

City of Hamilton EMERGENCY & COMMUNITY SERVICES COMMITTEE REVISED

Meeting #:24-009Date:November 21, 2024Time:1:30 p.m.Location:Council ChambersHamilton City Hall71 Main Street West

Loren Kolar, Legislative Coordinator (905) 546-2424 ext. 2604

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 November 7, 2024
- 5. COMMUNICATIONS
- 6. DELEGATION REQUESTS
- 7. DELEGATIONS
- 8. STAFF PRESENTATIONS
 - 8.1 Community Safety and Well-Being: Toronto Community Crisis Centre and Hamilton's Mental Health Crisis Response (HSC24040) (City Wide)
 - *a. Staff Presentation

9. CONSENT ITEMS

- 9.1 Recreation Master Plan Implementation Strategy Update (HSC24043) (City-Wide)
- 9.2 2024 Youth Strategy Annual Report (HSC24038) (City Wide)
- 9.3 Third Party Operated Recreation Facilities (CS13018(e)) (City Wide)
- 9.4 Long Term Care in Hamilton (HSC24018) (City Wide)
- 9.5 Seniors Advisory Committee Minutes October 4 2024
- 9.6 Hamilton Veterans Committee Minutes September 24, 2024
- 10. DISCUSSION ITEMS
- 11. MOTIONS
- 12. NOTICES OF MOTION

13. GENERAL INFORMATION / OTHER BUSINESS

- 13.1 Amendments to the Outstanding Business List
 - a. Items to be removed:
 - a. ECS: 5/16/2024-Item 8.1

Community Safety and Well-Being Annual Report 2024 (HSC24015) (City Wide) Addressed in Item 8.1, in this agenda

- 14. PRIVATE AND CONFIDENTIAL
- 15. ADJOURNMENT



EMERGENCY & COMMUNITY SERVICES COMMITTEE MINUTES 24-008

1:30 p.m. Thursday, November 7, 2024 Council Chambers (Hybrid) Hamilton City Hall 71 Main Street West

Present:Councillor A. Wilson (Chair), Councillors B. Clark, T. Hwang,
T. Jackson, C. Kroetsch (Vice-Chair), and M. Wilson

Also Present: Councillor T. McMeekin

Absent withRegrets:Councillor N. Nann – City Business

THE FOLLOWING ITEMS WERE REFERRED TO COUNCIL FOR CONSIDERATION:

1. Community Risk Assessment (HSC24033) (Item 8.1)

(Jackson/Hwang)

That Report HSC24033, respecting a Community Risk Assessment, be received.

Result: Motion CARRIED by a vote of 6 to 0, as follows:

YES	-	Clark, Brad	Ward 9
YES	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
YES	-	Jackson, Tom	Ward 6
ABSENT	-	Nann, Nrinder	Ward 3
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

2. Canada-Wide Early Learning and Child Care New Funding Formula, Emerging Issues Funding, and One Time Administration Funding (HSC24025(a)) (Item 10.1)

(Kroetsch/Hwang)

- (a) That the City of Hamilton accept the additional 100 percent provincial 2024 Canada-Wide Early Learning and Child Care one-time incremental Administration funding in the amount of \$1,139,665 and incremental Emerging Issues funding in the amount of \$865,363, and
- (b) That the General Manager of Healthy and Safe Communities Department, or designate, be authorized and directed to execute, on behalf of the City, the funding agreement from the Ministry of Education, as well as any ancillary agreements associated with this funding in a form satisfactory to the City Solicitor.

Result: Motion CARRIED by a vote of 6 to 0, as follows:

YES	-	Clark, Brad	Ward 9
YES	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
YES	-	Jackson, Tom	Ward 6
ABSENT	-	Nann, Nrinder	Ward 3
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

3. Citizen Committee Report: Senior's Advisory Committee's Request to Publish an Editorial in the Hamilton Spectator respecting the Communications Survey for Older Adults (Item 10.2)

(Jackson/Kroetsch)

That the Citizen Committee Report respecting the Senior's Advisory Committee's Request to Publish an Editorial in the Hamilton Spectator respecting the Communications Survey for Older Adults, be approved.

Result: Motion CARRIED by a vote of 6 to 0, as follows:

YES	-	Clark, Brad	Ward 9
YES	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
YES	-	Jackson, Tom	Ward 6
ABSENT	-	Nann, Nrinder	Ward 3
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

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4. Replacement of Floor Mats at Huntington Park Recreation Centre (Ward 6) (Item 11.1)

(Jackson/Clark)

WHEREAS, recreation in its various forms provides a wide range of benefits to individuals of all ages, including benefits for physical health, mental health, social connectedness and assists the City of Hamilton in meeting its vision of being the best place to raise a child and age successfully;

WHEREAS, since 1962, Huntington Park Recreation Centre, situated in Ward 6, has consistently been one of the top utilized recreation facilities in Hamilton;

WHEREAS in 2023, Huntington Park Recreation Centre had 77,662 visits for programs offered, 45,013 drop-in visits, 4,024 program users, and 3,815 hours of community rentals;

WHEREAS, the floor mats used at Huntington Park Recreation Centre are over 20 years old and have reached their end-of-life as evidenced by density loss as well as wear and tear; and

WHEREAS, the floor mats are heavily used by various community groups including preschool, gymnastics, dance programs, and Northeast Karate for martial arts instruction to the community.

THEREFORE BE IT RESOLVED:

That floor mats for programming at Huntington Park Recreation Centre be funded from the Ward 6 Capital Discretionary Account 3302309600 at an upset limit, including contingency, not to exceed \$7,600.00.

Result: Motion CARRIED by a vote of 6 to 0, as follows:

YES	-	Clark, Brad	Ward 9
YES	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
YES	-	Jackson, Tom	Ward 6
ABSENT	-	Nann, Nrinder	Ward 3
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

5. Flamborough Connects (Ward 15) (Item 11.2)

(M. Wilson/Hwang)

WHEREAS, Flamborough Connects strives, as their name suggests, to connect local services to the people of Ward 15 and rural Flamborough;

WHEREAS, given the nature of our community, there are many seniors, rural residents and others who do not enjoy the ability to access digitally shared information;

WHEREAS, Flamborough Connects has identified five specific broad-based information gaps, namely: frauds and scams; transportation (including DARTS); housing, food security and emergency services;

WHEREAS, the production and distribution of a series of five issue brochures (that will also be available digitally), is seen as the best way to ensure a growing awareness of and access to service information, and

WHEREAS, the Ward 15 Community Council recently and unanimously endorsed support of Flamborough Connects to proceed with this initiative.

THEREFORE, BE IT RESOLVED:

- (a) That Flamborough Connects be provided with a grant in support of the production and distribution of a series of five issue brochures, funded from the Ward 15 Non-Property Tax Revenue Account (3301609615), at an upset limit, including contingency, not to exceed \$5,400;
- (b) That the funds allocated and distributed through the grant be exempt on a one-time basis and not be counted toward any formula that restricts regular funding from the City including the City Enrichment Fund (e.g. the City's 30% formula); and
- (c) That the Mayor and City Clerk be authorized and directed to execute any required agreement(s) and ancillary documents, with such terms and conditions in a form satisfactory to the City Solicitor.

Result: Motion CARRIED by a vote of 6 to 0, as follows:

YES	-	Clark, Brad	Ward 9
YES	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
YES	-	Jackson, Tom	Ward 6
ABSENT	-	Nann, Nrinder	Ward 3
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

6. Assessment of Municipal Golf Courses (Item 11.3)

(M. Wilson/Hwang)

WHEREAS, Hamilton is served by three public golf courses with a total of 54 holes;

WHEREAS, the City's public golf facilities require significant capital investment, all three courses are rated in poor condition, and half of support facilities were rated in very poor and poor condition in the City's 2024 asset management plan;

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WHEREAS, the above ground infrastructure deficit at Chedoke Golf totals \$17 million while the state of the below ground irrigation system has yet to be determined;

WHEREAS, an underground irrigation line break at Chedoke Golf led to an additional usage charge of approximately \$440,000 over a three year period;

WHEREAS, there is no existing capital reserve for the City's golf operations;

WHEREAS, the City has publicly reported that it is not able to fund maintenance work on existing recreation assets at an acceptable rate provided in the current budget;

WHEREAS, there are no identified budgets to fund and maintain major acquisitions as identified in the City's Recreation Master Plan, including:

- Two (2) New Outdoor Artificial Ice Facility Spaces;
- Four (4) Community Recreation Centres Expansions;
- Four (4) New Community Recreation Centres; and,
- Two (2) Senior Centre Expansions

WHEREAS, Council has identified a desire to improve the local environment to further advance its goals of improved watershed management, climate change adaption, and biodiversity as set out in its Watershed Action Plan, Climate Action Plan, Parks Master Plan, and Biodiversity Action Plan;

WHEREAS, future population growth and development (new greenfield and redevelopment) requires careful management of stormwater runoff from the impacts of urbanization (impervious / hard surfaces) on the natural environment and public safety;

WHEREAS, new provincial guidelines have stressed the importance of controlling stormwater runoff at the source using better site design, retention practices, and filtration practices;

WHEREAS, green drainage infrastructure can retain water and reduce the amount of rain going directly into the City's sewer system and help with the risk of flooding;

WHEREAS, the Recreation Master Plan recognized a deficit of green space available to all Hamiltonians, particularly residents in wards 2 and 3;

WHEREAS, the Parks Master Plan has identified the need for more greenspace, including in the lower city, using an equity based analysis; and

WHEREAS, the City's golf course operations have previously been reviewed and assessed;

THEREFORE BE IT RESOLVED:

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- (a) That staff be directed to assess how publicly owned parklands at the Chedoke Golf Club might address the existing inequitable access to greenspace, natural area restoration, storm water management, community agriculture and biodiversity rather than keeping all the golf course lands exclusively as golf courses, with a report back to the Emergency and Community Services Committee in Q4 2025;
- (b) That this review of municipal golf course lands be conducted within the stated goals of the City's watershed action plan, biodiversity action plan, recreation master plan, parks master plan, and climate action plan so that future use of these parklands benefit the resiliency, health and well-being of all Hamiltonians; and
- (c) That the Chedoke parklands remain publicly owned in perpetuity.

Result: Motion CARRIED by a vote of 6 to 0, as follows:

YES	-	Clark, Brad	Ward 9
YES	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
YES	-	Jackson, Tom	Ward 6
ABSENT	-	Nann, Nrinder	Ward 3
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

FOR INFORMATION:

(a) APPROVAL OF AGENDA (Item 2)

The Committee Clerk advised the Committee of the following change to the agenda:

6. DELEGATION REQUESTS

6.1 Judith Bishop, Hamilton Child Care Advocates, respecting Item 10.1, Canada-Wide Early Learning and Child Care New Funding Formula, Emerging Issues Funding, and One Time Administration Funding (HSC24025(a)) (for today's meeting).

CHANGE IN ORDER OF AGENDA:

That Item 11.2, Motion referred from Council on October 23, 2024, respecting Flamborough Connects be moved up the agenda to follow Delegations.

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(Hwang/Kroetsch)

That the agenda for the November 5, 2024 Emergency and Community Services Committee meeting be approved, as amended.

Result: Motion CARRIED by a vote of 6 to 0, as follows:

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(b) DECLARATIONS OF INTEREST (Item 3)

There were no Declarations of Interest.

(c) APPROVAL OF MINUTES OF PREVIOUS MEETING (Item 4)

(i) October 3, 2024 (Item 4.1)

(Kroetsch/Hwang)

That the Minutes of the October 3, 2024 meeting of the Emergency and Community Services Committee, be approved, as presented.

Result: Motion CARRIED by a vote of 6 to 0, as follows:

YES	-	Clark, Brad	Ward 9
YES	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
YES	-	Jackson, Tom	Ward 6
ABSENT	-	Nann, Nrinder	Ward 3
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

(d) DELEGATION REQUEST (Item 6)

 Judith Bishop, Hamilton Childcare Advocates, respecting Item 10.1, Canada-Wide Early Learning and Child Care New Funding Formula, Emerging Issues Funding, and One Time Administration Funding (HSC24025(a)) (for today's meeting)

(Clark/M. Wilson)

That the Delegation Request from Judith Bishop, Hamilton Child Care Advocates, respecting Item 10.1, Canada-Wide Early Learning and Child

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Care New Funding Formula, Emerging Issues Funding, and One Time Administration Funding (HSC24025(a)), be approved, for today's meeting.

Result: Motion CARRIED by a vote of 6 to 0, as follows:

YES	-	Clark, Brad	Ward 9
YES	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
YES	-	Jackson, Tom	Ward 6
ABSENT	-	Nann, Nrinder	Ward 3
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

(e) DELEGATIONS (Item 7)

(i) (a) Jennifer Bonner, The HUB, respecting increased gun violence and the Building Safer Communities Funding issued by Public Safety Canada (Item 7.1)

Jennifer Bonner, The HUB, addressed the Committee respecting increased gun violence and the Building Safer Communities Funding issued by Public Safety Canada.

(b) Judith Bishop, Hamilton Childcare Advocates, respecting Item 10.1, Canada-Wide Early Learning and Child Care New Funding Formula, Emerging Issues Funding, and One Time Administration Funding (HSC24025(a)) (Added Item 7.2)

Judith Bishop, Hamilton Childcare Advocates, addressed Committee respecting Canada-Wide Early Learning and Child Care New Funding Formula, Emerging Issues Funding, and One Time Administration Funding (HSC24025(a)), with the aid of a PowerPoint presentation.

(ii) (Hwang/Jackson)

That the following Delegations, be received:

- (i) Jennifer Bonner, The HUB, respecting increased gun violence and the Building Safer Communities Funding issued by Public Safety Canada (Item 7.1)
- (ii) Judith Bishop, Hamilton Childcare Advocates, respecting Item 10.1, Canada-Wide Early Learning and Child Care New Funding Formula, Emerging Issues Funding, and One Time Administration Funding (HSC24025(a)) (Added Item 7.2)

Result: Motion CARRIED by a vote of 6 to 0, as follows:

YES	-	Clark, Brad	Ward 9
YES	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
YES	-	Jackson, Tom	Ward 6
ABSENT	-	Nann, Nrinder	Ward 3
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

(f) STAFF PRESENTATIONS (Item 8)

(i) Community Risk Assessment (HSC24033) (Item 8.1)

Fire Chief Cunliffe, addressed Committee respecting Community Risk Assessment (HSC24033), with the aid of a PowerPoint presentation.

(Jackson/Hwang)

That the Presentation respecting Report HSC24033, Community Risk Assessment, be received.

Result: Motion CARRIED by a vote of 6 to 0, as follows:

YES	-	Clark, Brad	Ward 9
YES	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
YES	-	Jackson, Tom	Ward 6
ABSENT	-	Nann, Nrinder	Ward 3
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

For further disposition, refer to Item 1.

(g) ADJOURNMENT (Item 16)

(Clark/Kroetsch)

That there being no further business, the Emergency and Community Services Committee be adjourned at 4:11 p.m.

Result: Motion CARRIED by a vote of 6 to 0, as follows:

YES	-	Clark, Brad	Ward 9
YES	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
YES	-	Jackson, Tom	Ward 6
ABSENT	-	Nann, Nrinder	Ward 3
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

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Respectfully submitted,

Councillor A. Wilson, Chair Emergency and Community Services Committee

Loren Kolar Legislative Coordinator Office of the City Clerk



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

TO:	Emergency and Community Services Committees
COMMITTEE DATE:	November 21, 2024
SUBJECT/REPORT NO:	Community Safety and Well-Being: Toronto Community Crisis Centre and Hamilton's Mental Health Crisis Response (HSC24040) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Rachelle Ihekwoaba 905-978-2680
SUBMITTED BY:	Brenda Bax Acting Director, Children's and Community Services Division Healthy and Safe Communities
SIGNATURE:	Ввар

RECOMMENDATIONS

- (a) That City staff participate in and support the next phase of the Mental Health Secretariat work being led by the Greater Hamilton Health Network (GHHN) to identify opportunities for improved coordination and integration of mental health services and supports in Hamilton and that an update on this work and recommendations for next steps be included in the annual GHHN reporting to Council through the Board of Public Health.
- (b) That the Mayor and Members of Council and City staff continue to work with community stakeholders, municipal partners and elected officials to advocate to various levels of government for sustained funding to support expansion of mental health and addictions services and supports, and improved coordination and integration of provincially funded mental health services.

EXECUTIVE SUMMARY

In May 2024, the Community Safety and Well-Being (CSWB) Plan Annual Report (HSC24015) was presented to Emergency and Community Services Committee and a motion directing staff to report back on the feasibility of implementing a similar service to Toronto's Community Crisis Service (TCCS) in Hamilton was approved.

SUBJECT: HSC24040 Community Safety and Well-Being: Toronto Community Crisis Centre and Hamilton's Mental Health Crisis Response (City Wide) – Page 2 of 10

The TCCS was established in Toronto to provide immediate, non-police-led support for individuals in crisis. Launched in 2021, it has expanded citywide, responding to rising mental health-related calls and promoting well-being through compassionate, culturally sensitive services. The TCCS operates under a "no wrong door" principle, allowing individuals to access help through multiple channels, including 911 and 211. During its pilot phase, it achieved a diversion rate of 78%, resolving many calls through the intervention of mental health responders that would have otherwise involved police.

Following consultations with Toronto, staff met with partners leading Hamilton's crisis response programs and services. Key programs include the Crisis Outreach and Support Team (COAST), the Mobile Crisis Rapid Response Team (MCRRT), Rapid Intervention Support Team (RIST) and Barret Centre. These crisis response programs and many other organizations in the community provide valuable services and supports however the lack of a coordinated system leads to fragmented service delivery and high demand that often exceeds available resources.

The report identifies gaps in Hamilton's mental health crisis response, noting that while many individuals are served, access through improved coordination would support improved outcomes for individuals in crisis. To effectively enhance the existing system in Hamilton, staff recommend the City's participation in and support of the Greater Hamilton Health Network's efforts to better integrate and coordinate existing services and supports. As demand continues to rise, continued advocacy for adequate funding for mental health services is required.

In conclusion, while Hamilton has robust crisis response programs, there is a critical need for enhanced coordination and integration to better serve individuals in mental health crises. A well-structured, Hamilton-specific approach could transform mental health services in our City, ensuring better use of scarce resources, and timely and effective support for those in need, This type of holistic system transformation would require new, dedicated resources for planning as well as the implementation phase.

Alternatives for Consideration – See Page 10

FINANCIAL – STAFFING – LEGAL IMPLICATIONS

Financial: Not applicable

Staffing: Not applicable

Legal: Not applicable

SUBJECT: HSC24040 Community Safety and Well-Being: Toronto Community Crisis Centre and Hamilton's Mental Health Crisis Response (City Wide) – Page 3 of 10

HISTORICAL BACKGROUND

In May 2024, staff presented the Community Safety and Well-Being Plan Annual Report (HSC24015) at which time a motion for staff to report back on the feasibility of implementing a service like the Toronto Community Crisis Service (TCCS) model was put forward. One of the community-identified priorities within Hamilton's Community Safety and Well-Being Plan is mental health and stigma reduction, targeting a decrease in hospitalizations due to mental health issues. Staff have since consulted with the City of Toronto and local mental health crisis response partners to understand whether and how a similar model could be implemented in Hamilton.

Toronto Community Crisis Service (TCCS)

The Toronto Community Crisis Service was established to meet the rising demand for mental health support, particularly as police data showed increasing mental health-related calls. The goal of the initiative is to provide non-police led, immediate support and intervention for individuals in crisis, promoting mental health and well-being through compassionate and culturally responsive services. It took approximately one and a half years to develop the model in Toronto, through extensive research and community engagement, addressing the limitations of smaller, fragmented services. After a successful pilot in 2021, the Toronto Crisis Service expanded citywide in Q3 2024.

TCCS operates under the principle of "no wrong door," allowing individuals to reach out for help by calling either 911 or 211. The service is available to individuals aged 16 and older. Mobile crisis teams are deployed to provide immediate assistance, which includes addressing basic needs such as food and clothing, as well as offering post-crisis care within 48 hours.

The City of Toronto plays a crucial role as the service system manager, overseeing background policy and support while coordinating partnerships with local organizations, police, and paramedics. The program is led by the Community Safety and Well-Being Division and works closely with several divisions, primarily including Public Health Services, Fire Services, Paramedic Services, and Toronto Police Service. The service is delivered by various health organizations funded by the city, which is divided into four operational areas, including Indigenous and Afro-centric approaches to health support.

The TCCS team consists of eight core staff members who are City of Toronto employees, including a manager, policy development officers, and a management consultant. Crisis workers are deployed and sourced from local organizations, resulting in a workforce of approximately 200 individuals across four key organizations.

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The TCCS is funded primarily through the City of Toronto's tax base, with an allocation of \$13.754 million during the pilot phase and \$26.832 million in 2024 as service expanded citywide¹. The city has also requested cost-sharing support from the province.

From March 2022 to April 2023, during the pilot phase, TCCS handled around 7,000 calls, achieving a diversion rate of 78%, meaning a significant proportion of calls were resolved without police involvement. As the service transitioned to citywide deployment in Q3 2024, there was a reported 40% increase in call volume within the first month. The service aims for long-term integration with paramedic systems and other emergency services to ensure a seamless response to mental health crises.

Hamilton's Mental Health Crisis Response

To address Council's inquiry regarding the feasibility of the Toronto Community Crisis Centre model in Hamilton, staff consulted with community providers to understand existing services in Hamilton. The city's mental health crisis response includes various programs aimed at supporting individuals in crisis.

The Crisis Outreach and Support Team (COAST), established in 1997 partnering St. Joseph Healthcare with the Hamilton Police Services, operating a 24-hour crisis line and provides outreach services to all ages. There are two ways COAST will respond for mobile visits which are triaged in a priority manner. The outreach response provided is determined by the risk level of the call, which may range from counselling via phone to in-person responses by a mental health worker and crisis response worker. In high-risk cases, both a mental health worker and a non-uniformed police officer are assigned to the visit. In 2023, this team received 25,073 calls, conducted 805 mobile visits without police intervention, and 799 visits that included non-uniformed police officers. Notably, only 3.2% of calls to the COAST crisis line resulted in a police response.

The Mobile Crisis Rapid Response Team (MCRRT) is composed of first responders consisting of mental health workers and dedicated uniform police officers, responding to 911 calls for persons in crisis or related calls. This team operates daily from 8:00 AM to 4:00 AM. In 2023, the Mobile Crisis Rapid Response Team responded to 5,514 calls, assisting 3,585 individuals, demonstrating lower apprehension rates and shorter wait times for both police officers and clients at emergency departments. Proactive engagement with clients helps build rapport and develop coping strategies outside of crisis situations. Funding for the mental health workers is provided by the Ministry of Health.

¹ City of Toronto Report for Action <u>2023 Update on the Toronto Community Crisis Service and Proposed</u> <u>Expansion Plan</u>. October 17, 2023. Available at https://www.toronto.ca/legdocs/mmis/2023/ex/bgrd/backgroundfile-240069.pdf

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The Social Navigator Program (SNP) and Rapid Intervention Support Team (RIST) originated from a partnership with the City of Hamilton's Economic Development Division and Emergency Medical Services. The goal of these programs is to reduce reliance on judicial and healthcare systems by guiding at-risk individuals toward appropriate agencies to improve their health and well-being. The team consists of paramedics, police officers, and a Social Navigator Coordinator. In 2022, the Social Navigator Program was expanded to include two Youth Navigators and the Rapid Intervention Support Team, which provides comprehensive support to individuals with complex needs.

Rapid Intervention Support Team is a coordinated multisectoral team that integrates various community agencies and Hamilton Police Social Navigator Officers. The team includes addictions workers, mental health navigators, Indigenous women's navigators, court liaisons, seniors and youth navigators, and housing navigators. In 2023, this team connected with 1,292 unique individuals and delivered 12,833 services, including transportation to medical appointments and wellness check-ins. This program is funded through the Community Safety and Policing Grant, from April 2022 to March 2025.

The Good Shepherd Barrett Centre provides 24/7 crisis services for individuals aged 16 and older, including telephone and in-person crisis assessment, crisis counselling, short-term stabilization beds, group counselling, and peer support drop-in groups. Funded by the Ministry of Health and Long-Term Care, the centre operates a 16-bed program, with 6 beds designated for justice-related referrals (e.g., police, MCRRT, SNP, and COAST) to divert individuals from the justice system and provide timely care. The 10 additional crisis beds accept referrals from various sources, including self-referrals, hospitals, and social service providers, with same-day intake and a one-hour response time for Safe Bed referrals. As part of the broader Good Shepherd organization, the Barrett Centre is dedicated to mental health and addiction services, supporting individuals across a wide range of needs, from shelter and outreach to medical care, with a focus on prevention and intervention for diverse populations.

Intensive Case Management Access Coordination (IntĀc) streamlines access to intensive case management services for individuals experiencing serious mental health issues, working closely with key agencies to provide comprehensive care. This program connects individuals to three key agencies providing these essential services: the Canadian Mental Health Association (CMHA), Hamilton Branch; the Community Mental Health Promotion Program (CMHPP) – City of Hamilton; and the Hamilton Program for Schizophrenia (HPS).

Hamilton ACTT, through St. Joseph's Healthcare, offers specialized community-based services for individuals aged 18 and older in the Greater Hamilton area who experience complex physical, psychological, and social challenges due to severe mental illnesses

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such as schizophrenia, schizoaffective disorder, major depression, and bipolar disorder. The program aims to help clients regain meaningful roles in their communities through comprehensive, individualized support that utilizes evidence-based therapeutic approaches. Key goals include reducing mental health symptoms, improving housing stability, enhancing independence and life satisfaction, and fostering better employment and educational outcomes, as well as strengthening social and family relationships.

Although not a provider of service, the Greater Hamilton Health Network (GHHN) is a coalition comprised of health service providers in the Hamilton, Haldimand Niagara North West area, who work together to transform healthcare services across the region, emphasizing integrated care and improved patient outcomes. The Ministry of Health provides project-specific funding to the GHHN through Ontario Health West for various initiatives that reflect specific health priorities, and the GHHN has also been a facilitator and convener of partners to address local issues in a coordinated and collaborative way. Hamilton health providers receive Ministry of Health funding directly from Ontario Health and are accountable to Ministry and Ontario Health West for the programs and services delivered by their respective organizations.

The GHHN recently completed its "Mobile and Outreach Service Mapping: A Current State Analysis of the Greater Hamilton Health Network Service Areas 2024"². This report outlines the implementation and outcomes of a mobile crisis intervention program aimed at providing immediate support to individuals in mental health distress. It evaluates the effectiveness of outreach services, highlights key challenges faced during the program, and presents recommendations for enhancing mental health crisis response in the community. Overall, the report outlines the diverse services available through multiple organizations and emphasizes the importance of accessible and timely mental health services to improve community well-being.

Feasibility of Implementation in Hamilton

The TCCS model includes several core elements that already exist in Hamilton, or which if implemented, could enhance Hamilton's mental health crisis response system. As in Toronto, a multi-agency 24/7 crisis response is available in Hamilton through programs like COAST/MCRRT, indicating a high feasibility for effective collaboration. The Toronto model serves individuals aged 16 and older, with COAST accommodating all ages, which also supports high feasibility. COAST operates 24/7, ensuring high feasibility for continuous crisis intervention. Mobile crisis teams are also available, with

² Greater Hamilton Health Network. (2024). *Mobile and outreach service mapping: A current state analysis of the Greater Hamilton Health Network service areas* report. Retrieved from https://greaterhamiltonhealthnetwork.ca/wp-content/uploads/2024/08/GHHN-Mobile-and-Outreach-Worker-Final-Report.pdf

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both COAST and the Mobile Crisis Rapid Response Team (MCRRT) aligning well with TCCS principles.

However, system coordination is limited in Hamilton, presenting a moderate to low immediate feasibility for implementing this critical component of the TCCS model. In Toronto, individuals in crisis can call 911 or 211, and Toronto's 911 dispatch can divert calls to 211. It should be noted that while Hamilton can divert 911 calls to Fire, Paramedics, Police and COAST; it is limited in current opportunities to triage appropriate calls to community paramedics, or mental health responders instead of ambulance.

The Ministry of Health currently operates Central Dispatch for ambulatory services. Local control of dispatch has been requested of the Ministry of Health, as is the model in municipalities such as Niagara, Ottawa, and Toronto, which would provide local options to triage appropriate 911 calls to community paramedics, or mental health responders beyond COAST.

Mental health professionals serve as first responders through COAST, further supporting high feasibility. However, there is a notable lack of sustained funding for existing programs, which presents a low feasibility challenge, as securing long-term funding is essential for effective implementation.

The mental health and addictions sector is complex, with many organizations providing unique services through varied funding streams in a patchwork manner, which when combined contribute to fragmented service delivery, complicated access, underresourced programs and services and duplication. Developing a similar coordinated program in Hamilton as exists in Toronto with a single point of access and "no wrong door" for Hamilton would mean transforming our local system of services and supports. This would require significant time and community consultation as well as dedicated senior level leadership in order to appropriately build trust and rapport between providers, identify opportunities, develop recommendations and implement a new model for Hamilton.

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

Mental health crisis response framework and programming must consider several key policies and pieces of legislation including:

• **Community Safety and Policing Act (CSPA)**: This act includes provisions related to the provision of community-based services and emphasizes the importance of collaboration between various agencies in addressing public safety, including mental health crisis responses. This legislation governs the Community Safety and Well-Being Plan as well as Hamilton Police Services.

SUBJECT: HSC24040 Community Safety and Well-Being: Toronto Community Crisis Centre and Hamilton's Mental Health Crisis Response (City Wide) – Page 8 of 10

- Mental Health Act (R.S.O. 1990, c. M.7): This act governs the assessment and treatment of individuals with mental health issues, outlining the rights of individuals and the responsibilities of healthcare providers. It is crucial for ensuring that any crisis response program aligns with legal requirements for involuntary treatment and patient rights.
- Health Care Consent Act (R.S.O. 1996, c. 2): This legislation establishes the principles of informed consent in healthcare, emphasizing the importance of respecting individuals' rights to make decisions about their treatment. Any crisis response program must adhere to these principles.
- Accessibility for Ontarians with Disabilities Act (AODA): This act aims to improve accessibility for individuals with disabilities, including those with mental health challenges. Programs should ensure that services are accessible to all individuals, regardless of their abilities.
- **Ontario Human Rights Code**: This code protects individuals from discrimination based on various grounds, including mental health status. Any crisis response program must promote equity and prevent discrimination in service delivery.
- Child and Family Services Act (CFSA): If the program includes services for youth under 16, it is important to consider the provisions of the Child and Family Services Act, which governs the welfare of children and emphasizes the need for a collaborative approach to support young individuals in crisis.
- **Public Health Standards**: Relevant public health guidelines and standards, such as those from the Ministry of Health, should be reviewed to ensure that the crisis response program aligns with best practices in mental health care and public health initiatives.
- Integrated Community Health Services Centres: governs the provision of emergency medical services, including the protocols for responding to mental health crises. Effective mental health planning must consider how to integrate these emergency services with mental health crisis response programs to ensure timely and appropriate care.

These policies and legislation must continue to inform Hamilton's comprehensive mental health crisis response programs to ensure they are effective, equitable, and legally compliant.

RELEVANT CONSULTATION

Staff engaged with partners in Toronto and across Hamilton in the development of this report. The City of Toronto provided in depth information included in this report.

Consultations with local leaders and programs included St. Joseph's Healthcare, Hamilton Police Services, Centre for Addictions and Mental Health, Good Shepherd,

SUBJECT: HSC24040 Community Safety and Well-Being: Toronto Community Crisis Centre and Hamilton's Mental Health Crisis Response (City Wide) – Page 9 of 10

Greater Hamilton Health Network and City of Hamilton Paramedics Services, Public Health, Housing, and Ontario Works.

ANALYSIS AND RATIONALE FOR RECOMMENDATION

Hamilton's mental health crisis response system is multifaceted, and partnerships are strong. A key takeaway from the local analysis is that providers in Hamilton's mental health and addictions sector identified gaps that hinder effectiveness to work as a coordinated system of services and supports. While the existing programs, such as Crisis Outreach and Support Team, Mobile Crisis Rapid Response Team, and Rapid Intervention Support Team, and the many other mental health outreach programs and services within the City provide valuable services, they may lack a comprehensive, integrated framework seen in models like the Toronto. The Toronto Community Crisis Service's successful "no wrong door" approach allows individuals to seek help through multiple avenues, whereas Hamilton's system can be fragmented, with varying access points that may confuse those in crisis.

Additionally, information from service users is needed to fully understand the needs of people seeking crisis support, though it is believed that an expansion of existing programming could better support needs.

Moreover, while Rapid Intervention Support Team connects with many individuals, the high demand for services – evidenced by the substantial number of unique individuals served – suggests that current resources may be inadequate. The lengthy waitlists for public health services, addiction support, reaching up to 18 months for case management, further exacerbate the issue, indicating a lack of timely access to necessary support.

City involvement: Mental Health Services and Supports historically are provincially funded services that are outside the scope of services provided by municipalities. However, the City of Hamilton's Paramedics, Public Health Services, and Police Services have a role in the community's mental health crisis response. Paramedics provide immediate medical assistance and support during crises, while Public Health Services offer several mental health resources and programs aimed at prevention and support, and Police Services ensure safety and facilitate appropriate responses to individuals in distress as well can apprehend under the Ontario Mental Health Act. Although Hamilton's Community Safety and Well-Being plan team is not resourced to develop and implement pilot programs as some other municipalities are, the support team through the CSWB plan plays a vital role in working at a system level to integrate initiatives across the six priority areas, which include mental health and substance use, into broader safety strategies, encouraging a coordinated response to community needs and promoting holistic well-being for all residents.

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It is important to note that while the GHHN is leading coordination efforts in the mental health and addictions sector through the Secretariat, it is not funded specifically for coordination of the sector. The Greater Hamilton Health Network's (GHHN) Mental Health and Addictions Secretariat was convened to enhance the coordination and delivery of mental health and addictions services within the community, recognizing the need for a local table. This initiative aims to address gaps in care, promote collaboration among service providers, and improve outcomes for individuals facing mental health and substance use challenges. As part of its work plan, progress can be reported back to Council through the GHHN's reporting to the Board of Public Health.

ALTERNATIVES FOR CONSIDERATION

That Council direct staff to prepare a business case for the 2025 budget that would provide resources for dedicated senior level leadership to work with the Greater Hamilton Health Network and the Mental Health and Addictions Sector to develop a made-in-Hamilton integrated mental health crisis response, with single point of access and coordinated follow up service and supports. This effort would build on and integrate existing services and supports and include community consultation, local analysis and recommendations. The implementation of a 211 response could be considered within this work, as well as a full costing and phased implementation plan for how the model could leverage existing resources and be developed uniquely for Hamilton.

APPENDICES AND SCHEDULES ATTACHED

Not applicable



Community Safety and Well-Being: Toronto Community Crisis Centre & Hamilton's Mental Health Crisis Response System

Emergency & Community Services Committee November 21, 2024



- Setting the Context
- Recommendations
- Toronto Community Crisis Service
- Hamilton's Mental Health Crisis Response Overview
- Feasibility in Hamilton



Setting the Context

- Community Safety and Well Being Plan aims to create the community conditions for everyone to thrive
- Currently, 1 of 6 priorities identified by the community is mental health and stigma reduction
- May 2024 staff presented Community Safety and Well-Being Annual Report and motion approved for staff to report back on the feasibility of implementing a service like the Toronto Community Crisis Service model



Page 26 of 70 Recommendations

- (a) That City staff participate in and support the next phase of the work being led by the Greater Hamilton Health Network (GHHN) to identify opportunities for improved coordination and integration of mental health services and supports in Hamilton and that an update on this work and recommendations for next steps be included in the annual GHHN reporting to Council through Public Health.
- (b) That City staff continue to work with community stakeholders and municipal partners to advocate to various levels of government for sustained funding to support expansion of mental health and addictions services and supports, and improved coordination and integration of provincially funded mental health services.



4

Alternatives for Consideration

As an alternative to staff recommendations, Council direct staff to:

- Prepare a business case for the 2025 budget that would provide resources for dedicated senior level leadership to work with the Greater Hamilton Health Network and the Mental Health and Addictions Sector to develop a made-in-Hamilton integrated mental health crisis response, with single point of access and coordinated follow up service and supports.
- The implementation of a 211 response could be considered within this work, as well as a full costing and phased implementation plan for how the model could leverage existing resources and be developed uniquely for Hamilton.



Toronto Community Crisis Service



Call 211 to access the Toronto Community Crisis Service



https://www.youtube.com/watch?v=npHu8YPX3-o&t=4s

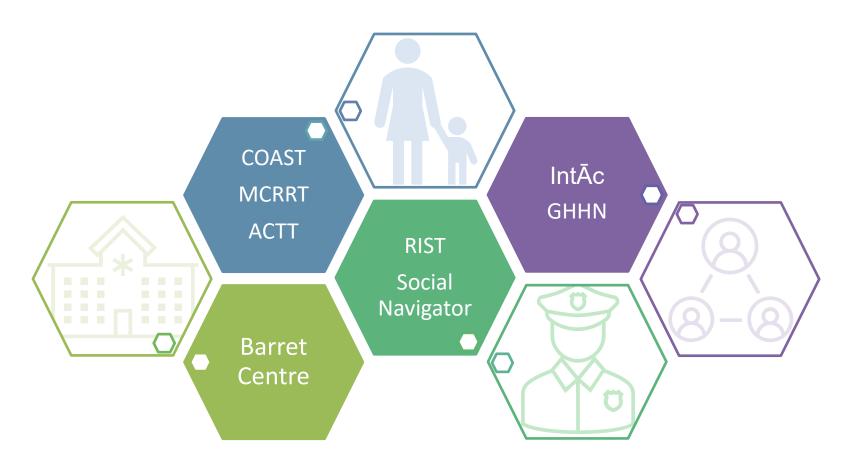


Toronto Community Crisis Service (cont.)

- Non-police led, immediate support and intervention for individuals in crisis
- Access through 911 and 211
- In Q3 2024, citywide program implemented; ~\$26.8 million annually through tax base
- City of Toronto acts as service system manager; under CSWB Division



Hamilton's Mental Health Crisis Response System



This slide provides a snapshot of Hamilton's crisis response system, acknowledging the many additional programs and supports available.



Page 31 of 70 St. Joseph Healthcare

Crisis Outreach and Support Team (COAST)

- Established in 1997 through a partnership between St. Joseph's Healthcare and Hamilton Police Services
- 24/7 diversion serving all ages
- Mobile Response System
- High-Risk Response
- 2023 Stats:
 - 25,073 calls received by COAST
 - 805 mobile visits conducted without police intervention
 - o 799 mobile visits involved non-uniformed police officers
- 3.2% of COAST crisis line calls resulted in a police response



Page 32 of 70 St. Joseph Healthcare

Mobile Crisis Response Team (MCRRT)

- Mental health workers and uniformed police officers responding to 911 calls for individuals in crisis
- Responded to 5,514 calls, assisting 3,585 individuals
- Demonstrated lower apprehension rates and shorter wait times at emergency departments.

Hamilton Assertive Community Treatment Team (ACCT)

- Individuals aged 18+ with severe mental illnesses (e.g., schizophrenia, bipolar disorder, major depression).
- Utilizes evidence-based therapeutic practices to improve mental health, housing stability, and life satisfaction.



Hamilton Police Services

Social Navigator Program (SNP)

- Reduce reliance on judicial and healthcare systems by guiding at risk individuals toward appropriate agencies
- Team consists of paramedics, police officers, social navigator coordinator, and two youth navigators

Rapid Intervention Support Team (RIST)

- coordinated multisectoral team that integrates various community agencies and Hamilton Police Social Navigator Officers
- Team consists of addictions workers, mental health navigators, Indigenous women's navigators, court liaisons, seniors and youth navigators, and housing navigators
- Funding ends March 2025



Page 34 of 70 Good Shepherd

Barret Centre

- 16 bed program with 6 Safe Beds dedicated to justice referrals
- Beds divert individuals from justice or emergency systems
- 10 crisis bed program accepts referrals from all sources
- Part of larger organization that provides prevention and intervention supports daily



Page 35 of 70 Additional Services

Canadian Mental Health Association

 Intensive Case Management Access Coordination (IntĀc) streamlines access to intensive case management services for individuals experiencing serious mental health issues

Greater Hamilton Health Network (GHHN)

- Not a provider of service but rather a coalition comprised of health service providers to transform health care services
- Ministry of Health provides project-specific funding to the GHHN
- Convene and coordination through Mental Health and Addictions Secretariat



Breadth of Resources in Hamilton

- Hamilton's system is multifaceted with strong partnerships
- 7 key programs highlighted though many more supports available
- 19 providers offering outreach, mobile or combined mental health services



Feasibility of TCCS in Hamilton

- TCCS elements already exist or could enhance Hamilton's system
- 24/7 diversion response available through COAST and MCCRT, serving all ages
- Mobile teams are part of COAST and MCCRT
- System coordination in Hamilton is limited; programs and services lack funding to meet demand; 211 has not been explored
- Planning a coordinated, single point of access mental health crisis response would require significant time and resources, senior level leadership, community collaboration and funding for implementation



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THANK YOU



INFORMATION REPORT

то:	Chair and Members Emergency and Community Services Committee
COMMITTEE DATE:	November 21, 2024
SUBJECT/REPORT NO:	Recreation Master Plan Implementation Strategy Update (HSC24043) (City-Wide)
WARD(S) AFFECTED:	City-Wide
PREPARED BY:	Kirill Pankov (905) 546-2424 Ext. 3859 Romas Keliacius (905) 546-2424 Ext. 4722
SUBMITTED BY:	Chris Herstek Director, Recreation Division Healthy and Safe Communities Department
SIGNATURE:	02,410

COUNCIL DIRECTION

Emergency and Community Services Committee, at its meeting on August 11, 2022, in Report HSC22014(b), directed staff to:

Develop and report back on an implementation strategy to include funding considerations for any recommendations presented in the Recreation Master Plan that relate to short term (0-10 years) facility investment needs.

The purpose of this report is to provide a progress update on the Recreation Master Plan Implementation Strategy, to clarify the proposed deliverables regarding indoor and outdoor facility investment needs, to highlight ongoing work on other recommendations in the Recreation Master Plan, and to share anticipated next steps.

INFORMATION

Background

The goal of the Recreation Master Plan Implementation Strategy is to prepare a detailed roadmap to execute recommendations related to facility investment needs as outlined in

SUBJECT: Recreation Master Plan Implementation Strategy Update (HSC24043) (City-Wide) - Page 2 of 4

the Recreation Master Plan, and to provide a clear and organized approach to prioritize and evaluate projects.

The Recreation Master Plan Implementation Strategy is dependent on population forecasts and expected growth in planning areas. The provincially mandated urban boundary expansion in 2022 and the municipal response to reinstate lands to the Greenbelt area impacting the Urban Hamilton Official Plan resulted in delays to initiating work on the implementation strategy.

The Recreation Division, in collaboration with staff from other departments including Public Works, Planning and Economic Development and Corporate Services, and Monteith Brown Planning Consultants, have been actively engaged in the development of the Recreation Master Plan Implementation Strategy since November 2023.

During the first half of 2024, work on the implementation strategy focused on high-level strategic aspects of the report, including creation of a prioritization framework and development of an evaluation criteria for facility investment needs. In June 2024, asset-specific data was collected and evaluated for indoor and outdoor facilities, and corporate initiatives with project dependencies, including the Recreation Asset Management Plan, were completed.

Given this context, this report provides an update to clarify expectations and define the specific outcomes of the implementation strategy for indoor and outdoor facility investment needs. The full implementation strategy will come forward to Council in Q2 2025.

Recreation Master Plan Implementation Strategy Outcomes

Indoor Facilities: The implementation strategy will focus on new and renewed community recreation centres for the next ten years. These sites offer the widest range of programming, have a large impact on communities, and are also the costliest facilities to build, operate, and maintain.

For indoor assets, the Recreation Master Plan Implementation Strategy will:

- Summarize the current state of recreation facilities and amenities
- Describe the methodology, evaluation criteria and strategic framework applied to the current state of assets, forming a strong foundation for future decision-making beyond the scope of this project
- Establish priorities and confirm timing within the next ten years for facility investments

SUBJECT: Recreation Master Plan Implementation Strategy Update (HSC24043) (City-Wide) - Page 3 of 4

- Develop a financial model that factors in facility prioritization, costing, funding, and capital budget to properly highlight deficits and provide options with funding considerations for Council
- Provide a sustainability plan to ensure ongoing maintenance and operation of recreational facilities and programs beyond the implementation phase.

Outdoor Facilities: The implementation strategy will apply a framework to outdoor facilities that emphasizes renewal of aging park amenities, expanding the inventory of full-size and lit sports fields, defining sport and recreation priorities for City-wide parks, and provide tools to address recreation and sport needs as part of the planning process for investment in outdoor spaces. Recreation staff will continue to work directly with Landscape Architectural Services and Parks staff as key stakeholders to prioritize investments in relevant outdoor assets as outlined in the Recreation Master Plan. Site-specific asset investment and prioritizing identified individual projects will not be directly addressed for outdoor facilities as part of the implementation strategy.

The implementation strategy will be flexible and adaptable to changing community needs and priorities and will not attempt to remove capacity for local and site-specific decision-making. While capital budgets are forecasted for 10 years, funding will continue to be approved by Council in the year an individual project is occurring, contingent on availability of funds and other perceived municipal priorities.

Recreation Master Plan Recommendations

In addition to the Recreation Master Plan Implementation Strategy that staff are preparing to address facility investment needs, three comprehensive projects based on Recreation Master Plan recommendations, in alignment with the 2022-2026 Council Priorities, have been actioned for completion by the end of 2025:

- Recommendation #65: Facility Usage & Performance Measurement
 - Develop a simple set of internal service delivery targets and respective performance measures for Recreation facilities, resources, and assets.
- **Recommendation #66:** Recreation Services Pricing Policy
 - Create a transparent policy, in collaboration with Finance staff, to set fairminded rates that accurately reflect the value of recreation services.
- **Recommendation #67:** Standardized Partnership Framework
 - Build a fair, equitable and transparent framework for creating future relationships with outside sport and recreation entities, including processes for managing unsolicited proposals.

SUBJECT: Recreation Master Plan Implementation Strategy Update (HSC24043) (City-Wide) - Page 4 of 4

Next Steps

Staff will continue to work with Monteith Brown Planning Consultants to prepare the Recreation Master Plan Implementation Strategy, with the final report to be presented to Emergency and Community Services Committee in Q2 2025.

The Recreation Master Plan contains multiple recommendations actionable by staff with minimal or no funding requirements. Recommendations continue to be prioritized and actioned through the addition of relevant projects to staff workplans and modifications of team priorities where appropriate.

As a measure of transparency and a commitment to move forward in a timely fashion, a web presence dedicated to the Recreation Master Plan will launch in Q1 2025 to provide a central resource hub for the public, Council, internal staff teams, and senior leadership to monitor progress towards the goals outlined in the Recreation Master Plan and decisions that will be made following the presentation of the implementation strategy.

APPENDICES AND SCHEDULES ATTACHED

None



INFORMATION REPORT

то:	Chair and Members Emergency and Community Committee
COMMITTEE DATE:	November 21, 2024
SUBJECT/REPORT NO:	2024 Youth Strategy Annual Report (HSC24038) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Rachelle Ihekwoaba 905-978-2680 Daniel Ridsdale 289-659-5994
SUBMITTED BY:	Brenda Bax Director (Acting), Children's and Community Services Division Healthy and Safe Communities Department
SIGNATURE:	

COUNCIL DIRECTION

On March 30, 2022, Council endorsed the <u>2022-2027 Youth Strategy Report</u> (CES15056(d)). As described in Report CES150569d), staff are required to "report on progress annually to the Emergency and Community Services Committee and the community." This report provides the annual progress update for 2024.

INFORMATION

Built through extensive engagement and collaboration with youth, City staff, parents and agency partners, the City of Hamilton's Youth Strategy maps out a plan for how the City will engage youth aged 14-29 and address the issues they face in Hamilton. Through this engagement process, five priority themes were identified to ensure youth voices will be integrated into City building:

- 1. Access to Mental Health and Addiction Support
- 2. Access to Safe and Affordable Housing
- 3. Access to Employment and Training Support
- 4. Enhance Safety and Sense of Inclusion
- 5. Enhance Youth Engagement and Leadership

In 2023, the Youth Strategy Annual Update (CES15056(e)) presented an overview of the governance model and implementation plan that will be used to fully execute the

SUBJECT: 2024 Youth Strategy Annual Report (HSC24038) (City Wide) – Page 2 of 4

plans activities. This update seeks to inform key activities, achievements, and impacts realized in 2024.

2nd Annual HamOntYouth Summit Presented by RBC

Hosted at the Hamilton-Wentworth District School Board's Education Centre on October 22, 2024, the event engaged over 250 youth from across the city, more than doubling attendance from the inaugural event in 2023. Activities focused on engaging youth with opportunities, celebrating youth achievements, amplifying their voices, and building skills. Students from over 20 public, Catholic, and French-speaking secondary schools were represented in attendance. Due to strengthened relationships with local school board partners, support from sponsors RBC and Alectra, and the youth-led organization, Model City Hall, hundreds of young Hamiltonians were able to inform several community issues. Discussion topics included responding to gun and gang violence, school curriculum planning, city-building, the LRT, and many more. A post-event report will be shared with community and to Council through a Communication Update in early 2025.

HamOntYouth Steering Committee

The HamOntYouth Steering Committee was launched in 2018 to inform and support Hamilton's Youth Strategy. The Committee is pivotal in integrating youth voices into the City of Hamilton's projects and initiatives. Throughout the past year, the Committee has had membership from 48 unique youth, volunteering over 790 hours to activities and initiatives. Of note, these activities and initiatives included organizing the HamOntYouth Beach Clean Up, HamOntYouth Summit, and supporting activities like the Dundas Cactus Festival Parade and Hamilton's Youth Town Hall.

Hamilton's 1st Youth Town Hall

On April 14, 2024, hosted by Council members at the City of Hamilton's Council Chambers, the town hall event engaged over 50 youth from across the city. Attendees heard from elected officials, engaged in youth-led discussions facilitated by Model City Hall, and debriefed key issues in concert with decision-makers in their community.

Hamilton's Building Safer Communities Grant

Working in collaboration with Hamilton's Community Safety and Well-Being Plan, the Building Safer Communities Grant Program provides multi-year funding for communityled initiatives that aim to prevent, and address risk factors associated with youth gun and gang violence. Youth Strategy staff have supported the grant initiative to ensure decisions are informed by meaningful engagement with Hamilton's youth. As directed in the Youth Strategy, staff are directed to engage key stakeholders and youth with lived

SUBJECT: 2024 Youth Strategy Annual Report (HSC24038) (City Wide) – Page 3 of 4

experience to best understand guns, gangs, and violence among the youth community. This connection to youth-serving partners and initiatives directly ensures that youth are actively involved in creating safer, more inclusive communities.

Hamilton's Child & Youth Network

In late 2023, Hamilton's Child and Youth Network was established and endorsed by a membership of over 50 senior leadership representatives from over 45 unique community organizations committed to enhancing local outcomes for children, youth, and their families. The Network meets three to six times per year to ensure Hamilton's children and youth feel safe, have a sense of belonging, and can meet their health and well-being needs. This Network will play a critical role in supporting both the Early Years Community Plan and the Youth Strategy. Network members belong to a community of professionals contributing to the broader Community Safety & Well-being (CSWB) Planning Framework, as mandated under the *Province's Safer Ontario Act, 2018*. The work of Hamilton's Child and Youth Network is nested in the broader system-planning methodology of Hamilton's Community Safety & Well-being Plan.

National Youth Week

Hamilton celebrated National Youth Week from May 1 - 7, 2024,. The recognition event is an annual celebration of youth and their achievements and involvement in their communities. The theme of Hamilton's 2024 National Youth Week was promoting youth health to improve the overall health of the community. In collaboration with Hamilton's Youth Serving Agencies Network, dozens of free activities were offered throughout the city.

Youth Experiences of Hate/Bias-Related Violence and Discrimination Study

In a partnership led by McMaster University's Faculty of Health Sciences, staff supported the submission of a \$100,000 grant application to the Canadian Institutes of Health Research. Funds were awarded to conduct a youth-led participatory action research study. This one-year youth-led project focuses on understanding how hate and bias-related violence impacts the mental health of diverse and marginalized youth in Hamilton. Led by McMaster University and supported by Empowerment Squared, Hamilton Anti-Racism Resource Centre (HARRC), and the City of Hamilton, this initiative reinforces our commitment to create safer, more inclusive environments for Hamilton's youth.

Youth Team Achievements

The Youth Team is comprised of the Xperience Annex, Learning Earning and Parenting Program (LEAP), Youth Engagers, and an Ontario Works Youth Case Manager.

SUBJECT: 2024 Youth Strategy Annual Report (HSC24038) (City Wide) – Page 4 of 4

- Hamilton's Youth Navigator supported 127 young residents through the Xperience Annex, Learning, Earning, and Parenting Program professionals were able to support 21 graduates through the program,
- Youth Engagers attended 30 public activities and events, growing, and promoting the @HamOntYouth Instagram account to over 4,250 followers,
- the Ontario Works Youth Case Manager provided unique supports to over 260 Hamilton youth.

CONCLUSION

Staff made significant progress in 2024 and a key enabler was establishing workgroups on each of the five identified priorities of the 2022-2027 Youth Strategy. In 2025, staff will report updates on the respective objectives linked to the identified priorities identified. With the successes and programming described above, staff are confident in their ability to achieve improved outcomes for Hamilton's Youth, as described in the 2022-2027 Youth Strategy.



INFORMATION REPORT

TO:	Chair and Members
	Emergency and Community Services Committee
COMMITTEE DATE:	November 21, 2024
SUBJECT/REPORT NO:	Third Party Operated Recreation Facilities (CS13018(e)) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Laura Kerr 905-546-2424 x5015
SUBMITTED BY:	Chris Herstek Director, Recreation Division Healthy and Safe Communities
SIGNATURE:	02,410

COUNCIL DIRECTION

The Emergency and Community Services Committee, at its February 8, 2024 meeting, approved the following:

"(d) That staff report back in Q3 2024 to the Emergency and Community Services Committee, on the following:

- 1. All City of Hamilton recreation facilities which have third party operators, including location, types of services being provided, partnership benefits, and the risks associated with these relationships;
- 2. Agreement inclusions to mitigate risks and potential to transfer governmental funding to a new operator should an organization withdraw services; and
- 3. Actual costs to operate the Beasley Community Centre compared to funding provided."

INFORMATION

All City of Hamilton Recreation Facilities which have Third Party Operators

The Recreation Division works with many community stakeholders to fully or partially operate recreation amenities and facilities in the City of Hamilton. As per the Recreation Master Plan, "The City recognizes the value that not-for-profit community stakeholders contribute to the community in terms of organizing and arranging a full spectrum of sport and other activities for residents of all ages." (page 130, Recreation Master Plan, Phase 3).

SUBJECT: Third Party Operated Recreation Facilities (CS13018(e)) (City Wide) -Page 2 of 4

There are currently 68 active arrangements with 64 third party operators and community groups that transfer primary use and control of a recreation facility (see Appendix "A" to Report CS13018(e)). This list excludes arrangements with organizations who have primary space within a facility (an office or storage), but where recreation staff retain responsibility for the overall operation of the facility or coordinating access for other groups. This list also excludes facilities where agreements are executed by Public Works, Facilities and Parks Divisions or where permits are issued for seasonal use only.

Benefits of Third Party Agreements

The Recreation Master Plan (2022) identified recreation's relationships with a wide range of organizations as a strength. The plan further noted that these relationships are appropriate and of benefit to the City when:

- The City does not have capacity or budget for direct program delivery or facility management;
- There is an established provider/partner already;
- The facility augments service gaps in lieu of City services;
- There is a need to build capacity or engage communities; or
- The potential service provider is the preferred specialist for the service offered

Additionally, non-profit organizations can often leverage additional sources of government funding or grants, allowing services to be delivered at a lower cost than as specified in the City's User Fees and Charge By-law while ensuring they meet priorities and outcomes identified.

For some facilities, relationships are also coordinated with school boards and other Divisions, such as the Children's and Community Services Division, to benefit greater system planning and establish a single service provider for multiple services. This benefits the community further by having a coordinated approach to building trusted relationships with families and responding to community needs. For example, at Beasley Community Centre and Dr. Davey School, Wesley Urban Ministries is the recognized single service provider, operating the EarlyON Child and Family Centre programs, licensed childcare centre, before/after care and school break programs, and recreation services.

Risks Associated and Inclusions in Agreements and Processes to Mitigate Risk

Despite the benefits, there are several risks associated with third party operation of recreation facilities; especially that not all risks can be avoided or that the new operator may have different processes or fees than what residents have come to expect from municipal services.

In addition, should operators no longer be able to provide service, any funding and grants they receive from private funders or other government sectors, often cannot be transferred to a new operator or the municipality. This funding would be redistributed in

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.

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

SUBJECT: Third Party Operated Recreation Facilities (CS13018(e)) (City Wide) -Page 3 of 4

accordance with any funding or program guidelines established by the Ministry or private funder.

A full list of these risks and agreement inclusions or process steps taken to mitigate risks can be found attached as Appendix "B" to Report CS13018(e).

Actual Costs to Operate the Beasley Community Centre Compared to Funding Provided

Costs for the Beasley Community Centre can be divided into operating costs and programming costs. Operating costs include expenses to open and close the facility for programs and rentals to take place, while programming costs include the staffing and equipment costs associated with direct program delivery.

In 2024, \$44,615 in net levy funding will be provided by the City of Hamilton to Wesley Urban Ministries (WUM) for operating costs of the Beasley Community Centre and Simone Hall. The Recreation Division also budgets an additional \$95,061 to support the operation of Beasley Community Centre/Simone Hall for items such as the annual lease and caretaking costs payable to Hamilton Wentworth District School Board (HWDSB), gym permit fees, cleaning, and utilities.

As shown in the chart below, it costs Wesley Urban Ministries \$125,840 to operate the centre 6 days a week (Mon-Thurs 9am-9pm, Fri 9am-6pm, Sat 9am-12pm).

Comparable costs are also included if City of Hamilton, recreation staff were required to operate the facility or deliver programming. Operating costs are significantly higher for City of Hamilton, Recreation to operate given the compensation differences (salaries and benefits) for like positions, as well as the inability to leverage staffing efficiencies that are realized by WUM in having the same operator/provider of daytime EarlyON programming.

Centre Operation	WUM Operating Costs (current state)	COH Recreation Operating Costs	COH Recreation Programming Costs for Like Programs
Staffing Costs and Benefits	\$113,637	\$192,832	\$236,772
Program Expenses & Administration	\$12,203	\$5,200	\$19,370
Total costs	\$125,840	\$198,032	\$256,142
Revenues	\$0	\$0	(\$124,485)
Net Levy funding	(\$44,615)	(\$44,615)	\$0
Remaining to be funded	\$81,225	\$153,417	\$131,657

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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 Employees.

SUBJECT: Third Party Operated Recreation Facilities (CS13018(e)) (City Wide) -Page 4 of 4

This community centre site is attached to Dr. Davey Elementary School and operates with controlled access in accordance with the Safe Schools Act and requirements for elementary schools. Controlled access requires a staff member to allow patrons into the community centre after they buzz at the door and is accounted for within the operating costs for the site.

Programming Costs

Wesley Urban Ministries funds the remaining operating costs and programming costs with their own organizational budget and by leveraging just over \$1M in additional government funding and grants. Current programming is offered free of charge to the local community, including the EarlyON Family and Children's Centre, a daily after school program, summer camp, youth outreach initiatives, a licensed childcare at adjoining Dr. Davey Elementary School, and community rentals and access. If the Recreation Division was to deliver comparable programming, an enhancement of \$131,657 would be required, in addition to the enhancement for operating costs. Programming would be delivered following the current Recreation Division registration processes, including charging a fee for service based on the Council approved User Fees and Charges By-law (admissions for drop-in programs, fees for instructed programs and camps, and rental rates for community access). There would also be no ability to prioritize registrations or access for the Beasley community as Wesley Urban Ministries currently does.

Future Third Party Operating Relationships in Recreation

The Recreation Master Plan recommended that the Recreation Division create a Standardized Partnership Framework to assess and secure suitable operators in the future. This framework can assist with evaluating these relationships and proposals, ensure a fair selection process, and reduce risks by ensuring minimum criterion is met. An effective framework can help inform municipal officials of the merits and drawbacks of partnerships and clarify the expectations and obligations of organizations looking to partner with the municipality (Recreation Master Plan (Phase 3) 2022, page 168).

Recreation staff are currently working on a community collaboration framework for indirect service delivery and partnerships as part of the Recreation Master Plan implementation and will report back to Council in the future.

APPENDICES AND SCHEDULES ATTACHED

Appendix "A" to Report CS13018(e):	Recreation Facilities with Third Party Operators
Appendix "B" to Report CS13018(e):	Summary of Risks and Agreement Inclusions or Processes to Mitigate

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.

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Recreation Facilities with Third Party Operators

There are currently 68 active arrangements with third party operators and community groups which transfer primary use and control of a recreation asset or amenity.

This list excludes:

- Arrangements with organizations to have primary use of space (office or storage), but where recreation staff retain responsibility for the overall operation of the facility or coordinating access for other groups
- Facilities in which agreements are executed by Public Works, Facilities and Parks Division
- Relationships where only rental permits are issued for seasonal use

Types of Services Being Provided	Number of Third Party Operators
Bocce Courts	15
Park Maintenance	11
Tennis/Pickleball Courts	9
Recreation/Leisure Programming	8
Community Hall	6
Lawn Bowling Club	3
Child Care Centre	3
Senior's Club	3
Community Hall & Park Maintenance	3
Recreation Centre and Programming	2
Fitness or Cycling Centre	2
Food Services	2
Arena and Programming	1
Total	68

A complete listing of all facilities is below:

Recreation Facility Operated by Third Party	Ward	Full/Partial Operation	Organization	Types of Services Being Provided
Ancaster Lawn Bowling Clubhouse	12	Full	Ancaster Lawn Bowling	Lawn Bowling Club
Ancaster Little League Park/Concession	12	Full	Ancaster Little League	Park maintenance

Appendix "A" to Report CS13018(e) Page 2 of 5

Ancaster Rotary Centre	12	Partial	Golden Horseshoe Cycling	Fitness/Cycling Centre
Ancaster Rotary Centre - Heron Creek	12	Full	Heron Creek Fitness	Fitness/Cycling Centre
Ancaster Tennis Clubhouse	12	Full	Ancaster Tennis	Tennis/Pickleball Courts
Beasley Community Centre	2	Full	Wesley Urban Ministries	Recreation Centre and Programming
Bernie Arbour Stadium	6	Partial	Hamilton Cardinals	Park maintenance
Beverly Township Hall	13	Full	Rockton Lions Club	Community Hall
Binbrook Memorial Hall	11	Partial	Binbrook Little Theatre	Recreation/Leisure Programming
Bridgeworks	2	Full	Sonic Unyon	Community Hall
Carlisle Community Centre	15	Partial	ABC Nursery	Child Care Centre
Chedoke Golf Course Clubhouse	1	Full	Caddywhack	Food Services
Chedoke Twin Pad Arena	14	Partial	Chedoke Bocce	Bocce Courts
Club 60 Senior's Club	2	Full	Club 60 Senior's Board	Senior's Club
Copetown Lions Park	12	Full	Copetown Lions Club	Community Hall
Corman Bocce	10	Full	Corman Bocce	Bocce Courts
Dominic Agostino Riverdale	5	Partial	Wesley Urban Ministries	Child Care Centre
Dundas Community Centre	13	Partial	ROUTES Youth Centre	Recreation/Leisure Programming
Dundas Driving Park Lawn Bowling	13	Full	Dundas Lawn Bowling	Lawn Bowling Club
Dundas Driving Park Tennis Courts	13	Full	Dundas Tennis Club	Tennis/Pickleball Courts
Dundas Little Theatre	13	Full	Dundas Little Theatre	Community Hall
Eastdale Bocce	10	Full	Eastdale Bocce	Bocce Courts
Ferris Park Bocce	10	Full	Ferris Park Bocce	Bocce Courts
Fred Lombardo Bocce	5	Full	Fred Lomboardo Bocce	Bocce Courts
Freelton Centennial Park	13	Full	Freelton Subcommittee	Park maintenance
Freelton Community Park	13	Full	Freelton Subcommittee	Park maintenance
Glanbrook Lions Club Youth Centre (Mount Hope)	11	Full	Air Cadets 779 Black Knight Squadron	Recreation/Leisure Programming

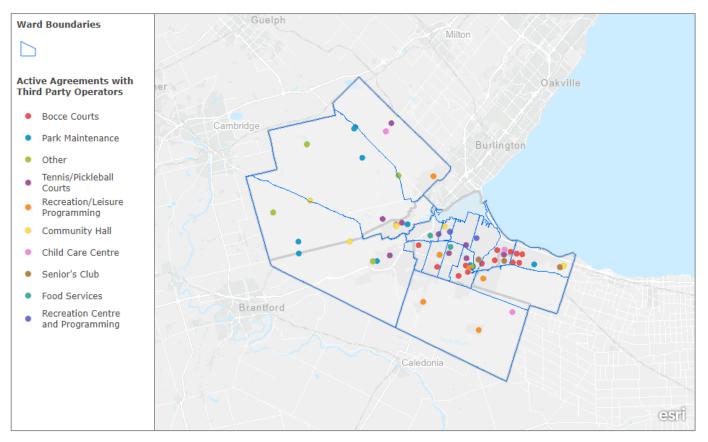
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Glen Castle Bocce	5	Full	Glen Castle Bocce	Bocce Courts
HAAA Tennis Courts	1	Full	Hamilton Tennis Club	Tennis/Pickleball Courts
Hester St Bocce	8	Full	Hester St Bocce	Bocce Courts
Hill Park Courts	7	Full	Pickleball Hamilton	Tennis/Pickleball Courts
Hilltop Tennis Courts	13	Full	Hilltop Tennis Club	Tennis/Pickleball Courts
Huntington Tennis Courts	6	Full	Huntington Tennis Club	Tennis/Pickleball Courts
Inch Park Arena	7	Partial	Hamilton Girl's Hockey	Food Services
Kiwanis Club	4	Full	BGC Hamilton-Halton (Hamilton East Kiwanis Boys and Girls Club)	Recreation Centre and Programming
Lisgar Bocce	6	Full	Lisgar Bocce	Bocce Courts
Lynden Legion Park	12	Full	Lynden-Troy Subcommittee	Park maintenance
Lynden Lions Park	12	Full	Lynden-Troy Subcommittee	Park maintenance
Martino Field	13	Partial	Dundas Little League	Park maintenance
Memorial Bocce	10	Full	Memorial Bocce	Bocce Courts
Millgrove Community Hall	15	Full	Millgrove Subcommittee	Community Hall, Park maintenance
Mohawk 4 Ice Centre	6	Full	Hamilton Arena Partners	Arena
Mohawk Sports Park	6	Partial	Hamilton Olympic Club	Recreation/Leisure Programming
Mountain Arena	8	Partial	Hamilton Skating Club	Recreation/Leisure Programming
Palomino Park Tennis Courts	15	Full	Carlisle Tennis Club	Tennis/Pickleball Courts
Rockton Park	13	Full	Rockton Subcommittee	Park maintenance
Rosedale Arena	4	Partial	Rosedale Senior's Board	Senior's Club
Rosedale Bocce Club	4	Full	Rosedale Bocce Club	Bocce Courts
Rosedale Tennis Courts	3	Full	Rosedale Tennis Club	Tennis/Pickleball Courts

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Roselawn Lawn Bowling	3	Full	Roselawn Lawn Bowling Club	Lawn Bowling Club
Saint Agnes Bocce	5	Full	Saint Agnes Bocce	Bocce Courts
Sam Manson Bocce	5	Full	Sam Manson Bocce	Bocce Courts
Sheffield Community Hall	12	Full	Sheffield Subcommittee	Community Hall, Park maintenance
Simone Hall	2	Full	Wesley Urban Ministries	Community Hall
Stoney Creek Little League	10	Full	Stoney Creek Optimists	Park maintenance
Stoney Creek Tennis Courts	10	Full	Stoney Creek Tennis Club	Tennis/Pickleball Courts
Strabane Park	13	Full	Strabane Subcommittee	Park maintenance
Templemead Bocce	6	Full	Templemead Bocce	Bocce Courts
Trenholme Joe Perin Bocce	6	Full	Trenholme Joe Perin Bocce	Bocce Courts
Trieste Bocce Club	8	Full	Triesta Bocce Club	Bocce Courts
Valens Community Hall	13	Full	Valens Subcommittee	Community Hall, Park maintenance
Valley Park Community Centre	9	Partial	Hamilton Public Library	Recreation/Leisure Programming
Volunteer Park	13	Full	Dundas Minor Baseball	Park maintenance
Waterdown Memorial Hall	15	Partial	Village Theatre Waterdown	Recreation/Leisure Programming
Winona Community Centre	10	Partial	Stoney Creek Historical	Recreation/Leisure Programming
Winona Park	10	Partial	Winona Peach Festival	Community Hall
Winona Senior's Club	10	Full	Winona Senior's Board	Senior's Club
Woodburn Hall	11	Full	Farmer's Dell Preschool	Child Care Centre

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Appendix "B" to Report CS13018(e) Page 1 of 4

Summary of Risks and Agreement Inclusions or Processes to Mitigate

The primary risks to having third party operators of municipal recreation facilities are outlined in detail in the Recreation Master Plan. These risks are detailed in the first two columns of the chart below. Steps taken to mitigate each risk is identified in the third and fourth columns. As part of continuous improvement, Recreation staff has identified additional measures to improve risk mitigation when new agreements are being executed. These additional measures are identified in the last column and have been developed in collaboration with Legal and Risk Services and from the initial findings from the Corporate Real Estate Leases and Licenses Audit Report.

Risks identified	Details	Mitigation Steps Taken	Details	Mitigation Steps to be verified/incorporated at commencement/renewal
Not all risks can be transferred	I ne City may be included in	Selection process	 Only consider already established community groups and organizations, and where possible, with a single operator of multiple services at a facility Organizations must demonstrate they have the expertise and financial/human resources to operate a facility, manage funding, and provide oversight to the services being offered Internal procedures are defined to ensure fair selection and allocation of resources, including following the Procurement Policy Bylaw when applicable for selection of service providers 	 Ensure all Funding Agreements require submission of reports and financial documentation by the operator at regular intervals and prior to provision of funding advance Ensure Funding Agreements address consequences of default including return funding Ensure all Funding Agreements require sufficient advance notice to be provided by operator prior to discontinuing operation
	have received advanced payment	Levels of agreements for facility operation	 There are different levels of facility operation and different agreements available, with minimum 	 Provision of comprehensive care and control training for operators prior to issuing keys and periodic checks by

Risks identified	Details	Mitigation Steps Taken	Details	Mitigation Steps to be verified/incorporated at commencement/renewal
			 requirements for operators based on the level of risk associated Wherever possible, organizations are provided with access and agreements that are the lowest risk possible (i.e., facility permit with keyholder agreement instead of a full facility operating agreement) Staff from legal service and risk 	City staff to ensure compliance with procedures •Ensure review of
		Involvement of legal and risk services	 management assist with drafting agreements, including any templates for recreation staff to use with groups (i.e., keyholder access) Advice provided for incorporation of standard clauses into agreements, based on level of risk and agreement type Identification of insurance requirements by risk management staff and indemnification of the City in all Agreements 	operational risks are
		Authority for execution	 Agreements are only executed when necessary authority has been obtained and by those with authority to do so 	 Legal Services approval as to Form will recite relevant authority
Organization operates outside of standard	0	Procedures and documents	 Agreements, Handbooks and supporting documents are used to clearly outline relationships with groups, including which party is 	 Ensuring handbooks are vetted by Legal/Risk Management staff, as well as

identified		Mitigation Steps Taken	Details	Mitigation Steps to be verified/incorporated at commencement/renewal
City business processes or fees	 branding, or offering different services Sometimes the operator requires additional membership fees to fully participate in programs 		 responsible for each part of a facility's operation Standard Operating Procedures ensure that Legal/Risk Management services are engaged for all new agreements, Staff dedicated to the coordination of agreements being created 	 other City stakeholders (e.g., Parks, Facilities, etc.) Provision of relevant City policies, procedures, by-laws, etc. (e.g., RZone, Smoking, Food Handling, etc.) operators
		Minimum requirements for community access	 Agreements include requirement for the operator to provide low/no cost facility access for a minimum number of hours to other organizations/residents 	 Ensure data respecting community access is being accurately tracked
Agreements require City staff management and oversight	 Agreements need to be effectively managed and complied with by all parties to be successful May be perception that preferential treatment or benefits are being provided to one organization over another 	requirements	 Reporting is required for service levels delivered, including number of programs, participants served, and/or annual financials If minimum operator requirements are not being met, follow up will occur by management with alternative service providers considered 	 Ensure submission of reporting is timely and reviewed with the operator to identify opportunities for improvement Ensure complaints are addressed and instances of default/non-compliance with the Agreement by operator is promptly documented and remedied, failing which termination of operator will be actioned
		Regular renewal of agreements	 A complete list of all operator agreements is maintained, including renewal dates and recreation manager responsible 	 Ensure Agreements are executed in a timely manner and are in place prior to the operator accessing the facility

Risks identified	Details	Mitigation Steps Taken	Details	Mitigation Steps to be verified/incorporated at commencement/renewal
		and monitoring	 Where possible, Agreements are renewed in advance of the expiry date using updated clauses and terms Staff dedicated to the coordination of agreements executed; this staff will be objective and removed from the relationship manager role to ensure unbiased oversight, that the correct agreement is used, and proper authority obtained Upon renewal of operator agreements, a scan is conducted to ensure there are no other suitable operators who should be considered 	 or commencing operation or receiving funding Ensure accurate Certificate of Insurance ("COI") has been received by the City prior to the operator accessing the facility or commencing operation 30 days prior to expiry of current COI, Recreation staff will be responsible for obtaining a new COI
		Continuous improvement	 Agreement inclusions and requirements for operators are continually being revisited, with opportunities to reduce the city's risk identified frequently and implemented When organizations have responsibility for community development and engagement, they will collaborate with the community to develop local goals and actions to meet 	 Ensure new Agreements contain most current Agreement language



INFORMATION REPORT

то:	Chair and Members Emergency and Community Services Committee
COMMITTEE DATE:	November 21, 2024
SUBJECT/REPORT NO:	Long Term Care in Hamilton (HSC24018) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Holly Odoardi (905) 546-2424 Ext. 1906
SUBMITTED BY:	Angela Burden General Manager Healthy and Safe Communities Department
SIGNATURE:	a. Burden

COUNCIL DIRECTION

Emergency Services Committee at its meeting of December 7, 2023, approved the following: "That staff from the Healthy and Safe Communities Division and Public Health Services be directed to report back in Q1 2024 to Emergency and Community Services Committee with a holistic overview of the long-term care and congregate settings in Hamilton including the number of beds lost with the closure of long-term care homes and any opportunities that might be available with the current closures of private Long-Term Care Facilities in the City."

INFORMATION

This information report aims to provide an overview of the current status of Long-Term Care beds in Hamilton, including the impact of alternate level of care patients and those waiting at home in the community. Alternate levels of care patients are patients in hospital that no longer require hospital-level/acute-care but remain in the hospital due to a lack of available Long-Term Care beds, complex care beds or other community destinations including the patient's home. Understanding these dynamics is crucial for understanding the growing demand for long-term care and home care services and improving the overall healthcare system in our community.

As of June 28, 2024, the Home and Community Care Support Services are now rebranded as Ontario Health atHome. All applications and admissions for long-term care homes as well as community care are all arranged through Ontario Health atHome.

SUBJECT: Long Term Care in Hamilton (HSC24018) (City Wide) - Page 2 of 4

Demand for LTC beds in Hamilton is difficult to quantify as data is collected at different times by different parts of the health system and different waiting lists reflect a difference in priority for long term care placement. Long Term Care placement is a provincial process, and just as Hamilton residents can request LTC placement in a Hamilton long term care home, or at a home in another area of the province, individuals living across the province can request a LTC bed in a Hamilton long term care home. There are thousands of individuals on regular LTC waiting lists in our region and hundreds waiting who are on priority crisis lists. There are also individuals in hospital who no longer need medical treatment but are occupying a hospital bed as they wait for a LTC placement. This is known as Alternate Level of Care.

In January 2024, there were 6063 patients on the Long-Term Care waitlist across Hamilton, Halton, Niagara, Brant and Haldimand with Hamilton's waitlist at 1938 patients. Home and Community Care Support Services shared that there were 368 patients on the crisis list for placement for Long-Term Care in Hamilton. These active crisis patients were noted to be in the following locations: 197 community patients, 138 hospital patients, and 33 patients noted as other locations. A crisis application is defined as: The applicant's needs can be net in a long-term care home and requires <u>immediate</u> admission to a long-term care home as a result of a crisis arising from the applicant's condition or circumstances that puts then at <u>significant safety risk</u> if left in their current environment. Crisis admission is considered to be the last possible option after all community-based services have been exhausted. For Crisis Applicants, they may be eligible for a "Reunification Priority Access Bed" if they have a partner or spouse who is resident currently in a long-term care home and the applicant wishes to be reunited with partner or spouse at that specific long-term care home.

As of November 4,2024 there are 66 alternate levels of care patients at St. Joseph's Hospital and 95 patients at Hamilton Health Sciences Hospital, for a total of 161 patients in the hospitals occupying an acute care bed that they do not require but remain there waiting for placement to a Long-Term Care home.

As of October 14, 2024, there are now 25 Long-Term Care Homes that serve residents in Hamilton. In the past 12 months Hamilton lost two Long-Term Care Homes. In Hamilton, the two Long-Term Care Homes that have closed over the past year were Pine Villa in Stoney Creek and Blackadar in Dundas for a total of 90 lost beds. In addition to those 90 lost beds, during the COVID-19 pandemic all three and four bed wards were eliminated which resulted in the loss of approximately 231 beds in Hamilton. With the loss of the 231 beds during the pandemic and closure of 90 long-term care beds this past year, Hamilton now has approximately 3773 Long-Term Care beds available to serve our community through its 25 homes. At any given time, Hamilton can have a range of 1500 to 2000 patients on the Ontario Health atHome waitlist for Long-Term Care Homes. Importantly to note that Long-Term Care Homes current occupancy rates across Ontario Health West stand at 98% or greater, indicating the high demand for available beds. Wait times for new admissions can exceed two to five years for patients on the waitlist list, reflecting the pressures on our local and provincial Long-

SUBJECT: Long Term Care in Hamilton (HSC24018) (City Wide) - Page 3 of 4

Term Care system. The crisis-list wait can range anywhere from weeks to 6 or more months.

Recent initiatives have resulted in planned addition of long-term care beds throughout the province. Through media releases, we understand that Hamilton will be benefitting from new Long-Term Care construction by Shalom Manor Long Term Care. Shalom Manor Hamilton is expected to welcome residents in summer of 2026 that will be providing 188 new beds. Macassa Lodge is redeveloping 44 beds and developing 20 net new beds which is anticipated to be ready for summer 2026. As well, in lower Stoney Creek, media release announcements have indicated Rykka Care Centres GP Inc. is proposing to construct a four-storey, 224-bed Long-Term Care facility ready in 2027 where Pine Villa Long-Term Care was previously. Schlegel Villages has recently announced the building of two Long-Term Care homes with a combined total of 512 beds due to its aging building. Therefore the net-new beds planned for Schlegel Villages after decanting Hamilton Continuing Care Long-Term Care into the new Long-Term Care development will be 438 beds anticipated availability by 2032-2033.

Noting the above information, there would be approximately 208 new beds by summer of 2026; another 224 planned for 2028 and a further 438 beds by 2033 for a total of 870 beds over the next eight to nine years. There could be other Long-Term Care developments or redevelopments that have not been made public that could further support those in need of Long-Term Care beds including those alternate level of care patients in hospitals as they wait for Long-Term Care placement.

The Ministry of Finance released the 2024 Ontario Economic Outlook and Fiscal Review. There were no new investments noted to be made in healthcare and the Long-Term Care sectors. There was an update on the progress of new builds or redevelopment for long term care homes / beds. The update was as follows: As of fall 2024, 113 long-term care homes are either completed, under construction, or have the approval to start construction across the province. This includes: 32 homes that are completed, representing 2,385 new beds and 2,610 beds upgraded to modern design standards; and 81 homes that are either under construction or approved to start construction, representing 7,026 new beds and 6,418 beds being upgraded to modern design standards.

AdvantAge Ontario and Ontario Long-Term Care Association are two key organizations that advocate for improved funding, capital development and redevelopment of long term care facilities provincially. Both organizations aim to address the growing demand for long-term care services and ensure that infrastructure meets the needs of an aging population. Both organizations have been advocating within the 2024-25 budget in securing funding for long-term care operations, capital development and redevelopment, and workforce support that are all essential for meeting the needs of Ontario's aging population. Both organizations continue to push for systemic changes

SUBJECT: Long Term Care in Hamilton (HSC24018) (City Wide) - Page 4 of 4

that will enhance the quality of care and the living conditions of seniors in Ontario's long term care homes.

For additional information on these key organizations advocacy work please see the below links:

Link for AdvantAge website <u>https://www.advantageontario.ca/</u> Link for OLTCA website <u>https://www.oltca.com/</u>

The status of Long-Term Care beds in Hamilton is critical to the well-being of our aging population and those 18 years and over that require long-term care. With a significant number of alternate levels of care patients and individuals waiting for placement from both the hospital and the community, it is essential for the province to prioritize actions that enhance our Long-Term Care capacity and address the systemic challenges faced by our healthcare system. The goal of collaborating and addressing these issues together, we can work towards a more efficient, effective and compassionate care model for all residents.

APPENDICES AND SCHEDULES ATTACHED

Not applicable



Seniors Advisory Committee October 4, 2024 Minutes 24-010 10:00am – 12:00pm

YouTube Channel Streaming for Virtual Meetings All electronic meetings can be viewed at City's YouTube Channel: https://www.youtube.com/user/InsideCityofHamilton

In Attendance:

Peter Lesser, Sheryl Boblin, Penelope Petrie, Marian Toth, Alexander Huang, Carolann Fernandes, Barry Spinner, Ann Elliott, David Broom, Aref Alshaikhahmed

Also in Attendance:

Lisa Maychak, Project Manager, Healthy & Safe Communities Department Carol Faulkner, Program Secretary, Healthy & Safe Communities Department Councillor Esther Pauls, City of Hamilton, Ward 7 Monique Taylor, Member of Provincial Parliament, New Democratic Party, Hamilton Mountain Sandy Shaw, Member of Provincial Parliament, New Democratic Party, Hamilton West-Ancaster-Dundas

Absent with Regrets:

Kamal Jain, Maureen McKeating, Marjorie Wahlman, Noor Nizam, Councillor Tom Jackson

1. CEREMONIAL ACTIVITIES (ITEM 1)

(i) Land Acknowledgement

P. Lesser read the Land Acknowledgement. A. Alshaikhahmed to read the Land Acknowledgement at the next meeting.

2. APPROVAL OF AGENDA (ITEM 2)

(i) October 4, 2024 (Item 2.1)

(S. Boblin/ A. Huang)

That the Seniors Advisory Committee approves the October 4, 2024 agenda, as presented.

CARRIED

3. APPROVAL OF MINUTES OF PREVIOUS MEETING (ITEM 4)

(i) September 6, 2024 (Item 4.1)

(D. Broom/ P. Lesser)

That the Seniors Advisory Committee approves the September 6, 2024 minutes, as presented.

CARRIED

4. DISCUSSION ITEMS (ITEM 10)

(D. Broom/ S. Boblin)

That the following discussion item be received:

(i) Council Follow-up for Coroner's Inquest (10.1)

D. Broom provided guests Monique Taylor, MPP and Sandy Shaw, MPP with a background regarding the motion carried at the Seniors Advisory Committee meeting on February 2, 2024, requesting City Council to advocate to the province for a coroner's inquest into the large number of deaths that occurred in long-term care homes in Hamilton during the Covid-19 pandemic. L. Maychak indicated that a Council Follow-up Notice dated June 26, 2024 stated, "that staff be directed to invite local Members of Provincial Parliament to a meeting of the Seniors Advisory Committee to discuss their request for a Coroner's Inquest."

After much discussion, Monique Taylor and Sandy Shaw suggested that they send letters to the provincial government requesting a Public Inquiry on behalf of the Seniors Advisory Committee.

CARRIED

(D. Broom/ A. Alshaikhahmed)

That the following updates be received:

(ii) Working Groups

(a) Housing Working Group (Item 10.2(a))

M. Toth encouraged everyone to view the University of Waterloo video about the Future Cities Initiative that will be discussed at the next Seniors Advisory Committee meeting. M. Toth indicated that she attended the Communications Working Group meeting on October 3, 2024 to ask for suggestions on how best to disseminate the new Housing Guide for Older Adults in Hamilton.

(b) Communications Working Group (Item 10.2(b))

A. Huang indicated that A. Alshaikhahmed developed a communications toolkit for community organizations and groups that serve and support seniors, and that the Communications Working Group is currently reviewing it.

(c) Getting Around Working Group (Item 10.2(c))

There are no updates from this working group.

(d) Elder Abuse Working Group (Item 10.2(d))

All agreed that D. Broom would be the second member representative along with A. Alshaikhahmed for the Seniors at Risk Community Collaborative (SaRCC). Al Alshaikhahmed indicated that there will no longer be an Elder Abuse Working Group under the Seniors Advisory Committee as the new Hamilton Elder Abuse Prevention Network will be established and is linked to the Seniors at Risk Community Collaborative (SaRCC).

CARRIED

(iii) Working Committees (Item 10.3)

(a) International Day of Older Persons (Item 10.3(a))

L. Maychak indicated that this event was hosted on October 1, 2024 at Sackville Seniors Centre, and included a small information fair and presentations on Climate Change and the health impacts. Approximately 100 older adults attended the event.

(b) Seniors Kick-off Event (Item 10.3(b))

There are no updates about this event.

(c) Senior of the Year Awards (Item 10.3(c))

L. Maychak stated that this year nineteen nominations were submitted, and that tickets for the October 15, 2024 event are now on sale until October 8, 2024 at all City of Hamilton seniors and recreation centres as well as online at <u>www.hamilton.ca/seniorsawards</u>. L. Maychak also indicated that both A. Huang and S. Boblin have been nominated for this year's Senior of the Year Awards.

(d) Ontario Health Coalition (Item 10.2(d))

C. Fernandes and A. Huang to continue to send correspondence through L. Maychak.

(e) Age-Friendly (Item 10.2(e))

A. Elliot indicated that the Age-Friendly Hamilton Community Progress Report along with a City Council Information Report went to Emergency and Community Services Committee on September 19, 2024. A. Elliot also indicated that an Age-Friendly presentation was facilitated at the September 19, 2024 meeting by L. Maychak, P. Petrie, and Angie Armstrong, Chair of the Age-Friendly Collaborative Committee.

(f) Extreme Heat Committee (Item 10.2(f))

P. Lesser stated that the Extreme Heat Committee submitted a report to City Council's Planning Committee, but there is no outcome yet.

CARRIED

5. MOTIONS (ITEM 11)

(i) Written Submission to The Hamilton Spectator's Op-Ed Section

(A. Huang/ D. Broom)

That a submission by the Chair of the Seniors Advisory Committee to The Hamilton Spectator's Op-Ed section respecting the Communications Survey for Older Adults, be approved.

CARRIED

9. ADJOURNMENT (ITEM 15)

(P. Lesser/ A. Alshaikhahmed)

That the Seniors Advisory Committee be adjourned at 11:56 am.

CARRIED



Hamilton MINUTES Hamilton Veterans Committee Meeting #2024 - 003

June 25, 2024 4:00 p.m. WebEx – Virtual Platform

Present:	Chair: Michael Rehill Vice Chair: Ed Sculthorpe Members: Terry Ryan, Dave Baldry, Steve Waldron, Rod Paddon, Robert Fife, Don Jackson
Also Present:	Christopher Redford (Staff Liaison), Carolyn King (Hamilton Military Museum), Moira McGuigan (Hamilton Military Museum)

1. CEREMONIAL ACTIVITIES

(i) Moment of Silence

Committee members observed a moment of silence.

(ii) Land Acknowledgement

Michael Rehill read the Land Acknowledgement.

2. APPROVAL OF THE AGENDA

(Baldry/Sculthorpe)

That the agenda for the June 25, 2024 meeting of the Hamilton Veterans Committee be approved.

CARRIED

June 25, 2024

3. APPROVAL OF MINUTES OF PREVIOUS MEETING (Item 4)

(i) May 28, 2024

(Ryan/Paddon)

That the Minutes of the May 28, 2024 meeting of The Hamilton Veterans Committee be approved, as presented.

CARRIED

4. COMMUNICATIONS (Item 5)

(i) Argyll Pavilion Signage (Item 5.1)

Two signs have been installed next to the pathway, there will be a small ceremony on June 26 at 1:00 pm to celebrate the installation.

(ii) Event Use Of Pedestrianized Space Adjacent To The Cenotaph (Item 5.2)

The BIA wishes to use the space adjacent to the Cenotaph. The Chair and Co-Chair confirmed permission previous to this meeting. The BIA used the space and abided by the map and regulations that the committee established to avoid damage to the Cenotaph.

5. DISCUSSION ITEMS (Item 10)

(Ryan/Paddon) That the following updates be received:

(i) Research A Grave (Item 10.1)

City Liaison requested Committee Members to assist contacting cadets to encourage support and to allow the project to move forward this year. Committee Members involvement will be beneficial as will pursuing support around Remembrance Day. This item will be added to the agenda of the September 2024 committee meeting.

(ii) Decoration Day 2024 Wrap-Up (Item 10.2)

The Ceremony had amazing attendance, while the service was kept short and concise. The Hamilton Military Museum offered their immense thanks for the cadet attendance at the Hamilton Museum's Dundurn Park event following the ceremony. RCMP showed interest in attending the Ceremony in 2025, T. Ryan to send contact information to the City Liaison. For 2025: Cadet Officers should assist more and can lead the

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cadets in decorating instead of Committee Members, increase in advertising to the public, Legions are welcome to attend, Pat Gallagher will be contacted to discuss a tour for the parents of the cadets. Discussion about Woodland Cemetery hosting the Ceremony in 2025, this discussion has been postponed to January 2025.

(iii) Marking the 80th Anniversary of D-Day (Item 10.3)

Committee recognized E. Sculthorpe for his wonderful job being interviewed and filmed for the anniversary. On November 5 at 9:30 am, there will be another interview conducted of promotional footage for Remembrance Day.

(iv) Merchant Marine Marker (Item 10.4)

City Liaison contacted the Superintendent of Parks North to start discussing the potential use of Pier 8 as the new location for the marker. The Chair sent a letter but has not heard a response.

(v) Hamilton Wreath Project 2024 (Item 10.5)

City Liaison to visit schools in September to gain more interest and participation than last year.

(vi) Dieppe Memorial Service (Item 10.6)

Planning has begun, Padre and Band have been confirmed. Planning Committee to book a meeting in early July to complete everything. There will be no July Committee Meeting, this planning meeting will take its place.

6. ADJOURNMENT (Item 15)

(Paddon/Sculthorpe)

That, there being no further business, the meeting be adjourned at 4:21 p.m. **CARRIED**

Respectfully,

Michael Rehill, Chair Hamilton Veterans Committee