Report HSC22015(a): Updated HATS Report to City of Hamilton

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PURPOSE OF THIS DOCUMENT & OVERVIEW

This report responds to questions asked of the Hamilton Alliance for Tiny Shelters (HATS) organization by City Council and staff.

It also serves as a follow-up document to the several requests made to the City to secure approval for foundational and subsequent annual funding for our Hamilton Tiny Shelters program.

ORGANIZATIONAL DETAILS & GOVERNANCE

HATS is an incorporated non-profit organization (1379127-1) and the Social Planning and Research Council of Hamilton acts as our charitable partner and financial administrator of our funds.

Our Program:

- Provides an effective, rapid and low-cost crisis response to the homelessness crisis
- Moves unsheltered people from dangerous conditions on the streets into a safer and more supportive place
- Offers protection from the environment, adequate access to hygiene and sanitation facilities, their own space, and a connection to services and healthcare that helps them along a path to stable housing.

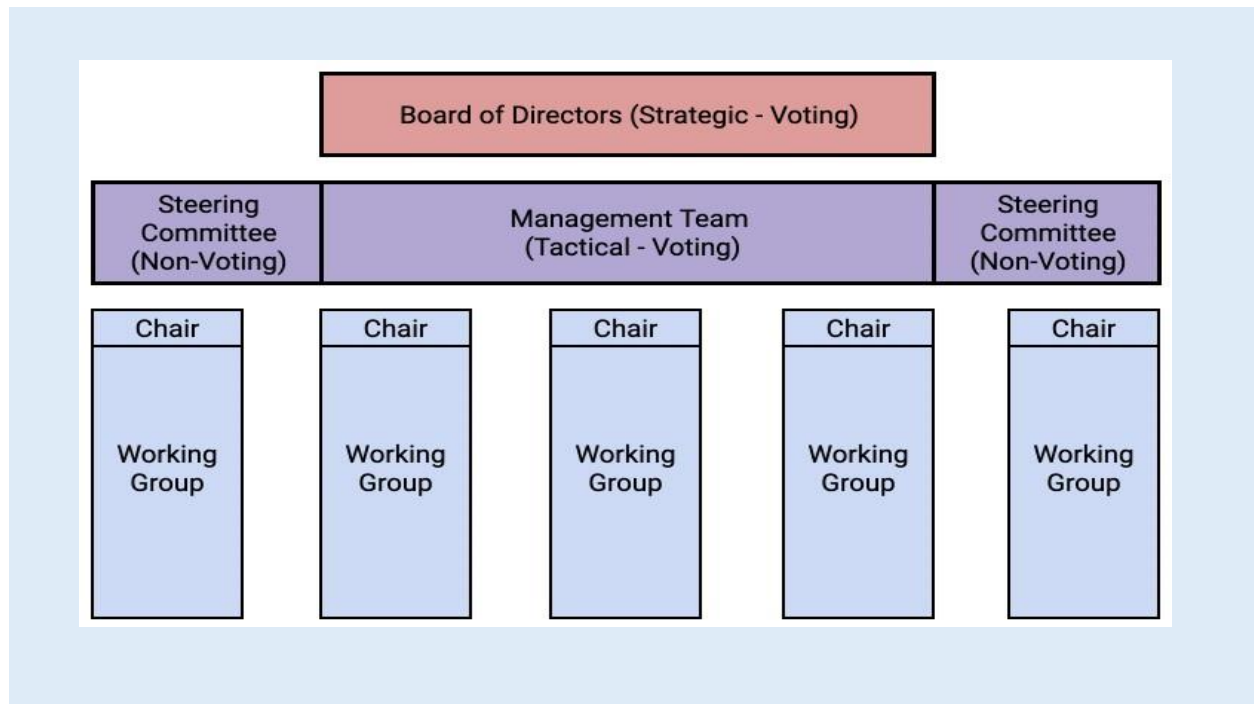
Our Organization’s Board members are:

Julia Kollek (President); Tom Cooper (Secretary); and Dan Bednis (Treasurer).

Our Governance structure in relation to decision-making, strategic planning, and tactical execution is as follows:



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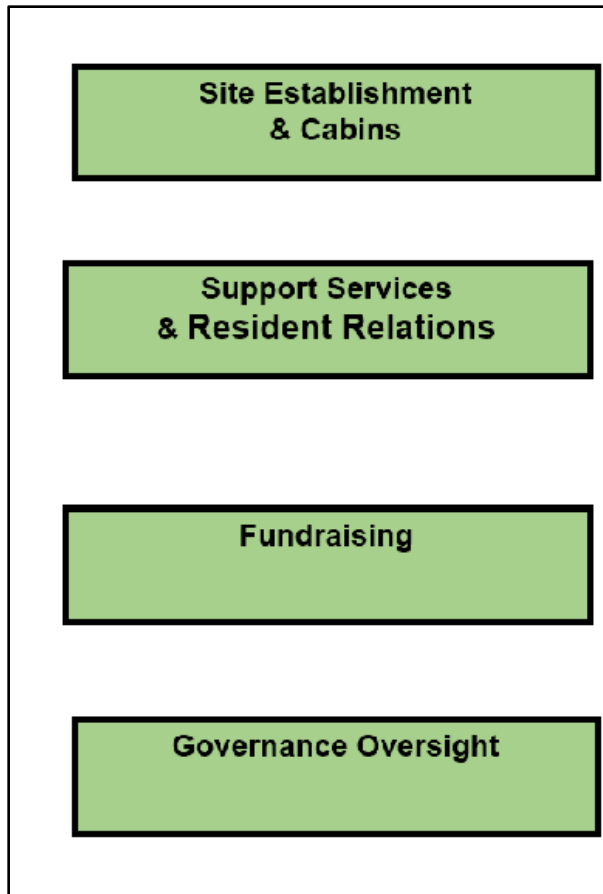
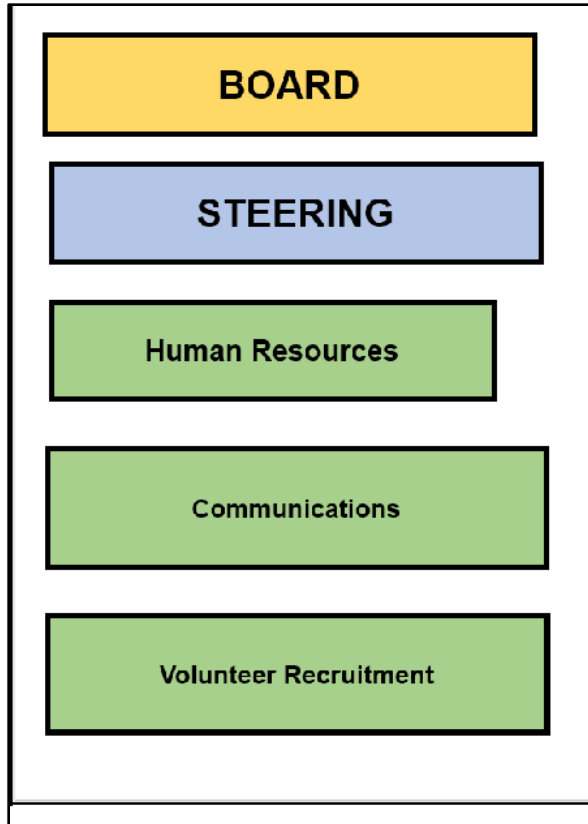
Committees within our leadership teams are responsible for the various aspects of this project, that cover a range of complex and inter-related components necessary to meet the program’s responsibilities – and to ensure the smooth running of the program once up and running.

Our Leadership Team works within the parameters of the following overall governmental structure:



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Members of our Leadership Team are as follows:

Bev Bednis, BA and M.Ed: HATS Volunteer Co-ordinator: Retired elementary school teacher of 35 years: Chair of Flamborough food bank.

Dan Bednis, Chair HATS Governance Committee: Electronics technologist: 24 years in senior management at BELL: 15 years in Management Consulting: 11 years in Real Estate: Member of Carlisle Optimist Club for youth initiatives.

Tom Cooper – Treasurer, HATS: Director, Hamilton Roundtable for Poverty Reduction: former columnist, Hamilton Spectator.

Stephanie Cox - Lawyer, Hamilton Community Legal Clinic

Tony D'Amato Stortz - - Consultant to HATS: Site Superintendent at KW's Better Tent City: founder of BetterStreet, working with communities to improve the lives of those experiencing homelessness.

Ed Fothergill – President, Fothergill Planning & Development Inc: former President, Hamilton Chamber of Commerce: elder at Chedoke Presbyterian Church.

Sheryl Green - Program Manager for the Housing & Homelessness Supports and Services Department at the Hamilton Regional Indian Centre (HRIC).

Bill Johnston – Affordable Housing Team, First Unitarian Church of Hamilton: a former City hall reporter and an editor at the Hamilton Spectator.

Julia Kollek – President, HATS: Academic Editor: Community Activist, and Organizer: founder, Kehila Heschel School.

Kim Martin – Executive Director, Social Planning and Research Council of Hamilton.

Wade Poziomka - Human Rights and Employment Lawyer, Ross & McBride: Past Chair of the Ontario Bar Association's Constitutional, Civil Liberties and Human Rights Section and sits on the executive of the Canadian Bar Association's Constitutional and Human Rights Section.

Art Samson – former school Principal, teacher and football coach: Catholic school board trustee, Town of Dundas Councillor, Hamilton City Councillor: supporter of



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Routes Youth Centre and the Dundas Junior Hockey Club.

Don Seymour - Executive Director, Wesley Urban Ministries

Ted Van Egdome: Chair HATS Fundraising Committee: Senior Vice President Operations, EcoSynthetix Inc: Member, Capital Campaign Board, Youth Unlimited GTA.

SITE LOCATION

HATS has secured the use of a privately-owned lot, located at 647 Barton St East in Hamilton. We have consulted on several occasions with Ward 3 Councillor Nann, and conducted the following neighbourhood outreach events:

1) Mon/Tues Nov 14th & Nov 15th

Letter drop to neighbours within 240m of the site
(double the radius generally used for planning proposals)

2) Mon/Tues Nov 14th & Nov 15th

In-person meeting with key community members (incl BIA & nearby businesses)

3) Thurs Nov 17th

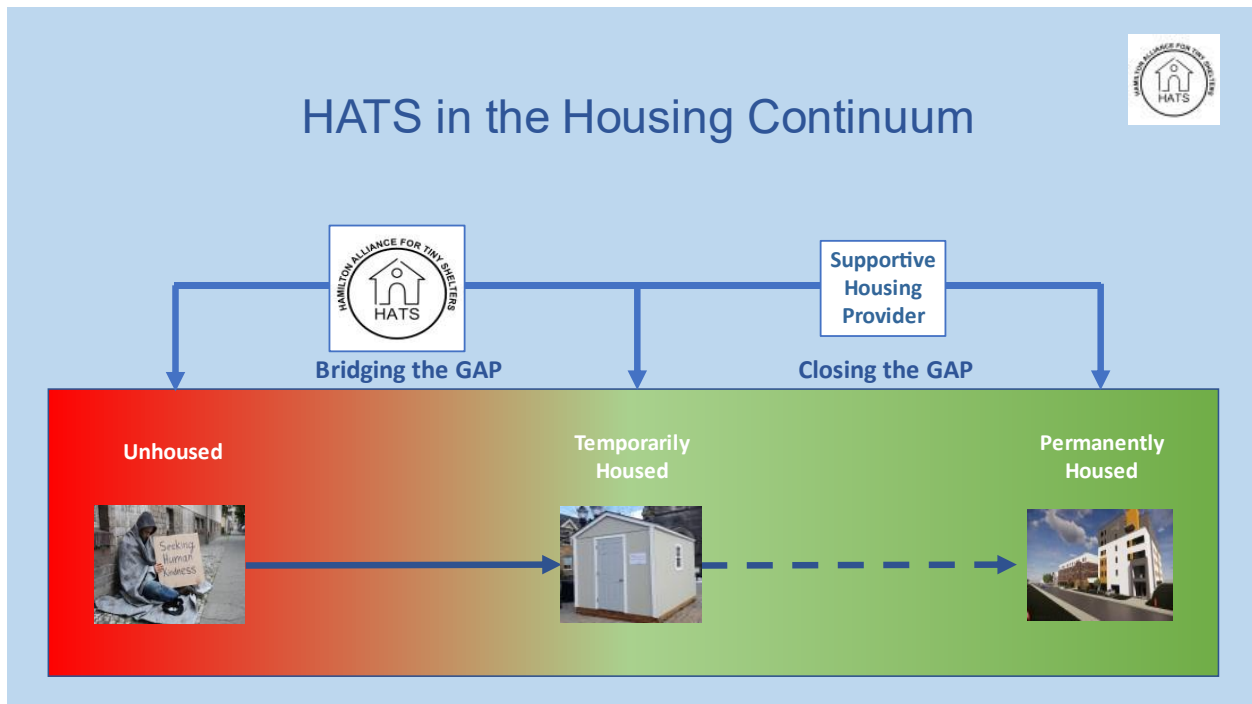
Two community meetings (sessions in the afternoon & evening) with our presentation also available on our website

4) Friday Nov 18th - Media Conference with Launch Announcement

WHERE DOES HATS FIT IN THE CITY OF HAMILTON’S HOUSING & HOMELESSNESS ACTION PLAN?

HATS offers a practical, rights-based solution to bridge the gap in the continuum towards permanent housing; the program aligns with the City’s Systems Planning Framework and roadmap to end chronic homelessness by 2025.

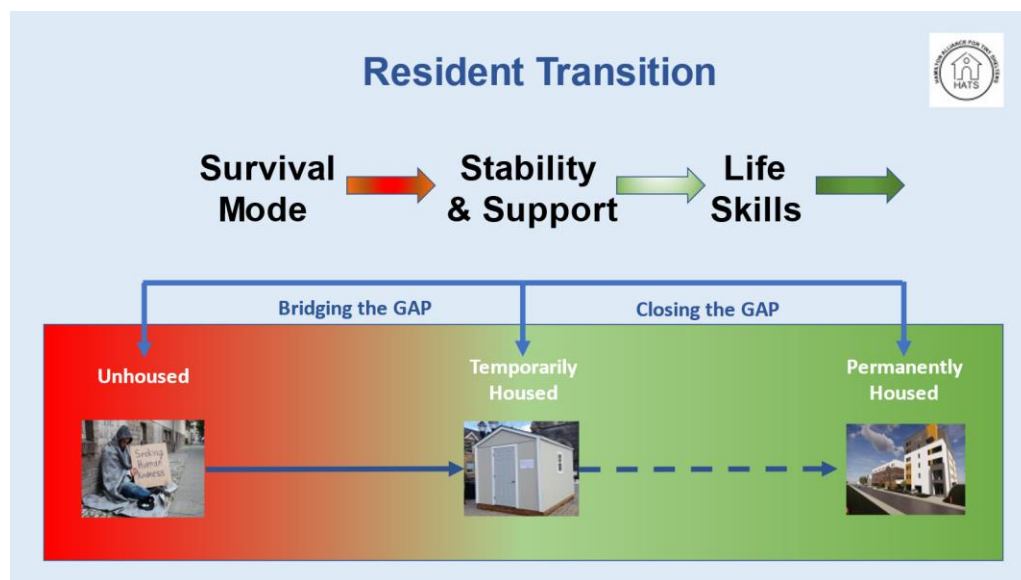
Our Leadership Team has worked extensively to set a path to success by consulting with those experiencing homelessness, as well as bringing together essential and diverse social support organizations.



DESIRED OUTCOMES

The goal of our program is to provide safety, health support and stability to help prepare those living unsheltered or in encampments to be housing-ready. The program acts as a stepping stone that increases the odds of successfully transitioning HATS residents to permanent housing.

Supportive housing organizations attest that taking someone straight from life on the street into a communal housing setting presents a difficult transition for the resident – as well as challenges for staff. We provide the additional opportunity for residents to access educational programs, as well as to revisit their work skills.





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MEASURES OF SUCCESS:

These are our preliminary measures of success, subject to change, and following further consultation (including those with lived experience):

1. Residents are protected from the elements, and from the risk of weather-related injuries
2. Residents have the stability in being in a fixed, known, approved location, allowing the maintenance of supports which is currently disrupted when people are constantly on the move
3. Residents have less stress and worry about where’s a safe place to stay every night
4. Residents have some privacy in “place of their own”
5. Residents have regular access to healthcare
6. Residents are assisted to move, at their own pace, toward more permanent housing
7. Residents have respect and dignity, safety, and a reduced feeling of isolation
8. Residents have the opportunity to develop leadership and life skills
9. Residents indicate satisfaction with HATS program
10. Residents have opportunities to enhance their work-ready skills
11. Residents feel a greater sense of personal autonomy

FINANCES

DESCRIBE THE COMMUNITY’S CONTRIBUTION OF DONATIONS RECEIVED

Hats began fundraising in earnest in May of this year, and to date, has raised more than \$130,000. These funds are composed of donations from:

The United Way of Hamilton-Halton
 Family funds held by the Hamilton Community Foundation
 Fund held by the Oakville Community Foundation
 Unions
 Downtown Hamilton Rotary Club
 Faith organizations
 Local companies
 Individuals
 Fundraisers organized by our volunteers



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CITY FUNDS & RESOURCES

Transitional housing programs such as ours have been established across North America. Here is the extent to which those in CCanada are funded by their municipalities:

Canadian Communities Funded By Their Municipalities

City	City Population	# Tiny Homes	Land City owned/arranged	Municipal Funding	% Contribution
ON - London York & Elizabeth sites	422,000	30+30	Yes	\$2,300,000	100%
ON - London Fanshawe & Parkwood sites		29+28	Yes	\$1,190,000	100%
ON - Kingston	132,000	20	Yes	\$407,000	40%
ON - Kitchener	576,000	42	Yes	\$337,000	55% Cap./22% Oper
BC - Duncan St. Julien	5,000	12	Yes	Majority	Majority
BC - Duncan The Mound	“	24	Yes	Majority	Majority
BC - Duncan Trunk Rd.	“	34	Yes	\$2,500,000	100%
BC - Alberni	18,259	30	Yes	\$140,000	Budget N/A
BC - Victoria	92,000	30	Yes	\$526,500	Budget N/A
BC - Vancouver	662,000	10	Yes	\$1,500,000	100%

We have currently raised more than \$130,000 from the community, and our request is for \$300,000 (\$100,000 spread over 3 years), beginning in 2022-2023.

Our Budget Summary is as follows:



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3 Year Budget

November 21, 2022

	YEAR 1 10 Homes	YEAR 2	YEAR 3 20 Homes New Site	3-YR CUMULATIVE
REVENUE (incl. City funds)	\$358,000	\$253,000	\$353,000	\$964,000
EXPENSES	\$395,000	\$267,000	\$362,000	\$1,024,000
TOTAL (- DEFICIT)	-\$37,000	-\$14,000	-\$8,000	
CITY FUNDS REQUEST	\$100,000	\$100,000	\$100,000	\$300,000
REVENUE TO DATE	\$138,926			

REVENUE: United Way, Community Foundation Funds, Rotary Clubs, Unions, Private & Corporate Donors

In-Kind Donations: Extensive hours by Volunteers, Board Members, Leadership Team & Support Partners

EXPENSES include: 24/7 Staffing, Homes, Communal Units, Security Measures, Site Setup & Maintenance

1) What will City funding, if provided, be used for?

One key strategy of the Housing and Homelessness Action Plan is:

“To provide funding to non-profit organizations and social housing providers to support feasibility and pre-development work for affordable rental projects, enabling them to qualify for the CMHC Co-Investment Fund and other available Federal or Provincial funding.”

As a non-profit organization - with a mission to provide temporary supportive housing to those experiencing homelessness - HATS falls under the category mentioned above.

Council’s portion would go towards the cost of operationalizing the site, including staffing, neighbourhood safety measures and protocols, that are required to ensure a safe environment for all.

2) Who will be Managing the Operations of the Program?

a) HATS will be hiring 2 site managers and security personnel to ensure 24/7 site coverage



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b) Don Seymour, Executive Director of Wesley Urban Ministries heads our Operations Advisory and HR Committee. Wesley has committed its operational expertise including:

- 2 Staff (a Case Manager & Recreational Therapist)
- Provision of meals daily to residents on the site
- All staff will be following Wesley’s policies and protocols

c) Social Planning and Research Council of Hamilton (SPRC) is providing governance over our finances.

d) The Hamilton Community Legal Clinic provides legal advice to ensure that practices and policies adhere to the Ontario Human Rights Code, amongst other laws.

e) In addition, the Fire, EMS, Police departments, and the range of Social Navigator programs have offered their services in a supportive role to the management of operations.

3) How can council be sure that once that City money is spent, there's a plan for the funds to continue the operation?

Whenever we meet with prospective premiere donors and granting organizations, they always ask if the City is a committed partner that’s prepared to provide significant financial support for our initiative.

There is the acknowledgement that the City of Hamilton has an important interest in finding creative and humanitarian solutions to deal with the growing crisis of people living rough on our streets.

Our hope is for our program to be only a 2-3 year venture. This is determined, in large part, by the level of available affordable and supported housing, and assuming the City fulfills its Homelessness Ending Strategy, which is set to eradicate homelessness by 2025.

Our program saves lives. It is humanistic and provides economic value. We request that the City provide funding for this evidence-based intervention to keep a number of vulnerable Hamiltonians in a healthier, safer and more secure environment.

4) Are there ways City staff will be involved? Are you asking for City Staff to be involved in any way? Do you need support or partnership from any of the City divisions? This is important



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As a program, we’re looking to engage in a partnership that works towards the common goal of finding safe, warm shelter for those sleeping on our streets, until more permanent accommodation becomes available.

In terms of our Residents, they will be accessing City services like any other citizen, with the same social services required as if they were unsheltered, but in a far more efficient manner.

City Services Likely Requiring Access

- Social Services – through case worker
- Police Services
- Fire Services – collaboration
- Ambulance – EMS paramedic
- Arts and Culture – a grant would be welcomed!
- Electric Utilities – hookup
- Library Services
- Public Transit – transit passes would be welcomed

Homelessness is expensive and a significant burden on taxpayers and municipalities.

In conversation with front-line services (Police, Fire and EMS), we understand that an inordinate amount of their time is currently spent with incidents involving those who are unhoused. This has put a great strain on both their financial and staffing resources.

SITE SAFETY

What are the security arrangements?

Now that our Neighbourhood Outreach Plan has taken place, and the location of our site publicly announced, Staff Sgt David McKenzie will conduct a site-specific Crime Prevention Through Environment Design plan for us.

During business hours it is anticipated that Social Navigator Staff would be regular visitors to the site. The Police department has supported the plan to have a security guard at the site during the evening. The site will also be of special attention for the beat



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officer, and officers would patrol the area when they have time available. The site is located on a corner of Barton Street that is regularly travelled by police officers during their tour of duty.

At our meeting with the Hamilton Police Department’s Rapid Intervention Support Team (RIST), the following recommendations were made and adopted by HATS:

- Install mesh-like fencing around the entire property in order to allow for clear visibility by officers who would be on regular community patrol;
- Install strategically-placed lighting;
- Install strategically-placed video cameras:
 - 2 on building West side
 - 1 on north side on washroom trailer
 - 1 at the SE corner

In addition to daytime staffing, HATS plans to hire non-uniformed security guards who will be on-site every evening from 6pm to 6am.

If Residents need support, individuals trained in outreach and de-escalation techniques would handle the situation. Our team has been present at The Hub where a guest became upset and experienced an episode. The situation was quickly and successfully diffused.

The Hub confirmed they have two trained mediators with expertise in Restorative Justice who will be available to the HATS community for conflict resolution. We also intend to build leadership capacity among the Residents.

In the event of an extreme crisis incident, the police services, EMS and the fire services acknowledge we’ll be calling 911, like any other citizen.

POLICE SERVICES SUPPORT

If the police approved a dedicated Social Navigator (SN) for this site, that would be helpful (in satisfying council concerns).

In our meeting with Sgt. Pete Wiesner and Staff Sgt Dave McKenzie, we learned that a range of units (aside from SNs) have been set up and are available to our site. The units are as follows:

Social Navigator –This unit has 5 officers assigned, in part, to help clients navigate the myriad of social support services available to those in need. These officers are



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accompanied by a nurse or mental health worker. These teams cover the entire City, and it would not be feasible nor necessary for them to dedicate their resources to the 10 Residents on our site.

COAST – Crisis Outreach and Support Team: This has 2 non-uniformed police officers assigned to it, working with our mutual clients in a *pro-active* manner for generally non-life-threatening situations.

MRRT – Mobile Rapid Response Team: This unit has 8 officers assigned. They generally respond to serious, often life-threatening situations. It is viewed as more of a *reactive* service as compared to COAST.

Crisis Response Unit – This is basically the coming together of the **COAST**, **MRRT** and **Social Navigator** units to better serve those experiencing a mental health crisis, whether immediate or long term.

In addition to the above, the Police Service has stepped up by establishing the **Rapid Intervention Support Team (RIST)**. This has brought together many other essential support organizations involving a total of approximately 18 resources (excluding supervisory personnel) as follows:

HRIC – Hamilton Regional Indian Centre serving the needs of the indigenous community has provided 1 resource;

Interval House – serving the emergency needs of woman has provided 1 resource;

YMCA –focused on the youth has 1 representative at the table;

Wesley – has provided 2 resources;

John Howard Society – has provided 1 resource pertaining to guidance on court/legal matters;

St. Joseph Hospital – has 1 medical staff person focusing primarily on providing addiction services;

CAMH – has 1 staff member providing mental health support services;

EMS – have 4 paramedics assigned.

FIRE SAFETY

1. Is there adequate access for the Fire Department and EMS?

The Fire Department is creating a site-specific Fire Safety Plan for us, and noted that the lot has a fire hydrant at its south-east corner.



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The Chiefs of Police, Fire Department and EMS have told us they have adequate access from Barton Street and Earl Street, and personnel would access the site on foot, not by vehicle. This is no different an approach than that used when accessing a typical building-sized lot, which is a very small, measuring only 52’ by 132’.

2. What separation between cabins is required by the fire department?

Pete deBoer, Chief Fire Prevention Officer, is working with us to prepare a custom Site Safety Plan, which includes consulting with the City’s Building Department on the required separation between the cabins.

3. Are there fire department rules about the ways stored things could interfere with fighting a fire?

Fire Chief Cunliffe recommended metal, lockable storage bins be situated at the rear of each home for Residents to store their belongings. This will also help to curtail hoarding. We have incorporated the bins in our current site design (see blue bins in site plan below).

SITE MANAGEMENT

INSURANCE

HATS has secured the following insurance coverage

Directors & Officers Liability
Property & General Liability
Accident
Liability
Cyber Guard.

PROGRAM ROLLOUT

Describe how you will be providing for showers, toilets, kitchen, cooking etc.

We have secured a washroom trailer and our budget includes a kitchen and communal meeting room trailer (see site plan below).



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How frequently will the sewage be removed from the site? That could be a concern for residential neighbours.

Sewage will be removed on a weekly schedule or as required by the system capacity. Residents will be responsible on a daily basis for keeping the washrooms clean.

What Timeline Are You Planning For?

Rollout Schedule

	Initiate Controlled Rollout Dec. 9 2022	Secure Equipment & Resources Jan 4 2023	Operationalize Site Jan 11 2023
CONSTRUCTION	<ul style="list-style-type: none"> - Secure sufficient funding 	<ul style="list-style-type: none"> - Place orders for Homes - Place orders for Communal Units 	<ul style="list-style-type: none"> - Place fully equipped Homes & hook up technical services - Place Communal Units & hook up technical services
SITE MANAGEMENT	<ul style="list-style-type: none"> - Secure Site Managers - Secure Security personnel - Social Support Services readied 	<ul style="list-style-type: none"> - Site Managers Orientation - Security personnel Orientation - Social Support Services Orientation 	<p>Staff On-site</p>
RESIDENT OCCUPANCY	<ul style="list-style-type: none"> - Applicants apply for Home 	<ul style="list-style-type: none"> - Interview & select applicants - Residents Orientation 	<ul style="list-style-type: none"> - Residents occupy Homes



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What will the expectations and rules be for the site?

Rules will be co-created with the Residents and support services representatives.

The responsibilities of the site community will include:

- a. Compliance with contractual agreement between Residents and HATS (Commitment Statements)

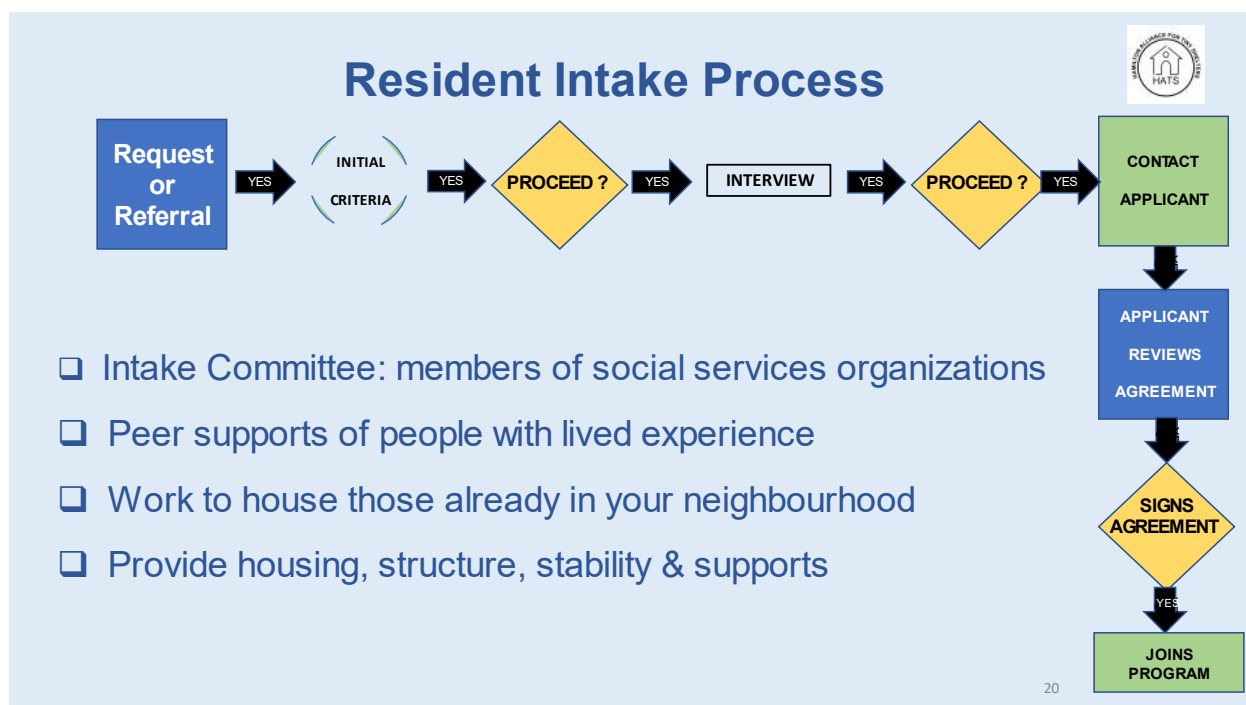
Note* The agreement to occupy a home meets the exemptions outlined in the Residential Tenancies Act, meaning that this Act does not apply. Residents sign a statement that clearly acknowledges that the RTA does not apply.

- b. That they will direct their Ontario Works or Ontario Disability Support Program shelter allowance portion to HATS.
- c. Our program is focused on building on the dignity of the individual, their belonging to a community and understanding their real needs.
- d. Residents are responsible for their own well-being, dignity and autonomy; HATS encourages values around being independent as well as being a part of a community.
- e. As full partners in our program, they understand there are rules and will sign an agreement before moving in.

See Appendix A for the Draft Agreement (which is subject to Resident input).

How will you be selecting the Residents?

See intake process below.



The program intake process and the decision on who will be a good fit for our program will be in consultation with front line service providers, who include:

RIST, the Hamilton Regional Indian Centre, The Hub, Wesley and The Shelter Health Network.

Prospective residents will need to meet the following eligibility:

- Unhoused, and not already living in one of the City’s shelters.
- A proven inability to access the traditional shelter system, and
- One on one meeting with partnering support services to discuss and assess suitability.

How many Residents? 10 Residents

How long do we have the site? 18-24 months as the owner will be developing a structure on the site subject to approved City permit applications.

How long with Residents stay there?

As long as they respect the rules and guidelines, they can stay until permanent housing is available to them.



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How will we ensure the portable toilets and showers are for the Residents and that others are not using them?

Site and security staff will ensure only the community Residents use the washroom facilities. [The ideal situation would be for the City to set up public washrooms nearby.]

How do we ensure there are no tents on-site?

The entire site will be monitored by video cameras, enveloped with a safety fence that has only one entry point to the site. In addition, the site owner will obtain a Blanket No Trespass order. A No Trespassing Sign will be put up on the property. Police officers will be called in the event of any trespassers.

What happens if there is a complaint by neighbours?

Our core principles are:

- We want to have an open, transparent process
- We want to engage the neighbourhood
- We want to be good neighbours

Our Neighbourhood Outreach Plan and response protocol include:

- a) Steering Committee and volunteers will be trained on how to handle any difficult conversations that may arise, either at the doorstep when delivering flyers to announce our site, and subsequently, when the site is established.
- b) Letters given to the Residents and neighbourhood establishments will include an invitation to a community meeting, a HATS email, and a phone number for inquiries.
- c) A HATS hotline number on a separate phone will be set up as part of our Neighbourhood Outreach Plan. Neighbours will be able to text or call in any concerns to this hotline or to get additional information.

What is the structure of HATS - who receives the call?

- Site Management staff will receive any hotline calls during the normal work-week hours
 - Security staff will manage the hotline on evenings and weekends
- Complaints are logged confidentially on a file kept on the HATS Drive, and issues are responded to immediately.



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What volunteers does HATS have - roles and who is responsible for what?

We currently have 90+ Volunteers. Our Volunteer Coordinator (VC) has connected with each one. All Volunteers must complete an intake form, undergo an orientation session, and are required to apply for Police Checks.

Those who plan to volunteer on-site will be taken through an additional training course, and a staff person will always be on-site with them.

Particular skills or areas of interest are listed in a skills bank that enables our VC to quickly and easily identify who can help with any particular task.

In addition, our Volunteers have been invited to join our Working Groups as outlined earlier.

STAFFING & WRAP-AROUND SERVICES

1) Is a staff member staying on-site?

There will be 24/7 coverage on-site (see Appendix B below).

2) Which staff are supporting the site and in what ways?

The HATS Operation Team consists of the following:

- Case managers help the Residents navigate support services;
- Recreational Therapist enriches the well-being of the Residents;
- Site Managers work on the ground with our Residents, the Case Manager, Recreational Therapist, and with our Board of Directors, volunteers, and other staff to ensure the success of this tiny home community.

The Team’s role is to:

- Build trust and relationships with Residents on-site;
- Determine their needs;
- Provide conflict resolution, de-escalation, and support services to Residents;
- Ensure a clean and stable site by engaging in basic construction, maintenance, cleaning, and site management;



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- Liaise with the HATS Board and community partners to ensure necessary services and policies are in place;
- Provide direction, supervision, and goal-setting for volunteer crews on site;
- Coordinate access for Residents to on-site as well as off-site programs and services;
- Act as a point-of-contact on-site for volunteers, community members, and partner agencies;
- Help protect Residents from exploitative and dangerous situations;
- Problem-solve, work with Residents, program and community resources.

3) Is there one Case Manager for all Residents?

Many of these individuals already have a Case Manager provided by another organization, in which case there would be no need to duplicate this service, or disrupt their current case management relationships.

Case Managers from Wesley will be available on-site to Residents who need help.

4) Who is providing the staff? And how are staff to be funded?

Wesley is providing and will pay for 1.5 full-time equivalent staff (an in-kind value of \$36K). In addition, Wesley will be donating the remaining 0.5FTE (\$24K) to HATS to be put towards our other staffing costs.

As per our budget, HATS will be providing 2FTE Site Managers and night-time security staff.

5) If staff don't show up, what happens?

We have budgeted for the cost of back-up measures by having a staff member on call/backup.

6) Which partners are contributing what? Who is actually committed to providing services, of what kind and how much of that service are they committed to?



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The following community partners are providing support:

Service	Agency	Mobile to site and/or off-site
<p>1. Case Managers – System Navigation and Support x 2</p> <ul style="list-style-type: none"> • System navigation: OW/ODSP/Housing referrals/coordinating and attending appointments/soft referrals to services required by HATS member • Lend support to respond issues as they arise • Overdose response trained 	<p>The Hub: “Our team works closely with physicians, social work, nurses, housing and shelter workers, police, public health officials, and community organizations to develop comprehensive housing and/or addictions plans for our clients”</p>	<p>On-site on a routine basis, responding to issues and concerns on an additional ad hoc basis 24 hours a day, with reasonable response time. On-site/mobile.</p>
<p>2. Assertive Outreach Intensive Case Manager x 2</p> <p>Description of role in Part B above</p>	<p>Wesley Urban Ministries & Hamilton Alliance for Tiny Shelters (HATS) Intervention and Support Team</p>	<p>Wesley has committed to hiring one staff person specifically to provide case management support, plus a 0.5FTE recreational therapist to the HATS community. They will be on-site & mobile.</p>
<p>3. Site Safety planning, Health checks, healthcare-focussed response</p>	<p>RIST & other SN Programs</p>	<p>On-site as needed</p>
<p>4. Medical outreach – basic medical care – overdose response</p>	<p>EMS</p>	<p>On-site as needed</p>
<p>5. Regular Health Checks</p>	<p>EMS</p>	<p>Regular Bi-weekly clinic held on-site</p>



Appendix "A" to Report HSC22015(a)
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Service	Agency	Mobile to site and/or off-site
6. Medical outreach – Overdose response	The Shelter Health Network (SHN) & the Hub partnership	SHN operates out of the HUB and HATS Residents can attend the HUB to access the treating physicians, just as unhoused persons currently do. Mobile support to the site will be provided on a case-by-case basis.
7. Harm Reduction Supplies on-site	The Hub and Aids Network will deliver and maintain stock	Supplies delivered on-site
8. Indigenous Supports	Hamilton Regional Indian Centre (HRIC) Hamilton Community Legal Clinic	Scheduled visits by mobile outreach program, providing soup, hygiene products etc. for all on-site and cultural support for Indigenous Residents in particular Extension of services on-site and consultation
9. Daily Meal Delivery	Wesley Urban Ministries	Delivery to site
10. Mental Health Outreach	CMHA	Routine weekly site visits to be arranged



Appendix “A” to Report HSC22015(a)
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Service	Agency	Mobile to site and/or off-site
<p>11. Violence/Conflict</p>	<p>The Hub – Liz (licensed community mediator) On-site and as-needed basis</p> <p>Social Navigators/Police if needed Streamlined process to site on an as-needed basis</p>	
<p>12. Two On-site staff: Daily operations and logistics Resident relations Referrals and coordination with support services Emergency response Conflict response Enforcement of rules Working in collaboration with case managers from Wesley</p>	<p>HATS employees</p>	<p>On-site staff employed by HATS and/or partner(s)</p>

APPENDIX A: DRAFT RESIDENTS’ AGREEMENT

Hamilton Alliance for Tiny Shelters (HATS) Makes These Commitments:

1. We provide a safe place for previously unsheltered people to be. It is our goal to help people transition to (permanent) housing.
2. We foster a community of people built on respect.
3. We provide a home for each Resident. Each home will be equipped with two locks; Residents are responsible for replacing locks should they be broken or lost.
4. We provide sanitation facilities.
5. We encourage community partners to provide food, health care including addictions and mental health counselling and treatment, as well as harm reduction support.
6. We encourage site community volunteers to support and improve the quality of life at HATS.
7. We will provide a stipend for extra chores completed.
8. Pets are allowed, but must not adversely affect other residences or the shared communal spaces.



**Appendix “A” to Report HSC22015(a)
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9. We will strive to continuously improve the conditions, environment and operations so that this program is the best it can be for its Residents.

As a Resident of HATS, I Make These Commitments:

10. I will respect the other Residents of HATS.
11. I will respect the buildings and property where we live.
12. I will respect the site coordinators, and support their efforts to maintain a safe and caring community.
13. I will respect the neighbouring properties and will not trespass.
14. I will work together with the other Residents to help to manage our community.
15. I understand that everyone has a role to play, to look after each other, and to keep the buildings and property clean and orderly. Appropriate volunteer roles (“core community support”) of approximately 3 hours per week will be assigned.
16. I will transfer my monthly OW or ODSP shelter allowance to support the operations of HATS. If I am not in receipt of OW or ODSP, I will initiate the OW application process within a week of arriving at HATS.
17. I agree to allow HATS to collect my personal information in regard to shelter allowance for this housing and disclose this information to other support organizations, as applicable. Personal information is collected in accordance with the Personal Information Protection & Electronic Documents Act. Only relevant information will be shared with other support organizations.
18. I understand that withdrawing my shelter allowance will require a conversation with myself, the Site Managers and OW/ODSP staff to confirm I have permanently left the property.
19. I understand that my information will be recorded in the Homeless Individuals and Families Information System (HIFIS) secure database. This database is used by Service Providers within the City of Hamilton system for the purpose of accessing services to help me find and keep a home.
20. I will not sub-let the home I have been assigned, nor will I let friends stay over for more than one week. Guests may not make HATS their primary residence without being approved and brought into the program and agreeing to all the terms outlined in this document.
21. I commit to staying safe and keeping other Residents and volunteers safe from COVID-19, by wearing a mask over my nose and mouth in all indoor shared spaces at all times during a pandemic outbreak, frequent hand washing, and staying 2 metres (6 feet) away from others.
22. I agree to dispose of any needles or sharps in a yellow Sharps Container.



Appendix “A” to Report HSC22015(a)
Page 26 of 29

23. I agree that HATS, staff, and partner organizations are not responsible for damages to the tiny home in which I reside or property inside it during the move.
24. I acknowledge the use of drugs is not endorsed by HATS, however, if use is necessary, it will not be tolerated outside the home, i.e., in the communal areas.
25. Dealing of drugs will not be tolerated on-site.

Together the Residents and HATS Make These Commitments:

25. We will establish a Site Community Council.
26. All Residents will be expected to participate (in varying degrees) in a Site Community Council that will work to improve operations at HATS and to restore relationships should conflict arise.
27. Consequences for inappropriate behaviour will include:
- 1-hour (take a walk)
 - Written warning
 - 24-hour restriction from shared space
 - Eviction (in the event of an eviction the HATS will make its best efforts to connect the evicted person to supports that will assist in finding an appropriate alternative accommodation).
28. Theft of any kind will result in consequences. Theft from a neighbour of HATS will result in eviction.
29. Violence will not be tolerated.
30. Threatening or persistent disruptive behaviour will not be tolerated.
31. No weapons are permitted. Knives, within reason, are permitted; however, if the use of a knife causes trouble, this privilege will be revoked.

By signing this document, I agree to the above noted commitments.

Signed, this _____ day of _____ 2022

Name & Signature

HATS Contact Name & Signature



APPENDIX B: WEEKLY ON-SITE STAFFING SCHEDULE PROVIDING 24-HR COVERAGE

2 FTE Site Managers (HATS)

1 FTE Case Manager (Wesley)

1 0.5 FTE Recreational Therapist (Wesley)

2 Night Security Personnel

Note:

Day shifts run from 6am-6pm; realistic schedule for those transitioning from street living.

Night shifts run from 6pm-6am

The schedule is below:

HATS – Daytime - On-Site Staffing Schedule Providing 24-hr Coverage


	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
8:00 AM							
8:30 AM							
9:00 AM							
9:30 AM							
10:00 AM							
10:30 AM							
11:00 AM							
11:30 AM	Case Manager Site Manager	Case Manager Site Manager	Case Manager Site Manager	Case Manager Site Manager	Site Manager Case Manager	Site Manager	Site Manager
12:00 PM							
12:30 PM	Case Manager Rec Therapist	Site Manager Case Manager Rec Therapist	Site Manager Case Manager Rec Therapist	Site Manager Case Manager Rec Therapist	Site Manager Case Manager	Site Manager	Site Manager
1:00 PM							
1:30 PM							
2:00 PM							
2:30 PM							
3:00 PM							
3:30 PM							
4:00 PM							
4:30 PM							
5:00 PM	Case Manager Site Manager	Case Manager Site Manager	Case Manager Site Manager	Case Manager Site Manager	Case Manager Site Manager	Site Manager	Site Manager
5:30 PM							
6:00 PM							

HATS – Night Time On-Site Staffing Schedule Providing 24-hr Coverage

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
6:30 PM							
7:00 PM							
7:30 PM							
8:00 PM	Overnight Security / Staffing	Overnight Security / Staffing	Overnight Security / Staffing	Overnight Security / Staffing	Overnight Security / Staffing	Overnight Security / Staffing	Overnight Security / Staffing
8:30 PM							
9:00 PM							
9:30 PM							
10:00 PM							
10:30 PM							
11:00 PM							
11:30 PM							
12:00 AM							
12:30 AM							
1:00 AM							
1:30 AM							
2:00 AM	Overnight Security / Staffing	Overnight Security / Staffing	Overnight Security / Staffing	Overnight Security / Staffing	Overnight Security / Staffing	Overnight Security / Staffing	Overnight Security / Staffing
2:30 AM							
3:00 AM							
3:30 AM							
4:00 AM							
4:30AM							
5:00AM							
5:30AM							
6:00AM							



CITY OF HAMILTON
PLANNING AND ECONOMIC DEVELOPMENT DEPARTMENT
Tourism and Culture Division

TO:	Chair and Members Emergency and Community Services Committee
COMMITTEE DATE:	December 1, 2022
SUBJECT/REPORT NO:	Hamilton Veterans Committee 2023 Budget Submission (PED22210) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Christopher Redford (905) 546-2424 Ext. 4688
SUBMITTED BY:	Carrie Brooks-Joiner Director, Tourism and Culture Planning and Economic Development Department
SIGNATURE:	

RECOMMENDATION

- (a) That the Hamilton Veterans Committee 2023 base budget of \$43,000 be approved, attached as Appendix "A" to Report PED22210, and referred to the 2023 budget process for consideration.
- (b) That a one-time budget allocation for 2023 of \$12,000, funded by the Hamilton Veterans Committee Reserve, be approved and referred to the 2023 budget process for consideration.

EXECUTIVE SUMMARY

For 2023, the Hamilton Veterans Committee (HVC) is requesting \$55,000 to coordinate Veterans' commemorative services, events and programmes. These include but are not limited to: Remembrance Day memorials at six locations across the City, the annual Garrison Parade, Decoration Day ceremonies, annual Dieppe Memorial Service and new Youth Education initiatives. The base budget of \$43,000 is no longer sufficient to ensure that these events are inclusive, accessible and safe.

2019 was the last year in which all Veterans Services and events were mounted at full scale. 2020 and 2021 saw most events either cancelled or scaled back. Since 2019, expenses have increased for wreaths, printing, musicians, tents, chairs, technical equipment rentals, enhanced sound systems (up 20% over 2019 costs) and

OUR Vision: To be the best place to raise a child and age successfully.

OUR Mission: To provide high quality cost conscious public services that contribute to a healthy, safe and prosperous community, in a sustainable manner.

OUR Culture: Collective Ownership, Steadfast Integrity, Courageous Change, Sensational Service, Engaged Empowered Employees.

**SUBJECT: Hamilton Veterans Committee 2023 Budget Submission (PED22210)
(City Wide) - Page 2 of 4**

programming elements such as heritage warplane flypasts. Some of the largest increases in cost are for security and road safety. Costs for Cable 14 media streaming, ASL translation and sponsored school fieldtrips as part of the Hamilton Veterans Committee's Wreath Project are new expenditures.

To cover these increases, the HVC is requesting that \$12,000 from the HVC Reserve be added to their base budget for 2023. If costs continue to rise a request for an increase in the base budget may be submitted for 2024.

Alternatives for Consideration - Not Applicable

FINANCIAL - STAFFING - LEGAL IMPLICATIONS

Financial: The Hamilton Veterans Committee is requesting their current annual budget of \$43,000 be increased in 2023 to \$55,000 by using \$12,000 from the HVC Reserve.

Staffing: N/A

Legal: N/A

HISTORICAL BACKGROUND

The Hamilton Veterans Committee was first appointed by the Council of The Corporation of the City of Hamilton in February 1972. At that time, the responsibility of the Committee was to:

- i) Act as liaison for the Veterans of the City of Hamilton and the Hamilton Parks Board (re: Cenotaph); and the Hamilton Cemetery Board (re: Field of Honour, Woodland Cemetery);
- ii) Co-ordinate all parades in the City involving Veterans; and
- iii) Deal with all other matters directly relating to or of concern to Veterans.

Since 2001, military remembrance and commemoration activities have included organizing the City of Hamilton Remembrance ceremonies in addition to assisting with the coordination of annual ceremonies in Ancaster, Dundas, Glanbrook, Stoney Creek and Waterdown. Other annual events include the Dieppe Memorial Ceremony and Decoration Day. The Committee and their staff liaison have most recently worked to include and promote the inclusion of youth in their events.

**SUBJECT: Hamilton Veterans Committee 2023 Budget Submission (PED22210)
(City Wide) - Page 3 of 4**

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

N/A

RELEVANT CONSULTATION

- Hamilton Veterans Committee
- Financial Coordinator, Financial Planning, Administration and Policy Division, Corporate Services Department
- Acting Manager, Finance and Administration, Financial Planning, Administration and Policy Division, Corporate Services Department

ANALYSIS AND RATIONALE FOR RECOMMENDATION

The rationale for the addition of \$12,000 drawn from the HVC Reserve is based on:

- Increased event and programming costs since 2019;
- Increased attendance numbers at Remembrance Day services resulting in additional costs; and
- Between 2022 to 2028, the Hamilton Veterans Committee will return to hosting two services of Remembrance at Gore Cenotaph, one on November 11 and one Garrison Parade on the Sunday nearest, in order to include active members of the Reserve forces who cannot attend if November 11 falls on a weekday.

ALTERNATIVES FOR CONSIDERATION

Not Applicable

ALIGNMENT TO THE 2016 - 2025 STRATEGIC PLAN

Community Engagement and Participation

Hamilton has an open, transparent and accessible approach to City government that engages with and empowers all citizens to be involved in their community.

Healthy and Safe Communities

Hamilton is a safe and supportive City where people are active, healthy, and have a high quality of life.

**SUBJECT: Hamilton Veterans Committee 2023 Budget Submission (PED22210)
(City Wide) - Page 4 of 4**

Culture and Diversity

Hamilton is a thriving, vibrant place for arts, culture, and heritage where diversity and inclusivity are embraced and celebrated.

Our People and Performance

Hamiltonians have a high level of trust and confidence in their City government.

APPENDICES AND SCHEDULES ATTACHED

Appendix "A" to Report PED22210 - 2023 Veterans Committee Budget Submission

CITY OF HAMILTON

2023

ADVISORY COMMITTEES

BUDGET SUBMISSION FORM

Hamilton Veterans Committee

PART A: General Information

ADVISORY COMMITTEE MEMBERS:

Mike Rehill, Chair	Steve Waldron
Don Jackson	
Rod Paddon	
Dave Baldry	
Robert Fyfe	
Ed Sculthorpe, Vice Chair	
Terry Ryan	

MANDATE:

Reporting to Council, the Hamilton Veterans Committee oversees the planning and delivery of military remembrance and commemoration activities on behalf of the City of Hamilton. When directed by Council, the Committee provides input on projects and issues that are of concern to Hamilton Veterans.

PART B: Strategic Planning

STRATEGIC OBJECTIVES:

Goals and objectives:

Act as a liaison for the veterans of the City of Hamilton on all matters that fall within Council's jurisdiction.

Coordinate Decoration Day, Remembrance Day Parades, community engagement pieces and Memorial Services in multiple wards.

Maximize the engagement of youth in the act of Remembrance through projects and events.

How will they be achieved:

Coordinate the remembrances for significant anniversaries such as Decoration Day, Remembrance Day, Garrison Parade and including but not limited to parades and memorial services.

Administer all other matters directly relating to or of concern to Hamilton Veterans that fall within Council's jurisdiction. Provide written letters of support for Veterans causes when requested and deemed appropriate.

Veteran's Committee advises on the use and care of cenotaphs in partnership with Heritage Resource Management.

Present opportunities for the engagement of youths in acts of Remembrance in the City of Hamilton through events and community projects

Who will benefit:

All citizens of the City of Hamilton as well as local veterans and active forces. Upward of 2,000 people attend the Remembrance Day services and parades coordinated by the Veterans Committee.

All residents of Hamilton will have the opportunity to show respect for Veterans service to our country.

The Youth of Hamilton will be given the opportunity to be engaged with Acts of Remembrance outside of the classroom setting through hands-on and digital platforms.

ALIGNMENT WITH CORPORATE GOALS:

Please check off which Council approved Strategic Commitments your Advisory Committee supports			
1) Community Engagement & Participation	X	2) Economic Prosperity & Growth	
3) Healthy & Safe Communities	X	4) Clean & Green	
5) Built Environment & Infrastructure		6) Culture & Diversity	X
7) Our People & Performance			

PART C: Budget Request

INCIDENTAL COSTS:

Meeting Costs: <ul style="list-style-type: none"> - postage, printing, parking - 7 general meetings, 4 event planning meetings & 1 meeting with all Veteran Organizations within the City of Hamilton - Name tags & arm bands 	\$500.00
SUB TOTAL	\$500.00

SPECIAL EVENT/PROJECT COSTS:

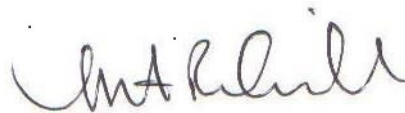
Ceremonies/Services: <ul style="list-style-type: none"> - Hamilton (Gore Park Cenotaph), 2 ceremonies and parades - Community Ceremonies (Ancaster, Glanbrook, Dundas, Stoney Creek, Waterdown) - Dieppe Veteran's Memorial Service - Decoration Day - 'We Remember' Wreath Project - Communications & Marketing 	\$36,000 \$6,000 \$4,000 \$4,000 \$3,500 \$1,000
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SUB TOTAL	\$55,000
TOTAL COSTS	\$55,000
Funding from Advisory Committee Reserve (only available to Advisory Committees with reserve balances)	\$12,000
TOTAL 2023 BUDGET REQUEST	\$55,000
PREVIOUS YEAR (2022) APPROVED BUDGET (2020 Request \$)	\$43,000

CERTIFICATION:

Please note that this document is a request for a Budget from the City of Hamilton Operating budget. The submission of this document does not guarantee the requested budget amount. Please have a representative sign and date the document below.

Representative's Name: Mike Rehill



Signature:

Date:

November 29, 2022

Telephone # :

905-546-2424 ext 4688 905-973-4005