



REGIONAL MUNICIPALITY OF WATERLOO COMMUNITY SERVICES COMMITTEE MINUTES

Tuesday, May 24, 2011
1:16 p.m.
Regional Council Chamber
150 Frederick Street, Kitchener, Ontario

Present were: Chair S. Strickland, L. Armstrong, T. Cowan*, R. Deutschmann*, T. Galloway, J. Haalboom, B. Halloran*, R. Kelterborn, G. Lorentz*, C. Millar, J. Mitchell, K. Seiling, J. Wideman* and C. Zehr

Members absent: J. Brewer and D. Craig

MOTION TO RECONVENE INTO OPEN SESSION

MOVED by L. Armstrong
SECONDED by J. Haalboom

THAT the meeting reconvene into open session.

CARRIED

DECLARATIONS OF PECUNIARY INTEREST UNDER THE *MUNICIPAL CONFLICT OF INTEREST ACT*

None declared

DELEGATIONS

a) Mark Eys and Monica Morrison, Healthy Communities Partnership Advisory Committee, addressed the Committee Re: PH-11-023, Waterloo Region Healthy Communities Partnership; a [copy of their presentation](#) is appended to the original minutes.

* J. Wideman joined the meeting at 1:18 p.m.

M. Eys identified the members of the interim advisory committee, which was established in 2009 with a focus on the partnership stream of the Healthy Communities Framework. He provided an overview of the six provincially mandated priority areas and the vision, mission and goals of the local advisory committee.

M. Morrison outlined the purpose of the *Community Picture* and its development through consultation and priority setting. A copy of the draft *Community Picture* was distributed to the Committee; it will be formally released once the Ministry approves the document and is appended to the original minutes. She summarized the broad findings of the community consultation and engagement process and stated that the advisory committee will focus on three top priority areas, as noted in the staff report. She identified the key recommendations of the advisory committee, which include meaningful collaboration to reduce health inequalities; the implementation of actions to address barriers related to poverty; and, ensuring that the interim group reflects the diversity of our community in planning and decision-making. She stated that health promotion is as important as economic development and that once the province has approved the *Community Picture*, the Waterloo Region Food System Roundtable has agreed to lead the food system priority and the Waterloo Region Active Living Network has agreed, in principle, to take the lead on the physical activity priority.

In response to a Committee question about responsibility for allocating funding to programs that address the priority areas, Jennifer Toews, Public Health Planner, stated that the province is responsible for allocating funds.

M. Eys responded to Committee inquiries related to the affordability of recreation and sports programs, and funding resources available through local area municipalities. He stated that the Active Living Network has representation from the area municipalities and will be reviewing funding sources and this issue in greater detail to ensure that the specific needs of each community is addressed.

* G. Lorentz left the meeting at 1:33 p.m.

In response to a Committee concern about the feasibility of implementing programs that will address the local issues, M. Morrison responded that this concern has been discussed by the members of the advisory committee and, as decision-makers, they have confidence in achieving the goals. J. Toews stated that the process was mandated by the province and, as such, every Public Health unit in Ontario is undertaking this process and moving forward.

* G. Lorentz returned to the meeting at 1:37 p.m.

Dr. Liana Nolan, Commissioner/Medical Officer of Health, stated that she is hopeful that all actions will come to fruition based on the province's focus on action and policy.

Chair Strickland stated that the Committee is interested in receiving updated information on the actions and activities of the various collaborative groups and advisory committees that have been established in cooperation with the Region and he suggested that senior staff provide regular summaries to the Committee with updated information.

PRESENTATIONS

a) Carol Simpson, Executive Director, Workforce Planning Board of Waterloo Wellington Dufferin, gave a presentation Re: 2011 Local Labour Market Plan; a [copy of the presentation](#) is appended to the original minutes.

She advised that the data sources for the current Plan included the Monthly Labour Force Survey (Statistics Canada); Canadian Business Patterns and Taxfiler. She provided data for an industry overview citing education levels and the significant population growth as contributing factors to the increased unemployment rate.

* T. Cowan joined the meeting at 1:43 p.m.

She identified the areas of business growth and decline, noting that the data suggests that the worst of the recession impact has already been felt locally. She highlighted the animal production industry and the professional scientific and technical sector where, locally, the Region has higher and lower concentrations, respectively. She noted that the truck transportation sector has potential for growth but there continues to be a shortage of drivers. There is employment growth among larger employers in the finance and insurance sector due to the local economic stability but there is low turnover and this could result in succession planning issues in the future. She summarized the strategic priorities for the Board, which include education/training, older workers retention, youth workforce engagement and under-represented populations in the workforce. She advised that copies of the [Local Labour Market Plan 2011](#) is available on the website and that a formal launch is planned in the future.

C. Simpson responded to Committee questions regarding statistics for the scientific/technology sector and the use of Census data.

REPORTS – Public Healtha) PH-11-023, Waterloo Region [Healthy Communities Partnership](#)

Received for information

b) PH-11-024, Suicide in Waterloo Region: A Health Status Report

Dr. Nolan introduced Jessica Deming, Epidemiologist, who provided an overview of the report highlights and advised that this report is the first health status report that focuses on suicide and suicidal behaviour in the Region.

* R. Deutschmann left the meeting at 1:57 p.m.

Dr. Nolan emphasized the importance of collaboratively establishing staff resources and a safe environment to adequately assist patients at risk of suicide. She responded to Committee questions regarding potential facility accommodations, funding and advocacy.

* B. Halloran left the meeting at 2:01 p.m.

T. Galloway suggested a friendly amendment to the recommendation and asked that the staff report also be distributed to each of the three local hospitals, the Local Health Integration Network and the local branch of the Canadian Mental Health Association.

In response to a Committee question about the gaps in patient support, Dr. Nolan advised that the Waterloo Region Suicide Prevention Council is working on addressing issues related to families in crisis and education; this staff report only gives the broader context. A report will be released in the fall and will contain specifics about local community needs.

* J. Wideman left the meeting at 2:10 p.m.

MOVED by C. Zehr
SECONDED by T. Galloway

THAT the Regional Municipality of Waterloo sends a copy of report PH-11-024 and correspondence to the Chief Coroner of Ontario, the Chief Medical Officer of Health of Ontario, and the Minister of Health of Ontario, recommending that at least one emergency department per regional hub be equipped with a completely safe physical environment for patients at risk of suicide and mental health professionals with the expertise to appropriately assess and manage such high-risk individuals, pursuant to Report PH-11-024, dated May 24, 2011;

AND THAT the Regional Municipality of Waterloo forward a copy of report PH-11-024 to the Association of Local Public Health Agencies, the Waterloo Wellington Local Health Integration Network, Grand River Hospital, St. Mary's Hospital, Cambridge Memorial Hospital and the Canadian Mental Health Association.

CARRIED, as amended

c) PH-11-025, Healthy Smiles Ontario – Update

Dr. Robert Hawkins, Dental Consultant, provided an update on the program and its related activities. He advised that Public Health staff to continue to be responsible for assessing client eligibility, despite the lack of provincial funding to offset this process.

MOVED by L. Armstrong
SECONDED by J. Mitchell

THAT the Regional Municipality of Waterloo request the Ontario Ministry of Health and Long-Term Care continue to fund the costs associated with the client eligibility process of Healthy Smiles Ontario until that process is centralized at the provincial level;

AND THAT the Regional Municipality of Waterloo forward a letter with the recommendation and a copy of this report to the Association of Local Public Health Agencies (aLPHa), as outlined in Report PH-11-025, dated May 24, 2011.

CARRIED

REPORTS – Social Services

d) SS-11-021, Update on Best Start Child and Family Centres

Nancy Dickieson, Acting Commissioner, Social Services, responded to a Committee inquiry about the probability of additional local schools being included in the initiative, by stating that a provincial announcement is pending.

Received for information

e) SS-11-022, Aboriginal Service Plan and Funding Allocation

N. Dickieson provided an overview of the provincial requirement and the process being undertaken by the parent committee to demonstrate compliance. She responded to Committee questions about terms of reference, outreach programs and funding sources, and advised that the proposal has been vetted through local aboriginal community representatives.

* J. Wideman returned to the meeting at 2:20 p.m.

MOVED by J. Haalboom

SECONDED by L. Armstrong

THAT the Regional Municipality of Waterloo approve the 2011 Aboriginal Service Plan conditional on Provincial funding as outlined in report SS-11-022, dated May 24, 2011.

CARRIED

f) SS-11-023, Resiliency Initiative Funding for Children's Services

N. Dickieson stated that the funding will support three local workshops and assist operators in dealing with the impact and transition process of the full-day kindergarten program.

MOVED by J. Mitchell

SECONDED by J. Haalboom

THAT the Regional Municipality of Waterloo enter into a funding agreement with the Resiliency Initiative Waterloo Region as outlined in SS-11-023, May 24, 2011;

AND THAT the 2011 Operating Budget for Children's Services be increased by \$10,000 gross and \$0 net Regional levy as outlined in Report SS-10-018.

CARRIED

g) SS-11-024, Enhanced Employment Services Initiative for Vulnerable Persons

Received for information

INFORMATION/CORRESPONDENCE

- a) Memo: Voice Mail Service Through the Regional Employment Resource Centres

Received for information

- b) Ministry of Community and Social Services Re: Launch of Licensing Inspection Findings on the Licensed Child Care Website

Received for information

- c) Region of Waterloo Social Services Annual Report 2010: Highlights

Received for information

- d) [Memo](#): Ontario Works Postal Strike Contingency Plan

Received for information

OTHER BUSINESS

- a) Council Enquiries and Requests for Information Tracking List

Received for information

- b) EcoFest

Rob Horne, Commissioner, Planning, Housing and Community Services, invited the Committee to attend the free event to be held at the Waterloo Region Museum on Saturday, June 4, 2011.

NEXT MEETING – June 7, 2011**ADJOURN**

MOVED by T. Cowan

SECONDED by T. Galloway

THAT the meeting adjourn at 2:25 p.m.

CARRIED

COMMITTEE CHAIR, S. Strickland

COMMITTEE CLERK, S. Natolochny

**Waterloo Region
Healthy Communities Partnership
(WR HCP)**

A Focus on Prevention

Healthy Communities Overview

- Healthy Communities Partnerships mandated by Ministry of Health Promotion and Sport
- Coordinated through Public Health
- Healthy Communities Partnerships work to create local policies that make it easier to be healthy

Functions

- Community Engagement and Planning
- Partnership Development
- Community Action to Build Local Healthy Public Policy

Six Priority Areas for Healthy Communities

Physical Activity, Sport and Recreation	Injury Prevention	Healthy Eating	Tobacco Use/ Exposure	Substance and Alcohol Misuse	Mental Health Promotion
<ul style="list-style-type: none"> • Increase access to physical activity, sport and recreation • Support active transportation & improve the built environment 	<ul style="list-style-type: none"> • Promote safe environments that prevent injury • Increase public awareness of the predictable and preventable nature of most injuries 	<ul style="list-style-type: none"> • Increase access to healthier food • Develop food skills and healthy eating practices 	<ul style="list-style-type: none"> • Increase access to tobacco free environments 	<ul style="list-style-type: none"> • Support the reduction of binge drinking • Build resiliency and engage youth in substance misuse prevention strategies 	<ul style="list-style-type: none"> • Reduce stigma and discrimination • Improve knowledge and awareness of mental health issues • Foster environments that support resiliency

WR HCP Interim Advisory Group Members

Christie Ertel, St. John's Ambulance

Heather Melo, City of Cambridge

Jodi Murray, Conestoga College

Laura-lee Dam, Ministry of Health Promotion & Sport

Linda Terry, Social Planning Council of Cambridge

Mark Eys, Wilfrid Laurier University

Mary MacKeigan, Opportunities Waterloo Region

Monica Morrison, Community Support Connections

Pat Allan, Centre for Addiction and Mental Health

Patricia Syms Sutherland, Waterloo Wellington Local Health Integration Network

Rob Martin, Waterloo Region Homes for Mental Health

Sam AbiSaab, Heart & Stroke Foundation

Katherine Pigott, Public Health

Jennifer Toews, Public Health

Vision

Our community working together to lead healthy and active lives

Mission

The Waterloo Region Healthy Communities Partnership exists to mobilize strategic action for policy change for healthy and active lives.

Goals

- create, strengthen and implement policies, practices and programs that make it easier to be healthy and active
- build health and well-being through collaborative and coordinated action
- build the capacity of community leaders to work together on healthy and active living

(from the draft Terms of Reference)

Community Picture

- Comprehensive profile of the Community
- Community Consultation and Engagement
- Priority Setting

Broad Findings

- The recent economic downturn and related changes in employment rates, housing costs and basic cost of food affects many individuals and their families in Waterloo Region, including the ability to support healthy and active lifestyles.
- Waterloo Region is a culturally diverse community. The health and well-being of immigrants influence the health of the broader community. A greater diversity of culturally appropriate resources is needed across multiple priority areas in Waterloo Region.
- Meaningful inclusion of priority populations will be required to plan and implement the proposed strategies across the six priority areas.

Three Top Priority Areas

1. Implement the *Healthy Community Food System Plan for Waterloo Region*
2. Improve the affordability and availability of physical activity, sports and recreation opportunities
3. Use social determinants of health approach to address the underlying contributing factors associated with mental health

Interim Advisory Group - Key Recommendations

- the WR HCP needs to work with and meaningfully include priority populations to reduce health inequities
- Poverty is a common risk factor among priority populations; take action on the barriers related to poverty.
- ensure that the WR HCP reflects diversity of our community in planning and decision making
- health promotion is as important as economic development

Health Promotion is a Community Investment!

- We are facing a preventable health care crisis
- 9/10 Ontarians think we need to invest more money in health promotion and introduce policy changes
- action needed at all levels
- HCP provides opportunity to create policies at the local level

Next Steps

Thank you



Workforce Planning Board
of Waterloo Wellington Dufferin

Labour Market Planning Update

May 24, 2011

Waterloo Region

Industry Overview

Employment Trend By Industry

Industry	2008	2009	2010	Abs Change 2008-2010
Total employed 000's	259.9	255.4	263.7	3.8
Goods-producing sector	73.8	70.9	72.3	-1.5
Agriculture	1.8	2.2	X	X
Forestry, fishing, mining, oil and gas	X	X	X	X
Utilities	1.8	1.8	X	X
Construction	17.1	16.2	15.7	-1.4
Manufacturing	52.7	50.4	53.7	1
Services-producing sector	186.1	184.5	191.5	5.4
Trade	40.6	37.7	39.3	-1.3
Transportation and warehousing	11.6	8.6	10.9	-1.7
Finance, insurance, real estate and leasing	18.9	18.8	22.3	3.4
Professional, scientific and technical services	15.8	16.5	17.6	1.8
Business, building and other support services	9.4	9.2	10.8	1.4
Educational services	27.5	29.0	24.2	-3.3
Health care and social assistance	20.2	23.4	22.3	2.1
Information, culture and recreation	9.2	8.3	8.8	-0.4
Accommodation and food services	13.8	15.0	15.8	2.0
Other services	11.0	10.0	11.5	0.5
Public administration	8.3	8.1	8.1	-0.2

X = Numbers suppressed – not available

KCMA Labour Force

Kitchener CMA (Adjusted)	February 2009	February 2010	February 2011
Population (K)	385.8	390.9	405.7
Labour Force (K)	278.9	273.7	290.4
Employment (K)	253.4	246	271.3
Unemployment (K)	25.5	27.7	19.1
Participation Rate %	72.3	70	71.6
Unemployment Rate %	9.1	10.1	6.6
Employment Rate %	65.7	62.9	66.9

K = 000's

Migration Patterns

Waterloo 2003 - 2008

Age Group	In-migrants	Out-migrants	Net-migrants
0-17	21,242	16,830	4,412
18-24	17,522	12,729	4,793
25-44	43,400	33,710	9,690
45-64	12,425	12,461	-36
65+	5,310	4,263	1,047
Total	99,899	79,993	19,906

Number of Business by Size Range

Waterloo 2008 - 2010

Employee Size Range	Number of Businesses		Absolute Change	Percent Change (%)
	Dec 2008	Dec 2010		
0	16,947	17,763	816	4.8
1 - 4	7,131	7,652	521	7.3
5 - 9	3,244	3,254	10	0.3
10 - 19	1,994	2,107	113	5.7
20-49	1,401	1,426	25	1.8
50-99	457	465	8	1.7
100-199	230	201	-29	-12.6
200-499	120	121	1	0.8
500+	45	41	-4	-8.9
Total	31,569	33,030	1,461	4.6

Top 10 Business Growth

Waterloo 2008 - 2010

NAICS	Total Businesses 2008	Total Businesses 2010	Absolute Change	Percent Change (%)
531 - Real Estate	2,785	3238	453	16.27
112 - Animal Production	822	1141	319	38.81
621 - Ambulatory Health Care Services	1,233	1379	146	11.84
623 - Nursing and Residential Care Facilities	93	213	120	129.03
238 - Specialty Trade Contractors	2,434	2536	102	4.19
111 - Crop Production	234	321	87	37.18
561 - Administrative and Support Services	1,283	1355	72	5.61
236 - Construction of Buildings	985	1052	67	6.80
813 - Religious, Grant-Making, Civic, and Professional and Similar Organizations	803	868	65	8.09
722 - Food Services and Drinking Places	1,011	1067	56	5.54

Top 10 Business Decline

Waterloo 2008 - 2010

NAICS	Total Businesses 2008	Total Businesses 2010	Absolute Change	Percent Change (%)
551 - Management of Companies and Enterprises	1,669	1601	-68	-4.07
447 - Gasoline Stations	224	179	-45	-20.09
484 - Truck Transportation	1,199	1155	-44	-3.67
418 - Miscellaneous Wholesaler-Distributors	285	259	-26	-9.12
532 - Rental and Leasing Services	253	231	-22	-8.70
711 - Performing Arts, Spectator Sports and Related Industries	204	183	-21	-10.29
333 - Machinery Manufacturing	284	267	-17	-5.99
541 - Professional, Scientific & Technical Services	4,004	3988	-16	-0.40
517 - Telecommunications	55	40	-15	-27.27
414 - Personal and Household Goods Wholesaler-Distributors	213	201	-12	-5.63

Concentration of Industry

Waterloo Versus Ontario

- Animal Production
3.6% vs. 2.2%
- Professional Scientific and Technical
12.1% vs. 15.1%

Businesses Featured in 2010 Report

Update from 2009-2010

Increases in # of businesses

- Crop Production +85
- Animal Production +327
- Professional, Scientific and Technical +134
- Fabricated Metal Manufacturers +12
- Food Manufacturers +6

Decreases in # of businesses

- Plastics & Rubber Products Manufacturers -1
- Transportation Equipment Manufacturers -1

New Industry Data

Truck Transportation

Truck Transportation - # of businesses

County	# of Businesses June 2009	# of Businesses June 2010	# of Businesses December 2010
Waterloo	1,185	1,177	1,155

Truck Transportation - # employed in SMEs

County	# Employed June 2009	# Employed June 2010
Waterloo	4,033	3,710

New Industry Data

Finance/Insurance

Finance and Insurance - # of businesses (NAICS 523/524)

County	# of Businesses June 2009	# of Businesses June 2010	# of Businesses December 2010
Waterloo	1,308/266	1,347/261	1,341/270

Finance and Insurance - # employed in SMEs (NAICS 523/524)

County	# Employed June 2009	# Employed June 2010
Waterloo	2,063/2,073	2,096/2,122

Strategic Priorities

#1 - Alignment of existing training/education programs to match shifting skill requirements

#2 - Marketing of existing employment opportunities to new workers and workers in transition

#3 - Rising Skill Demands/Shift in Key Employment Sector

#4 - Older Worker Retention Priority

#5 - Incorporating Under Represented Populations into the Workforce



Workforce Planning Board
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Region of Waterloo

Waterloo Region Healthy Communities Partnership Community Picture

Prepared for Region of Waterloo Public Health
Facilitated by Dillon Consulting Limited
Funded by the Government of Ontario

March 31, 2011



COMMUNITY PICTURE SUMMARY

Introduction

In Waterloo Region, Region of Waterloo Public Health (ROWPH) has been asked to establish and coordinate a Waterloo Region Healthy Communities Partnership (WR HCP). The **Waterloo Region Community Picture** provides a broad overview of the social, economic, political and environmental context related to the six Healthy Communities priority areas. It comprises a comprehensive profile of the community, including demographic make-up, health status data, current environment, strengths, opportunities and priority issues related to the six Healthy Communities priority areas: Physical Activity, Sport and Recreation; Injury Prevention; Healthy Eating; Tobacco Use and Exposure; Substance and Alcohol Misuse; and Mental Health Promotion.

Waterloo Region at a Glance

Waterloo Region includes the three cities of Cambridge, Kitchener and Waterloo, and the townships of North Dumfries, Wellesley, Wilmot, and Woolwich, blending a unique balance of urban and rural centres. With a population of just over half a million, Waterloo Region is one of the fastest growing areas in Ontario and is projected to grow from 523,000 in 2010 to 729,000 people by 2031. Priority populations in the region include seniors, immigrants, aboriginal people, Francophones, and Old Order Mennonites.

Broad findings

- The recent economic downturn and related changes in employment rates, housing costs and basic cost of food affects many individuals and their families in Waterloo Region, including the ability to support healthy and active lifestyles.
- Waterloo Region is a culturally diverse community. The health and well-being of immigrants influence the health of the broader community. A greater diversity of culturally appropriate resources is needed across multiple priority areas in Waterloo Region.
- Proposed strategies reflect a systems-based approach that mobilize collective action, build on existing programs, and create synergy across the six priority areas.
- Proposed strategies address required modifications in the built environment, supporting physical activity, healthy eating, mental health and well-being.
- Meaningful inclusion of priority populations will be required to plan and implement the proposed strategies across the six priority areas.

Community Consultation

Community stakeholders were engaged in a number of ways to capture their input to develop the Waterloo Region Community Picture, including (a) consultation with 20 Region of Waterloo Public Health staff; (b) key informant surveys with 19 local priority area experts; (c) two community consultation meetings with 58 community stakeholders; (d) an on-line survey with 105 community stakeholders; and (e) a priority setting meeting with 20 stakeholders.

Recommended Actions in Waterloo Region

1. Implement the *Healthy Community Food System Plan for Waterloo Region* which includes food skills and food access and to ensure that the plan addresses issues which contribute to the viability of local farms and to ensure access to healthy eating options through the implementation of regional and municipal planning, human services, and zoning support.
2. Improve the affordability and availability of physical activity, sports and recreation opportunities, including active transportation, at the neighbourhood level and region wide (including formal and informal).
3. Use social determinants of health approach to address the underlying contributing factors associated with mental health and to advocate for stakeholders to adopt and fund such an approach.
4. Improve food skills and food literacy in target populations, i.e., advocate for the re-introduction of home economics courses in the elementary and secondary school curriculum, develop food preparation courses for post-secondary school students in Universities and Colleges, and increase access to culturally appropriate foods for new Canadians through community kitchens.
5. Ensure available community capacity to meet rural and urban mental health related needs once awareness has been raised. This should be undertaken by involving people who receive the services.
6. Develop key intervention strategies and implement support for tobacco users (i.e., chew tobacco and water pipes) and current smokers who want to quit that meld professional tobacco cessation programs and support and peer-based cessation strategies.
7. Develop peer-led and facilitated injury prevention education programs, to include but not limited to falls prevention, concussion prevention, safe cycling, drowning prevention, self-harm prevention, suicide prevention, alcohol and prescription medication misuse/overdose.
8. Increase prevention efforts and the creation of policies to address the use of tobacco products (including smokeless tobacco), particularly among youth.
9. Creation and implementation of an Integrated Drugs Strategy using a comprehensive approach involving multiple perspectives and stakeholders addressing prevention, harm reduction, treatment and enforcement and justice.
10. Create a community (sport) health animator role to program, communicate and connect available resources.
11. Increase awareness and education efforts for harm reduction and substance and alcohol misuse prevention recognizing the contribution of alcohol and drug misuse on the development of diseases and illnesses and overall health of communities.
12. Carry out further research with injury prevention target groups to better understand their needs, including literacy and education levels and accessibility issues.



SOCIAL SERVICES

Employment and Income Support

Region of Waterloo

Date: May 24, 2011

MEMORANDUM

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

From: David Dirks, Director, Employment and Income Support

Copies: Michael Schuster, Commissioner, Social Services

File No.: S09-01

Subject: **POSTAL STRIKE CONTINGENCY PLAN FOR ONTARIO WORKS**

Background

The Canadian Union of Postal Workers (CUPW) will be in a legal strike position on Wednesday, May 25, 2011. CUPW will not deliver Ontario Works and Ontario Disability Support Program cheques during the strike. In anticipation Employment and Income Support, Social Services has developed a contingency plan to distribute the June monthly cheques to Ontario Works recipients. As a first step, Council was advised that we will no longer mail daily cheques effective Thursday, May 19th. This plan will be actioned once a strike is declared and no later than 12 noon Friday, May 27th to ensure that a person's monthly cheque is available.

Distribution Centres

Two centres will be established: 150 Main Street, Cambridge (Regional Offices) for those living in Cambridge and North Dumfries; and the Kitchener Auditorium for those living in Kitchener, Waterloo, Wellesley, Woolwich and Wilmot. These centres will be open from 9:30 AM to 4:00 PM from May 30th to June 1st. They will be operated by Regional staff.

Public Announcement and Next Steps

A variety of methods will be used to advise the community including: public service announcements, advertisements, posters in our offices, electronic information to community partners, common voice messaging within Ontario Works and direct contact with participants. Those who have their cheques directly deposited in their bank accounts (approximately 60% of the caseload) will not need to come to a reception centre. The caseload at end of April was 8,737.

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