MEDIA RELEASE: Friday, April 8, 2011, 4:30 p.m.

REGIONAL MUNICIPALITY OF WATERLOO
COMMUNITY SERVICES COMMITTEE
AGENDA

Tuesday, April 12, 2011
1:00 p.m.
Regional Council Chambers
150 Frederick Street, Kitchener, Ontario

1. DECLARATIONS OF PECUNIARY INTEREST UNDER THE MUNICIPAL CONFLICT OF INTEREST ACT

2. DELEGATIONS

3. PRESENTATIONS

   a) Dr. Fred Mather Re: SS-11-015, Sunnyside Home Annual Medical Director’s Report 2010

   b) Lynda Kohler, Brenda Leis and Denise Squire, Woolwich Community Health Centre Re: Community Needs and Capacity Assessment Project

4. REPORTS – Public Health

   a) PH-11-015, Food Safety Training Certification Program – Conestoga College Collaboration

   b) PH-11-016, Healthy Babies Healthy Children Program Changes Update

   c) PH-11-017, Quarterly Charged/Closed Food Premises Report

5. REPORTS – Social Services

   a) SS-11-016, One Time Funding for Equipment for Sunnyside Home Resident and Staff Safety

   b) SS-11-018, Youth Housing Stability Pilot Programs

   c) SS-11-019, Provincial Homelessness Business Case

6. REPORTS – Planning, Housing & Community Services

   a) P-11-037, Volunteer Programs at Region of Waterloo Museums – 2010

   b) P-11-040, Thirteenth Annual Report of the Kissing Bridge Trailway Advisory Board
7. INTERDEPARTMENTAL REPORTS

a) P-11-018/F-11-008, Updated Building Condition Audit and Capital Reserve Analysis for Community Housing Providers

8. INFORMATION/CORRESPONDENCE

a) Ministry of Education Re: Implementation of the New Full Day Early Learning Kindergarten Initiative

b) Children’s Services Invitation for the Waterloo Region Early Years System Plan Information Forum on May 13, 2011

c) Ontario Association of Non-Profit Homes and Services for Seniors Newsletter: Making Seniors a National Priority (Distributed separately)

d) Memo: Free Tax Clinics at Employment Resource Areas

e) Memo: Stress-Disease Connection Conference

f) Memo: Ontario Works Caseload – March 2011 (To be distributed at meeting)

g) Memo: 2011 Secondary School Suspension Update

9. OTHER BUSINESS

a) Council Enquiries and Requests for Information Tracking List

10. NEXT MEETING – Tuesday, May 3, 2011

11. ADJOURN
TO: Chair Sean Strickland and Members of the Community Services Committee

DATE: April 12, 2011  FILE CODE: S06-80

SUBJECT: SUNNYSIDE HOME ANNUAL MEDICAL DIRECTOR’S REPORT 2010

RECOMMENDATION:

For information.

SUMMARY:

The Long Term Care Home Act 2007 (LTCHA), which came into effect on July 1, 2010, requires the Medical Director to report on improvements of the previous twelve months and goals and objectives for the next twelve months. This continues the tradition of the Sunnyside Home Annual Medical Director’s Report to the Community Services Committee.

This report summarizes the improvements made through inter-disciplinary care, education and research activities at Sunnyside Home over the past year, as well as goals and objectives for 2011. Dr. Fred Mather’s leadership as Medical Director and as Chair of the Professional Advisory Committee continues to set a high standard of care and quality of life for Sunnyside Home residents. In the past year, the role of the physicians and other disciplines has expanded to also include tenants of the Supported Living expansion and clients of the Wellness Centre.

REPORT:

Dr. Mather’s report is attached as Appendix A.

CORPORATE STRATEGIC PLAN:

The service provided by the Medical Director and the other physicians at Sunnyside Home supports the Region’s Corporate Strategic Plan, Focus Area 3: Healthy and Safe Communities: (to) Support safe and caring communities that enhance all aspects of health.

FINANCIAL IMPLICATIONS:

Nil

OTHER DEPARTMENT CONSULTATIONS/CONCURRENCE:

Nil
ATTACHMENTS

Appendix A  Sunnyside Home Annual Medical Director’s Report 2010

PREPARED BY:  Helen Eby, Administrator, Resident Care

APPROVED BY:  Michael Schuster, Commissioner, Social Services
Appendix A

Sunnyside Home Medical Director’s Report

2010

This report summarizes the improvements for the past year and the goals and objectives for the coming year as required in the Long Term Care Homes Act (LTCHA). Areas of improvement in 2010 included leadership enhancement in the community in providing education and training for health professionals, improving pain management for residents, use of the Resident Assessment Instrument (RAI) to evaluate care, counselling of residents and families in end-of-life decisions, and providing optimal pain and symptom management for residents requiring palliative care.

Goals and objectives for 2011 include participating in the development of the electronic health record to collect meaningful information for quality improvement, pursuing movement from a least restraint to a no restraint philosophy, advancing research to improve care for seniors in long-term care, provision of continuing professional development, not only at the Professional Advisory Committee, but also by electronic and web resources and enrolling physicians with the Long-Term Care Physicians of Ontario.

Sunnyside Home continues to support education for medical and pharmacy students. Family Medicine residents join the health care team for one month of their integrative family medicine residency. A second year resident is a licensed physician who works both independently and collaboratively with the inter-disciplinary team. Sunnyside Home also provides regular “Care of the Elderly” tutorials for Clinical Clerks, who are medical students in their final year.

Each term, a fourth year co-op student from the School of Pharmacy of the University of Waterloo spends a four-month rotation under the supervision of the consultant pharmacist, Sally Ebsary. These final year students have done a number of research projects including:

- Anticoagulation monitoring for residents on warfarin
- Cytochrome P450-mediated drug interactions
- Effects of cholinesterase inhibitors on heart rate
- Safety of atypical antipsychotics in the elderly
- Calcium supplementation from nutritional supplements.

As pain and depression are symptom complexes that affect many in long-term care over a variety of diagnoses, a new protocol was introduced with a goal of reducing pain experienced by residents. Using a scale from zero to ten, residents are screened for pain twice a day. The tool is customized for individuals who cannot verbalize their pain. Better pain management follows this measure of pain patterns and intensity. A joint pharmacy student and nursing student project implemented and reviewed the acceptability of this surveillance by the residents. The response by the residents was favourable. This regular screening for pain has resulted in significant reductions of residents experiencing pain as measured through the Resident Assessment Instrument of the Minimum Data Set, Version 2.0 (RAI-MDS 2.0).

A Study released by the Canadian Institute of Health Information (CIHI) in May 2010 found that 44% of seniors in Canada living in residential care facilities (long-term care, nursing or personal care homes) had symptoms of depression according to the Depression Rating Scale (DRS) of the RAI-MDS 2.0. At Sunnyside Home, a review of the RAI-MDS data showed that forty-five per cent of residents are found to have symptoms of depression. Eight per cent of residents are found to have symptoms without treatment. Ontario data reports 31.1% with symptoms and 13.3% with symptoms and no treatment. Data on depression in long-term care requires critical interdisciplinary analysis. Depression is multi-factorial and not necessarily curable. Pharmacological treatment needs to be balanced against its adverse effects. There is an awareness of the high incidence of depression in
the elderly and this is reflected by a marked increase in antidepressant prescriptions. Individuals in long-term care encounter significant grief due to loss of friends, independence, function and intellect, as well as approaching the end-of-life.

As discussed in previous reports, the length-of-stay in long term care has become shorter. Individuals with chronic diseases or the frailty of old age, live in the community longer. Preparation for end-of-life care is integral to the holism of long-term care. The Waterloo Region-Wide Advance Directive, developed by many stakeholders, is the standard for advanced care planning with residents and families. The Sunnyside Palliative Care Team developed a counselling resource to assist residents and families with advance health care planning. In the event of severe life-threatening illness, seventy-five per cent of the residents are choosing to continue to receive their care at Sunnyside Home, rather than being transferred to acute care.

Ahead of most long-term care homes, Sunnyside Home has used an electronic medical record for nearly two decades. The utility of this electronic health record should be improved in order to be (i) web-based, (ii) interfaced with the pharmacy, (iii) integrate and interpret RAI-MDS data and (iv) promote quality improvement. Physicians at Sunnyside Home are interested in participating in this quality improvement.

The use of physical restraints is controversial. Long-term care homes practise policies of least restraint. Substantial evidence links physical restraints to harm. Although a restraint-free environment is possible, it requires education and institutional buy-in. Sunnyside Home will strive to become a no restraint facility.

In addition to the projects of pharmacy and nursing students and the potential information management of the electronic health record project, Sunnyside will continue to participate in research. At present, we are participating in the Heart Failure Management Project, sponsored by the Ontario Heart and Stroke Foundation.

Last year began in the shadow of the H1N1 outbreak, which fortunately did not affect long-term care as much as feared. Through the vigilant surveillance and infection prevention practices supported by the Home, there have not been any infection control outbreaks at the Home in 2010. The implementation of the “Just Clean Your Hands” program requiring hand washing participation by everyone in the home has significantly improved hand washing compliance and spread of disease. Consistent with all health care facilities, there is a continuing increase of antibiotic resistance evident in the residents admitted to Sunnyside Home which can be best managed through infection prevention and control practices.

The physicians continue to provide medical care in the following areas:

<table>
<thead>
<tr>
<th>Physician</th>
<th>Care Area</th>
<th>Type of Care</th>
<th>Team Leader</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Fred Mather</td>
<td>Buttonworks</td>
<td>Special Care (dementia)</td>
<td>Coral Bradshaw</td>
</tr>
<tr>
<td></td>
<td>Laurel Creek</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Greenfield (10 beds)</td>
<td>Short Stay Convalescent Care</td>
<td>Marion Tschirhart</td>
</tr>
<tr>
<td>Dr. Jonathan Peet</td>
<td>Cider Mill Woodside</td>
<td>Complex Physical and Palliative Care</td>
<td>Ruth Bremner</td>
</tr>
<tr>
<td></td>
<td>Castle Kilbride Shantz Hill</td>
<td>Psychogeriatric Care</td>
<td>Judy MacKay</td>
</tr>
<tr>
<td>Dr. Kent McKinnon</td>
<td>Greenfield Riverside</td>
<td>Complex Physical and Palliative Care</td>
<td>Marion Tschirhart</td>
</tr>
<tr>
<td>Dr. Pat Landy</td>
<td>Pioneer Tower Three Bridges</td>
<td>Complex Physical and Palliative Care</td>
<td>Sophie Matern</td>
</tr>
</tbody>
</table>
Medical care in long-term care requires regular rounds and meetings with the residents and their families. Excellence in medical care is promoted by provincial and national organizations such as the Ontario Long Term Care Physicians and the Long Term Medical Directors Association of Canada. Most importantly, the physicians at Sunnyside Home work with an excellent inter-disciplinary team to meet the needs and challenges of the residents.
TO: Chair Sean Strickland and Members of the Community Services Committee
DATE: April 12, 2011
FILE CODE: A02-40
SUBJECT: FOOD SAFETY TRAINING CERTIFICATION PROGRAM – CONESTOGA COLLEGE COLLABORATION

RECOMMENDATION:

THAT the Regional Municipality of Waterloo enter into an agreement with Conestoga College Institute of Technology and Training (“Conestoga College”) for the delivery of Food Safety Training Certification programs effective May 1st, 2011 with such agreement to be to the satisfaction of the Regional Solicitor, as outlined in report PH-11-015, dated April 12, 2011.

SUMMARY:

This report provides an overview of the Food Safety Training Certification program offered by the Region of Waterloo Public Health and outlines the rationale for a proposal to enter into a collaborative agreement with Conestoga College to designate it as a delivery agent of the Region of Waterloo Food Safety Training Certification program. The goal of the partnership is to increase access to food safety training certification courses in the Region in a cost effective and efficient manner. The collaboration would also assist Public Health in re-allocating resources to increase its compliance with other mandated programs under the Ontario Public Health Standards such as inspection completion rates. An update will be provided on the progress of this collaboration after a year of implementation.

REPORT:

Overview

Region of Waterloo Public Health currently provides food safety training that leads to certification for food handlers in the Region of Waterloo. As outlined in the Ontario Public Health Standards 2008, Food Safety Protocol, public health units are required to ensure food handlers in all food premises have access to training in safe food-handling practices and principles. Health units are also required to promote that a minimum of one food handler be certified in food safety at all times of operation in all high and moderate risk food premises.

In Waterloo Region, the food safety training program currently delivered by Regional Public Health Inspectors provides food handlers with the knowledge to identify conditions that could result in foodborne illness, and teaches them appropriate corrective actions. The purpose of the course is to assist in prevention and reduction of food-borne illness and enhance compliance with the Ontario food premises regulation in the food service industry. To ensure students have an enhanced understanding of course materials, a minimum grade of 70% on the final examination is required to achieve the Food Handler Certificate. The certificate is recognized for 5 years. A total of 1,315 people successfully earned the certificate in 2010, which is the most significant number since the Region commenced delivery of the program.
The demand for food safety training certification in the Region of Waterloo has increased consistently over the last decade putting increased pressure on Public Health Department resources. The number of clients who were certified in 2010 was eight times greater than in 1999. Figure 1 illustrates the demand for training since 1999.

Courses are presently offered in four formats:

1. In-class courses taught by Public Health Inspectors at Public Health offices (either one full day or two half-days),
2. Offsite courses taught by Public Health Inspectors at a worksite/food premise,
3. Self directed home study course,
4. On-line course.

Participants taking the home study or on-line options are required to take the exam at Public Health offices. A challenge exam is also offered on a one time basis per participant to clients who have knowledge of food safety and would like to be certified without taking the course.

The Regional on-site in-class training is currently offered 15 times throughout the year. In addition, offsite courses are accommodated as requested by clients in the food service industry. In 2010 Public Health Inspectors accommodated 15 courses at offsite locations throughout the Region. Courses are normally 6 – 7 hours in length. The Home Study option consists of an exam that is available to clients every two weeks throughout the year and proctored by Public Health Inspectors who are available to answer any questions. In addition, Public Health Inspectors offer assistance and a verbal oral exam component to clients with English as a second language or those with identified learning disabilities. The course has also been offered in French upon request and the Home Study Manual is available in English and Cantonese. The program material is also supplied to area high schools.

Figure #1

Number of Certified Food Handlers

![Graph showing the number of certified food handlers from 1999 to 2010](image_url)
Food Safety Certification Training Program Demands

The demand for food safety training certification in the Region of Waterloo is increasing and outstripping the capacity for Public Health to respond and accommodate effectively within current resources. As noted, the number of food handlers becoming certified annually has increased steadily.

As demand for food safety training rises, the costs, resources, and time associated with providing this program also rise. In terms of resources required to provide the program on an annual basis, it has been calculated that approximately 0.5 Full Time Equivalent Public Health Inspector position and 1.35 Full Time Equivalent support staff position are required to meet the current demands in 2011. It is expected that demands on our current resources will continue to rise and put increasing pressure on the Food Safety program and other mandated, competing demands within the Health Protection & Investigation Division in the future.

Due to the increased demand for the course, the current waiting time for clients planning to register and attend prescheduled classes is two – three months. Turn around time for awarding certificates is up to 6 weeks from the time the exam is written. In addition, the course is restricted to food handlers currently employed in the food service industry which is in accordance with Public Health’s mandate to make the course available to food handlers in all food premises in the Region.

Region of Waterloo Public Health and The Ministry of Health and Long Term Care also recognize courses offered by other agencies that meet the requirements for food safety training and certification as specified in the Ontario Public Health Standards. Agencies that currently provide recognized training include:

- Sault College
- FoodSafe
- FoodWise
- Ontario Independent Meat Processors
- TrainCan (Basic and Advanced)
- ServeSafe (American version of TrainCan)
- Canadian Restaurant Foodservices Association (CRFA)
- Any Health Unit in Ontario

The cost of privately run courses can range from $300 - $900 per group and can be a financial deterrent to training. The Region of Waterloo fee structure for the Food Safety Training Certification program is based on cost recovery of materials and does not include the cost of Public Health Inspector or Support Staff time associated with the course.

The current fee structure is as follows:

1) Regional Onsite courses, Offsite courses and Home study option: $40 (includes manual, Certificate, wallet card certificate, probe thermometer)
2) Challenge Exam: $10 (includes certificate, wallet card)
3) Online course: $30
4) Vulnerable groups receive 50% discount on courses and home study option: $20 (this subsidy has traditionally been provided to non-profit, charitable or philanthropic organizations organized for relief of persons in need that serve or prepare food as part of their mandate, for example, a food bank, church or emergency shelter)
Program Challenges

Region of Waterloo Public Health considered increasing the number of courses offered to clients in 2011. While increasing the number of courses would be a temporary solution to the current demand for food safety certification training, this option would continue to put pressure on existing mandated programs within our current complement of Public Health Inspectors and Program Support staff. The Health Protection and Investigation Division has 27 Public Health Inspectors that provide service in a multi-program delivery model which consists of the Food Safety, Safe Drinking Water, Infection Control, Health Hazard, Rabies, Vector-borne Disease, Outbreak Management, Communicable Disease Control and Recreational Water programs as mandated by the Ontario Public Health Standards 2008. Increasing the number of courses offered internally by Public Health would require the diversion of staff resources from other mandated activities and programs.

Proposed Conestoga College Collaboration & Rationale

In order to offset demands for food safety certification training and enable the Public Health's Health Protection and Investigation Division to meet our multi-program mandates, Public Health is proposing to enter into an agreement with Conestoga College to deliver the Region of Waterloo Food Safety Training Certification program.

This partnership would enable Public Health to ensure the increasing community demand can be accommodated in a timely manner.

Conestoga College is able to provide regular pre-scheduled courses on campus and offsite based on public demand. The college can also provide regular pre-scheduled Home Study sessions and Challenge exam options as outlined by Region of Waterloo. In addition, the College would also be equipped to manage the administrative, delivery and rewarding of co-branded certificates, which would include communication of classes through its Continuing Education catalogue and on-line through its website. The program would be offered to the public and food handlers through the Continuing Education Program and would be a part of the course curriculum in the Hospitality and Business programs for students enrolled at the College.

Onsite delivery of the course could take place at a variety of Conestoga College campuses throughout the Region with a commitment to add extra classes based on public demand thereby increasing access to the course. In addition, courses would be open and accessible to all individuals including non-food handlers (such as persons seeking employment in the food service industry), thereby further reducing barriers to food safety certification training. The cost of the program would be determined by the College and approved by the Region as outlined in the following proposal:

Estimated Cost Year #1: $59 for a 7 – hour course (plus HST)
Estimated Cost Year #2: $65 for a 7 – hour course (plus HST)
Estimated Cost Home Study: $40 (plus HST)
Estimated Cost Challenge Exam: $20 (plus HST)
Estimated Cost Online Course: $60 (plus HST)

* Note: Consistent with Public Health’s past practise, a 50% cost reduction subsidy would be provided to Food Handlers affiliated with non-profit, charitable or philanthropic organizations organized for relief of persons in need that prepare or serve food as part of the organization’s mandate.
These costs are considered accessible as well as accommodating to these above mentioned groups through a 50% cost reduction subsidy. Conestoga would continue to honour the subsidized delivery of food safety certification training to these groups, as described above, subject to an agreed upon annual limit which will be reviewed annually. Public Health would cover the subsidy for the number of participants from these groups that were in excess of the agreed to limit.

Region of Waterloo Public Health would provide oversight of course curriculum, and delivery of the program through an Advisory Committee that would consist of Region of Waterloo Public Health Inspectors and College instructors. At a minimum, the program would comply with the Ministry of Health and Long Term Care Food Safety Protocol in the Ontario Public Health Standards.

Conestoga College would be responsible for costs of reproducing program materials, administration of the program, marking exams, proctoring exams, issuance of certificates, maintaining a database of participants, providing courses at a variety of times and locations including weekday, weekend and night time courses based on public demand and need.

Conclusion

The proposed collaboration with Conestoga College would commence May 1st, 2011 following the signing of an agreement including the matters outlined in this report. All certificates awarded would be co-branded and promotion of the program would be the responsibility of both Conestoga College and Region of Waterloo Public Health. An implementation and transition plan would be included in the agreement to ensure a smooth transition of services. An update will be provided on the progress of this collaboration after a year of implementation. The proposal outlined in this report is part of an ongoing effort to identify efficiencies within the Food Safety program and break down barriers to services in order to meet multi-program mandates with current resources.

CORPORATE STRATEGIC PLAN:

Supports Focus Area 3 – Healthy and Safe Communities: Support safe and caring communities that enhance all aspects of health

Supports Focus Area 6 – Service Excellence: Foster a culture of citizen/customer service that is responsive to community needs

FINANCIAL IMPLICATIONS:

Staff resources currently utilized in the delivery of Public Health Department food safety training courses are funded within the base budget. Approximately 0.5 Public Health Inspector FTE and 1.35 Program Support FTE will be re-allocated to support program demands and increase Public Health’s compliance with its other mandated programs under the Ontario Public Health Standards such as inspection completion rates and related customer service and administrative functions. The base budget also includes revenues of $36,000 and expenses of $30,000 (related to material costs) for food safety training certification. Both of these items would be removed from the base budget in 2012 with a resulting gross increase of $6,000 annually ($1,500 net levy) to the bottom line of the Public Health Department budget as a result of loss of revenue in excess of expenses.
In the event that the number of Food Handlers affiliated with non-profit, charitable or philanthropic organizations that prepare or serve food as part of the organization’s mandate surpasses the agreed upon limit in any given year, Public Health’s commitment to offset the cost of the 50% subsidy for additional spots will be absorbed within the department’s base budget. For demonstration purposes, if there were twice as many participants from this group as the agreed to limit, the estimated cost to be absorbed within Public Health would be approximately $2,300.

OTHER DEPARTMENT CONSULTATIONS/CONCURRENCE:

Representatives from the Legal Services division and the Human Resources department have been consulted in connection with this report.

ATTACHMENTS:

NIL

PREPARED BY: Chris Komorowski, Manager Food Safety, Recreational Water and Cambridge & Area Team

Lindsay Ogg, Public Health Inspector

APPROVED BY: Dr. Liana Nolan, Commissioner/ Medical Officer of Health
TO: Chair Sean Strickland and Members of the Community Services Committee

DATE: April 12, 2011

FILE CODE: P09-40

SUBJECT: HEALTHY BABIES HEALTHY CHILDREN PROGRAM CHANGES UPDATE

RECOMMENDATION:

For information.

SUMMARY:

Changes to the Healthy Babies Healthy Children program have recently been outlined by the Ministry of Children and Youth Services. The changes will significantly impact what families in Waterloo Region are offered through the Healthy Babies Healthy Children program. These changes will also impact our local system of supports for young children and families, particularly during the postpartum period. Additional information is still needed and will be forthcoming from the Ministry of Children and Youth Services in order to plan for upcoming changes to the Healthy Babies Healthy Children program and other public health services within the context of our local system of services and supports for young children and their families.

Some components of Healthy Babies Healthy Children currently available to all families will be eliminated. Components of Healthy Babies Healthy Children supporting vulnerable children will be enhanced.

REPORT:

The Healthy Babies Healthy Children Program is a voluntary prevention/early intervention initiative designed to help families promote healthy child development and help their children achieve their full potential. Introduced in 1998, the program is delivered by Public Health Units across Ontario as mandated in the Ontario Public Health Standards (2008). The program is 100% funded by the Ministry of Children and Youth Services. Over time, modifications to the Healthy Babies Healthy Children program in Waterloo Region have been made (e.g. reduction in number of families being offered a postpartum home visit) in order to stay within the funding envelope.

On March 22, 2011, Region of Waterloo Public Health received a memorandum from the Ministry of Children and Youth Services entitled “Strengthening Early Years Programs: Healthy Babies Healthy Children Program Improvements” (See Appendix A). The Ministry of Children and Youth Services indicates that changes are being made to the Healthy Babies Healthy Children program as part of the province’s work to strengthen programs in support of the integrative vision of the Best Start initiative and the goal of improving outcomes for children and their families. The main focus for the changes being introduced by the Ministry of Children and Youth Services is to aid at risk families in accessing the Healthy Babies Healthy Children home visiting program more quickly.
Description of Healthy Babies Healthy Children Program Changes

The changes to the Healthy Babies Healthy Children program outlined by the Ministry of Children and Youth Services will significantly impact what families are offered through the Healthy Babies Healthy Children program and will also impact our local system of supports for young children and families, particularly during the postpartum period. The Ministry of Children and Youth Services indicates that the timeline for full implementation of the changes is January 2012.

Some components of the Healthy Babies Healthy Children program available to all families will be eliminated. The universal post-partum contact within 48 hours of hospital discharge and post-partum home visit will no longer be requirements of the program. The only remaining universal components will occur prior to hospital discharge. They will include the offer of a screening opportunity to families and the provision of an information package (containing child development information, a description of programs available to support children and families and contact numbers for new parents). Families identified at risk by the screening tool will be offered the Healthy Babies Healthy Children home visiting program. The proportion of families who will meet the criteria for the home visiting program and the expected timeframe within which families are to be contacted once identified at risk are not yet known. The Healthy Babies Healthy Children home visiting program will be strengthened through investment in training. Province-wide best practice guidelines will be introduced and are still under development.

A new, more detailed Healthy Babies Healthy Children screening tool (still to be validated) will replace the currently-used Larson (prenatal) and Parkyn (postpartum) screening tools to identify vulnerable families. The new screen, once validated, will be completed postpartum by hospital nurses prior to a mother and baby leaving the hospital. The new screen will also be used prenatally and during early childhood, although it is unclear if this screening will continue to be funded through the Healthy Babies Healthy Children program.

The Healthy Babies Healthy Children Program in Waterloo Region is well integrated within the system of services and supports for young children and their families. The upcoming changes to this program will, therefore, have an impact on partners in our system of supports for families with a new baby. Community networks (i.e. Healthy Babies Healthy Children Advisory Committee, Region of Waterloo Children and Parents Services Committee, Children and Youth Services Planning Council) and organizations (e.g. hospitals, child welfare, children’s services, children’s treatment centres, other public health programs) who serve young children and their families are currently being informed of the changes.

The Healthy Babies Healthy Children program contributes to the Region of Waterloo Public Health’s achievement of a number of the mandated Ontario Public Health Standards (e.g. breastfeeding support, healthy growth and development, healthy family dynamics, health teaching on public health topics). Changes to the Healthy Babies Healthy Children program will, therefore, require Public Health to identify and seek to address gaps in meeting Ontario Public Health Standards requirements that may result.

Next Steps

Region of Waterloo Public Health will:

- Submit a Healthy Babies Healthy Children service plan and budget for 2011 that contains the same program components as in previous years, at a level that can be delivered within the program funding envelope for 2011.

- Participate in provincial work groups for the development of the Healthy Babies Healthy Children program changes as directed by the Ministry of Children and Youth Services.

• Participate, in partnership with Grand River Hospital and Cambridge Memorial Hospital, in the validation of the new Healthy Babies Healthy Children screen being conducted in twelve Public Health Units over the next four months.

• Plan for upcoming Healthy Babies Healthy Children program changes in consultation and collaboration with community partners within the context of the Early Years System Planning Framework being utilized by the Region of Waterloo Children and Parents Services Committee.

• Bring forward a report about planned revisions for the Region of Waterloo Public Health Healthy Babies Healthy Children and Child Health programs to Community Services Committee prior to implementation of Healthy Babies Healthy Children and Child Health program changes.

CORPORATE STRATEGIC PLAN:

The Healthy Babies Healthy Children program contributes to the Region’s strategic focus areas of:

• #3 Healthy and Safe Communities – support safe and caring communities that enhance all aspects of health
• #4 Human Services – promote quality of life and create opportunities for residents to develop to their full potential

FINANCIAL IMPLICATIONS:

The Ministry of Children and Youth Services indicates that there are no plans to reduce funding from current levels for the 100% provincially funded Healthy Babies Healthy Children program as a result of Healthy Babies Healthy Children program changes. It is unclear at this time if there will be any changes to funding levels for individual Public Health Units. Healthy Babies Healthy Children funding for Waterloo Region has remained unchanged at $2,764,743 for the last four years, despite an increasing number of births and increasing costs for program delivery. The specific requirements of the program changes and their financial impacts are still unknown at this time.

OTHER DEPARTMENT CONSULTATIONS/CONCURRENCE:

Social Services and Public Health departments work in collaboration with community partners on planning for children’s services in Waterloo Region. Changes to the system of supports and services for young children and their families as a result of Healthy Babies Healthy Children program changes will be done in consultation with Region of Waterloo Children and Parent Services, within the Early Years System Planning Framework.

ATTACHMENTS

Appendix A: Memorandum from Darryl Sturtevant, Assistant Deputy Minister, Ministry of Children and Youth Services dated March 22, 2011 re: Strengthening Early Years Programs: Healthy Babies Healthy Children Program Improvements

PREPARED BY: Andrea Reist, Director, Child & Family Health

APPROVED BY: Dr. Liana Nolan, Commissioner/Medical Officer of Health
March 22, 2011

MEMORANDUM TO: Medical Officers of Health
Healthy Babies Healthy Children Program Directors

FROM: Darryl Sturtevant
Assistant Deputy Minister

RE: Strengthening Early Years Programs:
Healthy Babies Healthy Children Program Improvements

I am writing to outline improvements to the Healthy Babies Healthy Children (HBHC) Program which will be fully implemented as of January 2012. The changes are designed to more quickly and effectively identify and support vulnerable children and families so those who need help the most can access services more quickly.

The HBHC program improvements are part of the government's overall commitment to improve services for children and their families through its Best Start initiative. In addition, they are aligned with the work already underway with Dr. Charles Pascal around the development of a policy framework for Best Start Child and Family Centres.

Many of the HBHC enhancements were discussed at the HBHC Director’s meeting held on January 20-21, 2011 in Toronto. At the meeting, we received positive feedback from many of your staff on the program’s new direction and the commitment to further strengthen the program.

In summary, the HBHC initiatives discussed at the meeting include:

- A new, more detailed and evidence-based HBHC screening tool that will replace the currently-used Larson and Parkyn. The new screen will provide greater focus on risk identification and will enable you staff to identify and therefore support vulnerable families more quickly. We are very appreciative that some of your public health units are participating in the validation process for the screen;
- A streamlined HBHC screening process that will eliminate the need for the current multiple screens administered to families prior to receiving home visiting from HBHC. The existing post-partum phone call and home visit will no longer be a requirement of HBHC;
- An information package for new parents that will be provided before mother and baby leave the hospital. The package will include child development information, a description of programs available to support children and families and important contact numbers for further assistance. The content for the package will be developed with support from public health units and follow best practices for the sharing of information with parents;

...cont'd
- 2 -

- Strengthened home visiting through training and the introduction of province-wide best practice guidelines; and
- The option for public health units to include a social worker on the HBHC home visiting team.

Aligned with the HBHC changes, work has begun on a new Junior Kindergarten screen that will complement the current suite of infant and early childhood screenings and support effective transition to school. We know that many health units are already involved in screening children prior to school registration so we will keep you informed and involved as this initiative proceeds.

The changes in HBHC practice and delivery will be supported with ongoing communication and education opportunities. Work-groups with public health unit membership will be established to ensure that an informed, collaborative process is in place to support all parts of the HBHC program enhancements. In partnership with the Ministry of Health and Long-Term Care, we will update the Ontario Public Health Standards (OPHS) HBHC Protocol to reflect the program improvements and develop new guidance documents to support protocol requirements.

The HBHC enhancements are part of our work to strengthen programs in support of the integrative vision of Best Start and the goal of improving outcomes for children and their families. Public health units are critical partners in achieving these goals.

Thank you for your continued support as we move forward in the implementation of this important work.

Darryl Stowtavan
Assistant/Deputy Minister
Ministry of Children and Youth Services
TO: Chair Sean Strickland and Members of the Community Services Committee

DATE: April 12, 2011

FILE CODE: P10-80

SUBJECT: QUARTERLY CHARGED/CLOSED FOOD PREMISES REPORT

RECOMMENDATION:

For information

SUMMARY:

This report is a summary of food premises enforcement activities conducted by Public Health Inspectors in the Health Protection and Investigation Division for the first quarter of 2011.

REPORT:

During the first quarter of 2011, six establishments were charged under the Health Protection and Promotion Act, Ontario Food Premises Regulation 562 (See Table 1: Food Safety Enforcement Activity).

Food premises charges and closures can be viewed on the Food Premises Inspection Reports website Enforcement Actions Page for a period up to 6 months from the date of the charge or closure. Every food premises charged has the right to a trial and every food premises ordered closed, under the Health Protection and Promotion Act, has the right to an appeal to the Health Services Appeal and Review Board.

CORPORATE STRATEGIC PLAN:

Healthy and Safe Communities: Support safe and caring communities that enhance all aspects of health.

FINANCIAL IMPLICATIONS: NIL

OTHER DEPARTMENT CONSULTATIONS/CONCURRENCE: NIL

ATTACHMENTS

Table 1: Food Safety Enforcement Activity

PREPARED BY: Chris Komorowski, Manager, Health Protection and Investigation

APPROVED BY: Dr. Liana Nolan, Commissioner/ Medical Officer of Health
<table>
<thead>
<tr>
<th>Name of establishment</th>
<th>Date of Charges or Closure</th>
<th>Charges or Closure</th>
<th>Total Charge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Val’s Restaurant 6A-209 Pinebush Road</td>
<td>Provincial Offences Notice issued for an infraction observed on February 1, 2011</td>
<td>Store hazardous foods at an internal temperature between 5 degrees Celsius and 60 degrees Celsius ($455)</td>
<td>$455</td>
</tr>
<tr>
<td>Cambridge</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marsdale Retirement Residence 25 Linwood</td>
<td>Two Provincial Offences Notices issued for infractions observed on March 1, 2011</td>
<td>Operator fail to ensure equipment surface washed as necessary ($55)&lt;br&gt;Operator fail to ensure floor of food handling room kept clean ($55)</td>
<td>$110</td>
</tr>
<tr>
<td>Avenue Cambridge</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Grasshopper 868 King Street East</td>
<td>Provincial Offences Notice issued for an infraction observed on March 11, 2011</td>
<td>Fail to sanitize utensils after rinsing ($295)</td>
<td>$295</td>
</tr>
<tr>
<td>Cambridge</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fireside Deli &amp; Family Restaurant 800</td>
<td>Two Provincial Offences Notices issued for infractions observed on March 21, 2011</td>
<td>Use dirty cloth for cleaning utensils ($120)&lt;br&gt;Fail to protect food from contamination and adulteration ($300)</td>
<td>$420</td>
</tr>
<tr>
<td>Ottawa Street South Kitchener</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kentucky Fried Chicken 331 Lancaster Street</td>
<td>Provincial Offences Notice issued for an infraction observed on March 24, 2011</td>
<td>Operate food premise not maintained with smooth floor surface where food handled ($60)</td>
<td>$60</td>
</tr>
<tr>
<td>West Kitchener</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Janet Lynn’s Bistro 92 King Street South</td>
<td>Provincial Offences Notice issued for an infraction observed on March 25, 2011</td>
<td>Mechanical equipment not maintained to provide sufficient chemical solution rinse ($120)</td>
<td>$120</td>
</tr>
<tr>
<td>Waterloo</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
TO: Chair Sean Strickland and Members of the Community Services Committee

DATE: April 12, 2011

FILE CODE: S07-20

SUBJECT: ONE TIME FUNDING FOR EQUIPMENT FOR SUNNYSIDE HOME RESIDENT AND STAFF SAFETY

RECOMMENDATION:

THAT the Regional Municipality of Waterloo increase the 2011 operating budget for Seniors’ Services by $59,606 gross and $0 net Regional Levy, as outlined in report SS-11-016, dated April 12, 2011.

SUMMARY:

On March 8, 2011, the Ministry of Health and Long-Term Care announced $18 million of one-time funding for the purchase of new equipment to improve resident comfort and safety in long-term care homes. Sunnyside Home received an allocation of $59,606, which as a condition of acceptance, had to be expended by March 31, 2011. This deadline required that the equipment be purchased and delivered by March 31, 2011. As no additional Regional funding is required, the one-time funding was used to purchase 4 portable floor lifts, 4 sit-to-stand mini lifts, 4 ceiling lift tracking systems and 2 ceiling lift motor systems at a cost of $59,606.

REPORT:

The Ministry of Health and Long-Term Care has announced one-time funding of $18 million in fiscal year 2010-2011 to support the purchase of new equipment to improve resident comfort and safety. Sunnyside Home received $59,606 as its allocation of this funding. Research indicates that the equipment being funded by this special investment improves resident safety, decreases the use of restraints, reduces injuries due to falls and assists in preventing falls. The quality of care and safety for residents and staff will be enhanced through this provincial initiative.

To be eligible for this one-time funding by the Ministry of Health and Long Term Care, the long-term care home was required to agree to purchase and receive all goods and services between March 8, 2011 (the date of this announcement) and March 31, 2011. Any unspent funds will be recovered and a full accounting and reconciliation of funding will be required as part of the Annual Reconciliation Report for the 2011 calendar year.

In reviewing the eligible uses of this funding, staff decided to purchase new floor model lifts and sit to stand lifts and to continue with an ongoing project to install ceiling lifts in all resident rooms at Sunnyside Home. These purchases are consistent with the funding criteria and also support the Sunnyside Home’s musculoskeletal program, a health and safety initiative which aims to reduce staff injuries and lost time.

The one-time funding of $59,606 has been used to purchase 4 portable floor lifts, 4 sit-to-stand mini lifts, 4 ceiling lift tracking systems and 2 ceiling lift motor systems. Lift motors can be moved from one room to another as the needs of residents change, while the ceiling lift tracking is a permanent installation.
Many residents at Sunnyside Home require mechanical assistance to change their position in order to transfer or stand. Lifting equipment provides mechanical assistance to staff in transferring residents who cannot safely weight bear. Ceiling lifts are more comfortable than floor models for residents and reduce the risk of staff and resident injury. The Home also utilizes some floor model lifts for specific transfers, such as transferring residents from a sitting to standing position. Staff and residents are enthusiastic about the safety and comfort benefits of these lifts.

Over the past year and a half, in response to community need, Sunnyside Home has converted two of its Special Care home areas (units for those with Alzheimer’s or a related dementia) to Continuing Care home areas to serve those with advanced physical impairments, with or without a dementia. With this change, additional lifting equipment is required to meet the needs of this population.

Since 2004, through substantial support by the Foundation and targeted Provincial funds, Sunnyside has installed 80 ceiling lifts in the Home. To complete this long-term project, there is an imminent need for an additional 90 ceiling lift tracking systems, and a further 106 required to complete the project. The Foundation has designated proceeds from 2011 Walk and Roll and the fall Golf Tournament for this purpose.

CORPORATE STRATEGIC PLAN:

The purchase of equipment to allow for safe and comfortable resident transfers addresses the Region’s Corporate Strategic Focus Area 3, Healthy and Safe Communities: (to) Support safe and caring communities that enhance all aspects of health.

FINANCIAL IMPLICATIONS:

The 2011 operating budget for Seniors’ Services will increase by $59,606 gross and $0 net.

OTHER DEPARTMENT CONSULTATIONS/CONCURRENCE:

Finance has been consulted in the preparation of this report.

ATTACHMENTS:

Nil

PREPARED BY: Helen Eby, Administrator, Resident Care

APPROVED BY: Michael Schuster, Commissioner, Social Services
TO: Chair Sean Strickland and Members of the Community Services Committee

DATE: April 12, 2011

FILE CODE: S13-80

SUBJECT: YOUTH HOUSING STABILITY PILOT PROGRAMS

RECOMMENDATION:

THAT the Regional Municipality of Waterloo extend the Emergency Shelter Program Agreement with Reaching Our Outdoor Friends (ROOF) for 10 beds for May 1 to December 31, 2011;

AND THAT the Regional Municipality of Waterloo extend the Domiciliary Hostel Program Agreement with Argus Residence for Young People for 5 beds for June 17 to December 31, 2011, as outlined in the report SS-11-018, dated April 12, 2011.

SUMMARY:

NIL

REPORT:

1.0 Background

In April 2010, Social Planning, Policy and Program Administration released the report Promising Principles and Practices in Housing Options for Youth Experiencing Homelessness in Waterloo Region (the Youth Housing Options Report). This report addressed Action 4.8 of the Homelessness to Housing Stability Strategy, to “Explore best practices of youth-specific housing options for youth experiencing homelessness or at-risk of homelessness, where reconciliation with parents or guardian is not immediate or possible”. The Youth Housing Options Report included the following recommendations:

- Create youth-specific emergency shelter services for youth 16 and over in Kitchener/Waterloo, taking into consideration existing resources, impact to surrounding emergency shelters, and implementation/promotion of the six promising principles and practices.
- Develop longer term housing options for youth, taking into consideration specific needs of youth with complex issues.

Two programs were piloted and reviewed over the past year, tailored to meet the unique needs and developmental challenges of youth experiencing or at-risk of homelessness. One program was a youth-specific Emergency Shelter at ROOF (located in Kitchener), and the other was a youth-specific longer-term housing option for male youth with complex needs at Argus Residence for Young People (located in Cambridge). These agencies were identified as appropriate agencies in the community to undertake these programs, given their extensive experience providing youth-specific services to youth experiencing or at risk of homelessness.
2.0 ROOF – Providing a Roof (PAR)
To address recommendation #3 of the report, the Regional Municipality of Waterloo entered into an Emergency Shelter Agreement with ROOF on a trial basis for the period of March 25, 2010 – April 30, 2011 for 10 beds. During this time ROOF underwent regular monitoring against the Emergency Shelter Guidelines and at the conclusion of the pilot is found to be in substantial compliance.

Monitoring consisted of monthly check-in visits to the facility, where Region staff observed the progression of the program, policies and space and measured compliance against the Emergency Shelter Guidelines. Mid-point check-ins were also conducted with stakeholders, including EIS Caseworkers, neighbours, the City of Kitchener, other shelters and youth-specific housing stability programs. ROOF is a regular attendee of the Emergency Shelter and Social Services meetings as well as the Homeless Individuals and Family Information System (HIFIS) working group meetings. The shelter has had an average capacity of 82% over the year and had regular peaks where they have been full and even had a waiting list, indicating a significant need in the community for this service.

The program has also adhered to the Six Promising Practices and Principles identified in the Promising Principles and Practices in Housing Options for Youth Experiencing Homelessness in Waterloo Region (the Youth Housing Options Report), which include providing a continuum of accessible supports that are youth-specific; establishing trusting relationships; adopting a low demand approach to housing stability programs; linking education, income and housing supports, providing opportunities for youth engagement; and promoting collaboration between agencies.

2.1 Argus Residence for Young People - Five Beds to Home Program
To address recommendation #5 of the report, the Regional Municipality of Waterloo entered into a Domiciliary Hostel Agreement with Argus Residence for Young People on a trial basis for the period of June 16, 2010 - June 16, 2011 for 5 beds. During that time Argus underwent regular monitoring against the Domiciliary Hostel Standards and prior to the conclusion of the pilot is found to be in substantial compliance.

The program has been monitored with check-in visits to the facility throughout the year, where Region staff observed the progression of the program, policies and space and measured compliance against the Domiciliary Hostel Standards. The program has consistently been at full capacity and has successfully stabilized young men with complex needs who had previously been cycling in-and-out of the emergency shelter program. The Five Beds to a Home program has aided in filling a gap by providing one longer-term housing option for male youth with complex needs in this community.

The program has also adhered to the Six Promising Practices and Principles identified in the Promising Principles and Practices in Housing Options for Youth Experiencing Homelessness in Waterloo Region (the Youth Housing Options Report), which include providing a continuum of accessible supports that are youth-specific; establishing trusting relationships; adopting a low demand approach to housing stability programs; linking education, income and housing supports, providing opportunities for youth engagement; and promoting collaboration between agencies.

3.0 Next Steps
Subject to Council approval, Agreements with the agencies for these programs will be extended to the end of the 2011 calendar year at the conclusion of their pilot time frames. ROOF-PAR and Argus Five Beds to a Home may then participate in the regular annual Agreement processes associated with the Emergency Shelter and Domiciliary Hostel Programs.
CORPORATE STRATEGIC PLAN:

Working to strengthen the housing stability system and build the community’s capacity to address issues of homelessness is consistent with the Region’s Corporate Strategic Plan, Focus Area 4: Human Services: (to) Promote quality of life and create opportunities for residents to develop to their full potential; and specifically, Strategic Objective 4.2 (to) Enhance services to people experiencing or at-risk of homelessness.

FINANCIAL IMPLICATIONS:

The Emergency Shelter per diem is cost shared with the Province of Ontario on an 81.2:18.8 basis. As emergency shelters are funded under the Ontario Works program, there is no maximum expenditure for the program. The current maximum cost-shared per diem rate is set by the Province at $43.00.

The Domiciliary Hostel per diem is also cost shared with the Province of Ontario on an 80:20 basis. There is capacity to include Argus’ Five Beds to Home within the maximum budget set by the Province. The current maximum cost-shared per diem rate is set by the Province at $47.75.

OTHER DEPARTMENT CONSULTATIONS/CONCURRENCE:

Finance has reviewed this report. Legal Services will assist in preparing Agreements.

ATTACHMENTS

N/A

PREPARED BY: Lisa-Dawn Brooks, Social Planning Associate
               Marie Morrison, Manager, Social Planning

APPROVED BY: Michael Schuster, Commissioner of Social Services
TO: Chair Sean Strickland and Members of the Community Services Committee

DATE: April 12, 2011

FILE CODE: S13-80

SUBJECT: PROVINCIAL HOMELESSNESS BUSINESS CASE

RECOMMENDATION:

THAT the Regional Municipality of Waterloo approve the attached “Provincial Homelessness Business Case to Support Additional 2011 Funding” as part of the 2011 budget submission to the Province’s Ministry of Community and Social Services, as outlined in Report SS-11-019, dated April 12, 2011.

SUMMARY:

NIL

REPORT:

Each year the Region is required to submit a budget request to the Ministry of Community and Social Services (MCSS) for homelessness funding, including: Consolidated Homelessness Prevention Program (CHPP) (100% Provincial dollars), Provincial Emergency Energy Fund (PEEF) (100% provincial dollars) and the Domiciliary Hostel Program (80/20 cost-shared). Over the past three years (2008-2010), the Region has included a business case with the budget submission to provide further information and rationale regarding the request for additional dollars (SS-10-012). As a result of the business case submissions, MCSS provided the Region additional one-time CHPP funding of $200,000 in 2008 and $150,000 in 2009. No additional dollars were provided in 2010.

As with last year’s submission, the 2011 Business Case presents information and rationale for a request regarding all MCSS funded homelessness programs (see 2011 Business Case attached as Appendix A). The Region anticipates receiving $722,744 for the CHPP but is requesting an additional $698,245 in order to sustain and enhance existing programs and to fund additional longer term housing with supports. The Region anticipates receiving $75,210 for the PEEF and is requesting twice that amount in order to better address current demand. The Region is requesting that MCSS maintain the existing Domiciliary Hostel Program base budget at $2,309,066. Overall, the Business Case requests an additional $773,455 above the anticipated funding of $3,107,020 for a total request of $3,880,475. The current and requested funding is outlined in the following chart.

<table>
<thead>
<tr>
<th>Program</th>
<th>Current Funding</th>
<th>Requested Additional Funding</th>
<th>Total 2011 Request</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHPP (100% Province)</td>
<td>$722,744</td>
<td>$698,245</td>
<td>$1,420,989</td>
</tr>
<tr>
<td>PEEF (100% Province)</td>
<td>$75,210</td>
<td>$75,210</td>
<td>$150,420</td>
</tr>
<tr>
<td>Domiciliary Hostel (80/20 cost-shared)</td>
<td>$2,309,066</td>
<td>$0</td>
<td>$2,309,066</td>
</tr>
<tr>
<td>TOTAL</td>
<td>$3,107,020</td>
<td>$773,455</td>
<td>$3,880,475</td>
</tr>
</tbody>
</table>
CORPORATE STRATEGIC PLAN:

Working to strengthen the housing stability system and build the community’s capacity to address issues of homelessness is consistent with the Region’s Corporate Strategic Plan, Focus Area 4: Human Services: (to) Promote quality of life and create opportunities for residents to develop to their full potential; and specifically, Strategic Objective 4.2 (to) Enhance services to people experiencing or at-risk of homelessness.

FINANCIAL IMPLICATIONS:

The Region's 2011 approved operating budget includes a provision of $3,107,020 for the existing CHPP, PEEF and Domiciliary Hostel programs. The 2011 Business Case request is for an additional $773,455 to be funded entirely by the Province of Ontario.

OTHER DEPARTMENT CONSULTATIONS/CONCURRENCE:

Nil

ATTACHMENTS:

Attachment A: Provincial Homelessness Business Case to Support Additional 2011 Funding

PREPARED BY: Van Vilaysinh, Social Planning Associate
Marie Morrison, Manager, Social Planning

APPROVED BY: Michael Schuster, Commissioner, Social Services
ATTACHMENT A
PROVINCIAL HOMELESSNESS BUSINESS CASE

Region of Waterloo
SOCIAL SERVICES

Regional Municipality of Waterloo
Provincial Homelessness
Business Case
to Support Additional 2011 Funding

Prepared For:
Province of Ontario
Ministry of Community and Social Services

March 2011

DRAFT
1.0 INTRODUCTION

The Regional Municipality of Waterloo (the Region) has been serving as the Consolidated Municipal Service System Manager (CMSM) for Homelessness since 1999. This business case provides further information and rationale for the Region’s 2011 budget request for homelessness programs funded through the Ministry of Community and Social Services (MCSS) including the Consolidated Homelessness Prevention Program (CHPP), Provincial Emergency Energy Fund (PEEF), and Domiciliary Hostel Program.

2.0 CONSOLIDATED HOMELESSNESS PREVENTION PROGRAM

Since 2006, the Region has been implementing the Province’s Consolidated Homelessness Prevention Program (CHPP) (refer to Appendix A for further background information and to Appendix B for a 2010 list of accomplishments).

The Region submitted a business case with the 2010 Provincial budget submission to the Ministry of Community and Social Services (MCSS) requesting additional funding to sustain and enhance existing CHPP programs and to fund Supportive Housing of Waterloo (SHOW), a new longer term housing with supports (SS-10-012). The business case requested an additional $1,033,209; however, no additional funding above the annual allocation of $722,744 was provided.

2.1 Rationale for Additional CHPP Funding

The Region’s current CHPP annual allocation of $722,744 is appreciated and is efficiently and effectively applied towards addressing and ending homelessness in Waterloo Region (see Appendix B for a 2010 list of accomplishments and Appendix C for a summary of current CHPP funded programs). However, the allocation is insufficient to implement the Province’s CHPP Guidelines (2006) and does not recognize increased program operating costs and service demands.

In 2007, Waterloo Region released, “All Roads Lead to Home: A Homelessness to Housing Stability Strategy for Waterloo Region” (the Strategy). The Strategy (2007-2010) served as the Region’s system plan for addressing issues of homelessness and its implementation was identified as an action within the Region’s 2007-2010 Strategic Plan. The Strategy is currently being updated with the timeline for implementation spanning the next term of Regional Council (2011-2014).

The Strategy provides evidence of existing gaps and direction towards the actions required to ensure every community member in Waterloo Region has housing stability. The Strategy demonstrates that ending homelessness through the provision of housing and supports is not only a more humane approach; it is roughly 10 times less expensive on a per diem basis.

Yet, it is recognized that the Strategy cannot be fully implemented without additional funding from the federal and provincial governments. The Region has committed an additional $749,225 on an annual basis towards implementing the Strategy and is requesting the Province provide additional funding as well.

There is a need to support the full range of services within the housing stability system including prevention activities, shorter term programs (e.g., emergency shelters, outreach, time-limited housing), and longer term housing with support programs (e.g., supportive housing). As such, there is a need to support activities under all three objectives of CHPP:

1. To improve access to and connect households that are experiencing homelessness with the system of community services;
2. To support households experiencing homelessness to obtain and keep longer-term housing; and
3. To assist households at risk of homelessness to maintain housing.

However, it is highlighted through the research and in the Strategy that housing with supports is the most effective route to ending homelessness for those requiring assistance to maintain housing stability. In 2006, Regional Council approved a policy regarding CHPP to support all three objectives of CHPP with particular emphasis on housing with supports (SS-06-053). As outlined in Appendix C, CHPP funded programs adhere to this approved policy direction by addressing all three objectives of the CHPP with a particular emphasis on housing with supports (e.g. in 2010, housing with supports accounted for 50% of the CHPP programs and 72% of CHPP expenditures). Nevertheless, the demand for this type of supportive housing far outstrips available funding. In 2009, there were 608 people in Waterloo Region on a waitlist for general supportive housing (formerly the Supports to Daily Living Program), a 17% increase from 2008.

There are no other funding sources available from the Province for general supportive housing. If funding for the support component of the Supportive Housing of Waterloo (SHOW) project is not received, it risks an inability to support its intended purpose to serve as supportive housing for people experiencing persistent homelessness and simply serving as an affordable housing program.

SHOW is a non-profit group formed by thirteen Waterloo-based churches and faith groups to create general supportive housing for people experiencing persistent homelessness. In 2010, SHOW began operating a five story 30 unit building, with 24 hour support. The support component of SHOW is currently being partially funded through the Domiciliary Hostel Program. SHOW has identified the need for an additional $275,000 to maintain current levels of support.

In addition, existing CHPP programs require further funding in order to maintain and stabilize service levels. Beyond that, one CHPP program has identified a need for enhanced funding to meet increased service demands (see Appendix C for program descriptions). Despite the 6% increase to the CHPP base budget over the past four years, funding for agencies has not kept pace with inflation and does not recognize increased operating costs in areas such as utilities and insurance. Additionally, with the impact of the economic downturn, community need is even higher.

### 2.2 Request for Additional 2011 CHPP Funding

The Region’s 2011 CHPP budget submission is $1,420,989, representing an additional allocation of $698,245 beyond the expected annualized base allocation of $722,744. This reflects the results of the Strategy which highlight the urgent need to both sustain and enhance existing CHPP programs and to create additional units of general longer term housing with supports (e.g., supportive housing). Additional amounts required for each program are detailed in Appendix C.

<table>
<thead>
<tr>
<th>Area</th>
<th>2011 CHPP Funding Approved by Regional Council</th>
<th>2011 Requested Funding to Sustain and Enhance Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programs</td>
<td>$650,470</td>
<td>$1,291,808</td>
</tr>
<tr>
<td>Cost of Administration**</td>
<td>$72,274</td>
<td>$129,181</td>
</tr>
<tr>
<td>TOTAL</td>
<td>$722,744</td>
<td>$1,420,989</td>
</tr>
<tr>
<td>ADDITIONAL FUNDING REQUEST***</td>
<td>-</td>
<td>$698,245</td>
</tr>
</tbody>
</table>

*Contingent on Ministry funding
**MCSS allows up to 10% of total allocation for the cost of administration
***Calculated as: (TOTAL) – ($722,744)
If additional funding was made available to existing CHPP programs, it would allow each to:

- Continue sustainable operations and maintain services levels;
- Retain qualified and experienced staff;
- Increase ability to meet and increase service targets and outcomes; and
- Increase ability to participate in connecting as part of the larger system of services to address and end homelessness.

### 3.0 PROVINCIAL EMERGENCY ENERGY FUND

The Region has been providing energy assistance through 80/20 cost-shared discretionary benefits for many years. The Region was asked and agreed to support a local energy assistance program with additional community funding in 2001. The Provincial Emergency Energy Fund (PEEF) (100% Province funded) was announced in March 2004 with one-time funding of $75,210 and was integrated into the local energy assistance program for the 2004/2005 heating season. The PEEF became annualized in 2005/2006. In 2006, the Province announced additional one-time funding through PEEF for the 2006/2007 fiscal year. The annual allocations for 2008, 2009, and 2010 have remained at $75,210.

For the last three years, PEEF funding has been exhausted within the first quarter of our fiscal year (January to March). However, there is a year-round need for energy assistance, particularly during the months of September to December.

**Based on past usage of PEEF funding and demand for assistance in the colder months, the Region is requesting an additional $75,210 for a total annual request of $150,420.**

<table>
<thead>
<tr>
<th>Area</th>
<th>2011 PEEF Funding Approved by Regional Council*</th>
<th>2011 Requested Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Energy Assistance</td>
<td>$67,689</td>
<td>$135,378</td>
</tr>
<tr>
<td>Cost of Administration**</td>
<td>$7,521</td>
<td>$15,042</td>
</tr>
<tr>
<td>TOTAL</td>
<td>$75,210</td>
<td>$150,420</td>
</tr>
<tr>
<td>ADDITIONAL FUNDING REQUEST***</td>
<td>-</td>
<td>$75,210</td>
</tr>
</tbody>
</table>

*Contingent on Ministry funding
**MCSS allows up to 10% of total allocation for the cost of administration
***Calculated as: (TOTAL) – ($75,210)

### 4.0 DOMICILIARY HOSTEL PROGRAM

The Region is seeking to have its Domiciliary Hostel Program budget of $2,309,066 maintained for 2011.

Waterloo Region continues to be an underfunded area with respect to supported housing for seniors and those with mental health and addiction issues, all populations which are served by the Domiciliary Hostel Program in Waterloo Region. Demand for the Domiciliary Hostel Program has further increased with the Tier II Divestment of specialized mental health services to Waterloo Region that took place in October 2010. We are working closely with the Waterloo-Wellington LHIN, Grand River Hospital and other partners as the Domiciliary Hostel Program is considered an essential supportive housing resource in the community. As such, we are seeking to at least maintain capacity within this program for 2011 and will seek opportunities for increases in the future.
5.0 SUMMARY

Through the Strategy, the Region has clearly identified what is needed to address and end homelessness in Waterloo Region. We have identified housing stability as a priority area and have committed 100% Regional dollars to begin taking action. The provincial government needs to commit additional dollars as well.

As a part of this commitment, we are seeking the following for CHPP, PEEF and Domiciliary Hostel through MCSS ($1,420,989 + $150,420 + $2,309,066) beyond the expected annualized base allocation of ($722,744 + $75,210 + $2,309,066) for a total 2011 requested allocation of $3,880,475.

<table>
<thead>
<tr>
<th>Program</th>
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<td>Domiciliary Hostel (80/20 cost-shared)</td>
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<td>$0</td>
<td>$2,309,066</td>
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<tr>
<td>TOTAL</td>
<td>$3,107,020</td>
<td>$773,455</td>
<td>$3,880,475</td>
</tr>
</tbody>
</table>

Providing additional funding to the Region to address and end homelessness is a wise investment. For every dollar spent, research has proven or estimates that there will be a four to ten dollar savings to the emergency health, social services, and correctional systems. We hope you will look favorably upon our business case and thank you for considering our request.
APPENDIX A
CHPP BACKGROUND IN WATERLOO REGION

Until 2005, the Region administered four of the five provincial homelessness programs (that were to become the CHPP). These four programs included Supports to Daily Living, the Provincial Homelessness Initiative Fund, Off the Street – Into Shelter, and the Emergency Hostel Redirection Fund (the fifth, the Community Partners Program, was never funded in Waterloo Region). The following table summarizes the history and funding arrangements for these programs.

Provincial Homelessness Programs Administered by the Region

<table>
<thead>
<tr>
<th>Program</th>
<th>Year Program Began</th>
<th>Year Region Began Administering</th>
<th>Funding Arrangement</th>
<th>2005 Funding (Provincial)</th>
<th>2005 Funding (Gross)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supports to Daily Living</td>
<td>1990</td>
<td>1999</td>
<td>100% Provincial</td>
<td>$405,820</td>
<td>$405,820</td>
</tr>
<tr>
<td>Provincial Homelessness Initiative Fund</td>
<td>1999</td>
<td>1999</td>
<td>100% Provincial</td>
<td>$185,400</td>
<td>$185,400</td>
</tr>
<tr>
<td>Off the Street – Into Shelter</td>
<td>2001</td>
<td>2001</td>
<td>80/20 cost-share</td>
<td>$23,155</td>
<td>$28,100</td>
</tr>
<tr>
<td>Emergency Hostel Redirection Fund</td>
<td>1999</td>
<td>2003</td>
<td>80/20 cost-share</td>
<td>$38,904</td>
<td>$47,786</td>
</tr>
<tr>
<td>TOTAL</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>$653,279</td>
<td>$667,106</td>
</tr>
</tbody>
</table>

As of January 1, 2005, the Province identified that the various homelessness programs would be consolidated. On December 8, 2005, the Province released the Consolidated Homelessness Prevention Program Implementation Guidelines and Performance Measures (CHPP Guidelines) effective January 1, 2006. The CHPP Guidelines identify the following objectives:

- To improve access to and connect households that are experiencing homelessness with the system of community services;
- To support households experiencing homelessness to obtain and keep longer-term housing; and
- To assist households at risk of homelessness to maintain housing.

CHPP was funded 100% by the Province based on an amount equal to the 2005 provincial allocation ($653,279 for the Region of Waterloo). The Region of Waterloo continues to provide its former 20% share of the programs at $15,514 (now rolled into the Region’s annualized Homelessness to Housing Stability Strategy Fund totaling $749,225 for 2011). In July 2006, a pro-rated 2% base budget increase was applied to the CHPP. In 2007, MCSS announced another 2% increase to CHPP, compounded annually over three years, and an additional base budget administrative allocation effective July 1, 2007 ($2,666 for the 2007 fiscal equating to $5,331 annually for the Region of Waterloo). In 2008 and 2009, with the 2% increases provided, the annual allocations received were $698,703 and $722,744, respectively. Through submission of a Business Case, the Region requested additional CHPP funding and as a result, received a one-time allocation of $200,000 in 2008 and $150,000 in 2009. However, in 2010, the annual allocation remained at $722,744, with no increases or additional funds provided.

While the Ministry recognized and allowed for administrative costs at 10%, these are largely funded from within the overall allocation, thereby reducing funding available for Waterloo Region community programs.
## APPENDIX B
### IMPLEMENTING CHPP – ACCOMPLISHMENTS 2010

The Region has accomplished the following in 2010 as it relates to expectations outlined in the CHPP Guidelines:

<table>
<thead>
<tr>
<th>Expectations Identified Within CHPP Guidelines</th>
<th>Region’s Accomplishments in 2010</th>
</tr>
</thead>
</table>
| Develop and document informed policies and system plans, and manage available funding for the delivery of homelessness prevention services. | • Continue to utilize Region of Waterloo’s housing stability systems plan, “All Roads Lead to Home: A Homelessness to Housing Stability Strategy for Waterloo Region”, developed in November 2007. This report was created through the synthesis of ten background documents created by the Region (see website: [www.regionofwaterloo.ca](http://www.regionofwaterloo.ca), search “strategy publications”).  
• Published the Youth Housing Options Report (2010).  
• These documents are used to inform policies, funding requests and funding allocations. |
| Submit proposed budget and program description and negotiate service contract with MCSS Regional Office. | • Submitted a 2010 proposed budget of $1,755,953 supported by a 2010 Business Case submission.  
• Received an approved 2010 annual allocation of $722,744. |
| Establish and maintain/manage contracts with CHPP agencies and/or establish and maintain/manage direct-delivered programming. | • Identified and entered into purchase of service agreements with eight community-based programs for funding in 2010. |
| Collect required data, as requested by MCSS (e.g. to support MCSS performance measures); provide quarterly reports and year-end reconciliation reports. | • Provided quarterly and year end reports to MCSS. |
| Monitor services, ensure outcomes are met, and adjust services (when necessary) to meet local needs. | • Services monitored and adjustments made to several CHPP programs to ensure outcomes and local needs met.  
• Undertook a program review to identify CHPP funding level needs for 2011. |
| Undertake, document, and report a regular count of local homeless populations. | • The Region of Waterloo, through its annual inventory of housing stability programs, identifies an annual prevalence count based on use of local emergency shelter services. The count of individuals for 2007 was 2,831, 2008 was 2,783, 2009 was 2,841 and in 2010 was 2,859. The percentage of emergency shelter residents returning for shelter within the same year in 2007 was 24%, in 2008 was 27% and in 2009 was 20% (data currently not available for 2010).  
• In 2007, it was estimated that approximately 50-70 people are experiencing persistent homelessness at any given time. While over 150 people experiencing or at-risk of persistent homelessness were supported to find and maintain housing from 2008 to 2010, it is currently estimated that there are still 200 people across the Region requiring support at this level. |
| Provide information as required. | • Provided data on number of emergency shelters and emergency shelter beds to MCSS. |
The Region’s additional 2010 CHPP and CMSM accomplishments in the area of homelessness to housing stability include:

**Homelessness to Housing Stability Strategy**
- Continued to provide an annualized amount of funding totaling $415,628 for 2010 to implement the Homelessness to Housing Stability Strategy (this figure includes the Region’s continued commitment to provide its former 20% share of the OSIS program at $15,514).
- The first Homelessness to Housing Stability Strategy (2007-2010) was implemented successfully, with 90% of the actions either complete or in-progress.

**Persistent Homelessness**
- Expanded Streets to Housing Stability program (1 FTE at Working Centre, 1 FTE in Cambridge).
- The Supportive Housing of Waterloo (SHOW) building was completed and began housing people in June 2010.
- STEP Home brochure was updated.
- Targets to house 150 people approaching or experiencing persistent homelessness were achieved.

**Homelessness Partnering Strategy**
- Implemented six community programs through the federal Homelessness Partnering Strategy (HPS) funding 2009-2011.
- HPS funding announced for another 3 years (2011-2014), initiated Community Planning process.

**Emergency Shelter Program**
- Added a new youth-specific emergency shelter and completed monitoring.
- Continued to utilize Emergency Shelter Guidelines as a quality assurance tool.
- Implemented 1% Per Diem increase.
- Updated the Emergency Shelter Referral Protocol and the Cold Weather Plan

**Domiciliary Hostel Program**
- Completed third year monitoring process for compliance with Domiciliary Hostel Standards.
- Added five new homes under the Domiciliary Hostel Program, two with traditional models (Trinity Village Studios and Kaljas Homes) and three with alternative models (SHOW, Argus, Saginaw House).
- Created the first Domiciliary Hostel Program Annual Report.
- Updated a number of tools and documents for the Domiciliary Hostel program.

**Transitional Housing Program**
- Added a new Families and Transition (FIT) house, for a total of 4 FIT homes.

**Data and information**
- Implemented the Homelessness Individual and Family Information System (HIFIS) at two new sites (Safe Haven and ROOF).
- Continued to support HIFIS at nine sites through seven Service Providers.
- Year 2 (of 3) implementation of the Data Integration Project. Created data guide, data templates, and monitored variables.
- Supported the local Homelessness to Housing Umbrella Group (HHUG) to release their third annual Housing Stability Report Card and continued to support the Housing Stability Training Centre.
- Updated the Region’s Social Planning, Homelessness website.
- Updated and released annual housing stability system brochures.
- Completed and released 13 two-page Strategy Summary Sheets.
APPENDIX C
DESCRIPTIONS OF CURRENT CHPP FUNDED PROGRAMS

The following program descriptions are grouped under longer term housing stability programs (e.g., supportive housing) and shorter term housing stability programs. Each description summarizes information about the program, its funding history, and its needs. The particular CHPP objectives addressed by each program are also identified:

1. To improve access to and connect households that are experiencing homelessness with the system of community services;
2. To support households experiencing homelessness to obtain and keep longer-term housing; and
3. To assists households at risk of homelessness to maintain housing.

**Longer Term Housing Stability Programs**

**Cambridge Shelter Corporation – Supportive Housing (Meeting Objectives #2 & #3)**
This program was previously funded through the Provincial Homelessness Initiative Fund. Supportive housing is provided through 20 units at the Bridges for adults 16 years and older. Landlords are also recruited from the private rental market to transition residents (as they are ready) to more independent living situations. The program is currently funded through CHPP at $37,070 and they are seeking an additional $29,919 to maintain current levels of programming.

**House of Friendship – Supportive Housing (Meeting Objectives #2 & #3)**
This program was originally funded through Supports to Daily Living. The House of Friendship provides 95 units of supportive housing through Cramer House, Eby Village, and Charles Village. Cramer House was established in 1985 and provides supportive housing to nine single men in a shared living environment. Eby Village opened in May 1990 designed to serve 64 single male and female adults. Charles Village opened in 2005 designed to serve 22 single male and female adults (including two barrier-free units). The program is currently funded through CHPP at $257,738 and they are seeking an additional $41,462 to maintain current levels of support.

**K-W YWCA – Supportive Housing (Meeting Objectives #2 & #3)**
This program was originally funded through Supports to Daily Living. Lincoln Road is an innovative non-profit housing project for women and their children established in 1989. Lincoln Road provide supportive housing for single women and women-led families who have experienced persistent difficulty finding and maintaining adequate housing. It is comprised of 45 units, four of which are wheelchair accessible. They were seeking an additional $45,864 to their existing CHPP allocation of $171,863 to hire one additional Community Support Worker for children’s programming. The housing typically serves twenty resident children in need of additional support.

**Shorter Term Housing Stability Programs**

**Argus Residence for Young People – Shelters to Housing Stability (Meeting Objectives #2 & #3)**
The Shelters to Housing Stability program is a component of STEP Home (support to end homelessness) and was originally modeled on learnings from the Provincial "Hostels To Homes" pilot (operated in five other Ontario communities from 2007-2010), and Toronto’s successful “Street to Homes” program. Staff at the emergency shelter provides intensive, flexible support to shelter residents approaching or experiencing persistent homelessness to find and maintain housing (for a minimum of one year) with a ratio of one staff to ten participants. Currently, there are three emergency shelters in Waterloo Region that receive Regional HHSS funds for the Shelters to Housing Stability program. This is the first year Argus is incorporating the Shelters to Housing Stability program and they have been allocated CHPP funding in the amount of $24,886 and have requested an additional $15,114 to provide the level of support required for this position.
Cambridge Shelter Corporation – Welcome Aboard (Meeting Objectives #1, #2 & #3)
This program was originally funded through the Provincial Homelessness Initiative Fund. The Welcome Aboard drop-in is open seven days a week providing a safe indoor place each day for over 100 people experiencing or at-risk of homelessness. Programs include a daily meal program, showers, laundry facilities, weekly medical and foot care clinic, literacy counseling, addiction support groups, identification clinics, assistance with accessing drug and alcohol treatment, job and volunteer placements, assistance with accessing and maintaining housing, mailbox, dedicated phone lines, message centre as well as assistance with food, clothing and furniture. Welcome Aboard is the only centre in Cambridge offering daily services to this population. CHPP funding currently assists with 11% ($15,857) of the operating expenses for this program. They are seeking $52,473 additional funding to sustain current level of programming, representing approximately 40% of operating expenses.

Lutherwood – Families in Transition Program (Meeting Objectives #1 & #2)
This program was originally funded through the Emergency Hostel Redirection Fund. The Families in Transition (FIT) Program provides support to families experiencing homelessness across the Region of Waterloo in accessing safe affordable housing and comprehensive social services. A Support Worker assists families to identify and achieve goals towards gaining stability and developing skills for independent living. The FIT Program not only provides program participants with support in housing but also works with family members on education, parenting, employment, work preparation, childcare, transportation and health issues. Their current CHPP allocation is $50,723.

Lutherwood – Rent Bank and Eviction Prevention Program (Meeting Objective #3)
This program was previously funded through the Region and the Provincial Homelessness Initiative Program. The Rent Bank and Eviction Prevention Program was established in 2001 with a goal of preventing homelessness through the provision of information, advocacy, and a fund to assist tenants with rent and rental arrears. Eligible applicants can access up to two months arrears in the form of an interest-free loan with a lenient repayment strategy. Beyond arranging loans, the Rent Bank Coordinator spends a significant amount of time linking tenants to available resources in the community, supporting clients in financial literacy, follow-ups, and advocating with landlords, property management companies and other community partners to prevent homelessness. CHPP funding supports a portion of the program operating costs while the loan fund is supported through the Provincial Rent Bank program and loan repayments. The program currently receives $69,529 through CHPP and is seeking an additional $92,310 to maintain service at two locations.

Reaching Our Outdoor Friends (ROOF) Youth Street Outreach (Meeting Objectives #1, #2 & #3)
This program was originally funded through Off the Street – Into Shelter. The OSIS Youth Outreach Program first began in October 2001 and offers street outreach services across the Region of Waterloo in order to assist youth in moving from the street into emergency, time-limited or permanent housing. Originally, CHPP also funded the Direct Support Program; however, CHPP funding for this program was lost in 2006. In 2010, they received funding from the National Crime Prevention Council to enhance the Youth Street Outreach program to two FTE. They are currently funded through CHPP at $22,804 and have requested an additional $79,196 to maintain the current level of support for two FTE. For safety reasons, two rather than one outreach staff is required and staff resources need to be enhanced in order to retain qualified and experienced staff.
TO:        Chair Sean Strickland and Members of the Community Services Committee

DATE:      April 12, 2011

FILE CODE: H18-70

SUBJECT:   VOLUNTEER PROGRAMS AT REGION OF WATERLOO MUSEUMS - 2010

RECOMMENDATION:

For information.

SUMMARY:

The volunteer opportunities available at the Waterloo Region Museum, Joseph Schneider Haus and McDougall Cottage encourage community engagement in these museums, and enhance the visitor experience. In 2010, 540 volunteers contributed 12,362 hours to the Waterloo Region Museum, 195 individuals contributed 5,668 hours at Joseph Schneider Haus, and 2,202 hours were contributed at McDougall Cottage. In addition, 603 volunteers contributed 4,263 hours to the Waterloo Wellington Children’s Groundwater Festival and 385 volunteers contributed 2,742 hours to Doors Open Waterloo Region. In total, more than 1700 volunteers contributed more than 27,200 hours to the Region’s museums and related events.

Although museum volunteer statistics remain fairly constant, national trends indicate that volunteer recruitment and retention is becoming more difficult and competitive across Canada. The most recent research shows that the volunteer experiences individuals are looking for are changing significantly. Individuals are looking for group opportunities, use of their professional skills, clearly defined positions, flexible schedules, short term commitments and two way relationships that meet their needs and goals. The museums’ volunteer programs will need to adapt to these changes in order facilitate these shifts and to optimize volunteer recruitment and retention. Fostering meaningful volunteer engagement is not just a capacity issue, but a strategic one that must evolve with the trends to meet the needs of the museums and the volunteers themselves.

The Region and its museums are partners in the National Volunteer Week activities planned in the community from April 10 to April 16, 2011. Each year, communities across Canada set aside this week to honour and celebrate the efforts of individuals who generously donate their time and talents to make their communities a better place to live. The Region will place “thank you” ads in the Cambridge Times, Waterloo Chronicle and the Record during National Volunteer Week.

The Waterloo Region Museum will also host the annual Volunteer Appreciation Breakfast for volunteers of the three museums, Region of Waterloo Library, and the Waterloo-Wellington Children’s Groundwater Festival, on Wednesday, April 20 from 7:30 a.m. to 10 a.m.

REPORT:

Waterloo Region Museum

The Waterloo Region Museum has a very strong and diverse volunteer base. Volunteers provide a pool of experience, knowledge and expertise that complements staff resources. They also provide a critical
link to the community by actively promoting and supporting the museum. Volunteer efforts are visible in many aspects of museum programs and services.

Visitors can stroll through the living history village and watch volunteers aged 16 to 85 bring history to life. They may appreciate the stunning hand knitted sweaters or perfectly sewn skirts created by Kerstin Reaume, or watch Alison Jackson and Rebecca Gillian demonstrate the fine art of handwork. Along the way they can immerse themselves in the sights and scents of beautiful historic gardens maintained by a team of more than 20 dedicated volunteers. Others enjoy the simple sound of a clock keeping perfect time thanks to Gerry Kraak or enjoy musical performances lead by Shalagh Cassidy and Marie Skelding. During the Christmas season visitors delight in shortbread and fig pudding. Volunteers Belle Beaudette, Patricia Butler, Pam Cressman, Lois Edwards and Diane McHutchion spent four months baking more than 8,000 cookies and other historic treats.

Since 1990, a small group of adults from K-W Rehabilitation Services have been keeping the community up to date on the latest museum events by assisting with the mailing of promotional materials. During the winter season another team of volunteers has been working to inventory and repair the museum’s extensive reproduction costume collection. As well, in preparation for the opening of the exhibit gallery several new conservation volunteers joined our team. These are just a few of the experiences made possible through the efforts of hundreds of volunteers.

Public interest in the new museum resulted in an overwhelming number of requests to volunteer. More than 200 application packages were mailed out and 90 new volunteers were placed. Staff anticipate this trend will continue as the exhibit galleries open and the museum operates year round.

Community support and involvement for the Waterloo Wellington Children’s Groundwater Festival continues to grow. Partnerships with more than 14 local high schools, two local universities and environmental organizations result in more than 500 hundred enthusiastic and knowledgeable volunteers participating at the Festival each year. Since 1996, more than 7,500 volunteers have contributed more than 50,000 voluntary hours!

The Friends of the Waterloo Region Museum made significant contributions to the site including launching a successful Storytelling Series, offering a series of popular heritage craft and garden workshops, and hosting another very successful Starry Night.

Joseph Schneider Haus Museum

Volunteers have been an essential element in the success of the Joseph Schneider Haus for almost 30 years. In 2010, JSH volunteers continued to perform their regular responsibilities, along with many ‘one-off’ events and envelope stuffing sessions. Volunteers contributed time weekly, participated in monthly committee meetings or assisted with events such as the Quilting Bee, Easter Egg Hunt, and the Heritage Showcase.

The museum’s successful Junior Interpreter Program, which is comprised of a dedicated group of 24 boys and girls between the ages of eight and 17, continues to be an important part of the living history interpretation offered at the museum. Not only do the Junior Interpreters complete their monthly shifts, they also assist at special events throughout the year, such as the Egg Hunt and March Break. The JIs contributed 488 hours in 2010.

Volunteers continue to work at the reception desk, assisting staff with general reception duties, greeting visitors and making gift shop sales. One dedicated individual has volunteered for the last 13 years to assist with collections management projects. The museum is also fortunate to have two retired teacher/librarians who have taken on the task of cataloguing the museum’s library holdings.
The Friends of Joseph Schneider Haus continue to make a significant contribution to the life of the museum. The programs they support and administer annually include the Folk Artist Residency, the Edna Staebler Research Fellowship, the Quilt Block Contest and the Museum Gift Shop. In any given year, however, it is the resident Folk Artist who commits and delivers the greatest number of individual hours to the museum; the 2010 resident artist was Basket Maker, Wendy Durfey of Rockwood.

**McDougall Cottage**

The base of support for and awareness of McDougall Cottage is steadily growing; each year more individuals participate in and assist with programming. A volunteer group has been helping with the presentation and adjudication of the Annual Wee Quilt Challenge, now in its seventh year, and a group of more than 25 musicians regularly takes part in the popular kitchen ceilidhs and Scottish music sessions gathering from as far away as Elora and Burlington. In 2010, two pipers from the local community volunteered to pipe down the sun from the banks of the Grand River each Thursday in July, August and September, reminding Cambridge residents of the presence of McDougall Cottage in the cultural landscape. They received a generous amount of support and attention on each of the evenings and will be repeating their mini-performances this summer.

Our Scotsman-in-the–garden, John Tennant, was assisted again this year by master gardener Irene Thurston and collectively, they contributed more than 320 hours of love and attention to the wee Cottage gardens. Other volunteers have performed a variety of services to advance the programmes of the Cottage including photography, special event delivery, demonstrations and gardening.

Toward the end of the McDougall year, a group of supporters from Cambridge and elsewhere in the region, clients of a wide variety of Cottage offerings over the years, gathered as a focus group. The event was designed to provide an opportunity for these individuals to brainstorm programming ideas and to give staff feedback on programmes and promotions.

This initiative provided extremely positive feedback, and resulted in a core group forming a Friends of McDougall Cottage. This fledgling group, though small, is in scale with the Cottage itself and it will go forward into 2011 when a more definite mission will be developed and its supporting role more clearly defined.

Volunteer hours contributed to McDougall programmes and services in 2010 exceeded 2,200 hours, surpassing 2009 totals and indicating again that McDougall support continues to grow.

**Doors Open Waterloo Region**

In 2010, Doors Open Waterloo Region hosted more than 45 historic sites. Each site is responsible for providing volunteers for the day. The 2010 event attracted a record number of 385 volunteers who contributed 2,742 hours.

**Volunteer Recognition and Support**

Celebrating volunteer achievements is essential to attracting and retaining dedicated volunteers. Museum staff recognizes the importance of recognition, and it is an ongoing and integral part of the volunteer management process. The staff seek to notice and value individual contributions both informally and formally.

The annual Volunteer Appreciation Event for volunteers in all Regional programs was held at the Waterloo Region Museum on Sunday, December 5, 2010, International Volunteer Day. More than 500 volunteers and their family members enjoyed an afternoon of entertainment, treats and traditional Christmas celebrations.
In 2010, seven individuals from the Waterloo Region Museum received Provincial Volunteer Service Awards. They were: Angie Felgendreher-5 years, Sharon Thornton-5 years, Ross Edwards-10 years, and Harriet Schaefer-10 years. Rachel Pringle, Adam Benninger and Victoria Roth received Youth Awards.

Five volunteers from Joseph Schneider Haus received Provincial Volunteer Service Awards: Joy Bettschen—five years; Karl Kessler—10 years; Linda Lantz—10 years; Sharon Spall—30 years; Amelia Hankins—Youth-5 years.

Also, Joy Bettschen received the Provincial Senior of the Year Award in recognition of her outstanding dedication and contributions to Joseph Schneider Haus.

In January 2010, several new volunteer management software features were implemented. Regional volunteer programs and Waterloo Region Police Services began using the new online Volunteer Information Centre. Sunnyside Senior’s Services, Joseph Schneider Haus and the Waterloo Region Museum introduced kiosks that allow volunteers to sign in and record their hours electronically and receive program updates. The Waterloo Region Museum is in the process of testing a new online volunteer application process.

Area Municipal Consultation/Coordination

The Coordinator of Volunteer Services at the Waterloo Region Museum provides expert advice to Area Municipal Volunteer coordinators on request. This report will be shared with Area Municipal staff.

CORPORATE STRATEGIC PLAN:

The volunteer opportunities and recognition programs provided through the Region’s museums support the Region’s values of Service, Respect, Innovation and Collaboration.

FINANCIAL IMPLICATIONS:

NIL

OTHER DEPARTMENT CONSULTATIONS/CONCURRENCE:

The Regional Volunteer Advisory Committee with Department representatives from across the corporation, and with the support of the Directors of Employee & Organizational Effectiveness and Community Services, continue working toward the development and implementation of consistent volunteer management practices and standards.

ATTACHMENTS:

NIL

PREPARED BY: Antoinette Duplessis, Assistant Curator, Joseph Schneider Haus
Susan Burke, Manager/Curator, Joseph Schneider Haus/McDougall Cottage
Deborah Young, Coordinator of Volunteer Services, Waterloo Regional Museum

APPROVED BY: Rob Horne, Commissioner of Planning, Housing and Community Services
TO: Chair Sean Strickland and Members of the Community Services Committee

DATE: April 12, 2011

FILE CODE: D12-40/KBT/ANNREP

SUBJECT: THIRTEENTH ANNUAL REPORT OF THE KISSING BRIDGE TRAILWAY ADVISORY BOARD

RECOMMENDATION:

For information.

SUMMARY:

When the County of Wellington and Regional Municipality of Waterloo jointly created the Kissing Bridge Trailway Advisory Board in May 1998, the Terms of Reference required the Board to report to both Councils each year on its activities. At its meeting of February 24, 2011, the Board adopted the attached report to be submitted as its Thirteenth Annual Report for the year 2010 (Attachment 1).

REPORT:

The Kissing Bridge Trailway runs through parts of the County of Wellington and the Region of Waterloo from Guelph to Millbank. Currently there are three discontinuities in the Trailway due to missing bridges across the Grand and Conestogo Rivers and a tributary of the Nith River east of Millbank.

In 2010, the Steward Groups responsible for the operation and maintenance of the Trailway continued on with work from previous years as they conducted a variety of projects and activities including trail resurfacing, maintenance and beautifying the Trailway. These improvements have had a positive impact on the profile and use of the trail, particularly among local residents. Use of the Kissing Bridge Trailway continues to increase as it becomes better known and recognized as an accessible route for walkers and cyclists. The Village of Millbank Association, which was added as a sixth Trailway Steward Group in 2009, continues to work with Perth County, Perth East Township, and Region of Waterloo staff to replace the bridge east of Millbank.

The following are highlights from the Thirteenth Annual Report of the Kissing Bridge Trailway. The full report is attached to Report P-11-040.

The Trailway Advisory Board met three times in 2010. For the most part, the meetings focused on activities involving development of infrastructure and maintenance required to ensure that Trailway users are provided with a safe and enjoyable experience.

Mike Curtis, representative of the Guelph Hiking Trail Club was re-elected Chair of the Trailway Advisory Board for 2010. Bill Strauss the representative of Waterloo Region was re-elected to serve as Vice Chair.
Trails Open Ontario

The Kissing Bridge Trailway was featured twice in 2010 Trails Open Ontario, which is a province-wide nature heritage program promoting trail use. The Guelph Hiking Trail Club offered a six hour guided tour on April 24, 2010 and the advisory board hosted a two hour tour on September 12, 2010.

Millbank Village

In 2010, the Township of Perth East donated $15,000 toward the cost of the Millbank bridge replacement. The Village of Millbank Association is covering the cost of replacing the deck using railway ties, installing railings, and paying part of the engineering fees. Local contractors have offered to assist with the installation of decking. Funding options to cover the costs of bridge installation are being pursued, including Trillium and TD Friends of the Environment. When the bridge is installed, there will be a good opportunity to hold a local event to celebrate.

Distance Marker Signage

Most well-developed trails have mileposts or distance markers as a convenience to trail users. A prototype distance marker sign was approved by the Board. The Region’s sign shop fabricated the markers on aluminum sign blanks to be mounted on posts driven into the ground next to the Trailway. By the end of 2010, most steward groups had installed distance marker signage, based upon locations determined using GPS.

Benches

The prototype of the standard benches to be used along the trail was installed in 2010 by the Elmira Lions Club.

Boomer Creek Bridge

After Regional Design and Construction staff identified some weather-related deterioration of the abutments of the small bridge over Boomer Creek near Linwood, the Linwood Lions Club had an engineering firm carry out a detailed inspection. This is the only original railway bridge left on the Trailway. The bridge was deemed suitable for winter snowmobile use, but repairs are needed. Drawings have been prepared detailing the required repairs for review by Regional Transportation and Environmental Services staff. The Golden Triangle Snowmobile Club has a proposal to work with the Linwood Lions Club on the necessary repairs to the bridge.

Brochure

Interest in the Kissing Bridge Trailway continues to grow, but the Trailway remains relatively unknown across the Waterloo-Wellington region. The Trailway brochure which was redone in colour in 2008 has been popular and has been reprinted several times. The brochures can be obtained at any of the Regional and County libraries and information centres as well as at some area Bed and Breakfasts.
Fundraising

The completion of the Trailway depends in large measure upon successful fundraising by the individual Trailway Steward Groups. Each group has held activities to generate moneys for trail construction. The Board has developed a brochure for use by steward groups in fundraising initiatives. Experience to date has shown that fundraising is more effective when members of the community groups approach others in their respective social and business networks to solicit contributions to their group’s Trailway project rather than seek a donation to the Kissing Bridge Trailway as such. The brochure assists the fund-raisers in setting the larger context of each group’s work. A donation form was also created in 2008 to assist steward groups in their fundraising efforts.

Other means by which funds can be raised for Trailway activities include applying for grants designated for trail development. Funding opportunities are available from a variety of sources including the TD Friends of the Environment Fund, Ontario Trillium Foundation, Recreational Infrastructure Canada, Wal-Mart, Home Depot and Unilever through Tree Canada. Projects eligible for such grants include the construction of boardwalks and kiosks.

Activities Planned for 2011

Bridge Construction

Regional staff will continue to work with the Trans Canada Trail Foundation to explore financial and engineering options to replace the Grand River and Conestogo River bridges.

Access to Katherine Street

The completion of the Cox Creek bridge is forcing the Board and the Guelph Hiking Trail Club in particular to consider creating an 850 metre access trail or ramp from the Trailway up to the east side of Katherine Street because this intersection is grade separated, and the side slopes of the Trailway are very steep and densely treed with cedar. The access trail will permit users easy access between the Trailway and Katherine Street which is the designated detour route on the east bank of the Grand River. Such a trail will also likely be associated with a small staging area and parking lot off Katherine Street. Even after the anticipated replacement of the Grand River bridge a short distance to the west, however, a staging area will be required at this location to permit easy access to the Grand River.

Kiosks

In 2011, the installation kiosks is expected to be completed with the inclusion of section-specific Trailway information including local points of interest and local advertising. Three kiosks remain to be installed at appropriate locations in the westernmost sections of the Trailway.

Fundraising

In 2010, Trailway Advisory Board member Doug Cerson put forward a proposal to organize an annual rail event. A subcommittee (Mike Curtis, Denise Boyd-Dunlop and Sarah Wilhelm) met to explore possibilities for such an event. The “Spring on the Trail” event is scheduled for May 14, 2011. The event is intended to promote activities along the length of the trail. It is hoped that the event will be successful in attracting participants and sponsors, and help to raise the local profile of the Trailway. The priority for the event is to raise funds for the two major bridges required across the Conestogo River (near Wallenstein) and the Grand River (near West Montrose).
**Inspection of Trailway for Hazards**

During 2011, Trail Condition Reports will be completed by each of the steward groups. Trailway inspections enable the various steward groups to take the required actions in a timely fashion in order that all Trailway users will be able to enjoy themselves safely.

In conclusion, the Trailway Advisory Board expects 2011 to be another activity filled year along the entire length of the Trailway. The Advisory Board is confident that the enthusiasm generated by the addition of the Village of Millbank Association community group and the planned “Spring on the Trail” event will provide increased overall support for the Kissing Bridge Trailway.

**Area Municipal Consultation/Coordination:**

Staff liaise with the Townships of Wellesley and Woolwich as required. The Township of Woolwich trails co-ordinator attends Trailway Advisory Board meetings on a regular basis, and the Mayor of Woolwich is the Regional representative on the Board.

**CORPORATE STRATEGIC PLAN:**

Focus Area Two of the Region of Waterloo’s Strategic Plan (Strategic Focus 2007-2010) speaks to managing and shaping growth to ensure a liveable, healthy, thriving and sustainable Waterloo Region. One of the Strategic Objectives is to “Enhance, develop, promote and integrate sustainable and active forms of transportation (public transit, cycling and walking).” The Kissing Bridge Trailway provides 44 kilometres of readily accessible walking and cycling trail through Woolwich and Wellesley Townships and adjoining areas of Wellington County. The Trailway has been identified as a major bicycle route in the Regional Cycling Master Plan.

**FINANCIAL IMPLICATIONS:**

NIL

**OTHER DEPARTMENT CONSULTATIONS/CONCURRENCE:**

Structural engineers in the Transportation and Environmental Services Department provide invaluable technical advice on bridges along the Trailway. Legal Services also advises on legal matters pertaining to the operation of the Trailway.

**ATTACHMENTS:**

Attachment 1: Thirteenth Annual Report of the Kissing Bridge Trailway Advisory Board for the Year 2010

**PREPARED BY:** Albert Hovingh, Principal Planner, Environmental and Stewardship Planning

**APPROVED BY:** Rob Horne, Commissioner of Planning, Housing and Community Services
Thirteenth Annual Report
of the Kissing Bridge Trailway Advisory Board
for the Year 2010

Submitted to the Councils of

The County of Wellington
and
The Regional Municipality of Waterloo

February, 2011
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Thirteenth Annual Report  
of the  
Kissing Bridge Trailway Advisory Board for 2010

Introduction
In September 1997, the County of Wellington and Region of Waterloo jointly leased a 44.5 kilometre stretch of abandoned rail right-of-way from the Province for development as a multi-use recreational trailway between the outskirts of the City of Guelph and the Village of Millbank. Since then, the lease has been renewed and currently runs until 2012. During the winter and spring of 1998, the County and Region concluded Trailway Steward agreements with five community groups to develop and operate sections of the Trailway. They are as follows:

<table>
<thead>
<tr>
<th>Segment</th>
<th>Trailway Steward Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guelph to Grand River</td>
<td>Guelph Hiking Trail Club</td>
</tr>
<tr>
<td>Grand River to East Limit of Elmira</td>
<td>Conestogo-Winterbourne Optimist Club</td>
</tr>
<tr>
<td>East Limit of Elmira to Wallenstein</td>
<td>Lions Club of Elmira</td>
</tr>
<tr>
<td>Wallenstein to Linwood (Ament Line)</td>
<td>Linwood Lions Club</td>
</tr>
<tr>
<td>Linwood (Ament Line) to Millbank</td>
<td>Golden Triangle Snowmobile Association</td>
</tr>
</tbody>
</table>

In May 1998, the County and Region jointly approved Terms of Reference for the Trailway Advisory Board, and appointed fifteen persons and four alternate representatives to the Board. Section 1.8 of the Terms of Reference states that the Board "will prepare an annual report to the Councils of the County of Wellington and Regional Municipality of Waterloo on its activities, initiatives, and proposals for the coming year." This is the twelfth such annual report, and covers the year 2009.

In 2009, the Village of Millbank Association signed a co-stewardship agreement with the Golden Triangle Snowmobile Association and the County and Region to become steward of the segment between the Perth Waterloo boundary and Road 121 in Millbank. The Association now has a representative and alternate on the Board like the other Trailway Steward Groups.

During 2010 the steward groups carried out a range of activities including trail maintenance, installation of distance markers, construction of a prototype bench, and improving the overall appearance of the Trailway. The Village of Millbank Association has been working with Perth East Township and the County of Perth to replace a bridge over a tributary of the Nith River in Millbank. These activities have had a positive impact on the profile and use of the trail, particularly among local residents.

Trailway Advisory Board
The Trailway Advisory Board met three times in 2010. For the most part, the meetings focused on activities involving development of infrastructure and maintenance required to ensure that Trailway users are provided with a safe and enjoyable experience. With the knowledge and enthusiasm of board member Doug Cerson, the development of an annual trail event is in the works.

Mike Curtis, representative of the Guelph Hiking Trail Club was re-elected Chair of the Trailway Advisory Board for 2010. Bill Strauss the representative of Waterloo Region was re-elected to serve as Vice Chair.

The term of the Linwood Lions Club alternate expired at the end of 2010 and a replacement was nominated to replace Mel Herrfort of the Village of Millbank Association, who passed away in 2009.
New appointments were approved by the County and the Region for a three-year term beginning in 2011.

Renewal of Trailway Lease
The Trailway Lease is currently set to end in 2012. Both the Region and the County intend to seek a more permanent arrangement with the Province in light of the investment that would be involved in constructing a bridge over the Grand River. The Ontario Realty Corporation (ORC) has at different times indicated that it is satisfied with the maintenance of the property to date. During the lease negotiation, the Trans Canada Trail will be addressed.

Trans Canada Trail
A major gap in the Kissing Bridge Trailway continues to be the Grand River near West Montrose in Woolwich Township. The missing bridge results in a significant detour for trail users travelling between Guelph and Elmira and has been identified as a major gap in the Trans Canada Trail in Southern Ontario. Regional Transportation and Environmental Services staff are providing technical advice on potential design solutions which address the configuration of the century-old abutments and piers which remain from the original bridge.

The County of Wellington has been working with adjoining landowners and local communities to align a section of the Trans Canada Trail along a portion of the former CN right-of-way between the eastern end of the Kissing Bridge Trailway and Elora. This is an essential link to connect the Waterloo-Wellington segment of the Trans Canada Trail to the route further east. In addition, the City of Guelph is preparing the southern approach to the Trailway as well as the connection to the Kissing Bridge Trailway. This will link the eastern terminus of the Trailway with the River Run Centre in downtown Guelph. In 2002, it was determined to link the two trailways through the G.R.C.A.-owned Marden Tract.

Ongoing negotiations of County and City of Guelph staff have not secured necessary user lease agreements with Hydro One. Due to a prohibition of snowmobiling in the corridor by Hydro One, the Fergus/Elora/Belwood Snowmobile Club has withdrawn its earlier offer to steward this section. New steward group support will need to be secured to help build and maintain the trail.

When user lease agreements are in place for this 17 km trail, consideration will be given to bringing it under the auspices of the Kissing Bridge Trailway Advisory Board. The Board has already supported this concept in principle.

Trailway Usage

Trails Open Ontario
The Kissing Bridge Trailway was featured twice in 2010 Trails Open Ontario, which is a province-wide nature heritage program promoting trail use. The Guelph Hiking Trail Club offered a 6 hour guided tour on April 24, 2010 and the advisory board hosted a 2 hour tour on September 12, 2010.

Trail Use Complaints
The Region received complaints of farm equipment being moved back and forth across and along the trail. The concerns related to a farm just east of Elmira, which is on the portion of the trail under stewardship by the Conestogo-Winterbourne Optimists Club. Based upon inspection, it appeared that there was no obvious damage to the trail in the area. The Board determined that no further action would be required at this time.

An additional complaint was received regarding a tent along the trail at Arthur Street and Snyder Avenue in Elmira. The tent was dismantled by police and hasn’t been re-installed.
Capital Improvements

Millbank Village

The first priority for the Village of Millbank Association is the installation of a bridge over the stream east of Millbank (Figure 1) in order that the trailway connection can be completed into Millbank. An old rail bridge in the County of Perth is being evaluated as it is of generally suitable length. As the bridge was engineered to handle rail traffic, it would be sufficiently strong for trail use, but would require a new deck. Technical studies are being carried out by Perth County to determine what alterations would be required, and Region of Waterloo Design and Construction staff has provided valuable technical advice.

In 2010, the Township of Perth-East donated $15,000 toward the cost of the Millbank bridge replacement. The Village of Millbank Association is covering the cost of replacing the deck using railway ties, installing railings, and paying part of the engineering fees. Local contractors have offered to assist with the installation of decking. Funding options to cover the costs of bridge installation are being pursued, including Trillium and TD Friends of the Environment. When the bridge is installed, there will be a good opportunity to hold a local event to celebrate.

Information Kiosks

In 2009 four information kiosks (Figure 2) were completed, three in Wellington County and one in the Region of Waterloo. General trail maps were mounted on one side of the display panel. The intention is to complete the kiosks with the inclusion of section-specific Trailway information including local points of interest and local advertising. Three kiosks remain to be installed at appropriate locations in the westernmost sections of the Trailway. The kiosks will be painted using Korzite paint, manufactured in Guelph.

Trail Surfacing

When the railway was abandoned, the ties were removed leaving the track ballast loose. Over the years, some sections of the Trailway have been heavily used by pedestrians and vehicles from neighbouring farms. This has packed the ballast to the point that it is relatively comfortable for walking and generally acceptable for
mountain bike use. In other sections, however, the ballast remains almost as loose as it was when the ties were pulled. Walking is unpleasant and cycling virtually impossible in such sections. Grading and packing and surfacing with fine material such as stone dust continue to be required in these sections in order to make the entire trail surface conducive to easy and comfortable use by walkers and cyclists (Figure 3).

As has been the case in previous years, some of the Steward Groups applied stonedust to parts of their section, most often to fill holes and hazards (low wet spots and ruts). The Elmira Lions Club has decided to stop actively grooming the trail surface as they have found that over time grooming causes a separation of the coarser stones and finer gravel resulting in a slippery walking surface.

The Guelph Trail Hiking Club is hoping to raise funds to construct an access route up from the Trailway to the side of the overpass on Katherine St. North just east of the Grand River.

Distance Marker Signage
Most well-developed trails have mileposts or distance markers as a convenience to trail users. A prototype distance marker sign was approved by the Board. The Region’s sign shop fabricated the markers on aluminum sign blanks (see left) to be mounted on posts driven into the ground next to the Trailway. By the end of 2010, most steward groups had installed distance marker signage, based upon locations determined using GPS.

Benches
The prototype of the standard benches to be used along the trail was installed in 2010 by the Elmira Lions Club.

Boomer Creek Bridge
After Regional Design and Construction staff identified some weather-related deterioration of the abutments of the small bridge over Boomer Creek near Linwood, the Linwood Lions Club had an engineering firm carry out a detailed inspection. This is the only original railway bridge left on the Trailway. The bridge was given the okay for winter snowmobile use, but repairs are needed. Drawings have been prepared detailing the required repairs for review by Regional engineering staff. The Golden Triangle Snowmobile Club has a proposal to work with the Linwood Lions Club on the necessary repairs to the bridge.

Fencing
The Fencing Sub-committee is headed by Glen Martin, agricultural community representative from
Woolwich Township, who is very knowledgeable about fencing. In a number of cases, high-tensile wire fencing has been used in place of the standard paige-wire fencing on which the 1997 cost estimates were based. This is marginally less expensive than the paige wire fencing, and is actually preferred by most of the landowners.

In recent years, the requests for fencing have been few indicating that in general there are few problems being experienced by landowners adjacent to the Trailway. There were no fence requests in 2010.

**Other Concerns**

**Brochure**

Interest in the Kissing Bridge Trailway continues to grow, but it still remains relatively unknown across the extent of the Region and the County. The Trailway brochure which was redone in colour in 2008 has been popular and has been reprinted several times. The brochures can be obtained at any of the Regional and County libraries and information centres as well as at some area Bed and Breakfasts.

**Finances**

The cost of developing recreational trails can be high. When the Kissing Bridge Trailway was established, it was intended that most of the cost would be borne by the community groups who are jointly developing the Trailway. To date, the majority of the funds expended on the Trailway have come from the Trailway Steward Groups or private donations.

The Region contributed $38,000 to the Kissing Bridge Trailway in 1999, and a further $20,000 in 2000. The Board has developed a formula to allocate this money among Trailway Steward Groups based on infrastructure development costs within Regional boundaries. In addition, Wellington County provided $10,000 in 2001 to assist the Guelph Hiking Trail Club install barrier gates at intersections along its section. The County provided $25,000 in each of 2004, 2005 and 2006 to grade and apply stonedust to the Trailway. The County continues to fund ongoing maintenance (mowing and weed control) in Guelph/Eramosa.

**Costs to Complete the Trailway**

Planning to complete the development of the Trailway necessitates an accurate identification and estimation of costs. As conditions on the Trailway have become better understood, and as Trailway Steward Groups develop a better understanding of the costs of gates, bridges, and re-surfacing, we are now able to estimate the remaining expenditures to complete the Trailway. Estimated costs are set out in Table 1. The portion of the trail and planned parking areas within Wellington County are now complete.

<table>
<thead>
<tr>
<th>Infrastructure</th>
<th>Original Requirement Cost</th>
<th>Required for Completion No. Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signposts</td>
<td>51 $1,785</td>
<td>0 $0</td>
</tr>
<tr>
<td>Barrier Gates</td>
<td>50 $40,000</td>
<td>0 $0</td>
</tr>
<tr>
<td>Parking Lots</td>
<td>9 $9,000</td>
<td>6 $6,000</td>
</tr>
<tr>
<td>Bridges</td>
<td>10 $167,000</td>
<td>1 $60,000</td>
</tr>
<tr>
<td>Ramp at Reg. Rd. 23</td>
<td>1 $21,000</td>
<td>1 $21,000</td>
</tr>
<tr>
<td>Grading</td>
<td>43.35 $43,350</td>
<td>15.23 $15,230</td>
</tr>
<tr>
<td>Stonedust</td>
<td>43.35 $281,775</td>
<td>21.19 $137,735</td>
</tr>
<tr>
<td>Kiosks</td>
<td>5 $4,500</td>
<td>3 $2,700</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$568,410</strong></td>
<td><strong>$242,665</strong></td>
</tr>
</tbody>
</table>

*Note: The cost of bridges excludes the large bridges at the Grand and Conestogo Rivers*
Fundraising
The completion of the Trailway depends in large measure upon successful fundraising by the Trailway Steward Groups. Each group has held activities to generate moneys for trail construction. The Board has developed a brochure for use by steward groups in fundraising initiatives. Experience to date has shown that fundraising is more effective when members of the community groups approach others in their respective social and business networks to solicit contributions to their group’s Trailway project rather than seek a donation to the Kissing Bridge Trailway as such. The brochure assists the fund-raisers in setting the larger context of each group’s work. A donation form was also created in 2008 to assist steward groups in their fundraising efforts.

Other means by which funds can be raised for Trailway activities include applying for grants designated for trail development. Funding opportunities are available from a variety of sources including the TD Friends of the Environment Fund, Ontario Trillium Foundation, Recreational Infrastructure Canada, Walmart, Home Depot and Unilever through Tree Canada. Projects eligible for such grants include the construction of boardwalks and kiosks.

Motorized vehicles
Electric Bikes (E-bikes) are becoming a concern on Trails throughout the province. After some discussion, the Board concluded that these sorts of vehicles would be considered a motorized vehicle and therefore, not be allowed. It was also noted that a motorized wheel chair would be allowed for accessibility purposes. No action is being taken at this time, but the issue will be discussed further as needed.

Activities for 2011

Bridge Construction
Regional staff will continue to work with the Trans Canada Trail Foundation to explore financial and engineering options to replace the Grand River and Conestogo River bridges.

Access to Katherine Street
The completion of the Cox Creek bridge is forcing the Board and the Guelph Hiking Trail Club in particular to consider creating an 850 metre access trail or ramp from the trailway up to the east side of Katherine Street because this intersection is grade separated, and the side slopes of the trailway are very steep and densely treed with cedar. The access trail will permit users easy access between the Trailway and Katherine Street which is the designated detour route on the east bank of the Grand River. Such a trail will also likely be associated with a small staging area and parking lot off Katherine Street. Even after the anticipated replacement of the Grand River bridge a short distance to the west, however, a staging area will be required at this location to permit easy access to the Grand River.

Kiosks
In 2011, the kiosks will be completed with the inclusion of section-specific Trailway information including local points of interest and local advertising. Three kiosks remain to be installed at appropriate locations in the westernmost sections of the Trailway. The kiosks will be painted using Korzite paint, manufactured in Guelph.

Fundraising
The amount of money raised to date by the respective Trailway Steward Groups from private and corporate donors in the community is impressive. It demonstrates that local individuals value the Trailway in their community, and are prepared to provide financial support for its completion. Further, the Trailway has also attracted contributions from larger fundraising organizations such as
the Trillium Foundation, TD Friends of the Environment, RInC, Wellington County and Waterloo Region. Providing signage at all intersections and kiosks at strategic locations is anticipated to further motivate additional giving.

In 2010, Doug Cerson put forward a proposal to organize an annual trail event. A subcommittee (Mike Curtis, Denise Boyd-Dunlop and Sarah Wilhelm) met to explore possibilities for such an event. The “Spring on the Trail” event is scheduled for May 14, 2011. The event is intended to promote activities along the length of the trail. It is hoped that the event will be successful in attracting participants and sponsors, and help to raise the local profile of the Trailway. The priority for the event is to raise funds for the two major bridges required across the Conestogo River (near Wallenstein) and the Grand River (near West Montrose).

Inspection of Trailway for Hazards
During 2011, trail Condition Reports will be completed by each of the steward groups. Trailway inspections enable the various steward groups to take the required actions in a timely fashion in order that all trailway users will be able to enjoy themselves safely.

Conclusion
In conclusion, the Trailway Advisory Board expects 2011 to be another activity filled year along the entire length of the Trailway. The Advisory Board is confident that the enthusiasm generated by the addition of the Village of Millbank Association community group and the planned “Spring on the Trail” event will provide increased overall support for the Kissing Bridge Trailway.

Respectfully submitted,

Mike Curtis, Chair (2010)
Trailway Advisory Board
February 24, 2011
REPORT:  P-11-018/F-11-008

REGION OF WATERLOO
PLANNING, HOUSING AND COMMUNITY SERVICES
Housing
FINANCE DEPARTMENT
Treasury Services

TO:                      Chair Sean Strickland and Members of the Community Services Committee
DATE:        April 12, 2011                      FILE CODE:  D26-01
SUBJECT:    UPDATED BUILDING CONDITION AUDIT AND CAPITAL RESERVE ANALYSIS FOR COMMUNITY HOUSING PROVIDERS

RECOMMENDATION:

THAT the Regional Municipality of Waterloo take the following actions regarding Community Housing capital reserve requirements, as outlined in Report P-11-018/F-11-008, dated April 12, 2011:

   a) Renew the urgent request to the Province of Ontario and Canada Housing and Mortgage Corporation to provide adequate and sustainable funding to Community Housing Providers in Waterloo Region, as described in Report P-11-018/F-11-008; and

   b) Forward a copy of this report to MPs and MPPs representing Waterloo Region, the Ministry of Municipal Affairs and Housing, the Ministry of Public Renewal and Infrastructure, the Chair of Canada Mortgage and Housing Corporation, the Association of Municipalities of Ontario (AMO), and all Community Housing Providers in Waterloo Region.

SUMMARY:

When the transfer of Community Housing from the Province of Ontario to the Region of Waterloo was completed in 2001, it was clear that capital reserve funds for all Community Housing Providers were less than what was needed to address necessary capital repair issues. The degree of the shortfall and how long it would take to address the funding gap was unclear. In 2002, the Region undertook a Building Condition Audit (BCA) and Reserve Fund Study (RFS) in order to quantify the capital repair needs and financial shortfall for Community Housing Providers. One of the recommendations in this report was a direction to staff to conduct a major review and update of the capital reserve plan every three to five years (Report P-02-038/F-02-029). Accordingly, the RFS that quantifies the financial shortfall was updated (Report P-07-046) in 2007 and in 2010 both the BCA and RFS studies were updated.

The deficiency of capital reserves for housing in Waterloo Region is substantial and shared by most Service Managers. In August 2006, the Social Housing Services Corporation (SHSC) released a summary of findings related to the issue of “Preservation of Housing Stock in Ontario.” SHSC identified the magnitude of underfunded reserves associated with aging housing stock to be in the order of approximately $1.3 billion in the Province of Ontario. In many instances, the ability of municipalities to address the need for capital repairs to Community Housing developments, in their respective capacities as Service Managers, is quite limited. The current Housing Reserve Fund, after allowing for existing commitments, is not sufficient to meet all the capital needs of aging housing stock within the Region.
The BCA/RFS in 2002 determined that a $35.4 million investment would be required at that time, to address the identified long term capital repair need of $71.9 million over the next fifteen years. The updated 2010 BCA/RFS has now determined that a $44.1 million investment today (net present value) is required to address the identified long term capital repair need of $75.1 million over the next fifteen years (including the financial benefits already received from Social Housing Renovation and Retrofit Program – SHRRP). A table summarizing the results is on page 4 of this report.

In 2008 and 2009, two capital repair funding programs were implemented by the Region of Waterloo through funding provided by the Federal and Provincial governments. In total, the Region has received over $24 million in funding for capital repairs in Community Housing; this funding has been fully allocated. The funding assisted Community Housing Providers to complete over 250 capital projects and energy efficiency improvements and has made a positive contribution to the physical asset of the buildings in Waterloo Region, but a substantial funding gap remains.

The purpose of this report is to share the results of the 2010 BCA and RFS, and recommend that Regional Council renew their request to senior levels of government to provide adequate funding to Community Housing Providers in Waterloo Region. This report does not include the Waterloo Region Housing (WRH) units. Building Condition Audits for those units are being conducted by Facilities staff over three years, 2010 – 2012, with projected capital needs to be considered by Council, as part of an updated capital budget. Financing for WRH is provided from three sources of funding: federal grants, tax levies and contributions from the Housing Reserve Fund where needed.

REPORT:

The Social Housing Reform Act, 2000 (SHRA), and its associated regulations, designated the Region of Waterloo as Service Manager responsible for the funding and administration of local Community Housing programs transferred from the Province. The Region assumed ownership of 2,558 Community Housing units (now managed by Waterloo Region Housing) and full responsibility for overseeing over 50 ‘Prescribed Housing Providers’. Prescribed Providers are legislated in the SHRA and include former Local Housing Authorities (WRH), Provincial Co-operatives, Private Non-Profits, and Municipal Non-Profits such as Region of Waterloo Community Housing Inc. (ROWCHI). Prescribed Providers account for approximately 7,500 Community Housing units and are accountable to the Region for their operations, including governance, financial reporting and overall compliance with the SHRA. Of significant concern at the time of transfer was the adequacy of the capital reserve funds for Community Housing Providers, which was difficult to assess at the time due to lack of information.

Deficiency of Capital Reserves

Capital reserves are typically established to fund the repair and replacement of major components of Community Housing sites throughout Waterloo Region. Contributions to the capital reserves of the Region’s Community Housing Providers are included in the annual subsidy that each Non-Profit or Co-operative Housing Provider receives from the Region. These contributions are calculated in accordance with a funding formula legislatively mandated by the Province of Ontario.

In April 2002, Regional Council received a report (Report P-02-038/F-02-029) outlining the immediate need for up to $35.4 million in funding from senior levels of government for the purpose of making necessary repairs to the approximately 5,000 units of Community Housing operated by various Non-Profit and Co-operative Housing Corporations throughout Waterloo Region. The financial analysis component of the audit was based on the condition of the housing stock, anticipated expenses over the next 15 years, the expected contributions to the reserve fund and the balance in the capital reserves at the time of the transfer of administration. The 2002 report determined that the immediate funding of $35.4 million was required to fund the projected shortfall of $71.9 million needed to fund required capital repairs over the next fifteen (15) years.
Staff undertook a further financial review in April 2007 (Report P-07-046) to update the funding shortfall. Using a series of assumptions, including most current capital reserve fund balances, interest rates on reserve funds, spending patterns of housing providers, capital work deferrals and an overall increase in construction cost, the long-term need was then estimated to be $134.9 million over the next 15 years (to 2022). An immediate contribution of $78 million was required to meet the long-term funding need. This shortfall amount did not include the additional 2,558 units of Community Housing owned and operated directly by the Region of Waterloo (former Local Housing Authorities), as this program has an annual budget for capital costs.

The deficiency of capital reserves for housing in Waterloo Region is significant and is a concern shared by many Service Managers. In August 2006, the Social Housing Services Corporation (SHSC) released a summary of findings related to the issue of “Preservation of Housing Stock in Ontario.” SHSC identified the magnitude of underfunded reserves associated with aging housing stock to be in the order of approximately $1.3 billion in the Province of Ontario. In many instances, the ability of municipalities to address the need for capital repairs to Community Housing developments, in their respective capacities as Service Managers, is quite limited. The current Housing Reserve Fund, after allowing for existing commitments such as the projected capital needs for WRH, is not sufficient to meet all the capital needs of aging housing stock within the Region (see Financial Implications).

**Capital Funding Programs**

Since the transfer in 2001, the Region of Waterloo and Community Housing Providers have requested the Province provide financial assistance for necessary capital work, as the Community Housing developments transferred had current and future capital repair needs. The first funding specifically directed at capital repairs for Community Housing Providers was made available in 2008 as part of the 2008 Ontario Budget. The Provincial Government announced a $100 million “Social Housing Capital Repair Fund.” The funding was a one-time payment to be divided amongst all 47 Service Managers and was allocated based on each Service Manager’s current share of the Community Housing stock. The Region of Waterloo’s allocation under this program was $3,269,668. The funding was allocated, as a loan, to Community Housing Providers through a Business Case submission process. The purpose of the provincial funding was to respond to emergency capital repairs, health and safety repairs and energy efficiency improvements that would achieve tangible results and deliver positive impacts on Community Housing residents. In total nine (9) Community Housing Providers completed eighteen (18) projects, including mould remediation, flat and sloped roof replacements, window replacement and bathroom renovations. In addition, a portion of this funding was used to complete the BCA/RFS addressed in this report (per Report P-08-088).

A second stream of funding became available in 2009 as the Provincial and Federal governments jointly invested more than $1.2 billion in affordable housing as part of the Economic Stimulus Funding. Of this amount, $704 million has been invested in the Provincial Social Housing Renovation and Retrofit Program (SHRRP). Funding allocated to Service Managers mirrored the “Social Housing Capital Repair Fund” allocation process. The Region’s allocation under this program was $19.04 million (including another $19,179 received in February 2011), plus an additional $2.4 million to provide funding for the regeneration of Kitchener Housing Inc.’s 16 units located on David Street in Kitchener.

The funding provided through these two programs has been fully allocated to over 250 capital projects throughout Waterloo Region. The funding has had a positive impact in Waterloo Region through the completion of necessary capital repairs and energy efficiencies. The successful delivery of these programs was grounded in the funding commitment from the Ministry of Municipal Affairs and Housing (MMAH), and the spirit of collaboration with the Community Housing Providers, MMAH and the Region of Waterloo.
Projects ranged from emergency capital repair items like flat roof replacement and elevator modernizations to energy efficient upgrades like high efficiency natural gas fired furnaces and insulated glazed windows. From the overall allocation, $2.5 million was committed to the replacement of 2,450 fridges and 2,200 13L toilets with more energy efficient models. Some of the capital projects completed from this capital funding not only alleviated funding restraints to capital reserves, but have also reduced utility bills which the Community Housing Providers will benefit from on an annual basis.

**2010 Building Condition Audit, Energy Audit and Reserve Fund Study**

In September 2008 (Report P-08-088), Regional Council approved funding to update the 2001 Building Condition Audits (BCA), utilizing funding provided through the Provincial “Social Housing Capital Repair Fund”. The purpose of these BCA updates was to identify the current capital needs of each individual Community Housing Provider and assist the Providers in developing a responsive strategy that includes a practical capital reserve plan and preventative maintenance program. The updated building condition audits included a building assessment study, a reserve fund study, and an energy audit of each existing Community Housing Provider that is subject to the Social Housing Reform Act, 2000 (SHRA) or eligible under the Social Housing Agreement (SHA), not including the 2,558 Waterloo Region Housing (WRH) units.

The building condition audits, energy audit and capital reserve fund study was completed by an external engineering consultant (IRC) in late 2009. The consultant provided a report for each Community Housing building, including current condition of individual building components, remaining useful life, and an analysis of the impact of capital repairs on capital reserve funds. The consultant also included findings relating to energy use and opportunities to realize some energy efficiencies. Reports have been reviewed with each Community Housing Provider’s Board and each Board will use this report as a planning tool for future capital repairs.

The updated 2010 study has now identified that immediate funding of $44.1 million is required to fund the projected shortfall of $75.1 million needed for capital repair needs over the next fifteen (15) years. On average, the identified funding shortfall has increased from $15,105/unit to $15,642/unit. This increase is not as significant as expected. Factors impacting the results include deferred capital work resulting in higher capital reserve funds, infusion of capital repair funding from senior levels of government and fewer units under Region administration. The Operating Agreement of one Federal Community Housing Provider with 50 units expired in 2008 and is not included in the 2010 BCA. In addition, six other Providers with adequate reserve balances were not included in the 2010 BCA. The following table summarizes the results of studies.

<table>
<thead>
<tr>
<th>Year of Report</th>
<th>Net Present Value</th>
<th>Shortfall over next 15 years</th>
<th>Shortfall per unit basis</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>2002</td>
<td>$35.4 million</td>
<td>$71.9 million</td>
<td>$15,105</td>
<td>Based on 6% discount rate</td>
</tr>
<tr>
<td>2010</td>
<td>$44.1 million</td>
<td>$75.1 million</td>
<td>$15,642</td>
<td>including SHRRP funding; 5 % discount rate</td>
</tr>
<tr>
<td>2010</td>
<td>$47.5 million</td>
<td>$80.1 million</td>
<td>$16,679</td>
<td>excluding SHRRP funding; 5% discount rate</td>
</tr>
</tbody>
</table>

Notes: 2007 results not included as the results are not comparable. The 2007 included only a financial review of the RFS and not a full BCA process.

Discount rates changed from 6% in 2002 to 5% in 2010 to reflect current market rates.
Additional Benefits of the BCA/RFS

The primary purpose of the BCA/RFS is to identify the current capital needs of each individual Community Housing Provider, to assist the Providers in developing a responsive strategy that includes a practical capital reserve plan and preventative maintenance program; and to assist Providers in understanding the existing and future financial contributions to their Capital Reserve Fund that will be needed to complete the necessary work. This purpose has been achieved.

One of the additional benefits to this process is an electronic planning tool for each Housing Provider to prepare annual capital budgets, identified timeframes of when individual Providers’ capital reserve funds may be exhausted and to explore funding options beyond that timeframe (i.e. leveraging assets, fund raising, external grant or loan programs or accessing the Housing Reserve Fund). Other benefits include an enhanced understanding of the Region-wide need for additional capital reserve funding, and a process to validate our requests to senior levels of government to provide adequate funding to Community Housing Providers in Waterloo Region.

Stabilization Planning for Housing Providers

As a whole, Housing Providers, including Prescribed Providers and those developed under the AHS, have continued to provide well-managed, safe and affordable housing in Waterloo Region. Housing staff continue to provide support and oversight to ensure that this is the case. However, some Providers have faced a number of challenges in the delivery of affordable housing, specifically around meeting their financial obligations and completing necessary capital repairs. Although the infusion of capital repair has provided relief, a few providers continue to have difficulty. Staff is developing a proposed Stabilization Planning Model, including an Asset Management Strategy, for Regional Council’s consideration at a future date that will help identify “Providers at Risk” (PAR) and create a strategy to assist Boards in stabilizing their Community Housing. The intention of proposed Bill 140 – Strong Communities through Affordable Housing Act (outcome of the Provincial Long-Term Affordable Housing Strategy) is to change legislation to give Service Managers more tools to manage Housing Providers in difficulty.

Next Steps

Staff recommends that Regional Council reiterate its request to senior levels of government for a financial contribution to address the historic underfunding of capital reserves that occurred when responsibility for Community Housing was transferred to the Region of Waterloo in 2001. This request should note that the updated amount of funding needed now to address the identified capital repair shortfall over the next 15 years is now estimated to be $44.1 million. Provincial and Federal government funding has had a positive impact and reduced the funding now needed (net present value) to complete necessary capital repairs over the next 15 years from $47.5 million to $44.1 million.

Regional staff will continue to work with other Service Managers in urging the Province of Ontario and the Federal Government to properly fund capital repairs associated with Community Housing developments, which should have been provided at the time of transfer.

Area Municipal Consultation and Coordination

Area Municipal staff will be provided a copy of this report and Regional staff will continue to notify Community Housing Providers funded through these programs of the need to obtain all necessary permits and approvals from the Area Municipalities and associated agencies and utilities.
CORPORATE STRATEGIC PLAN:

Council’s Strategic Focus Five includes “Optimize the use of existing infrastructure and ensure it is adequately maintained.” Although the Region does not own the Community Housing sites, they are considered an asset to the Region in providing safe affordable housing.

Focus Area Six includes actions to continue to ensure all Regional programs and services are responsive, efficient, effective and accountable to the public. This report seeks to both maintain and, where possible, enhance this focus area by ensuring that the Region of Waterloo and its Housing Providers operate sustainably. Focus Area One includes actions to effectively use and manage energy resources.

FINANCIAL IMPLICATIONS:

The initial building condition audit and reserve fund study for housing providers, presented in 2002, determined that the reserves held by the providers would not be adequate to undertake the capital repairs required for the next fifteen years. An amount of $35.4 million was required in 2002 to meet the projected $71.9 million shortfall through 2015. Based on the updated BCA and RFS completed in 2009/2010, a contribution of $44.1 million is required now to meet the reserve fund shortfall of $75.1 million projected for the next fifteen years. There is still a significant shortfall in capital reserve funds to adequately address capital needs for Community Housing Providers, even with the 2008 and 2009 injections of capital repair funding from senior levels of government.

The Region’s Housing Reserve Fund was established to 1) maintain the existing housing stock; 2) replace any lost units; and 3) increase the supply of affordable housing. The Housing Reserve Fund balance is $45.4 million at year end 2010. Of that amount, $2.7 million is committed to Non-Profits and Co-operatives, and $23.0 million will be required for Waterloo Region Housing capital needs over the next ten years. As noted previously, the BCA/RFS does not include the WRH units. Audits on those units are being done over three years - 2010-2012. The results of those audits could increase the need for capital funding for WRH beyond what is currently included in the capital forecast. In addition, Regional Council may consider contributions from the Housing Reserve Fund to assist with meeting the remaining commitments to the Affordable Housing Strategy. While the Housing Reserve Fund may be of some assistance, generally through a loan arrangement, in helping the Providers with reserve fund shortfalls, it is not sufficient to meet all the capital needs of the aging housing stock within the Region. There continues to be a clear and increasing need for funding from senior levels of government.

OTHER DEPARTMENT CONSULTATIONS/CONCURRENCE:

NIL

ATTACHMENTS:

NIL

PREPARED BY:  Jennifer Murdoch, Manager, Housing Program  
                Alba Michelucci, Financial Analyst  
                Deb Schlicter, Director, Housing  
                Angela Hinchberger, Director Financial Services, Treasury & Tax Policy

APPROVED BY:  Rob Home, Commissioner of Planning, Housing and Community Services  
               Larry Ryan, Chief Financial Officer
March 22, 2011

Linda Fabi
Director of Education
Waterloo Region District School Board
51 Ardelt Avenue
Kitchener, Ontario
N2C 2R5

Dear Linda,

I wanted to take this opportunity to acknowledge and thank you and your team at the Waterloo Region District School Board for the innovation and leadership you have demonstrated with the implementation of the new Full Day Early Learning Kindergarten initiative.

*With Our Best Future in Mind*, the landmark report by Ontario’s early learning advisor, Dr. Charles Pascal, established the vision for the program we are all now working to implement. It envisioned a fully accessible, high quality early learning opportunity for four-and-five-year-olds in all local schools across our province. The complexities and challenges faced by parents trying to arrange care for their children in the before and after school hours was addressed by the extended day program. The use of existing public infrastructure - our schools - in a program staffed by board employees who would be members of a team of professionals, provides a seamless early learning experience for the children.

In the recent provincial webcast on the extended day component of the Full Day Kindergarten program, your staff were exemplary in their ability to share your board’s experience, initiative and advice to others now moving to implement the full vision of the program. Your Executive Superintendent, MaryLou Mackie, exemplified the leadership that is so necessary when introducing such a transformational initiative as Full Day Kindergarten. She spoke about the opportunities and the challenges faced by your board as you and your staff worked to meet the needs of your students and their families. Scott Podrebarac, your System Administrator for the Early Learning Program clearly outlined the operational issues that needed to be addressed and spoke about the experiences of individual school teams in this first year of implementation.

The participation of Nancy Dickieson, Director of Children’s Services for the Region of Waterloo, and her comments about the municipalities’ role and consultations about the implementation of Full Day Kindergarten, spoke to the relationships and collaboration that exists between your school board and your community partners.
My colleagues in the Ministry of Education’s Early Learning and Child Care Division and I have been impressed with the work that you and your staff have accomplished in this first year of implementation of the Full Day Kindergarten initiative, your commitment to the vision of a high quality, seamless early learning experience for the children, service to their families and collaboration with the larger child care community in your region.

We have also appreciated your board’s willingness to share your expertise and insights and to accommodate the many requests that have come from our staff and other school boards across the province to visit your schools.

Thank you for the leadership that you and your Board of Trustees have demonstrated with the implementation of Full Day Kindergarten.

Sincerely,

Jim Grieve
Assistant Deputy Minister
March 28, 2011

Dear Community Partner,

The launch of the Provincial Early Learning Framework in 2009 following the vision set out in, "Our Best Future in Mind" is creating some exciting opportunities for young children and families. In Waterloo Region under the guidance of our Best Start Network, Region of Waterloo Children and Parent Services Committee (ROWCAPS), Children's Services is beginning to develop an Early Years System Plan. This plan will focus on how we can develop a system of services in our community that supports the developmental health of children prenatal to twelve years of age. As a community partner who provides services to children and families I would like to invite you to an information forum. The purpose of the forum is to provide an overview of system planning, service integration and to seek your input to shape a vision for Waterloo Region.

The forum will be held on Friday, May 13th, 2011 from 10:00 - 3:30 at the Holiday Inn, Fairway Road, Kitchener. Lunch will be provided, please register by May 01, 2011 by clicking on the on-line registration form link in the covering email.

I look forward to meeting with you in May and working together to develop a collaborative vision for children in Waterloo Region.

Sincerely,

Nancy Dickieson,
Director Children's Services
Region of Waterloo
519-883-2177
NDickieson@regionofwaterloo.ca
Ontario Association of Non-Profit Homes and Services for Seniors (OANHSS)

OANHSS is the provincial Association representing not-for-profit providers of long term care, services and housing for seniors. Members include municipal and charitable providers of long term care homes, non-profit nursing homes, seniors’ housing projects and community service agencies.

Through the delivery of a full continuum of not-for-profit services, OANHSS members recognize the diverse and varying needs of seniors and attempt to meet these needs. Member organizations operate over 27,000 long term care beds and over 5,000 seniors’ housing units across the province.

The Ontario government has already noted in legislation its commitment to the promotion of long term care services by not for profit organizations, and Ontario residents have demonstrated a preference for not-for-profit long term care services.

End Notes

i According to Statistics Canada published data 86.5% of seniors voted in the last federal election compared to 44.2% aged 18 to 24 and 70.6% aged 25 to 55.

7,054,000 people 18 and over said they voted in the last provincial election. Of those people who responded that they voted, 2,680,000 were aged 55 and over, thus individuals over 55 make up approximately 38% of all ballots cast.

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Supportive Seniors’ Policy

Canada’s seniors, despite being a large and fast-growing part of our population, have not received attention from public policy makers commensurate with their contribution to society, their numbers or their political clout.

Across Canadian provincial and territorial jurisdictions, significant disparities exist with respect to accessibility of services, the costs and availability of services to seniors and appropriate and affordable seniors’ housing options.

While Canada is in a position to lead a transformation of seniors’ care across the country, Canadian seniors and their caregivers are currently being shortchanged.

The purpose of this Position Statement is to inform seniors’ policy direction for the next federal government.

Inter-Provincial Variation

Services and housing options for seniors vary from province to province and territory with a high degree of inconsistency in availability, accessibility, and costs. Because a significant proportion of caregiving is provided by family members, seniors may move from one jurisdiction to another to be closer to family to receive the support and advocacy that they need. However, services are not portable, costs vary, levels of care are inconsistent and in some cases are not even comparable.

A good example of a significant inconsistency between provinces/territories is related to long term care and each jurisdiction’s long term care residency requirements for eligibility. The Canadian Healthcare Association’s New Directions for Facility-Based Long Term Care states that, for example, the eligibility criteria for admission to long term care in Ontario does not include a residency requirement, while in BC, Alberta, and Manitoba (and others) there are provincial residency requirements. This clearly affects the ability of a long term care resident to move to another province or territory.

Too many of Canada’s seniors are living in situations where services do not match their needs. This is particularly the case in rural and remote areas.

Seniors’ Services and Housing Options

Most seniors prefer to live in their homes for as long as they can and when they need supports to do so, the supports and services are often difficult to find; there are long waiting lists; and services are prioritized as a budgeting measure and are therefore limited.

Affordable seniors’ housing options are insufficient, have long wait lists and do not meet the existing demographic need. Housing strategies do not foster assessment of current and future need and long term planning to meet the needs of communities and their senior residents.
The Solutions

Mental Health and Addictions
The documented incidence of dementia and other mental illnesses is reaching epidemic proportions among seniors. The actual incidence is much higher because best evidence indicates that two thirds of seniors’ mental illnesses are not diagnosed and therefore are untreated. Depression is a significant mental illness within the seniors’ population, yet it receives very little recognition and is therefore misunderstood, under-diagnosed and largely untreated.

Older adults are negatively impacted by a combination of ageism and the stigma associated with mental illness and addictions, plus a lack of trained and knowledgeable health care and social service providers and significant gaps in mental health services along the entire continuum of care.

Financial Barriers
Financial barriers that hinder the development of housing and services for seniors are significant. One such barrier is how GST rates are treated differently among various types of health care providers. Long term care currently does not qualify for the same GST rate as the hospital sector as an example, although the long term care resident population is increasing in acuity and exhibiting a higher incidence of chronic disease and disability.

The solutions proposed for the federal government will support the provinces and territories in better meeting the needs of seniors across the country. Our recommendations aim to achieve more consistency and portability across jurisdictions and improve seniors’ housing and mental health options and services, as these are currently the most pressing issue areas that negatively impact seniors across the country. These are also the areas in which we see the federal government having an opportunity to make a significant improvement by taking a strong leadership role.

If implemented, our recommendations will result not only in better outcomes and higher quality of life for older adults and their caregivers, but also in improved efficiencies leading to a more effective health care system.

Inter-Provincial Disparities
Lead the development of a federal/provincial/territorial agreement focused on developing consistency across jurisdictions on availability of publicly funded services and consistency of terminology. Ensure that accountability and incentive systems are put in place.

Mental Health
Develop a national policy on seniors’ mental health that focuses on health promotion, education and awareness, and accessibility of mental health programs and services for all older Canadians.

Seniors’ Services and Housing Options
Canadian seniors need the federal government to take a leadership role in housing and to facilitate cooperative working relationships between federal departments and provincial/territorial and municipal governments, particularly in the area of long term planning and strategies. As part of its leadership role, the federal government should lead the development of a framework and funding process (e.g., incentives) for seniors’ housing to encourage and support provinces and territories to develop full seniors’ housing continuums to ensure seniors may remain in their communities while accessing the most appropriate level of care when they require it, and to move along the continuum of care as their needs change.

Financial Strategies to Improve Care
In order to support better care delivery for seniors, develop strategies that reduce the financial barriers to seniors’ care providers. One example would be to apply the same GST/HST rates to charitable and not-for-profit long term care homes as currently apply to public hospitals. This change would not only conserve more dollars for bedside care and act as an incentive to service providers, it is also rational public policy.

Background
Seniors’ Demographics
By 2015, for the first time in our nation’s history, Canadians over 65 years of age will outnumber children. By 2056 the proportion of seniors aged 80 years and over will triple to about 1 in 10, compared with about 1 in 30 in 2005.

Mental Health
An absence in the diagnosis of mental illness in seniors is a significant problem – it is estimated that two thirds of seniors’ mental illnesses are not diagnosed and are therefore not treated. There is also a significant lack of resources, accessible expertise, and services specific to seniors or even available to seniors. Combined with stigma and ageist programs and services, access to the right care at the right time to improve or maintain mental health is far from a reality.

According to the 2010 Report of the Ontario Health Quality Council, depression is a significant problem among frail or elderly individuals with 22% of those living in long term care homes showing increasing symptoms of depression or anxiety in the three months preceding the study. Further, aggressive (responsive) behaviours, agitation or wandering, are common among long term care residents. Dementia is another prevalent mental illness affecting seniors, with 50 to 70 percent of long term care residents suffering from a form of dementia.
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Inter-Provincial Disparities
Lead the development of a federal/provincial/territorial agreement focused on developing consistency across jurisdictions on availability of publicly funded seniors’ services along with levels of service, portability of publicly funded services and consistency of terminology. Ensure that accountability and incentive systems are put in place.

Further, to address the problem of inadequate affordable housing, a long range affordable housing strategy with ongoing, multi-year funding commitments that would enable housing providers, provincial/territorial governments and municipalities to plan for the future is a priority.

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Making Seniors a NATIONAL PRIORITY

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December 2010

Ontario Association of Non-Profit Homes and Services for Seniors
7050 Weston Road, Suite 700, Woodbridge, ON L4L 8G7
(905) 851-8821 | www.oanhss.org
MEMORANDUM

To: Chair Sean Strickland and Members of the Community Services Committee

From: Cathy Bossenberry, Manager, Income Support
       David Dirks, Director, Employment and Income Support

Copies: Michael Schuster, Commissioner, Social Services

File No.: S09-01

Subject: FREE TAX CLINICS AT EMPLOYMENT RESOURCE AREAS

Background

Employment and Income Support (EIS) began participating as a community tax clinic site in 2008. This came forward as a result of a Canada Revenue Agency (CRA) policy to no longer host tax clinics at their office on Frederick Street; they asked if we would be willing to fill this gap in the community. CRA provided trained tax clinic volunteers and software; EIS hosted clinics in the Employment Resource Areas in both Cambridge and Kitchener. 670 tax filings were completed in 2008; approximately 80% of those were for Ontario Works or Ontario Disability Support Program participants.

2011 Approach

In 2011, EIS expanded the clinics to include all EIS ERAs: Cambridge, Kitchener and Waterloo. EIS provides the workspace and the staff in the ERAs support the volunteers with the scheduling and receiving of individuals. The same volunteers have supported these tax clinics since 2008.

This year, the service of Opportunities Waterloo Region (OWR) was engaged to act as the umbrella organization for the coordination of all the Waterloo Region community tax clinics. All clinics are now listed on the accesswaterlooregion.ca website. Also new this year is the collection of additional statistics on the anticipated refund or balance owing, postal codes to determine locations served as well as the number of dependents. In the Waterloo tax clinic alone, more than 60 individuals and families have been assisted with their returns and will receive more than $36,000 in refunds. The clinic assisted singles, families and seniors from both the cities and the townships.

With many government tax credits being linked directly to the completion of annual tax returns this is a key service for many in the community who are unable to complete their tax returns or cannot afford to have others complete them on their behalf. The Ontario Child Benefit, GST rebates, Guaranteed Annual Income System, Property Tax credits and others are only issued if
a return is completed. The success of the clinics and the 2011 expansion of these services indicate that this is a valuable service that EIS would look to continue in future years.

**Strategic Focus**

Hosting tax clinics and engaging **OWR** in the organization of all Regional non-profit clinics addresses the Region's Corporate Strategic Focus Area Six: Service Excellence, Objective 6.1 (to) Ensure all Regional programs and services are citizen/customer focused in order to meet the needs and expectations of the community.

For further information please contact David Dirks, Director, Employment and Income Support at Phone: 519-883-2179 or ddirks@region.waterloo.on.ca
MEMORANDUM

To: Chair Sean Strickland and Members of the Community Services Committee
From: David Dirks, Director, Employment and Income Support
Copies: Michael Schuster, Commissioner, Social Services
File No.: A02-20
Subject: STRESS-DISEASE CONNECTION CONFERENCE

Personal Services Coordinating Committee

The Personal Services Coordinating Committee is a committee of Social Services. It is chaired and resourced by Regional staff. Members include representatives from community agencies in such areas as crisis intervention, mental health, counseling, faith and spiritual needs, emergency services and first aid. The Committee plays a very important role in the development of the Waterloo Region Emergency Support Team (WREST).

The Committee’s purpose is the provisions of advice, direction and support during and after an emergency. The focus is upon the ongoing and psychological needs of those impacted by a catastrophe. An important activity is the annual conference to promote professional awareness and development in the provision of personal services in an emergency.

2011 Conference: Stress-Disease Connection

This will be the Committee’s 17th workshop. The Conference theme, Stress-Disease Connection “When the Body Says No” will be held on Wednesday, May 11, 2011 from 9:00 a.m. to 4:30 p.m. at the Sunshine Centre, Luther Village on the Park.

The conference will address a number of topics including: the nature of stress and its physiological impact; three major stressors (loss of control, uncertainty and conflict); our stressful work environment; the recognition and prevention of stress; and the way an understanding of others can inform and enhance the professional role.

Speaker

Dr. Gabor Mate, MD will lead the conference. He is a bestselling author of “When the Body Says No”, “Scattered Minds” and “In the Realm of Hungry Ghosts”. He also co-authored “Hold on to Your Kids”. As well he has written many articles and commentaries and presented at numerous conferences. Dr. Mate is presently staff physician at a clinic in Vancouver's...
Downtown Eastside, where many of his patients deal with drug addictions, HIV and other related challenges.

The professionals who will attend provide services to a varied and changing population experiencing loss, trauma and a variety of environmental health and economic challenges. This connection will impact both the client being served and the professional providing service. The fact that the conference is fully subscribed at 173 attendees suggests this is a topic of great interest to our caregiving community.

**Strategic Focus**

This conference and the work of the Personal Services Coordinating Committee addresses the Region’s Corporate Strategic Focus Area Three: Healthy and Safe Communities, Objective 3.4 (to) Coordinate and implement emergency management initiatives.

For further information please contact David Dirks, Director, Employment and Income Support at Phone: 519-883-2179 or email ddirks@region.waterloo.on.ca
MEMORANDUM

To: Chair Sean Strickland and Members of the Community Services Committee
From: Chris Harold, Supervisor, Information and Planning
       Linda Black, Manager, Vaccine Preventable Diseases
File No.: P14-20
Subject: 2011 SECONDARY SCHOOL SUSPENSION UPDATE

Background
Public Health is required to collect and maintain the immunization records of all students attending school in Waterloo Region, as per the Immunization of School Pupils Act (ISPA).

The Act requires students to be immunized against tetanus, diphtheria, polio, measles, mumps and rubella. If students do not provide an immunization record or legal exemption, they face suspension from school for up to 20 days or until documentation is received.

On April 5, 2011, Public Health enforced the ISPA legislation within the secondary school population in Waterloo Region.

Suspension Process
Since receipt of the recommendations of the internal audit of the annual suspension process (refer to Report C-A-08-002/PH-08-011), Public Health has strived to reduce the number of students suspended. To work towards this goal, the program recently implemented two initiatives to improve our client’s ability to submit their immunization information:

- Call centre technology to ensure all calls are answered between 8:30 a.m. to 4:30 p.m.
- Online immunization reporting website (https://e-immunization.regionofwaterloo.ca/)

Data comparing this year’s (2011) process to 2010 is as follows:

<table>
<thead>
<tr>
<th>Number of students eligible for suspension or suspended</th>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>End of January (reminder notices printed)</td>
<td>4,921</td>
<td>4,491</td>
</tr>
<tr>
<td>Number of suspension orders delivered</td>
<td>1,864</td>
<td>2,248</td>
</tr>
<tr>
<td>Suspension Day</td>
<td>795</td>
<td>987</td>
</tr>
<tr>
<td>End of suspension day</td>
<td>290</td>
<td>405</td>
</tr>
</tbody>
</table>

From March 31 to April 5, staff in the program answered over 1,300 phone calls. In addition, over 500 individuals were immunized at Public Health’s walk-in immunization clinics in Cambridge and Waterloo.

For further information please contact Linda Black, Manager, Vaccine Preventable Diseases, at lblack@regionofwaterloo.ca or 519-883-2006 ext. 5251.
<table>
<thead>
<tr>
<th>Meeting date</th>
<th>Requestor</th>
<th>Request</th>
<th>Assigned Department</th>
<th>Anticipated Response Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>07-Sep-10</td>
<td>S. Strickland</td>
<td>Staff report regarding the impact of the Public Health Needle Exchange Program on the incidence of blood-borne infections</td>
<td>Public Health</td>
<td>As part of Harm Reduction program report due in March 2011</td>
</tr>
<tr>
<td>28-Sep-10</td>
<td>Committee</td>
<td>Staff report regarding the impact of revised technology for Delivery of Social Assistance on applicants. Social</td>
<td>Services</td>
<td>early 2011</td>
</tr>
</tbody>
</table>