



Media Release: Friday, February 19, 2016, 4:30 p.m.

## **Regional Municipality of Waterloo**

### **Community Services Committee**

#### **Agenda**

Tuesday, February 23, 2016

1:00 p.m.

Regional Council Chamber

150 Frederick Street, Kitchener

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- 1. Declarations of Pecuniary Interest under the Municipal Conflict Of Interest Act**
  - 2. Delegations**
    - 2.1.** Trudy Beaulne, Social Development Centre Waterloo Region and KW VisitAble Housing Task Force Re: VisitAble housing in Waterloo Region

#### **Consent Agenda Items**

Items on the Consent Agenda can be approved in one motion of Committee to save time. Prior to the motion being voted on, any member of Committee may request that one or more of the items be removed from the Consent Agenda and voted on separately.

- 3. Request to Remove Items from Consent Agenda**
- 4. Motion to Approve Items or Receive for Information**
  - 4.1. PHE-PSV-16-01, Paramedic Services Performance Measurement Report – January to December 2015 (year-end) (Information)** 4
  - 4.2. PHE-IDS-16-01, Sexual Health Youth Strategy Update (Information)** 11

**4.3. CSD-IP-16-01, Immigration Partnership Update**

26

**Recommendation:**

That the Commissioner of Community Services be authorized to sign, on behalf of The Regional Municipality of Waterloo, an agreement with Her Majesty the Queen in Right of Ontario by its Ministry of Citizenship, Immigration and International Trade to provide funding in the amount of \$40,000 for use in connection with the Waterloo Region Immigration Portal under the Immigration Partnership, with such agreement to be in a form satisfactory to the Commissioner of Community Services and the Regional Solicitor;

That the 2016 Operating Budget for Community Services be increased by \$25,264 gross and \$0 net Regional Levy, for the Immigration Portal Development to be funded by the Ministry of Citizenship, Immigration and International Trade (MCIIT) as outlined in Report CSD-IP-16-01, dated February 23, 2016;

That the Commissioner of Community Services be authorized to sign, on behalf of the Regional Municipality of Waterloo, the grant letter agreements in connection with grants provided to assist with resettlement of Syrian newcomers, subject to such grants being approved by the Task Force overseeing the Immigration Partnership Fund for Syrian Newcomers and the form of grant letter agreement being satisfactory to the Commissioner of Community Services and the Regional Solicitor;

That the addition of 0.60 Temporary Full Time Equivalent be approved effective April 1, 2016 to June 30, 2017 for a Planner position for Community Services, Immigration Partnership as outlined in report CSD-IP-16-01, dated February 23, 2016;

And that the increase of 0.09 Temporary Full Time Equivalent be approved effective April 1, 2016 to December 31, 2017 to increase the Program Assistant position hours for Community Services, Immigration Partnership as outlined in report CSD-IP-16-01, dated February 23, 2016.

**4.4. CSD-HOU-16-01, Proposed Waiting List Assistance Program**

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**Recommendation:**

That the Regional Municipality of Waterloo authorize staff to implement the Waiting List Assistance Program as outlined in report CSD-HOU-16-01, dated February 23, 2016.

<b>Regular Agenda Resumes</b>
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**5. Reports – Planning, Development and Legislative Services**

- 5.1. PDL-CUL-16-02, Overview of Museum Collections Storage Needs and Possible Federal Funding Towards Expansion of Curatorial Centre** 36

**Recommendation:**

That the Regional Municipality of Waterloo take the following actions regarding a proposed expansion to the Region of Waterloo Curatorial Centre, as described in Report No. PDL-CUL-16-02, dated February 23, 2016:

- a) Initiate an application to the Canada Cultural Spaces Fund for submission in 2016, seeking funding for architectural fees, construction, storage systems and related expenses from the Government of Canada; and
- b) Forward this report to the Federal Minister of Canadian Heritage, and area Members of Parliament.

**Reports – Public Health and Emergency Services**

- 5.2. PHE-HLV-16-02, Public Health’s Role in Supporting School Health (Information)** 44

- 5.3. PHE-PSV-16-02, Paramedic Services Ambulance Service Review Update (Information)** 55

**6. Information/Correspondence**

- 6.1. Housing Stability System Evolution Newsletter – Winter 2016 (Distributed Separately)**

- 6.2. The Community Guide to End Homelessness in Waterloo Region (Distributed Separately)**

- 6.3. Council Enquiries and Requests for Information Tracking List** 59

**7. Other Business**

- 8. Next Meeting – March 22, 2016**

- 9. Adjourn**



**Report:** PHE-PSV-16-01

**Region of Waterloo**  
**Public Health and Emergency Services**  
**Paramedic Services**

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**To:** Chair Geoff Lorentz and Members of the Community Services Committee

**Date:** February 23, 2016                      **File Code:** P05-80

**Subject: Paramedic Services Performance Measurement Report – January to December 2015 (year-end)**

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**Recommendation:**

For Information

**Summary:**

The Paramedic Services Master Plan is well underway and will be brought forward to Council in Fall of 2016. The report will have in depth finding based on detailed data analysis and recommendations for Council to review, based on the goals of the project;

- a) Quality of Care
- b) The right care at the right time, and
- c) Resourcing levels to meet peak demand in a reasonable time

In the mean time the existing format for the Performance report is presented here to give a full year end review.

Key performance measures can assess how effective and efficient a program is at meeting specific objectives, priorities, and legislated mandates. The focus of this work is on quality and performance, with measurement being a means to provide information to help make decisions and better manage operations.

Monitoring these indicators over time will allow Region of Waterloo Paramedic Services to identify patterns and address the challenges that arise. Some highlights for 2015 (January to December) include:

Volume and Service Level

- There have been 39,020 calls dispatched, a measure of service demand, in Waterloo Region and represents the third year in a row of record call volume and an increase of more than 1,700 calls or nearly 5 calls more per day from last year.
- For 2015, the rate of calls per 1,000 population, a measure of service demand, is up 3.3 per cent, and the number of calls is up 4.7 per cent compared to 2014. The increase continues to outpace population growth, and was likely influenced by an aging population.

#### Compliance and Quality Assurance

- Compared to 2014, the regional 80<sup>th</sup> percentile response time to emergency calls has slowed 2.3 per cent (13 seconds) from 9 minutes 36 seconds to 9 minutes and 49 seconds in 2015; likely due to the continued increases in call volume being experienced, and also influenced by offload delay losses.
- With the exception of one warning system infraction dealt with in 2013, as indicated, there were no other warning system infractions identified by internal reviews in 2015.

#### Efficiency Indicators

- For 2015, Offload Delay losses are higher than those experienced during 2014 and 2013, and closer to the levels experienced in 2012 but are now trending in a more sustainable direction.
- Offload Delay improved greatly in the latter half of 2015 declining 44.9 per cent from the first quarter of 2015.
- After large increases in time spent in Code Yellow and Code Red in early 2015 levels have returned to near, but still slightly above, the historical averages.

#### Service and Quality Impact

- Service type indicators tend to fluctuate around the average over time, particularly when a small number of cases are involved. Currently all indicators are within acceptable ranges.

A 12-hour ambulance was added in July of 2015. As a result, the full impact of this latest additional resource will only be reflected in future performance reports.

#### **Report:**

The report contains four indicator categories:

1. Volume and Service Level (How much did we do?)
2. Compliance and Quality Assurance (How well did we do it?)
3. Efficiency (How efficiently did we do it?)
4. Service and Quality Impact (How well is the service being performed?)

To produce this report and the indicators included in it, a number of data sources were

utilized. Due to the nature of Paramedic Services, the Region of Waterloo relies on a joint effort with external parties to access accurate and reliable data in as timely a fashion as possible. The Ambulance Dispatch Reporting System (ADRS), Central Ambulance Communications Centre (CACC) and St. Mary's Hospital are sources of data for a number of indicators. For the remaining indicators, data values have been pulled from the Paramedic Services TabletPCR (an internal tool used to track information and data relevant to calls and patient care reporting). The Paramedic Services Performance Measurement Report will undergo additional development in the future as key indicators are identified.

#### Summary of Results:

##### Volume and Service Level

- The rate of calls per 1,000 population, a measure of service demand, is up 3.3 per cent from 2014, and continues to outpace population growth, and was likely influenced by an aging population.
- The 39,020 calls dispatched in Waterloo Region, a measure of service demand, represents the third year in a row of record call volume and an increase of more than 1,700 calls or nearly 5 calls more per day compared to last year.
- A quarterly record of 9,958 of calls were dispatched in Waterloo Region in Q4 2015.
- For Q4 2015 Unit Utilization (UU) increased from a low of 28 per cent at 5am, peaking at 52 per cent at 11am, before gradually decreasing the rest of the day.
- Unit Utilization measures the percentage of an hour that ambulances are actively engaged in responding to calls, as opposed to waiting for calls. When Unit Utilization exceeds a value of 40 per cent, it becomes difficult to ensure an ambulance will be available for the next call within a reasonable time.
- Staffing is partly based on patterns and predictions seen in Unit Utilization, and monitoring Unit Utilization allows for proactive planning to alter the deployment of staff to reach an appropriate level.
- Region of Waterloo Paramedic Services transported patients 81.1 per cent of the time while non-patient transports such as patient refusal, or other non-patient carrying instances made up the remaining 18.9 per cent of dispatched calls for 2015.
- Note that a 12-hour ambulance was added in each July of 2011, 2012, 2013, and 2015, and an emergency response unit was added in 2014. A 12-hour ambulance was added in July of 2015. As a result, the full impact of this latest, additional resource will only be reflected in future performance reports.

##### Compliance and Quality Assurance

- For 2015, Paramedic Services' 80th percentile response time to emergency calls (code 4) was 09 minutes and 49 seconds, 2.3 per cent (13 seconds) slower than 2014.

- From Q3 to Q4 in 2015, the 80th percentile response time to emergency calls (code 4) improved 0.3 per cent (2 seconds) from 09 minutes and 43 seconds to 09 minutes and 41 seconds, likely influenced by additional resources beginning to take effect, a slight easing in the growth of call volume being experienced, and unseasonably good road conditions.
- Paramedic Services has begun monitoring response parameters observed from urban, suburban, and rural perspectives, using an 80th percentile response time informal benchmark.
- Response times vary according to population and road density, which is a typical pattern in all EMS services
- With the exception of one warning system infraction dealt with in 2013, as indicated, there were no other warning system infractions identified by internal reviews in 2015.
- Chute time adherence remained slightly below the historical average for the quarter, as Region of Waterloo Paramedic Services continues work to improve compliance on this metric.

#### Efficiency Indicators

- For 2015, Offload Delay losses are higher than those experienced during 2014 and 2013, and closer to the levels experienced in 2012 but are now trending in a more sustainable direction demonstrated a decreasing trend from Q1 to Q4 in 2015.
- Overall, Paramedic Services is in a much more stable situation and better poised to deal with Offload delay issues in 2015 compared to previous years.
- Paramedic Services and local hospitals continue to collaborate to address the issue of Offload Delay and the ability of our services to address and limit Offload Delays to Paramedic Services. Strategies to address Offload Delay and return crews to the public for re-assignment are assisting in lowering and stabilizing our Offload Delay losses.
- Time spent in Code Yellow and Code Red increased in Q1 2015 before decreasing again through Q2, Q3, and Q4 and currently remains slightly above the historical average.

#### Service and Quality Impact

- Note that service type indicators tend to fluctuate around the average over time, particularly when a small number of cases are involved.
- The percentage of stroke patients taken to stroke facilities was slightly at or above the historical monthly average throughout the year.
- As any Return of Spontaneous Circulation (ROSC) is deemed to be positive, results for Return of Spontaneous Circulation indicator continued to track with the monthly average and remain in an acceptable range (variation is normal due to the small numbers of cases).

- Heart attack STEMI (ST-Segment Elevation Myocardial Infarction) Protocol compliance fluctuated around the historical monthly average, providing care in less 90 minutes 57.4 per cent of the time this quarter and 63.6 per cent for 2015.

**Corporate Strategic Plan:**

This report supports 2011-2014 Strategic Objective 5.3: Ensure Regional programs and services are efficient and effective and demonstrate accountability to the public, and is expected to support 2015-2018 strategic objectives related to Healthy, Safe and Inclusive Communities, and Responsive and Engaging government services.

**Financial Implications:**

Paramedic Services budgets are funded 50% by the Ministry of Health and Long Term Care and 50% through the local tax levy.

**Other Department Consultations/Concurrence:**

Information Technology staff from the Corporate Services Department collaborated with Public Health and Emergency Services staff on the production of this report.

**Attachments**

Appendix A: Paramedic Services Performance Measurement Report, for the period of January – December 2015 (year-end), produced January 19, 2016, Summary.

The detailed January – December 2015 (year-end) report is distributed separately for Councillors and is available online at the following link:

- January – December 2015 (year-end):  
[http://chd.region.waterloo.on.ca/en/researchResourcesPublications/resources/ParamedicServices\\_PerformanceMeasurement\\_Q4\\_2015.pdf](http://chd.region.waterloo.on.ca/en/researchResourcesPublications/resources/ParamedicServices_PerformanceMeasurement_Q4_2015.pdf)

**Prepared By:** **Stephen Van Valkenburg**, Director/Chief Paramedic Services  
**Jordan Steffler**, Strategic & Quality Improvement Specialist  
**Stephen Drew**, Health Data Analyst

**Approved By:** **Dr. Liana Nolan**, Commissioner / Medical Officer of Health

## Appendix A

Paramedic Services Performance Measurement Report, for the period of January – December 2015 (year-end), Produced January 19, 2016, Summary.

### A. Volume and Service Level Indicators<sup>1</sup>

Indicator	Previous Year (2014)	Current Year (2015)
Total number of calls* (a measure of service demand)	37,274	39,020
Rate of calls per 1,000 population* (a measure of service demand)	65.6	67.7
Unit utilization	38.1%	40.8%

### B. Compliance and Quality Assurance Indicators<sup>2</sup>

Indicator	Previous Year (2014)	Current Year (2015)
Paramedic Service's response time to emergency (code 4) calls*	09min 36sec	09min 49sec
Paramedic Service warning system use	100.0%	100.0%
Chute time adherence	92.4%	91.5%

Summary by Municipality			
Municipality	Response Time <sup>3</sup> Current Year (2015)	Total Call Volume	
		Previous Year (2014)	Current Year (2015)
Cambridge	10min 01sec	9,196	9,904
Kitchener	09min 04sec	17,947	18,416
Waterloo	09min 27sec	6,824	7,257
North Dumfries	13min 43sec	605	621
Wellesley	17min 48sec	284	319
Wilmot	16min 25sec	1,018	1,037
Woolwich	12min 59sec	1,400	1,466

<sup>1</sup> Volume and Service Level indicators can be forecasted, but do not necessarily require targets. They are monitored to identify trends to ensure appropriate action (if any) can be taken to address the changing demands on the service.

<sup>2</sup> Compliance and Quality Assurance indicators do have targets, and Paramedic Services strives to continually improve reporting period over reporting period, understanding variances and taking appropriate action.

<sup>3</sup> Year-end Summary based on data as of January 19, 2016 (for 2015).

**C. Efficiency Indicators<sup>4</sup>**

<b>Indicator</b>	<b>Previous Year (2014)</b>	<b>Current Year (2015)</b>
Offload Delay Measurement (# of 24 hour ambulance days)*	103.7	150.0
Code Yellow Status (% of total time)	9.3%	13.3%
Code Red Status (% of total time)	0.5%	1.1%

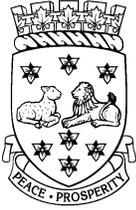
**D. Service and Quality Impact Indicators<sup>5</sup>**

<b>Indicator</b>	<b>Previous Year (2014)</b>	<b>Current Year (2015)</b>
Stroke Patients to Stroke Facilities*	86.9%	86.9%
Return of Spontaneous Circulation*	14.8%	13.5%
Heart attack (STEMI) protocol*	69.1%	63.6%

\*Indicator is captured in a similar fashion (with some variation in measurement) within a portion of the OMBI reporting process.

<sup>4</sup> Efficiency indicators provide tracking mechanisms to see overall system status/health. The target is to continually improve reporting period over reporting period, understanding variances and taking appropriate action.

<sup>5</sup> Service and Quality Impact indicators tend to fluctuate around averages, due to the shared nature of responsibility among multiple parties. They are monitored over time for trending to understand possible patterns and improvement opportunities



Report: PHE-IDS-16-01

## Region of Waterloo

### Public Health and Emergency Services

### Infectious Diseases, Dental and Sexual Health

**To:** Chair Geoff Lorentz and Members of the Community Services Committee

**Date:** February 23, 2016

**File Code:** P25-20

**Subject:** Sexual Health Youth Strategy Update

#### Recommendation:

For information

#### Summary:

On June 19, 2012, Regional Council endorsed the Waterloo Region Sexual Health Youth Strategy (PH-12-027). The Sexual Health Youth Strategy (herein referred to as the Strategy) was developed in 2012 by a committee comprised of Region of Waterloo Public Health staff and community partners as a result of a comprehensive review of sexual health programs and services available to youth in Waterloo Region (PH-10-052), and growing concern related to a steady increase in chlamydia rates among youth and the rate of teen pregnancy. Parents, an important partner, have been fully engaged in this process. This report provides a report of current progress on the program design and implementation.

Attachment 1 presents chlamydia cases and age-specific incidence rates for individuals 15 to 24 years of age (2009 to 2014) and pregnancy rates for females 15 to 19 years of age (2009 to 2013). It is hoped the Sexual Health Youth Strategy will contribute to an improvement in sexual health behaviours among youth and ultimately result in a decrease of incidence rates (which are societal outcome indicators). It is also important to note there is an upward trend provincially in the rates of sexually transmitted infections, and the Ministry of Health and Long-Term Care and Public Health Ontario are continuing work to identify contributing factors to this complex issue.

The Strategy is a multi-year plan outlining a series of activities which aim to promote healthy sexuality among youth and to provide a comprehensive, strategic approach for youth sexual health education, programs and services in Waterloo Region. Member organizations of the steering committee have been working collectively to prioritize, plan

and implement these activities. Attachment 2 lists the Sexual Health Youth Strategy Steering Committee members.

Since July 2012, a number of initiatives have improved how youth can access sexual health services and information in Waterloo Region. Key accomplishments include:

- Enhancing access to sexual health services at thirteen Waterloo Region District School Board secondary schools;
- The establishment of two new sexual health clinics for youth in Cambridge and Kitchener;
- The creation of a youth-friendly website ([www.doinit.ca](http://www.doinit.ca)); and
- The creation and distribution of “The Talk” from Tots to Teens resource for parents.
- The administration of a survey of parent-child communication about sexual health. Over 950 parents completed the survey. Results and next steps will be finalized in late Spring/early Summer 2016.

Due to the success of our collaborative efforts, the Steering Committee members have expressed interest in continuing this work beyond the original timeframe. Public Health is committed to coordinating future Strategy efforts. The Terms of Reference for the Committee will be updated accordingly, and the scope of future efforts will be determined over the next year.

An evaluation of the Sexual Health Youth Strategy, including opportunities for future refinement and collaboration, will be initiated in 2017.

This report presents key strategy initiatives that have been implemented to date (also refer to Attachments 3 and 4), and highlights areas of focus for 2016 and beyond.

## **Report:**

## **Background**

The Sexual Health Youth Strategy is a shared Public Health and community partner response to surveillance and research findings related to youth sexual health in Waterloo Region. Prior to strategy development in 2010, local surveillance indicated:

- Increasing rates of chlamydia among Waterloo Region male and female youth within the 15 to 24 year age cohort
- A teenage pregnancy rate higher in Waterloo Region compared to comparator health regions<sup>1</sup>. The teenage pregnancy rate in Waterloo Region was also

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<sup>1</sup> Ministry of Health and Long-Term Care (2009). Initial Report on Public Health. [http://www.health.gov.on.ca/english/public/pub/pubhealth/init\\_report/pdfs/indicators.pdf](http://www.health.gov.on.ca/english/public/pub/pubhealth/init_report/pdfs/indicators.pdf). Accessed March 15, 2012.

higher than Ontario as reported by the Ministry of Health and Long-term Care in 2009<sup>2</sup>.

In response to surveillance data at the time, a review of sexual health services available for individuals of secondary school age in Waterloo Region was completed by the Infectious Diseases, Dental and Sexual Health (IDDSH) division at Region of Waterloo Public Health. The study identified opportunities for improvement related to local youth:

- Sexual health attitudes and knowledge, and
- Perspectives on sexual health programs and services available to them.

Refer to Report PH-10-052 for more information on the review.

Based on surveillance data and the review findings combined, Public Health and several community partners committed to improving youth sexual health programming and education in Waterloo Region. The group created the Waterloo Region Sexual Health Youth Strategy<sup>3</sup>, which is comprised of several activities focused on three areas:

- 1) **Access** — Increasing access and reducing or eliminating barriers to sexual health services
- 2) **Education** — Enhancing youth knowledge, skills and attitudes about sexual health
- 3) **Parents** — Increasing parents' and guardians' knowledge, skills, and confidence for talking with their children about sexual health

Implementation of the strategy began after Community Service Committee endorsement on June 19, 2012 (Refer to Report PH-12-027) and approval by all participating organizations. Representatives from the organizations formed the Sexual Health Youth Strategy Steering Committee with partners assuming lead or supporting roles depending on the activity. Overall coordination is provided by Region of Waterloo Public Health. Refer to Attachment 2 for organizations involved in strategy development and the Steering Committee.

This report provides an update on progress to date (July 2012 to 2015) and the focus for the strategy going forward. While the Sexual Health Youth Strategy was originally scheduled to end in 2017, the committee members have expressed interest in continuing this work beyond 2017 as there is merit in both leveraging/targeting resources and collaborating to avoid duplication of services. Public Health is committed to coordinating future Strategy efforts.

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<sup>2</sup> Reproductive, Maternal and Infant Health in Waterloo Region: A Health Status Report (January 2012).

<sup>3</sup> Available at [http://chd.region.waterloo.on.ca/en/researchResourcesPublications/resources/SexualHealthYouthStrategy\\_WR.pdf](http://chd.region.waterloo.on.ca/en/researchResourcesPublications/resources/SexualHealthYouthStrategy_WR.pdf)

## **Progress on Sexual Health Youth Strategy Activities (July 2012 to 2015)**

Since 2012, a number of successful initiatives have made changes to how youth can access sexual health services and information in Waterloo Region. A summary of major strategy accomplishments to date, by focus area, is below

- 1) Access — Increasing access and reducing or eliminating barriers to sexual health services.

Increasing access to sexual health services has been a major focus of the strategy to date. Young people's access to sexual health services is affected by how easy it is to get to a service, how comfortable a youth is in seeking out a service, and in some cases, how involved their parents are in helping them access a service. Co-locating sexual health services in schools or other venues that are familiar to youth and house other services is an effective way of eliminating transportation-related and other barriers to obtaining service. There are three main ways that the strategy has worked to eliminate barriers by providing greater access to youth at risk for poor sexual health outcomes:

- **Enhanced sexual health services at most Waterloo Region District School Board secondary schools**

In partnership with the Waterloo Region District School Board, Region of Waterloo Public Health Nurses have been providing one-on-one counseling, education, support, and resources to students on a range of sexual health topics for one half day per week at Waterloo Region District School Board secondary schools (as per the previous 25 years). Previously, students were required to visit a Region of Waterloo Public Health clinic for enhanced sexual health services. After successful implementation of a pilot project, students at 13 secondary schools are now able to access services on site at their school, eliminating transportation related barriers experienced by some students. Expansion to the remaining four schools is anticipated in the 2016-2017 school year.

- **Establishment of two community-based confidential clinics for youth, located in easily accessible, youth-friendly locations**

Reallocation of resources has allowed for two new clinic locations that are specifically targeted to teens and young adults requiring sexual health services. Clinic locations were chosen based on a number of factors including student feedback, socio-economic demographics of the surrounding area, easily accessible location by foot and/or transit, and an opportunity to partner with a host organization that provides other services targeted to youth. The clinics are operated at the following locations:

- City of Kitchener Downtown Community Centre at 35-B Weber Street West
- YMCA Teen Drop-In Zone (formerly the Z Beside the Y) at 256 Hespeler Road

in Cambridge.

Both clinics are held every Wednesday from 3:30 to 6:30 p.m.

Most weeks, the Kitchener clinic is operating at full capacity (six to eight clients). Attendance at the Cambridge clinic has been inconsistent. This is due to site-specific challenges and temporary staffing vacancies. It is anticipated challenges will be resolved in the upcoming year.

- **Creation of a youth friendly sexual health website**

The [www.doinit.ca](http://www.doinit.ca) website, designed and maintained by the AIDS Committee of Cambridge, Kitchener, Waterloo and Area (ACCKWA), is targeted specifically for youth (i.e. uses youth friendly language and provide links to sexual health resources that are relevant to youth experiences such as web-based dating and sexting). The website includes a confidential option for youth to ask a question related to their sexual health through text or online chat to be answered by staff of a local health organization.

Since its launch in 2013, the website has received 6703 hits (5917 new visitors, 786 returning visitors). On average, returning visitors have spent eight minutes on the site visiting six pages; an indication that content is being read. Questions have been received through the text or online chat option 34 times, mainly related to birth control and pregnancy. Promotion of the website and text service will continue.

2) Education — Enhancing youth knowledge, skills and attitudes about sexual health

Work to enhance youth knowledge, skills and attitudes about sexual health in school settings has been achieved through two areas:

- **Advocate that the Ministry of Education expand the health and physical education components of the Ontario curriculum for elementary school students**

On September 10, 2013, the Board of Health received a report recommending that the Board of Health request the Minister of Education implement the Human Development and Sexual Health component of the 2010 Ontario Grades 1-8 Health and Physical Education Curriculum. The Board of Health voted to endorse the report and send a letter from the Board of Health, in addition to letters from community partners, including the Waterloo Region District School Board and the Waterloo Catholic District School Board, to the Minister of Education to request expansion of the health and physical education curriculum (refer to report PH-13-034).

In February 2015, the Ontario Ministry of Education released revisions to the Health & Physical Education (HPE) Curriculum, which will be taught in classrooms across

Ontario. Public Health will collaborate with both school boards on curriculum implementation.

- **Implementation and evaluation of a sexual health education pilot project in one elementary school**

A pilot sexual health education pilot project implemented and evaluated from 2012 to 2013 indicated that a voluntary education program for students in grades 7 and 8 led to increased knowledge of sexual health compared to students who chose not to attend the program. The pilot project also indicated that while the program seemed to have positive preliminary findings related to knowledge improvement, overall participation in the program was low, especially among male students. The findings from this program will be incorporated into activities scheduled for implementation in 2016 to 2017 related to sexual health program development in elementary and secondary schools, and programs targeted to males specifically.

3) Parents — Increasing parents' and guardians' knowledge, skills, and confidence for talking with their children about sexual health.

Two activities to support parents and guardians to speak with their children about sexual health were started during the first phase of strategy implementation:

- **Development and distribution of the “The Talk” from Tots to Teens resource**  
[“The Talk” from Tots to Teens](#) resource provides age and developmentally appropriate guidelines for provision of sexual health information to children and youth. Developed in partnership with Planned Parenthood Waterloo Region, the resource supports parents and caregivers to decide when to discuss specific sexual health topics with their children. The resource is available in both print and online, and has been shared with community organizations in Waterloo Region with a role in supporting parents with young children and youth.

- **Research on programs to improve parent-child communication about sexual health**

Parent-child communication about sexual health is an important factor in improving sexual health outcomes for youth. In 2015, a parent survey was conducted to better understand how parents talk with their children about sexual health, and what supports they believe would help them in this role. Responses from over 950 parents in Waterloo Region were obtained and are currently being analyzed. Findings from the survey, in addition to research on effective parent-child sexual health programs, will provide valuable information for the Region of Waterloo Public Health and community partners as they determine how to support parents and caregivers in speaking with their children about sexual health. The report is expected to be completed in Spring 2016.

Refer to Attachment 3 for a full list of activities and their current status. Refer to Attachment 4 for a summary table of accomplishments to date, including community partner involvement (lead and supporting organization).

### **Sexual Health Youth Strategy Focus for 2016 to 2017**

The Strategy Steering Committee identified the following three priority areas for 2016 to 2017:

<b>Activity</b>	<b>Lead Organization</b>	<b>Supporting Organization (s)</b>
Enhance sexual health education through supports for educators and other professionals for <ul style="list-style-type: none"> <li>• Secondary school aged youth</li> <li>• Elementary school aged children</li> </ul>	Region of Waterloo Public Health	<ul style="list-style-type: none"> <li>• Waterloo Region District School Board</li> <li>• Waterloo Catholic District School Board</li> </ul>
Explore and implement options and opportunities for the development of sexual health programs for males	Region of Waterloo Public Health	<ul style="list-style-type: none"> <li>• Sexual Assault Support Centre</li> <li>• Planned Parenthood Waterloo Region</li> <li>• AIDS Committee of Cambridge, Kitchener, Waterloo and Area</li> </ul>
Develop and/or provide tools, resources and supports for parents and guardians related to talking about sexual health with their children	To be determined	To be determined

Implementation of the three activities will commence in the first two quarters of 2016.

An evaluation of the Sexual Health Youth Strategy, including opportunities for future refinement and collaboration, will be initiated in 2017.

### **Ontario Public Health Standards:**

This relates to Ontario Public Health Standards requirements #5 and #6 in the Sexual Health, Sexually Transmitted Infections, and Blood-borne Infections (including HIV) standard:

- Requirement #5 states, “The board of health shall use a comprehensive health promotion approach to increase the community capacity regarding the promotion of healthy sexuality, including the prevention of adolescent pregnancies, sexually

transmitted infections and blood-borne infections by:

- Collaborating with and engaging community partners and priority populations;
  - Mobilizing and promoting access to community resources;
  - Providing skill-building opportunities; and
  - Sharing best practices and evidence.
- Requirement #6 states, “The board of health shall collaborate with community partners, including school boards, to create supportive environments to promote healthy sexuality and access to sexual health services.”

### **Corporate Strategic Plan:**

This report relates to strategic objective 4.4 (Promote and support healthy living and prevent disease and injury) in the Healthy, Safe and Inclusive Communities focus area in the 2015-2018 Strategic Plan.

### **Financial Implications:**

Region of Waterloo Public Health’s contributions to the Sexual Health Youth Strategy are covered under the department’s existing base budgets for Public Health Mandatory Programs; the budgets are established by Regional Council (as the Board of Health) and are funded up to 75% by the province with the remainder funded by the local tax levy.

### **Attachments:**

Attachment 1 — Chlamydia Incidence Rates Among 15 to 24 year old (2009 to 2014) and Teen Pregnancy Rates (2009 to 2013)

Attachment 2 — Organizations Represented on the Sexual Health Youth Strategy Steering Committee

Attachment 3 — Sexual Health Youth Strategy Status Update by Activity

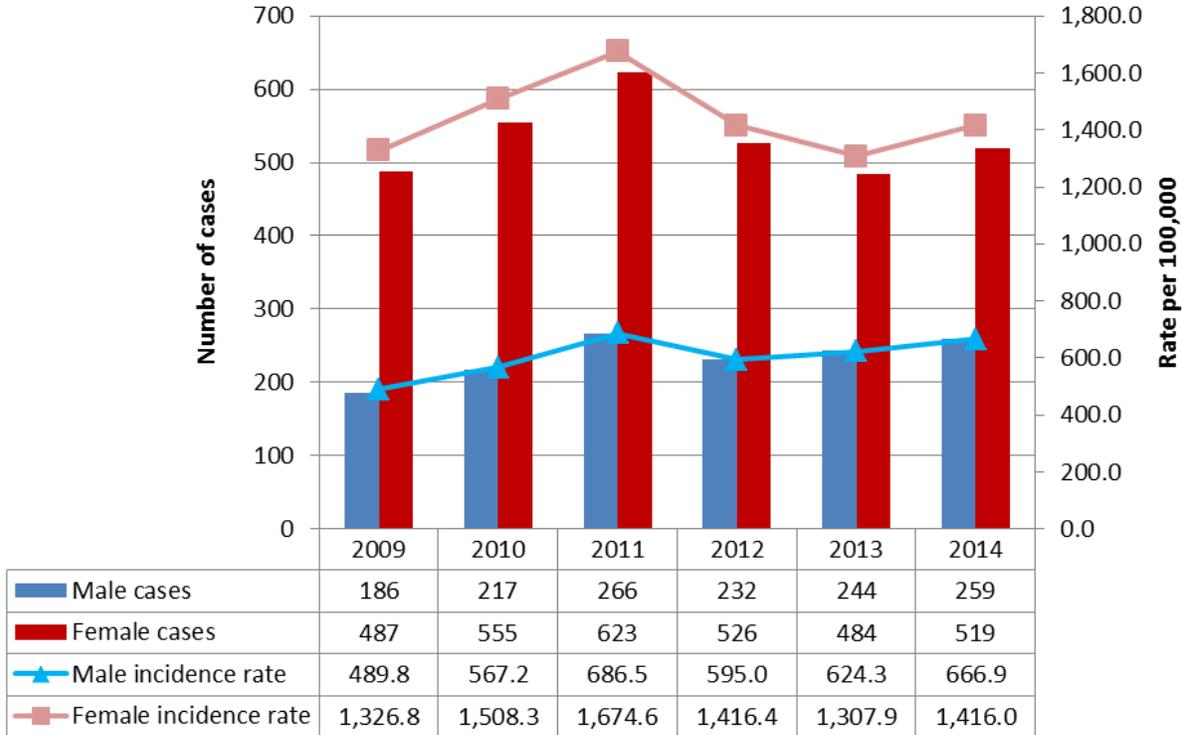
Attachment 4 — Summary of Sexual Health Youth Strategy Accomplishments to Date

**Prepared By:**       **Grace Bermingham**, Public Health Planner  
                              **Chris Harold**, Manager, Information and Planning and Acting  
                              Manager, Sexual Health Youth Strategy

**Approved By:**       **Dr. Liana Nolan**, Commissioner / Medical Officer of Health

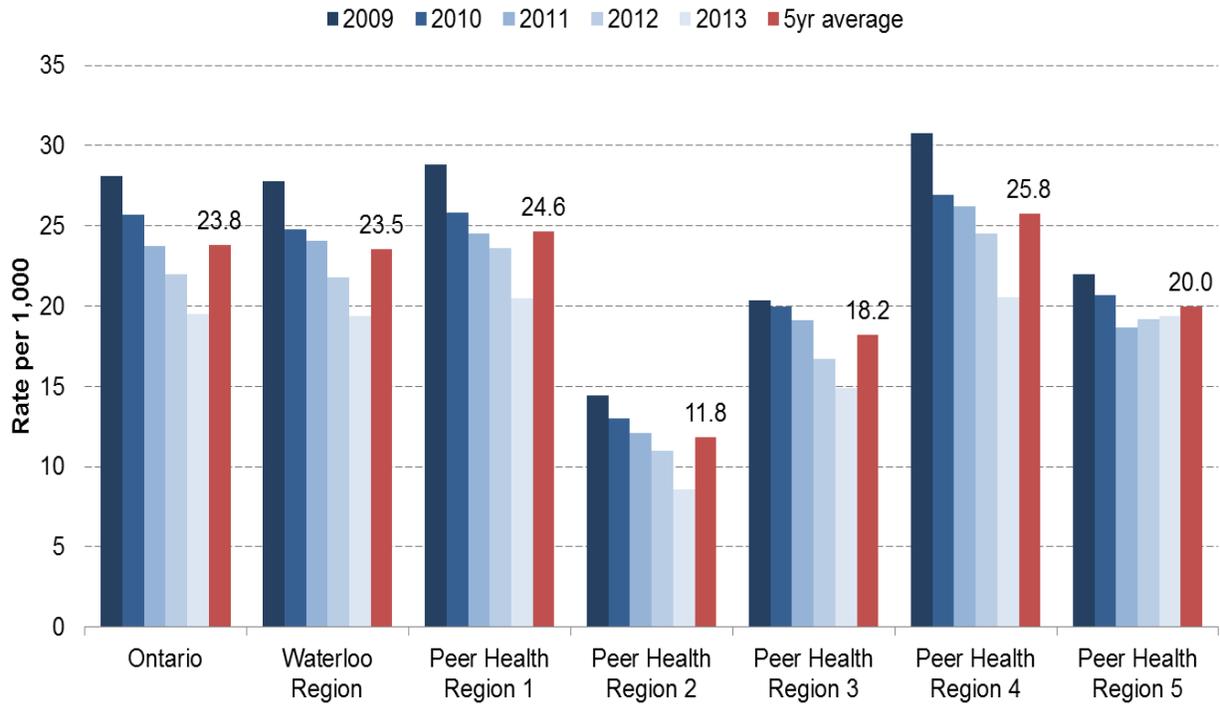
Attachment 1

**Chlamydia cases and age-specific incidence rates per 100,000 among 15 to 24 year olds, by sex and year, Waterloo Region, 2009-2014**



- Chlamydia incidence rates among youth 15 to 24 years of age fluctuated slightly between 2009 and 2014, with a slight decreasing trend observed between 2011 and 2013 for females
- Age-specific rates are higher for females compared to males, which is consistent across the province
- The local rate of chlamydia, accounting for all age cohorts, has remained significantly lower than the provincial rate since 2009 (graph not shown)

**Teen (15 to 19) pregnancy rates, by year, Peer Health Regions, Waterloo Region and Ontario, 2009-2013**



- Overall, the teen pregnancy rate declined in Waterloo Region between 2009 and 2013
- Waterloo Region’s teen rate is generally consistent with the provincial average
- Waterloo Region’s five year average rate is higher than three out of five comparator health regions
- Comparator health regions are defined by Statistics Canada. They allow health regions to compare their health indicators with regions that have similar socio-demographic characteristics

**Attachment 2****Organizations Represented on the Sexual Health Youth Strategy Steering Committee**

- AIDS Committee of Cambridge, Kitchener, Waterloo and Area (ACCKWA)
- OneROOF
- Planned Parenthood Waterloo Region
- Sexual Assault Support Centre
- Region of Waterloo Public Health
- Waterloo Catholic District School Board
- Waterloo Region District School Board

Other organizations that were consulted or involved in strategy development include:

- Developmental Services Resource Centre — Waterloo Region
- KW Counselling (OK2BME)

**Attachment 3**  
**Sexual Health Youth Strategy Status Update by Activity**

**Focus Area 1: Access**

<b>Action Item 1: Establish or increase youth-centred services in community settings</b>			
<b>Activity</b>		<b>Status</b>	<b>Year to be started</b>
1.1	Identify opportunities for collaboration, and to streamline existing sexual health services, between all Sexual Health Youth Strategy partners	Complete	N/A
1.2	Explore opportunities to provide accessible sexual health services to youth in community settings	Complete	N/A
1.3	Establish youth-friendly, accessible sexual health services in one community setting (i.e. "co-location of services") in Waterloo Region (WR)	Complete	N/A
1.4	Establish youth-friendly, accessible sexual health services in multiple community settings across WR	Complete <sup>4</sup>	N/A
1.5	Encourage health practitioners to discuss healthy sexuality with their young clients; provide resources and supports where appropriate	To be initiated	>2017
<b>Action Item 2: Enhance youth sexual health services in elementary and secondary schools</b>			
<b>Activity</b>		<b>Status</b>	<b>Year to be started</b>
2.1	Discuss opportunities to increase the range and type of sexual health services provided in the Waterloo Region District School Board in keeping with the board's curriculum	Complete	N/A
2.2	Discuss opportunities to increase the range and type of sexual health services provided in the Waterloo Catholic District School Board in keeping with the board's faith perspective	Complete	N/A
2.3	Increase sexual health services provided in the WRDSB in keeping with the board's curriculum	In progress	N/A
2.4	Increase sexual health services provided in the WCDSB in keeping with the board's faith perspective	In progress	N/A
2.5	Discuss opportunities to increase and/or provide sexual health services in private schools in Waterloo Region	To be initiated	>2017
<b>Action Item 3: Increase access to sexual health information through technology</b>			
<b>Activity</b>		<b>Status</b>	<b>Year to be started</b>
3.1	Develop a youth-friendly, interactive website for youth in Waterloo Region	Complete	N/A

<sup>4</sup> Opportunities to expand services in additional settings and neighbourhoods will continue to be explored. Future sites will depend on available resources, etc.

**Focus Area 2: Education**

<b>Action Item 4: Establish or increase youth-centred services in community settings</b>			
<b>Activity</b>		<b>Status</b>	<b>Year to be started</b>
4.1	Increase supports for educators and other professionals to deliver sexual health information to secondary school students (e.g. resources, training and consultation)	Prioritized	2016
4.2	Enhance existing sexual health education classes/programs/campaigns/curriculums offered to secondary school aged youth beyond grade 9	To be initiated	>2017
<b>Action Item 5: Enhance sexual health education in elementary schools</b>			
<b>Activity</b>		<b>Status</b>	<b>Year to be started</b>
5.1	Advocate that the Ministry of Education expand the health and physical education component of the Ontario curriculum for elementary school students	Complete	N/A
5.2	Increase supports for educators and other professionals to deliver sexual health information to elementary school students (e.g. resources, training and consultation)	Prioritized	2016
5.3	Implement and evaluate a sexual health education pilot project in one WR elementary school	Complete	N/A
5.4	Develop and enhance elementary school sexual health programming (resources, education and services) for students.	To be initiated	2017
<b>Action Item 6: Explore options and opportunities for the development of sexual health programs for males</b>			
<b>Activity</b>		<b>Status</b>	<b>Year to be started</b>
6.1	Explore options and opportunities for the development of sexual health programs for males	Prioritized	2016-2017
6.2	Implement sexual health programs for males	Prioritized	>2017

**Focus Area 3: Parents**

<b>Action Item 7: Increase parents' and guardians' knowledge, skills, and confidence for talking with their children about sexual health</b>			
<b>Activity</b>		<b>Status</b>	<b>Year to be started</b>
7.1	Conduct a situational assessment to determine the sexual health support needs of parents in Waterloo Region and to determine which strategies are effective at increasing parents' and guardians' awareness, knowledge, skills, and confidence for talking with their children about sexual health	In progress	N/A
7.2	Develop and/or provide tools, resources, and supports for parents and guardians' related to talking about sexual health with their children	In progress	N/A
7.3	Develop and distribute age and developmentally appropriate guidelines for the provision of sexual health information	Complete	N/A

**Summary:**

Number of completed activities	10
Number of activities in progress or to be started in 2016 (prioritized)	7
Number of activities to be started in 2017 or later	5
Total number of activities in the Strategy	22

**Attachment 4**  
**Summary of Sexual Health Youth Strategy Accomplishments to Date**

<b>Accomplishment</b>	<b>Lead Organization</b>	<b>Supporting Organization(s)</b>
Establishment of two sexual health clinics targeted to youth: <ul style="list-style-type: none"> <li>• YMCA Teen Drop-In Zone, 256 Hespeler Road, Cambridge</li> <li>• Downtown Community Centre, 35-B Weber Street, Kitchener</li> </ul>	Region of Waterloo Public Health	Planned Parenthood Waterloo Region  Sexual Assault Support Centre
Enhancement of sexual health services in thirteen Waterloo Region District School Board Secondary Schools to improve access to contraception (following a successful pilot project)	Region of Waterloo Public Health	Waterloo Region District School Board
Creation of a youth-friendly website ( <a href="http://www.doinit.ca">www.doinit.ca</a> )	AIDS Committee of Cambridge, Kitchener, Waterloo and Area (ACCKWA)	Region of Waterloo Public Health
Creation of <a href="#">“The Talk” from Tots to Teens</a> resource — a guide for parents on how to speak with their child(ren) about sexual health and well-being	Region of Waterloo Public Health	Planned Parenthood Waterloo Region
Pilot program in one WRDSB elementary school implemented and evaluated	Region of Waterloo Public Health	Waterloo Region District School Board



**Report:** CSD-IP-16-01

**Region of Waterloo**  
**Community Services Department**  
**Immigration Partnership**

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**To:** Chair Geoff Lorentz and Members of the Community Services Committee

**Date:** February 23, 2016

**File Code:** A02-40

**Subject:** Immigration Partnership Update

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**Recommendation:**

That the Commissioner of Community Services be authorized to sign, on behalf of The Regional Municipality of Waterloo, an agreement with Her Majesty the Queen in Right of Ontario by its Ministry of Citizenship, Immigration and International Trade to provide funding in the amount of \$40,000 for use in connection with the Waterloo Region Immigration Portal under the Immigration Partnership, with such agreement to be in a form satisfactory to the Commissioner of Community Services and the Regional Solicitor;

That the 2016 Operating Budget for Community Services be increased by \$25,264 gross and \$0 net Regional Levy, for the Immigration Portal Development to be funded by the Ministry of Citizenship, Immigration and International Trade (MCIIT) as outlined in Report CSD-IP-16-01, dated February 23, 2016;

That the Commissioner of Community Services be authorized to sign, on behalf of the Regional Municipality of Waterloo, the grant letter agreements in connection with grants provided to assist with resettlement of Syrian newcomers, subject to such grants being approved by the Task Force overseeing the Immigration Partnership Fund for Syrian Newcomers and the form of grant letter agreement being satisfactory to the Commissioner of Community Services and the Regional Solicitor;

That the addition of 0.60 Temporary Full Time Equivalent be approved effective April 1, 2016 to June 30, 2017 for a Planner position for Community Services, Immigration Partnership as outlined in report CSD-IP-16-01, dated February 23, 2016;

And that the increase of 0.09 Temporary Full Time Equivalent be approved effective April 1, 2016 to December 31, 2017 to increase the Program Assistant position hours for Community Services, Immigration Partnership as outlined in report CSD-IP-16-01, dated February 23, 2016.

**Summary:**

Nil

**Report:****1.0 Ontario Funding for the Waterloo Region Immigration Portal**

In 2006, The Regional Municipality of Waterloo (the “Region”) received funding to develop an immigration portal in Waterloo Region. The Region partnered with numerous community stakeholders to develop the portal and has maintained the portal since its inception. Since that time, the Region has received three rounds of funding to support portal development from the Ontario Ministry of Citizenship, Immigration and International Trade (MCIIT, formerly Ontario Ministry of Citizenship and Immigration). The purpose of the immigration portal is to improve newcomer access to municipal information or services, promote the Region as a destination for newcomers to Canada, and to provide an improved focus on immigrant or newcomer needs regarding settlement and/or employment opportunities at the local level. In 2015 the Region was invited to submit an application to the Ontario Ministry of Citizenship, Immigration and International Trade for a fourth round of funding and was notified on 25 January 2016 that this application was successful. The new funds will be used to significantly improve the effectiveness of the Waterloo Region Immigration Portal as an attraction and retention tool and resource for prospective immigrants, newcomers, businesses, post-secondary and other local stakeholders through the engagement of key local stakeholders in development and launching a new portal with enhanced content, functionality and cross-referencing.

In order to receive this provincial funding, the Region is required to enter into the Province’s standard form of Transfer Payment Agreement and the terms and conditions are not subject to negotiation. It is recommended that the Commissioner, Community Services, be delegated authority to sign this Agreement on behalf of the Region.

**2.0 Immigration Partnership Fund for Syrian Newcomers**

The Federal Government has committed to resettling 25,000 Syrian refugees in Canada through direct government sponsorship by the end of 2016 in addition to significant efforts to privately sponsor Syrian refugees. Waterloo Region anticipates receiving over 1,000 Syrian refugees, with a large number arriving between November 2015 and

February 2016. This exceeds the region's yearly intake of refugees by over 250%. Over 700 have arrived in Waterloo Region since the end of December 2015. In normal times, unforeseen situations and gaps in sponsorship and services for refugees with financial and other implications emerge. The sudden increase in the number of refugees currently arriving in Waterloo Region may compound those gaps and make solutions more difficult to identify.

In line with Waterloo Region's overall Municipal Refugee Resettlement Plan, The Kitchener and Waterloo Community Foundation and the Cambridge & North Dumfries Community Foundation have established the Immigration Partnership Fund for Syrian Newcomers (the "Fund") to channel cash donations in support of longer-term Syrian refugee resettlement and integration in Waterloo Region. Monies donated to the respective Foundations will be released to the Region of Waterloo as the host organization for the Immigration Partnership.

Agencies and private sponsors directly involved in the resettlement and integration of Syrian refugees in Waterloo Region are eligible to apply for support from the Fund. Grant-making through the Fund will align with the strategic pillars of the Immigration Partnership: Settle, Work and Belong. The priorities of grant-making will be to support projects and initiatives that promote:

- Development of community supports geared towards settling and community participation and integration of Syrian refugees.
- Access of Syrian refugees to health and mental health services, affordable housing, language training and language supports.

A Task Force of the Immigration Partnership Council has the authority to make decisions on the allocation of monies in the Fund against its Terms of Reference. Payment authority is held by the Region of Waterloo. Immigration Partnership staff will support the work of the task force and collaborate with the Region of Waterloo colleagues to administer the fund and distribute dollars to successful applicants. The maximum amount of monies distributed will equal the amount available in the Fund.

It is recommended that the Commissioner of Community Services be delegated authority to sign approved grant letter agreements on behalf of the Region to ensure timely receipt of grants to individuals and community organizations. Further, it is recommended that the Immigration Partnership Program Assistant position hours be increased by 0.09 Temporary Full Time Equivalent effective April 1, 2016 to December 31, 2017 to support this work.

### **3.0 Immigration Partnership Staff Support**

In 2014/2015, Immigration Partnership conducted an extensive partnership evaluation which explored how the partnership functions and highlighted the many strengths of its collaborative work to date. The Partnership evaluation provides a guide for ways of working together that will enable Immigration Partnership to increase its collective impact in Waterloo Region going forward. Following this, Immigration Partnership is moving into a period of ongoing planning and evaluation of its work. This next period will include a review of the work community partners are doing together and how success will be measured moving forward. This work will feed into the development of Immigration Partnership's Community Action Plan, which currently runs from 2014-2016.

To support this work between April 1, 2016 and June 30, 2017, it is recommended that Immigration Partnership employ a part-time planner at 0.6 Temporary Full Time Equivalent, funded by the United Way of Kitchener-Waterloo and Area which supports Immigration Partnership's ongoing evaluation work.

**Corporate Strategic Plan:**

This report supports the 2015-2018 Corporate Strategic Plan Focus Area 4: Healthy, Safe and Inclusive Communities, and Strategic Objective Action 4.3. (to) increase the supply and range of affordable and supportive housing options and is consistent with Focus Area 5: Responsive and Engaging Government Services and Strategic Objective 5.4: (to) ensure Regional programs and services are efficient, effective and provide value for money.

**Financial Implications:**

The Ontario Ministry of Citizenship, Immigration and International Trade has approved funding of \$40,000 for the fifteen (15) month period April 1, 2016 to June 30, 2017. Of the total, \$25,264 will be spent in 2016 and the balance will be spent in the first half of 2017. The approved funding is 100% provincial and does not require a Regional contribution. Subject to Ministry approval, the \$40,000 of funding will be allocated to staffing (\$4,843) and portal design and development costs (\$35,157).

In addition to the portal design and development costs, an increase of 0.69 temporary full time equivalent staff is required for the Immigration partnership. The fiscal cost of these positions is \$52,407 for 2016 and \$38,109 for 2017. These costs can be accommodated within the 2016 approved Regional budget, which includes funding from senior governments, United Way as well as the Regional property tax levy.

For 2017, the Region has existing agreements from funders totalling \$34,782. The balance of the required funds will be provided from within the approved levy contribution of \$50,000 for 2017 for the Immigration Programs.

	FTE	Effective Period	2016	2017	Total
Portal design and Development *			\$25,264	\$14,736	\$40,000
Program Assistant	0.09	Apr/16 to Dec /17	3,900	5,267	9,167
Planner	0.60	Apr/16 to Jun /17	48,507	32,842	81,349
Total	0.69		\$77,671	\$52,845	\$130,516
<b>Ministry CIIT Funding*</b>					
			\$25,264	\$14,736	\$40,000
Grants &United Way			37,407	34,782	72,189
			\$62,671	\$49,518	\$112,189
Regional Contribution			\$15,000	\$3,327	\$18,327

\* Expenditures and funding not part of the 2016 approved Regional budget.

The Regional contribution for the temporary staffing positions has been provided for in the 2016 Operating Budget.

#### **Other Department Consultations/Concurrence:**

Legal Services has been consulted regarding the development of the legal agreement with the Ontario Ministry of Citizenship, Immigration and International Trade and Corporate Resources (Treasury Services) provided support in developing the budget for the agreement. Legal Services and Corporate Resources (Treasury Services) reviewed the Terms of Reference for the Immigration Partnership Fund for Syrian Newcomers. Finance and Human Resources provided support regarding staffing requirements.

#### **Attachments**

A- January 25, 2016 Letter from Ministry of Citizenship, Immigration and International Trade

**Prepared By: Tara Bedard**, Manager, Immigration Partnership

**Approved By: Douglas Bartholomew-Saunders**, Commissioner, Community Services

**Ministry of Citizenship,  
Immigration and International  
Trade**

Office of the Minister

400 University Avenue, 6<sup>th</sup> Floor  
Toronto ON M7A 2R9  
Tel.: 416 325-6200  
Fax: 416 325-6195

**Ministère des Affaires civiles,  
de l'Immigration et du Commerce  
international**

Bureau du ministre

400, avenue University, 6<sup>e</sup> étage  
Toronto ON M7A 2R9  
Tél. : 416 325-6200  
Télééc. : 416 325-6195



January 25, 2016

Mr. Ken Seiling  
Chair  
Region of Waterloo  
150 Frederick Street, 1<sup>st</sup> Floor  
Kitchener, Ontario  
N2G 4J3

Dear Chair Seiling:

**Re: Enhancing the Functionality and Alignment of the Waterloo Region Immigration Portal –  
2015-10-1-328128207**

I am pleased to inform you that the proposal submitted to the Ministry of Citizenship, Immigration and International Trade's (MCIIT) *2015 Immigration Programs Call for Proposals* (CFP) has been approved for funding. As you know, the CFP was a competitive process and your proposal was evaluated and selected based on its merits.

I am delighted to confirm the award of funding for up to **\$40,000** over a two fiscal year period to the Region of Waterloo for the *Enhancing the Functionality and Alignment of the Waterloo Region Immigration Portal* project under the Ministry's Municipal Immigration Information Online program.

As outlined in the CFP Application Guide, the Region of Waterloo will be required to enter into a legally-binding agreement with the Ministry on the terms and conditions of this grant. A program area staff person from the Information, Research and Evaluation Unit will follow up regarding the completion of a funding agreement. Funding for this grant will be disbursed according to the payment schedule and any conditions and reporting requirements included in the funding agreement.

**RECEIVED**  
FEB 07 2016  
OFFICE OF THE REGIONAL CHAIR .../2

-2-

Our government is committed to supporting newcomers who are seeking opportunities to succeed. I look forward to a continued partnership with the Region of Waterloo as we work together to build a successful future for newcomers and for Ontario.

Best wishes for success.

Yours truly,



Michael Chan  
Minister

C: Daiene Vernile, MPP  
Kitchener Centre



**Report:** CSD-HOU-16-01

## Region of Waterloo

### Community Services

### Housing Services

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**To:** Chair Geoff Lorentz and Members of the Community Services Committee

**Date:** February 23, 2016

**File Code:** D26-20

**Subject:** Proposed Waiting List Assistance Program

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#### **Recommendation:**

That the Regional Municipality of Waterloo authorize staff to implement the Waiting List Assistance Program as outlined in report CSD-HOU-16-01, dated February 23, 2016.

#### **Summary:**

Ministry of Municipal Affairs and Housing (MMAH) sent a letter dated August 11, 2014 informing the Regional Municipality of Waterloo about the Investment in Affordable Housing (IAH 2014 Extension) program and the notional funding allocation for just Year 1 (2014-15) of \$2,547,400. Due to short timeframes, the Province required a Program Delivery and Fiscal Plan (PDFP) for just Year 1 funding to be submitted by November 30, 2014, which outlined how much of the notional allocation would be committed to each of the eligible components: Rental Housing, Homeownership, Ontario Renovates, Operating, and administration.

On January 21, 2015, Regional Council authorized staff to develop and deliver, under the IAH (2014 Extension) Year 1 Operating Component, the Housing Assistance with Supports (HAWS) program for up to \$1,316,130 over 10 years for up to 40 flexible housing assistance units. The focus for this rent assistance program was for STEP Home participants (those who are or at risk of becoming chronically homeless), which was identified as part of the Region's Out of the Cold Response Plan (SS-14-053).

MMAH identified Region of Waterloo's full IAH (2014 Extension) notional allocation of \$24,832,000 for the six year term (2014/15 – 2019/20) of the program in mid December 2014. On February 11, 2015, Regional Council approved the PDFP for Year 2 to Year 2067048

6, and authorized staff to develop program details for the remaining \$2,520,000 of the rent assistance program under the Operating component, consistent with Ministry of Municipal Affairs and Housing (MMAH) guidelines and community need (CSD-HOU-15-02).

Report CSD-HOU-16-01 provides the program details for the proposed Waiting List Assistance Program (WLAP), with \$2,520,000 in senior government funding available to March 31, 2024. The WLAP would provide up to \$350 monthly to assist with rent costs for the 75 households who have been waiting the longest on the Community Housing Waiting List until they move into a rent-geared-to-income unit.

## Report

The new Affordable Housing Strategy 2014-2019 includes a target of providing rental assistance to help create housing stability for at least 100 households in our community with the greatest need for affordable and supportive housing. The funding is intended to be portable and is tied to the tenant; not the unit.

Based on the success of the Region's Temporary Housing Assistance with Supports (THAWS) program and the Region's Out of the Cold Response Plan, Regional Council authorized the allocation of \$1,316,130 in Year 1 IAH (2014 Extension) program under the Operating Component to fund the Housing Assistance With Supports (HAWS) program for up to 40 STEP Home participants (Report CSD-HOU-15-01).

Staff propose that the remaining \$2,520,000 in Operating Component funding be used for the proposed Waiting List Assistance Program (WLAP). As with the HAWS program, the WLAP would provide up to \$350 monthly to households on the Region's Community Housing Waiting List to assist with rent costs until the households move into a rent-geared-to-income unit. Approximately 75 households will be able to receive the rent assistance at a time.

While the average wait time for a family is a minimum of three years and a minimum of six years for a non-senior single or couple, several households have been on the Region's Community Housing Waiting List for significantly longer, due to more complex housing needs and fewer matching options. The purpose of the WLAP funding is to provide rent assistance to households that have been on the Community Housing Waiting List the longest, where they are currently living. Payments will be made directly to landlords on behalf of the household.

The proposed WLAP would offer the funding assistance to the 75 with the earliest application date. Eligible households would need to currently be renting a self-contained unit in Waterloo Region of a size that meets occupancy standards, Fire and Building Code and has no outstanding property orders, and have household incomes below the Province's Household Income Limits. Households would not be required to

move to receive the WLAP funding. Households receiving the WLAP funding would be required to remain on the Community Housing Waiting List and will be encouraged to accept a rent-geared-to-income unit when offered. Once a household receiving WLAP funding moves into a rent-geared-to-income unit the WLAP payments would stop and the WLAP funding would be made available to the next household that has been on the Community Housing Waiting List the longest.

The IAH (2014 Extension) program requires that all Operating Component funding be used by March 2024. Staff propose to monitor and adjust the number of households receiving the WLAP funding to ensure all the funds are used by the end date of the program and will implement an exit strategy during the last 18 months of the WLAP to help transition households receiving WLAP funding as the program winds down.

### **Corporate Strategic Plan:**

Implementing the Waiting List Assistance Program supports the Region's 2015 – 2018 Corporate Strategic Focus Area: 4: Healthy, Safe and Inclusive Communities and Strategic Objective 4.3, (to) increase the supply and range of affordable and supportive housing options.

### **Financial Implications:**

The IAH (2014 Extension) program will provide \$24,832,000 in funding over the six year program (2014-2020) to help implement the Region's Affordable Housing Strategy and address local affordable housing needs. The \$2,520,000 was allocated in Year 2 (2015-2016) of the IAH (2014 Extension) program to fund a new rent assistance program for households on the Region's Coordinated Access Waiting List through to the end of the program. This program will not impact the current tax levy for housing programs as funds from senior levels of governments are being utilized. The funding proposed for WLAP will be advanced by the Province on a quarterly basis to the Region for distribution. Funding for this program may be provided to March 2024.

### **Other Department Consultations/Concurrence:**

Staff from Treasury Services has been consulted in the preparation of this report.

### **Attachments**

Nil

**Prepared By:** Jeffrey Schumacher, Supervisor, Housing Supply Initiatives

Jennifer Murdoch, Manager, Housing Programs

**Approved By:** Douglas Bartholomew-Saunders, Commissioner, Community Services



Report: PDL-CUL-16-02

## Region of Waterloo

### Planning, Development and Legislative Services

### Cultural Services

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**To:** Chair Geoff Lorentz and Members of the Community Services Committee

**Date:** February 23, 2016                      **File Code:** R03-80(A)

**Subject: Overview of Museum Collections Storage Needs and Possible Federal Funding Towards Expansion of Curatorial Centre**

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#### **Recommendation:**

That the Regional Municipality of Waterloo take the following actions regarding a proposed expansion to the Region of Waterloo Curatorial Centre, as described in Report No. PDL-CUL-16-02, dated February 23, 2016:

- a) Initiate an application to the Canada Cultural Spaces Fund for submission in 2016, seeking funding for architectural fees, construction, storage systems and related expenses from the Government of Canada; and
- b) Forward this report to the Federal Minister of Canadian Heritage, and area Members of Parliament.

#### **Summary:**

The Region of Waterloo is continually planning for and implementing improvements to artifact collections development and management at its museums. The Region's goal is to preserve and develop collections that represent the history of the Region and its relationship to the world (from Strategic Directions for the Region of Waterloo Museums, Report No. PDL-CUL-15-06 dated March 24, 2015), with three supporting objectives of documentation, adequate storage, and relevant collections development.

This report primarily addresses the second objective of ensuring adequate storage for the collections. The Region's museums care for more than 53,000 objects, plus an estimated one million objects excavated from archaeological sites in Waterloo Region. Artifact storage at Joseph Schneider Haus is past capacity, and any additions to the collection must be limited in number and size. The Region of Waterloo Curatorial Centre located on 1961477

the Waterloo Region Museum campus is estimated to be at 90% of the available 20,000 square feet capacity, and potential new acquisitions are being carefully screened. The proposed expansion of the Curatorial Centre would address these needs, and has been included in the 10 Year Capital Forecast since 2009.

In 2014, consultants prepared a schematic design for a 14,480 square feet expansion of primarily artifact storage, with a preliminary cost estimate of \$11.15 M including furnishing, fixtures and equipment. This project is currently included in the 2016-2025 10 Year Capital Forecast with design and tendering in 2017, and construction in 2018-2019.

The expansion is eligible for funding from the Canada Cultural Spaces Fund (CCSF), Department of Canadian Heritage, and it is recommended that staff proceed with an application in 2016. Council would be advised when the application has been submitted.

The Region of Waterloo Museums' collections goals are further supported by a focus on documentation through an on-line database including photographs of artifacts, a unique Collecting Plan for Waterloo Region Museum (with one to be developed for Joseph Schneider Haus in the future), and a planned application to have Waterloo Region Museum designated as a Class A institution under the Federal Cultural Property Export and Import Act (Joseph Schneider Haus is already designated) to be able to acquire and store objects of national significance.

These actions, combined with previous accomplishments, place the Region's museums at the forefront of collections management among Ontario's community museums.

### **Report:**

Since the 1980s, the Region of Waterloo has been proactively planning for and implementing improvements to artifact collections development and management at its museums. This planning is an ongoing process, in recognition of the stewardship role that the Region plays in preserving the community's material past.

The Region's museums care for more than 53,000 objects, plus an estimated one million objects excavated from archaeological sites in Waterloo Region.

Major improvements to collections management took place when collections storage was built at Joseph Schneider Haus in the 1980s and then in 1995 when the Region of Waterloo Curatorial Centre opened at the Waterloo Region Museum campus of facilities.

Collection stewardship responsibilities are reflected in the Strategic Directions for the Region of Waterloo Museums (report PDL-CUL-15-06 dated March 24, 2015), in which goals, objectives and strategic actions related to collections management and development are identified.

The Region's goal for its museum collections is to preserve and develop collections that represent the history of the Region and its relationship to the world. Three primary objectives, which are consistent with museum management best practises, relate to this goal:

1. To document the collections in an appropriate and publically accessible database;
2. To ensure there is adequate storage for the collections; and
3. To develop collections that are relevant to each museum's Statement of Purpose.

## **1. Collections Documentation**

### **Collections Database**

In 2014, collections information at the Waterloo Region Museum and Joseph Schneider Haus was transferred from an outmoded collections management database to PastPerfect, a collections database that is used by many other museums in Ontario, including those in Waterloo Region and Wellington County. The transfer of data identified issues of consistency in how data had previously been entered, absence of data and the naming of objects. Efforts to resolve these issues are underway and staff anticipates that the database content updates will be completed by early 2017.

The Region has purchased an online module of PastPerfect so that once corrections to the data have been made, the databases can be accessed and searched by the public via the Internet.

### **Collections Photography**

Approximately 30% of the Waterloo Region Museum collection has been photographed or scanned. Although approximately 50% of the Joseph Schneider Haus collection has been photographed or scanned, the images are not of sufficiently high quality and will need to be re-photographed or scanned.

Images of those objects not yet photographed or scanned, with the exception of archaeological objects which will not be photographed, will be completed by mid 2017. Images will be included in the database, including in the online version.

## **2. Collections Storage**

Collections storage at the Region's museums is centralized in two buildings: storage in the modern service wing at Joseph Schneider Haus opened in 1989, and the Region of Waterloo Curatorial Centre opened in 1995. Storage areas are environmentally controlled and monitored to control fluctuations in relative humidity; they have fire suppression and security systems; they are dark environments to reduce damage from light; and they are clean environments with dust filtration on the HVAC systems.

Artifact storage at Joseph Schneider Haus is past capacity of the square footage and volume of space available, with some objects, in particular furniture, stacked on top of one another. Some artifacts have been relocated to the Curatorial Centre to alleviate storage concerns. Artifact storage will be maintained at Joseph Schneider Haus, but additional storage space at the Curatorial Centre is required to meet current needs at Joseph

Schneider Haus, plus any future acquisitions. Although staff has not declared a moratorium on collecting for Joseph Schneider Haus, at the present time additions to the collection are extremely limited in number and size.

The Curatorial Centre includes 43,300 square feet of space. Approximately 20,000 square feet is used for the storage of artifacts. Artifact storage rooms include a room for the storage of photographs, maps, books and other paper artifacts; storage for large vehicles, industrial and agricultural machinery; furniture storage; and storage for small artifacts. Collections management areas include artifact registration, conservation labs, artifact holding room, receiving areas and an emergency management supplies storage room.

Storage at the Curatorial Centre is estimated at more than 90% capacity of the available 20,000 square feet. New acquisitions are limited, with staff paying particular attention to the size of objects that can be accommodated in the available space. There are numerous factors which influence decisions to accept or decline objects – an object's physical size is just one; other factors include relationship to mission, community significance, condition and duplication in the existing collection.

The Region has anticipated the need for additional artifact collections storage for several years. Expansion of the Curatorial Centre has been included in the 10 Year Capital Forecast since 2009.

Museum staff has met with staff from the Region of Waterloo Archives to discuss their future storage needs. Archives has recently relocated from 150 Frederick Street to 20 Queen Street East, but staff anticipate that additional storage space will be required after approximately 2024. Space for the Region's Archives is not included in this Curatorial Centre expansion project but could be accommodated in any future expansions.

In 2014, Facilities Management engaged Joe Somfay Architect and BTY Group cost consultants to prepare a schematic design and construction estimate for a two storey addition to the Curatorial Centre, encompassing 14,480 square feet, located on two floors (see Attachment 1). The majority of this space is for artifact storage. The preliminary (Class C) construction estimate including furnishings, fixtures and equipment is \$11.15 M. This project is included in the 2016-2025 10 Year Capital Forecast. Subject to approval by Regional Council, final design and project tendering would take place in 2017, construction in 2018 and 2019, with fit-out for occupancy in late 2019. Operating costs will be related primarily to debt servicing, utilities and building maintenance; there is no planned increase in staffing associated with this project.

During the schematic design process, the Region confirmed with the Grand River Conservation Authority that the proposed addition is not within the flood plain of Schneider Creek.

The proposed addition would be attached to the north façade of the Curatorial Centre. The structure would be steel frame construction with exterior metal panel cladding to match the existing structure. The interior construction would be a combination of metal stud partitions

and concrete block walls. The proposed addition would be environmentally controlled and monitored to control fluctuations in relative humidity; it would have fire suppression and security systems; and dust filtration on the HVAC systems.

The expansion to the Curatorial Centre is eligible for funding from the Canada Cultural Spaces Fund (CCSF), Department of Canadian Heritage. Eligible expenses relevant to this project include professional fees such as architectural, engineering and technical services; project management and environmental assessments; construction and renovation of cultural infrastructure; fire safety and security systems; environmental practices and sustainable construction, e.g. LEED; and specialized equipment such as environmental control systems and storage systems. Applications to the CCSF are accepted at any time throughout the year.

CCSF can finance up to 50% of eligible project expenses for construction and/or renovation, specialized equipment purchases or feasibility studies for the construction and/or renovation of a cultural space; however, the average approved contribution for similar projects across Canada has been significantly less.

### **3. Collections Development**

#### **Collecting Plans**

In 2008 the Waterloo Region Museum, then known as Doon Heritage Crossroads, published a collecting plan (see report P-08-033, dated March 4, 2008) believed to be the first such document compiled outside of provincial and national museums in Canada.

The Collecting Plan analyzed the artifact collection and outlined future collecting guidelines and priorities. The Plan recommended a range of new collecting initiatives, with particular emphasis on objects from the latter half of the 1900s and early 2000s, in order to broaden the collection to reflect the sweeping changes that have taken place in the region over the past 50 years and to complete gaps identified in the existing collection. Implementation of the Plan was also intended as a support to the development of exhibits for the then proposed Regional museum.

Recommendations in the Plan included:

Focus on objects that relate to specific themes or “centres of excellence” which reflect unique characteristics of Waterloo Region, including manufacturing (especially furniture, auto parts, food product packaging and the high tech sector), multicultural communities, and objects that celebrate community.

Include objects that do not relate to a centre of excellence where they meet other collecting criteria (for example, uniqueness, curiosity value, etc.).

For post-1950 consumer goods, collect objects that reflect unique characteristics of this region, not those mass-produced elsewhere even if they were used locally.

Continue to decline objects that are duplicated in the existing collection, are in poor condition, have little relevance to regional history, or would be better placed in another museum or archive that specializes in the subject matter associated with the object.

These recommendations influence decisions that are made by staff on a daily basis regarding objects being offered for sale or donation to the museum.

A collecting plan has not been developed for Joseph Schneider Haus, but is planned for completion after 2019.

It is not envisioned that a collection will be developed for McDougall Cottage, other than objects directly associated with the McDougall and Baird Families. There is no space to accommodate artifact storage at McDougall Cottage. Any artifacts associated with McDougall Cottage, but not on exhibit, will be stored at the Curatorial Centre.

### **Cultural Property Designation**

Joseph Schneider Haus is one of 270 Canadian museums and art galleries designated under the Federal Cultural Property Export and Import Act to receive objects of National significance. Approximately 10%, or 750 artifacts, in the Joseph Schneider Haus collection are designated under the Act.

Staff has begun the process of compiling documentation to apply to have the Waterloo Region Museum designated as a Class A institution under the Act. This designation will allow the Waterloo Region Museum to acquire objects of national significance, and to potentially relocate storage of some nationally designated objects from Joseph Schneider Haus to the Curatorial Centre. Museum staff will be reviewing collections management and development policies, and museum emergency preparedness plans in advance of making application for designation under the Act. Revised policies will be brought to Regional Council for approval in 2016.

### **Collections Disposal**

Collections development includes reviewing existing collections to determine if some objects are surplus to a museum's needs, primarily due to duplication or poor condition. The process of removing objects from a museum collection is referred to as deaccessioning or disposal; at the Region, the policy and procedures around disposing of objects are consistent with provincial standards for museum operations.

Staff will proactively identify objects for disposal in the coming years, following the Region's policy and procedures.

### **Area Municipal Consultation/Coordination**

Regional staff consult regularly with staff at museums, galleries and archives owned and operated by the Area Municipalities regarding collections management and development.

**Corporate Strategic Plan:**

Supporting initiatives that enhance arts, culture and heritage opportunities to enrich the lives of residents and attract talent and visitors are directly related to a Thriving Economy.

**Financial Implications:**

The 2016 approved 10 year Capital budget includes \$11.15 million for Curatorial Centre Storage Expansion (project 42046) to be funded from debentures, as set out in the timeline below:

	2017	2018	2019	2020	Total
Capital Expenditure to be debt financed over 10 years	\$925,000	\$7,945,000	\$2,280,000		\$11,150,000
Incremental Operating Costs:					
Debt Servicing		\$108,400	\$931,400	\$267,300	\$1,307,100
Utilities and building maintenance				\$75,000	\$75,000
Total incremental costs		\$108,400	\$931,400	\$342,300	\$1,382,100

Operating costs are anticipated to increase by \$1.38 Million mainly due to debt servicing costs, utilities and building maintenance. There is no planned increase in staffing.

**Other Department Consultations/Concurrence:**

Corporate Services, Facilities Management led the schematic design and preliminary cost estimating process for the proposed expansion of the Region of Waterloo Curatorial Centre. Subject to Council approval, Facilities Management would oversee implementation of the construction project. Facilities Management and Finance staff have reviewed this report and provided input as appropriate.

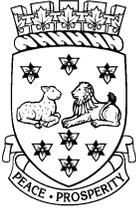
**Attachments:**

Attachment 1 - Proposed Addition to Region of Waterloo Curatorial Centre (drawing)

**Prepared By: Tom Reitz, Manager/Curator**

**Approved By: Rob Horne, Commissioner, Planning, Development and Legislative Services**





Report: PHE-HLV-16-02

**Region of Waterloo**  
**Public Health and Emergency Services**  
**Healthy Living**

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**To:** Chair Geoff Lorentz and members of the Community Services Committee

**Date:** February 23, 2016                      **File Code:** P13-20

**Subject: Public Health's Role in Supporting School Health**

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**Recommendation:**

For information.

**Summary:**

Region of Waterloo Public Health has long standing partnerships with local schools boards in providing public health related services to their students. In recent years, there has been increasingly compelling evidence that health and education are inextricably linked, and that comprehensive, whole-school approaches are the most effective way to address a variety health issues. Region of Waterloo Public Health has expanded its relationships with school boards to include the introduction of Healthy Schools, a comprehensive approach to addressing the physical, social and intellectual well-being of students. Additional supports such as increased access to web based resources and the "Virtual Nurse" school newsletter expand Public Health's ability to support schools in creating healthy, supportive environments for all students.

This report highlights current initiatives and partnerships with local school boards and Region of Waterloo Public Health to promote the well-being of children in Waterloo Region. This summary includes, background, evidence-informed Healthy Schools Approach, building and maintaining strategic partnerships with local school boards, public health services offered to school and next steps.

- Region of Waterloo Public Health (Public Health) is mandated by the Ontario Public Health Standards to work with schools boards and schools to reduce the burden of chronic disease.

- Public Health's Healthy Living Division is committed to promoting healthy, safe and inclusive communities (Regional Strategic Plan 2015-2018).
- Research indicates that schools are an ideal place to promote health of children
- In October 2014, Ministry of Education included well-being as a goal in its vision.
- Both the Ministries of Health and Education have adopted the evidence-informed comprehensive school health framework, the "Healthy Schools Approach", as the best way to promote student well-being.
- Healthy Living Division has initiated local strategic partnerships with the Waterloo Region District School Board and the Waterloo Catholic District School Board to develop a common vision, goal, language and areas of focus to promote well-being of students.
- Public Health offers over 40 services to schools and is committing intensive public health nurse support to Healthy Schools pilot project.

## Report:

### 1.0 Background

It is well known that childhood obesity rates are steadily increasing, 1 in 5 Waterloo Region youth are overweight or obese<sup>1</sup>. In Waterloo Region, only 7 per cent of children and youth are getting the recommended amount of physical activity<sup>2</sup> and less than 1 per cent of youth have a good quality diet<sup>3</sup>.

It is possible to alter the trajectory of children's prospects for good health, but to do so require significant changes, and experts from around the world agree that schools are the ideal place to start<sup>4</sup>. Hence, it is essential for public health to develop and maintain relationships with key stakeholders in creating a school environment that supports the well-being of children.

### Education and Health Sector Mandates

Student well-being is not just a mutual goal but also an interdependent outcome for health and education sectors. In other words, healthy students are better learners, and better-educated individuals are healthier.

<sup>1</sup> Canadian Community Health Survey (CCHS), 2011/2012 Statistics Canada, Share File, Ontario MOHLTC.

<sup>2</sup> Colley, D.A., Garriguet, D., Janssen, I., Craig, C.L., Clarke, J. & Tremblay, M.S. (2011). *Physical Activity of Canadian Children and Youth: Accelerometer Results from the 2007 to 2009 Canadian Health Measures Survey*. Health Reports, 22(1); as cited in Region of Waterloo Public Health (2011). Waterloo Region Community Assessment Report. Waterloo, ON: n.a., pg 28.

<sup>3</sup> Region of Waterloo Public Health (2015). *Child Health Report Series: Nutrition, Physical Activity and Health Outcomes – Technical Addendum*. Waterloo, ON: Drew, S., pg 16.

<sup>4</sup> Stewart-Brown, S. (2006). *What is the evidence on school health promotion in improving health or preventing disease and, specifically, what is the effectiveness of the health promoting school approach?* Copenhagen, WHO Regional Office for Europe (Health Evidence Network report; <http://www.euro.who.int/document/e88185.pdf>, [ Cited January 13, 2016]

## Health Mandates

In accordance with the Ontario Public Health Standards<sup>5</sup>, the board of health shall work with school boards and/or staff of elementary, secondary using a comprehensive health promotion approach to influence the development and implementation of healthy policies, and the creation or enhancement of supportive environments to address the following topics:

- Healthy eating, Healthy weights
- Comprehensive tobacco control
- Physical activity
- Alcohol use
- Exposure to ultraviolet radiation

## Education Mandates

While the Ministry of Education primarily sets mandates for student academic achievements, in the recent years it has been linking health and education together through an increasing number of policies, frameworks and supporting documents including:

- Policy/Program Memorandum No. 138, “Daily Physical Activity in Elementary Schools, Grades 1–8” (2005). This policy requires that all students in Grades 1 to 8, including students with special needs, be provided with opportunities to participate in a minimum of twenty minutes of sustained moderate to vigorous physical activity each school day during instructional time
- Policy/Program Memorandum No. 150, School Food and Beverage Policy (2010). The purpose of this memorandum is to set out nutrition standards for food and beverages sold in publicly funded elementary and secondary schools in Ontario
- Achieving Excellence: A Renewed Vision for Education in Ontario (2014), which includes the promotion of child and student well-being as one of four interconnected goals for the province’s education system<sup>6</sup>
- Revised Health and Physical Education (2015) curriculum<sup>7</sup> that is up-to-date and evidenced-informed
- Revised Foundations for a Healthy Schools Framework (2014)<sup>8</sup> to align with the School Effectiveness Framework<sup>9</sup>

<sup>5</sup> Ministry of Health and Long Term Care. (2015). *Ontario Public Health Standards 2015*. [http://www.health.gov.on.ca/en/pro/programs/publichealth/oph\\_standards/docs/ophs\\_2008.pdf](http://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/ophs_2008.pdf) [Cited January 8, 2016]

<sup>6</sup> Ontario Ministry of Education. (2014). [Achieving Excellence: A Renewed Vision for Education in Ontario](#). [Cited January 8, 2016]

<sup>7</sup> Ontario Ministry of Education. (2014). <http://www.edu.gov.on.ca/eng/curriculum/elementary/health1to8.pdf> [Cited January 8, 2016]

<sup>8</sup> Ontario Ministry of Education. (2014). [Foundations for a Healthy School](http://www.edu.gov.on.ca/eng/healthyschools/resourceF4HS.pdf). <http://www.edu.gov.on.ca/eng/healthyschools/resourceF4HS.pdf>. [Cited January 8, 2016]

<sup>9</sup> Ontario Ministry of Education. (2013). [K-12 School Effectiveness Framework](http://www.edu.gov.on.ca/eng/literacynumeracy/SEF2013.pdf). <http://www.edu.gov.on.ca/eng/literacynumeracy/SEF2013.pdf> [Cited January 8, 2016]

## Current Synergies

These mutual mandates and inter-related outcomes between the two sectors have led to formation of provincial partnership committee comprised the Council of Ontario Directors of Education (CODE) and the Council of Medical Officers of Health (COMOH) (2014). The committee aims to use its leadership and networks to help foster, both formally and informally, strong, collaborative and sustainable partnerships between school boards and boards of health<sup>10</sup>.

### Research: Healthy Schools Approach

According to the research, comprehensive school health is an effective way to improve both health<sup>11</sup> and educational outcomes<sup>12</sup>, and encouraging healthy behaviours that last a lifetime. In the classroom, comprehensive school health facilitates improved academic achievement and can lead to fewer behavioural problems<sup>13</sup>. In the broader school environment, it helps students develop the skills they need to be physically and emotionally healthy for life.<sup>14</sup>

### What is the Healthy Schools Approach?

A healthy school is one where school administration, teachers, parents, students and community agencies work together to create an environment that will have a positive impact on a child's health and learning. A Healthy School builds a healthy setting for the whole school community to live, learn, work, and play. Benefits of a Healthy School include:

- Enhanced physical, emotional, social, and spiritual health
- Improved student health and educational outcomes
- Improved academic achievement and decreasing behavioural problems in the classroom
- Enhanced student leadership opportunities and meaningfully engaging students within the school community
- Stronger relationships through collaborating with home, school, and community.
- Enhanced parent engagement opportunities

<sup>10</sup> Council of Ontario Directors of Education and Association of Local Public Health Agencies. (2014). [http://www.ontariodirectors.ca/code-comho/CODE\\_COMOH\\_Letter\\_Final.pdf](http://www.ontariodirectors.ca/code-comho/CODE_COMOH_Letter_Final.pdf) [Cited January 11, 2015]

<sup>11</sup> Stewart-Brown, S. (2006). *What is the evidence on school health promotion in improving health or preventing disease and, specifically, what is the effectiveness of the health promoting school approach?* Copenhagen, WHO Regional Office for Europe (Health Evidence Network report); <http://www.euro.who.int/document/e88185.pdf>, [Cited January 13, 2016]

<sup>12</sup> Murray, N.D., Low, B.J., Hollis, C., Cross, A. Davis, S. (2007) *Coordinated school health programs and academic achievement: a systematic review of the literature*. *Journal of School Health*, 77 (9), 589-599.

<sup>13</sup> *ibid*

<sup>14</sup> Joint Consortium for School Health (2008). *What is comprehensive school health?* <http://www.jcsh-cces.ca/upload/JCSH%20CSH%20Framework%20FINAL%20Nov%2008.pdf> [Cited January 13, 2016]

## 2.0 Working with Local School Boards

Given the evidence that supports comprehensive school health and the direction set out by the Ministry of Education and the Ministry of Health and Long Term Care, Public Health has been working in collaboration with the Waterloo Region District School Board (Waterloo Region) and the Waterloo Catholic District School Board (Waterloo Catholic). The Waterloo Region school board serves over 62,000 students (i.e. 42,327 elementary and 19,807 secondary students) and the Waterloo Catholic serves over 21,000 students (i.e. 14,782 elementary and 6,676 secondary students).

### Building partnerships

To initiate an integrated approach to promote student well-being, a steering committee comprised of school board representatives including a superintendent, Mental Health Lead and Healthy Active Living Consultant and public health representatives at each board was initiated in 2014.

It was clear during steering committee discussions that each sector had a mandate to promote student well-being, however, organizational culture, sector-specific language (jargon) and capacity differed. To address these differences, the following keys steps were taken to develop a common understanding and a mutual partnership:

- Through discussion, a common understanding of key words such as policy and well-being was created and defined in a glossary
- Guiding principles for working together were defined
- A Healthy Schools approach, which complements the School Effectiveness Framework and therefore not an additional initiative, was used
- Schools that have the capacity and need for intensive public health support were identified

While each board utilized a different approach to formalize this partnership, a common vision, goal, guiding principles and areas of focus were established. At Waterloo Catholic, the Terms of Reference outlining key goals, approach and process was established. With Waterloo Region, the steering committee worked together to formalize a Strategic Partnership Action Framework including definition of strategies and terms so staff in each organization can see their own work (See Appendix A for a sample framework).

### Public Health Services Offered to Schools

To meet the mutual goal of student well-being, Public Health offers over forty services to all elementary and secondary schools in both school boards (see Attachment B). These services include direct one-to-one support, resources and curriculum supports, kits, consultations, and referrals to other community agencies. Public Health has developed several products to increase access to information about services offered to schools:

- A list of services offered to schools with key contacts will be distributed to all schools

- The School Health webpage provides a centralized access point to obtain information about services offered to schools ([www.regionofwaterloo.ca/schoolhealth](http://www.regionofwaterloo.ca/schoolhealth))
- The “School Health Virtual Nurse” e-newsletter distributed three times a year. It will include information on: current events, new/changes to services, upcoming events and trends

### Healthy Schools Pilot Project

Both school boards have committed to piloting the Healthy School Approach. For the 2015-2016 school year, Public Health has committed to provide intensive Public Health Nurse support to 11 Waterloo Catholic and 10 Waterloo Region pilot schools. A Public Health Nurse is assigned to each pilot school to support them using the Foundations for a Healthy School Framework. It is a strengths-based approach working where schools are at, and maximizing their capacity to promote student well-being. Waterloo Catholic is using a family of schools model with 9 elementary schools and 2 secondary schools. Waterloo Region’s Healthy Schools pilot project has been delayed at the request of the school board for a variety of reasons.

Some of the activities to date for Healthy Schools within Waterloo Catholic include the following:

- Each school is working on their own action plan targeting the priority areas unique to their school
- Three elementary schools worked in collaboration with the public health nurse and the Mental Health Lead from the School Board to develop school-tailored action plans focusing on positive mental health promotion, linking with the Board’s Mental Health Strategy, and connecting with the Board’s work on Resiliency Initiatives
- Secondary pilot schools have Healthy Schools youth leaders identified who will be part of planning, implementing and evaluating of initiatives related to Healthy Schools throughout the year
- St. Benedict Secondary School secured over \$400,000 of funding for a re-design of their outdoor space from local and national funding agencies with the support of Public Health; the school formed a Healthy Schools Committee comprising of staff, parents, and students to plan and implement this project
- Healthy eating and physical activity articles are distributed to schools for their monthly newsletters

### 3.0 Next Steps

To maintain and enhance relationship with the school boards and to promote student well-being, the steering committees will continue to explore effective and efficient ways to work together and promote student well-being. Some actions include:

- Completion of a Strategic Partnership in Action Framework for the Waterloo Catholic school board

- Completion of a Terms of Reference with the Waterloo Region school board for the steering committee
- Exploration of different ways to coordinate current internal committees related to safe and healthy schools, mental health and wellness and healthy schools to make it a more efficient and effective use of staff time as the topics are interrelated with the Waterloo Region school board
- Evaluation of Healthy Schools pilot project

### **Ontario Public Health Standards:**

Under the Health Protection and Promotion Act, the Region serves as Waterloo Region's Board of Health. Boards of Health are expected to adhere to the Ontario Public Health Standards, which outline the expectations for providing public health programs and services. This report provides information:

- Compliance with the following Chronic Disease Prevention requirement: The board of health shall work with school boards and/or staff of elementary, secondary, and post-secondary educational settings, using a comprehensive health promotion approach, to influence the development and implementation of healthy policies, and the creation or enhancement of supportive environments to address the following topics: healthy eating, healthy weights, comprehensive tobacco control, physical activity, alcohol use; and exposure to ultraviolet radiation
- The provision of ongoing education for Board of Health members to help them remain abreast of relevant trends and emerging public health issues

### **Corporate Strategic Plan:**

This report relates to Strategic Objective 4.4 (Promote and support healthy living and prevent disease and injury) in the Healthy, Safe and Inclusive Communities focus area in the 2015-2018 Strategic Plan.

### **Financial Implications:**

Routine activities related to the Public Health role in supporting school boards and/or staff of elementary, secondary and post-secondary schools are covered under the department's existing base budgets for Public Health Mandatory Programs; the budgets are established by Regional Council (as the Board of Health) and are funded up to 75% by the province with the remainder funded by the local tax levy.

### **Other Department Consultations/Concurrence:**

Nil

**Attachments**

Attachment A: Strategic Partnership in Action Framework for Healthy Schools Sample

Attachment B: List of Public Health Services for Schools

**Prepared By:**       **Melanie Garbarz**, Public Health Planner, Healthy Communities,  
Schools and Workplaces  
**Jessie Johal**, Manager, Healthy Communities, Schools and  
Workplaces

**Approved By:**       **Dr. Liana Nolan**, Commissioner / Medical Officer of Health

**Appendix A:  
Sample Strategic Partnership in Action Framework for Healthy Schools**

<b>Vision</b>	<b>Healthy Kids, Healthy School Communities</b>					
<b>Goal</b>	<b>To promote well-being of students in Waterloo Region to achieve excellence by:</b>					
	Influencing Strategic Direction	Influencing Environments: <small>Schools, Home and Communities</small>			Influencing Behaviours	
<b>Approach</b>	<b>Healthy Schools Approach</b>					
	Engage students, staff, parents/guardians and community Build collaborative and sustainable partnerships Ensuring systematic inquiry through an ongoing plan, act, assess, and reflect cycle Creating supportive environments that support health and well-being through comprehensive approaches					
<b>Guiding Principles</b>	Be evidence-informed Promote diversity and inclusion Balance societal good and individual needs Address disparities in health and well-being Encourage sustainable solutions Align strategic priorities for the well-being of school community Collaborate within reasonable means for each partner					
<b>Health Promotion Strategies</b>	<b>Assessment &amp; Research</b>	<b>Strategic Implementation of Ministry Policies</b>	<b>Community Partnerships</b>	<b>Instruction &amp; Programming Support</b>	<b>Social Marketing</b>	<b>Evaluation &amp; Knowledge Exchange</b>
<b>Priority Areas of Action</b>	<b>Promote Healthy Physical and Social Environments</b>					
	<b>Healthy eating</b>		<b>Physical activity and health</b>		<b>Positive Mental Health</b>	
<b>Supporting Health Topics</b>	Growth and Development		Personal Safety and Injury Prevention		Substance Misuse & Addiction Prevention	

### Attachment B: List of Public Health Services for Schools

	TOPIC	SERVICES
SERVICES AND CURRICULUM SUPPORTS	Dental Health	<ul style="list-style-type: none"> <li>• Screening at elementary schools for JK, SK and grade 2 students</li> </ul>
	Environmental Health	<ul style="list-style-type: none"> <li>• Extreme weather and outdoor air quality resources</li> <li>• Safe drinking water resources</li> </ul>
	Epidemiology	<ul style="list-style-type: none"> <li>• Reports and fact sheets</li> </ul>
	Healthy Growth & Development	<ul style="list-style-type: none"> <li>• Nipissing screen distribution to JK, SK and Grade 1 students</li> <li>• Nutri e-step screen distribution to JK students</li> <li>• Resources and information for kids age 0 - 6</li> </ul>
	Immunization	<ul style="list-style-type: none"> <li>• School Immunization Clinics</li> <li>• Catch Up Clinics</li> <li>• Hepatitis B Clinics</li> <li>• Meningitis Clinics</li> <li>• Human Papilloma Virus (HPV) Clinics</li> </ul>
	Infectious Diseases	<ul style="list-style-type: none"> <li>• Influenza Clinic</li> <li>• TB Skin Testing for secondary students</li> <li>• Hand washing resources</li> <li>• Guidelines to prevent and manage infectious diseases at schools</li> </ul>
	Resource Centre	<ul style="list-style-type: none"> <li>• Resources with lesson plan ideas, games, models, DVDs, posters, and more</li> </ul>
	Road Safety & injury prevention	<ul style="list-style-type: none"> <li>• Resources and information</li> </ul>
	Sexual Health	<ul style="list-style-type: none"> <li>• Girl Time program for grades 7-8 girls</li> <li>• Public Health Nurses available half a day/week at secondary public schools to provide counselling, education, support and resources to students</li> <li>• Public Health Nurses available to provide curriculum support to secondary catholic schools upon request</li> <li>• Sexual Health Counselling by appointment</li> <li>• Sexually Transmitted Infections (STI) and HIV testing</li> <li>• Growing Bodies Open Minds - parent only session on how to talk to your child about sexual health</li> </ul>
	Skin Cancer Prevention - Ultraviolet Radiation (UVR)	<ul style="list-style-type: none"> <li>• Consultation with a Public Health Nurse for school staff, students and parents on how to develop sun protection policies, guidelines and procedures and how to create shade</li> <li>• Resources about UVR protection and increasing shade on school site</li> </ul>
CURRICULUM	Substance Misuse Prevention	<ul style="list-style-type: none"> <li>• Resources and information</li> </ul>
	Tobacco Prevention,	<ul style="list-style-type: none"> <li>• Consultation with a Public Health Nurse for school staff, students and</li> </ul>

	TOPIC	SERVICES
	Protection and Cessation	<p>parents on tobacco related topics</p> <ul style="list-style-type: none"> <li>Resources to prevent tobacco use among youth</li> <li>Consultation with a Youth Engagement Lead for school staff about how to engage youth to create a tobacco prevention strategy</li> </ul>
	Youth Engagement	<ul style="list-style-type: none"> <li>Tool kit with resources to engage youth in diverse activities</li> </ul>
SUPPORTING HEALTHY SCHOOLS	Supporting Healthy Schools	<ul style="list-style-type: none"> <li>Process and tools to improve your school health and student well-being</li> <li>A Public Health Nurse is available for consultation on how to implement the Healthy Schools approach and the use of the various tools</li> </ul>
	Healthy Eating	<p>Ready to use action plans for:</p> <ul style="list-style-type: none"> <li>Supporting Healthy Fundraising, Celebrations and Special Events</li> <li>Healthier Lunches and Snacks</li> <li>Learning About Growing and Cooking Food</li> </ul>
	Physical Activity	<p>Ready to use action plans for:</p> <ul style="list-style-type: none"> <li>STEP IN Weekly Walk &amp; Roll Program</li> <li>School Travel Planning</li> <li>PALS</li> </ul>
	Positive Mental Health	<ul style="list-style-type: none"> <li>Information and links to external organizations</li> </ul>
ENFORCEMENT AND MANDATORY SERVICES	Immunization of School's Pupils Act	<ul style="list-style-type: none"> <li>Information about Public Health role, exceptions and reporting immunizations</li> </ul>
	Inspections	<ul style="list-style-type: none"> <li>Inspections of school cafeterias</li> <li>Information about inspection of swimming pools, food premises, Hair and Beauty Salons, etc.</li> </ul>
	Infection Control and Reportable Diseases	<ul style="list-style-type: none"> <li>Guidelines to prevent and manage infectious diseases at schools</li> <li>Inspections, investigation and follow-up of Reportable Diseases</li> <li>Response to infection control complaints and outbreaks</li> <li>Response to potential exposure to Rabies virus</li> <li>Public Health Inspector on-call for reporting diseases, enteric outbreaks or to obtain information on cleaning/sanitation guidelines, water quality and safe food handling</li> </ul>
	Tobacco Enforcement Activities	<ul style="list-style-type: none"> <li>School Inspections</li> <li>Response to complaints</li> <li>Information</li> </ul>



Report: PHE-PSV-16-02

**Region of Waterloo**  
**Public Health and Emergency Services**  
**Paramedic Services**

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**To:** Chair Geoff Lorentz and Members of the Community Services Committee

**Date:** February 23, 2016                      **File Code:** P05-10

**Subject: Paramedic Services Ambulance Service Review Update**

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**Recommendation:**

For information

**Summary:**

The Region of Waterloo Paramedic Services underwent an Ambulance Service Review by the Ministry of Health and Long Term Care November 23-25, 2015 as part of their legislated requirement. Every three (3) years the Paramedic Services are required to undergo a provincial Ambulance Service Review in order to obtain a license to operate.

In addition to successfully completing the review process, the Region of Waterloo Paramedic Services was **commended** specifically for their efforts in the following areas:

- Level of Service
- Quality assurance initiatives with community agencies
- Training
- Human Resource Inventory (HRI) Files

Overall the Ambulance Service Review was a great affirmation of the changes that have been incorporated in Paramedic Services, with the support of Regional Council. The Region of Waterloo Paramedic Services performed admirably in the review and was successful in obtaining a license to operate land ambulance service for another 3 year period.

**Report:**

The Region of Waterloo Paramedic Services underwent Ambulance Service Review by the Ministry of Health and Long Term Care November 23-25, 2015 as part of their legislated requirement. The Ministry of Health of Long Term Care conducts an Ambulance Service Review prior to the expiration of an existing certificate to confirm that the provider meets legislated certification standards.

Legislated standards include:

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

The Ambulance Service Review focuses upon three main areas:

- Patient Care
- Quality Assurance
- Administration

The Ambulance Service Review found that the Region of Waterloo Paramedic Services has **met** the requirements of the Land Ambulance Service Certification Standards, and a renewal certificate for a 3 year period will be issued. The review included the following areas:

- 1) The review of ACR (Ambulance Call Reports) demonstrated that patient care was provided in accordance with the Advanced Life Support (ALS)/Basic Life Support (BLS) Patient Care Standards. The service was commended for their level of performance in this area.
- 2) Equipment and supplies were reviewed, in accordance with the Provincial Equipment Standards for Ontario Ambulance Services. The Service was commended for the level of performance in this area.
- 3) The Service Provider's Preventative Maintenance was reviewed including inspection and maintenance schedule. Vehicle, maintenance and repair records were also reviewed.
- 4) The review of Human Resource Inventory (HRI) files included quality assurance

components, and immunization status requirements. The Service Provider is commended for the level of performance in this area.

The paramedics, logistics and planning, as well as professional standards and administrative staff, ought to be commended for their effort put forth in obtaining such a positive and affirming report.

**Corporate Strategic Plan:**

Strategic Goal 5 – Responsive and Engaging governmental services

5.2 – Provide excellent citizen-centered services

**Financial Implications:**

No financial implications at this time

**Other Department Consultations/Concurrence:**

Nil

**Attachments**

Appendix A: CAO Letter – Waterloo Ambulance Service Review Results

**Prepared By:**           **Stephen Van Valkenburg**, Chief, Paramedic Services

**Approved By:**       **Dr. Liana Nolan**, Commissioner / Medical Officer of Health

**Appendix A:****Ministry of Health and  
Long-Term Care**

Emergency Health  
Services Branch – ICRCG  
590 Rossland Rd. E.  
Whitby ON L1N 9G5  
Tel.: 905-665-8086  
Fax: 905-665-4044

**Ministère de la Santé et des  
Soins de longue durée**

Direction des services de  
santé d'urgence - ICRCG  
590 rue Rossland E.  
Whitby ON L1N 9G5  
Tél.: 905-665-8086  
Télééc.: 905-665-4044



February 2, 2016

Michael Murray  
Chief Administrative Officer  
The Regional Municipality of Waterloo  
150 Frederick Street  
Kitchener ON N2G 4J3

Dear Mr. Murray:

This communication is to advise you that the Region of Waterloo Paramedic Services was successful in meeting the legislated requirements for certification as a land ambulance operator in the Province of Ontario.

A report with our observations from the recertification inspection conducted November 24-25, 2015 was provided to Mr. Van Valkenburg on February 2, 2016. Typically the Service Provider will communicate with Emergency Health Services Branch respecting any observations. The Region of Waterloo Paramedic Services continues working collaboratively with the ministry to ensure excellence in ambulance services in the Region of Waterloo and to all Ontarians.

The Region of Waterloo Paramedic Services was commended for their efforts in the following areas:

- Level of Service
- Quality assurance initiatives with community agencies
- Training
- HRI Files

Should you have any questions respecting the report, please contact Stephen or myself anytime.

Sincerely,

Michael Bay  
Manager  
Inspections and Certifications

cc: Dr. Liana Nolan, CMOH, The Regional Municipality of Waterloo  
Mr. Stephen Van Valkenburg, Chief, Region of Waterloo Paramedic Services  
Mr. Tarmo Uukkivi, Director, EHSB  
Ms. Mary Vahaviolos, Senior Manager, EHSB  
Mr. Arthur Graham, Senior Manager, EHSB  
Ms. Kim Charlebois, Field Manager, EHSB

<b>Council Enquires and Requests for Information</b>				
<b>Community Services Committee</b>				
<b>Meeting date</b>	<b>Requestor</b>	<b>Request</b>	<b>Assigned Department</b>	<b>Anticipated Response Date</b>
Feb 2/2016	CS Committee	That staff review options and previous resolutions in relation to a basic income guarantee and report back to the Committee	Community Services	May/June 2016



































## HOW CAN I LEARN MORE?

### Watch

There are many great videos (local and beyond) and movies about homelessness.

#### Video Clips

[Raising the ROOF – The Homeless Read Mean Tweets](#) (2015)

[Rethink Homelessness – Cardboard Stories](#) (2014)

#### TV Shows

[How Can a Cold Man Understand a Warm Man, Why Poverty Ontario Short Documentary](#), TVO (2015)

[60 Minutes – Hard Time Generation: Homeless Kids](#) (2011)

#### Movies

**Time Out of Mind** (2015)  
starring Richard Gere

**The Soloist** (2009)  
starring Jamie Foxx and Robert Downey Jr.  
(based on the true story of Nathaniel Ayers)

**The Pursuit of Happyness** (2006)  
starring Will Smith (based on the true story of Chris Gardner)

**Homeless to Harvard: The Liz Murray Story** (2003)  
(based on a true story)

**Ironweed** (1987)  
starring Jack Nicholson and Meryl Streep

#### Documentaries

**Lowdown Tracks** (2015)  
A documentary made by award-winning filmmaker Shelley Saywell, of Bishari Films

**Carts of Darkness** (2008)  
This documentary follows a group of homeless men who have combined bottle picking with the extreme sport of racing shopping carts. Director Murray Siple

**Dark Days** (2000)  
A documentary made by Marc Singer, a British filmmaker. The film follows a group of people living in an abandoned section of the New York City underground railway system, more precisely the area of the so-called Freedom Tunnel.

**112**  
families accessed  
emergency  
shelters from  
April 1, 2014 to  
March 31, 2015

### Plays

**Myra's Story** (2013)

A one-woman show that explores the life of a homeless woman in Dublin

### Local Videos

STEP Home [watch](#)

20,000 Homes [watch](#)

Circle of Friends [watch](#)

## Speakers

There are a number of housing stability agency staff, Regional staff from Housing Services and/or people with lived experience that may be available to speak to your church, class, event etc.

Contact the Homelessness and Housing Umbrella Group (HHUG) at [www.hhug.ca](http://www.hhug.ca) or agencies listed on [page 15](#) of this document.

## Events

You can also attend annual events held within our community.

National Housing Day is celebrated each year on or around November 22. Search National Housing Day in Waterloo Region online.



# LEND



“volunteering  
changes  
the volunteer”

LEARN

LEND

LEAD

## HOW YOU CAN SUPPORT

**There are many ways that you can LEND your support to our collective efforts to end homelessness. You can volunteer your time, give money and/or donate items.**

Here are some of the key non-profit agencies directly working to end homelessness in our community that need your support:

[Argus Residence For Young People](#) 519-623-7991

[Cambridge Self-Help Food Bank](#) 519-622-6550

[Cambridge Shelter Corporation](#) 519-624-9305

[House of Friendship](#) 519-742-8327

[Kitchener Downtown Community Health Centre](#) 519-745-4404

[Lutherwood](#) 519-884-7755

[Marillac Place](#) 519-571-0722

[Mennonite Central Committee - Circle of Friends](#) 519-745-8458

[Monica Place](#) 519-743-0291

[oneROOF Youth Services](#) 519-742-2788 ext. 212

[Supportive Housing of Waterloo \(SHOW\)](#) 519-886-8200

[The Working Centre](#) 519-743-1151

[Waterloo Regional Homes for Mental Health](#) 519-742-3191

[YWCA Kitchener-Waterloo](#) 519 576-8856

Organizations that provide on-going support to many of these agencies include:

[United Way Cambridge and North Dumfries](#) 519-621-1030

[United Way Kitchener Waterloo and Area](#) 519-888-6100

[The Food Bank of Waterloo Region](#) 519-743-5576



## Donating Items

In addition to the agencies and programs that are **directly working to end homelessness**, there are also many shops, community resources, online resources, and services that help people to set up their new home for little or no money.

The Waterloo Region [“Make It a Home” Access Guide](#) lists over 25 different shops, community resources, online resources, and services to which you can donate new or used goods.

Remember if you are looking to donate goods directly to one of the agencies on [page 15](#), contact them first to ensure they are able to receive your donation or to find out what is needed most right now.

LEND

**“knowing what it’s like  
‘cause you’ve been there”**

**“volunteering = personal development”**

**“volunteer with a pure unselfish motive and you will  
be blessed more than those you set out to help”**

**“volunteering = increasing awareness of my community”**

# Organize a Third Party Fundraising Event

**Agencies in Waterloo Region working to end homelessness appreciate the generous support they receive from the local community.**

One of the ways they receive support is through third-party fundraising events sponsored by various organizations and individuals within the community. Hosting an event in support of an agency can be a great way to help make a difference in our community and have a lot of fun in the process.

Need an idea of what kind of event to host? From dinner parties to bake sales to casual Friday, there's no event too large or small. Be sure to check with the agency in advance regarding any terms and conditions for hosting third party events on their behalf.

## At home

- yard sale or neighbourhood sale
- host a party and ask for donations in lieu of a hostess gift (street party, pool party, garden party, wine and cheese, cocktail, cook-off, sporting event)
- request donations in lieu of gifts for a birthday or anniversary

## At work

- coffee and cake for a donation
- mini bake sale or craft sale
- casual day
- 50/50 draw
- collect needed items as part of holiday celebrations
- recipe book sale

**“to make a  
difference  
in others’ lives”**

## Anywhere

- sales (e.g., books, plants, used toys)
- bike rides, walks or runs
- tournaments (ping pong, badminton, softball, soccer, frisbee, video games, Wii)
- auctions (art, silent, services)
- benefit concert
- BBQs

**“I always gain more from  
the person I set out to help”**

# Raise Money or Lend Your Time

There are other local community initiatives happening in Waterloo Region that you can participate in or donate to.

Here are a few examples:

Hockey Helps the Homeless Kitchener Event  
[www.hockeyhelpsthehomeless.com](http://www.hockeyhelpsthehomeless.com)

Soup Sisters or Broth Brothers (local chapter Kitchener-Waterloo)  
[www.soupsisters.org](http://www.soupsisters.org)

Monsignor Doyle, Into the Cold Event Cambridge, 519-622-1290

Call to Action hosted by OneROOF. Annual speaker  
For more information call 519-742-2788 x212

“putting the power in empowerment”

“giving back”

“using my skills and gifts and developing new ones”

“giving hope”

“more attention is paid to homelessness than ever before because of all the people that donate their time to help others in our community”

## Volunteering your time can make a significant impact in the lives of people experiencing homelessness or members of our community at-risk of homelessness.

Ideas for ways you can volunteer include:

- Helping out at shelters or meal programs
- Helping out at fundraising and awareness events
- Being part of a Circle of Friends

To find out more, contact the agencies listed on [page 15](#) of this Guide directly and/or contact:

The United Way of Cambridge Volunteer Centre  
[www.uwcambridge.on.ca/volunteer-centre.php](http://www.uwcambridge.on.ca/volunteer-centre.php)

The Kitchener-Waterloo Volunteer Action Centre  
[www.volunteerkw.ca](http://www.volunteerkw.ca)

“sense of purpose”

“giving transforms the giver”

“fairness”

“gratitude”

“I volunteer to empower others”







## LANGUAGE GUIDE

# How to talk about housing stability.

**When talking about housing stability it is important to be aware of the words we use. Language plays an important role in shaping how we think about the world and the people around us.**

Some phrases or words that were used to talk about homelessness in the past are now considered out-dated, and may reinforce negative stereotypes. Use the following principles:

**Remember to **focus** on the solution rather than the problem.**

e.g. Housing stability rather than homelessness.

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**Remember to **use “people first” language.****

e.g. Instead of “homeless person” or “street person” say “person experiencing homelessness”.

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**Remember to **avoid blaming people.****

e.g. Rather than people being “hard to house” recognize the community doesn’t currently have the right housing or support to meet everyone’s needs.

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Further information is available in the Homelessness to [Housing Stability Language Guide](#).

