

Regional Municipality of Waterloo

Community Services Committee

Minutes

Tuesday, April 12, 2016

1:16 p.m.

Regional Council Chamber

150 Frederick Street, Kitchener, Ontario

Present were: Chair G. Lorentz, L. Armstrong, E. Clarke, S. Foxtan, T. Galloway*, D. Jaworsky, H. Jowett, K. Kiefer, J. Mitchell, J. Nowak, K. Redman, K. Seiling, S. Shantz*, S. Strickland*, and B. Vrbanovic.

Absent: D. Craig

Declarations of Pecuniary Interest under “The Municipal Conflict of Interest Act”

K. Seiling declared a pecuniary interest with respect to item 2.8 on the Closed Committee Agenda due to his wife’s volunteer work.

E. Clarke declared a pecuniary interest with respect to item 2.7 on the Closed Committee Agenda due to her employment.

Delegations

- a) Dr. Fred Mather, Medical Director, Sunnyside Home re: CSD-SEN-16-01, Sunnyside Home Medical Director’s Report 2015

Dr. Mather provided a [presentation](#) outlining the work done at Sunnyside Home in 2015. A copy of the presentation is appended to the original minutes. He provided two examples of individuals that were admitted to the convalescent care unit. In both of these cases it was possible to defer their admission to long term care by helping them return to their greatest possible level of independence.

*S. Shantz entered the meeting at 1:24 p.m.

*T. Galloway entered the meeting at 1:31 p.m.

Dr. Mather advised the Committee that Sunnyside Home has improved in relation to most of targets for the Quality Improvement Plan. However, there is room for further improvement in relation to falls and pressure ulcers. He noted that some of the high fall numbers are as a result of the fact that if a person falls in the thirty days before admittance it is included in the statistics. He outlined how they are working to avoid transfers, including advance care plans and increasing the availability of diagnostic tools in the home.

In response to a question from the Committee, Dr. Mather stated that they have been advocating for changes in how the fall data is calculated.

The Committee thanked Dr. Mather for the presentation and for the work done by the staff and volunteers at Sunnyside Home.

Received for information.

b) Melissa Webster, Erma Friesen and Birgit Lingenberg re: CSD-EIS-16-06,
Employment and Income Support Community Advisory Committee Annual Report

Nina Bailey-Dick, Social Planning Associate, provided an overview of the Committee membership. She introduced the delegation and explained that they are all participant members from the Employment and Income Support Community Advisory Committee (EISCAC).

M. Webster stated that EISCAC is an enlightening group that she is proud to be a member of. She explained that in 2015, EISCAC successfully worked with community partners who were seeing fewer referrals as a result of issues that Regional staff were having with new Ontario Works technology. Letters were sent on behalf of EISCAC to the provincial government to express concerns that this would result in funding reductions. The province's response indicated that this would not affect the funding for the community partners.

E. Friesen stated that EISCAC has been an educating experience for her and that it gives her an opportunity to express her views on issues. She stated that by working with EISCAC she was able to help a friend that was living in deplorable conditions.

B. Lingenberg noted that EISCAC is a necessary committee that provides individuals with lower incomes with an opportunity to provide their view on important services.

The Committee thanked the delegation for their service on EISCAC and noted that similar committees do not exist in many other jurisdictions.

Received for information.
2109629

c) John Goodwin re: Haven House

J. Goodwin appeared before the Committee on behalf of the Women's Crisis Services of Waterloo Region. He provided a [written submission](#) that is appended to the original minutes. J. Goodwin stated that they are currently working on rebuilding Haven House, an emergency shelter for abused women and children in Cambridge. He thanked the Region for its financial support and continuing to advocate on behalf of the project. J. Goodwin explained that they have raised \$6.9 million of their \$9.4 million campaign largely through local community support and with very little funding from the provincial or federal governments

In response to a question from the Committee, J. Goodwin stated that the province contributed the original land for Haven House but have not provided any additional funds for the reconstruction. They are working to gain access to federal funding but may not be able to qualify because construction has already started.

The Committee thanked J. Goodwin for the presentation.

Consent Agenda Items

Request to Remove Items From Consent Agenda

There were no requests to remove items from the consent agenda.

L. Armstrong noted that he was pleased to see that the Federation of Canadian Municipalities is supporting working with publishing houses on ebooks.

Motion to Approve Items or Receive for Information

Moved by L. Armstrong

Seconded by K. Kiefer

That the following items be approved:

- That the Regional Municipality of Waterloo enter into a funding contract effective April 1, 2016 with Sunshine Montessori School Limited, operated as Sunshine Montessori, located at 10 Boniface, Kitchener, Ontario, as outlined in report CSD-CHS-16-10, dated April 12, 2016.
- That the Regional Municipality of Waterloo formally endorse the 2016 Federation of Canadian Municipalities (FCM) resolution requesting the Federal Government to examine publishers' current practices in making eBooks available to public libraries, as described in Report PDL-LIB-16-04, dated April 12, 2016.

And that the following items be received for information:

2109629

- CSD-HOU-16-02, New Provincial and Federal Investments in Affordable and Supportive Housing
- CSD-EIS-16-05, Waterloo Region Energy Assistance Program (WREAP) Update
- CSD-CHS-16-08, Provincial Announcement Ontario Early Years Child and Family Centres
- PDL-CUL-16-06, Volunteer Programs at the Region of Waterloo Museums in 2015
- PHE-HPI-16-02, Quarterly Charged/Closed Food Premises Report
- PHE-CRS-16-01, 2015 Public Health and Emergency Services Annual Report

Carried

Regular Agenda Resumes

Reports – Community Services

CSD-CHS-16-09, Capacity Building Role of Consolidated Municipal Service Manager

Nancy Dickieson, Director, Children's Services, provided a [presentation](#) on the capacity building actions that have occurred in the Early Learning and Child Care (ELCC) sector over the last five years. A copy of the presentation is appended to the original minutes. She explained that the ELCC sector is in a period of significant change due to the implementation of full day kindergarten and the introduction of the Child Care and Early Years Act. As the service manager, staff have been working on how to assist with stabilizing the sector and building a high quality licenced ELCC system. She provided an overview of the various initiatives that have been undertaken in this regard including new policies and resources, implementation of OneList Waterloo Region, and developing tools to help providers identify underserved areas. She also noted that the change to base funding for operators has been designed to improve affordability for parents.

N. Dickieson explained that the next steps include a community engagement process for the 2016-2020 ELCC Service Plan and planning for where new child care infrastructure should be located.

Received for information.

Reports – Planning, Development and Legislative Services

PDL-CUL-16-05, Public Art Selection Process for the ION LRT in Kitchener and Waterloo

J. Mitchell and T. Galloway stated that they would be interested in serving on the jury for this project.

T. Galloway asked staff why the proposed budget for the public art pieces was lower than on other projects. Lucille Bish, Director, Cultural Services noted that the locations for the public art pieces are smaller than normal. The largest proposed space on the ION corridor will be the King and Victoria Transit Hub, and it is not included in this process. L. Bish advised the Committee that artists will be able to propose projects for multiple locations.

In response to a question from the Committee, Rob Horne, Commissioner, Planning, Development and Legislative Services stated that staff can provide more information on Grandlinq's responsibilities in relation to the maintenance of the public art projects at the ION stations.

Regional Chair K. Seiling proposed amending the recommendation to direct the jury to review the budget and report back to Council if necessary.

Moved by H. Jowett

Seconded by L. Armstrong

That the Regional Municipality of Waterloo approve an expenditure of up to \$385,000 to be funded from the Public Art Reserve Fund for up to seven artwork projects to be incorporated into the ION Light Rail Transit corridor, as described in Report PDL-CUL-16-05, dated April 12, 2016;

And that the ION Light Rail Transit Public Art jury be directed to review the budget required to fund recommended artwork projects as part of their work and report back to Council if the approved budget requires amendment;

And that Councillors Tom Galloway and Jane Mitchell be appointed to the ION Light Rail Transit Public Art Project jury.

Carried

Reports – Public Health**PHE-HLV-16-03**, Proposed Smoke-Free Ontario Act Amendment and Electronic Cigarettes Act Regulations

In response to a question from the Committee, S. Sedgwick Walsh, Director, Healthy Living, stated that manufactures are not currently required to identify the substances
2109629

contained in an e-cigarette. The province is looking to include the contents of e-cigarettes in the regulations so that people can be protected from unknown substances. She also noted that at this time there has not been enough research conducted to determine whether e-cigarettes are an effective method of smoking cessation.

*S. Strickland left the meeting at 2:25 p.m.

Moved by D. Jaworsky

Seconded by S. Foxton

That the Regional Municipality of Waterloo, as the Board of Health, communicate its support to the Government of Ontario for its continued efforts to protect Ontarians by strengthening the Smoke Free Ontario Act and the Electronic Cigarettes Act (2015) as described in the document "Proposed changes to regulations made under the Smoke-Free Ontario Act and Electronic Cigarettes Act, 2015";

And that the Regional Municipality of Waterloo forward a copy of report PHE-HLV-16-03, dated April 12, 2016 to the Minister of Health and Long-Term Care.

Carried

PHE-IDS-16-03, Assessment of Substance Use, Opioid, and Overdose Trends in Canada, Ontario, and Waterloo Region

Karen Quigley-Hobbs, Director Infectious Disease, Dental and Sexual Health, provided an overview of the report and explained that there are a number of concerns regarding opioid use and overdoses. She advised that there is no single source of monitoring for substance use and overdoses nationally, provincially or locally. This requires Public Health to work with multiple data sources.

K. Quigley-Hobbs stated that illicit fentanyl is an increasing concern that has caused several deaths nationally and was confirmed to be present in the Region. Public Health continues to work with community partners to address this issue but she noted that national and provincial action is needed to address preventable opioid overdoses.

In response to a question from the Committee, K. Quigley-Hobbs explained that if the provincial government develops a prevention and intervention plan this should include increasing the availability of Naloxone.

Moved by E. Clarke

Seconded by B. Vrbanovic

That the Regional Municipality of Waterloo request the federal Minister of Health and provincial Minister of Health and Long-Term Care develop consistent real-time

2109629

monitoring and surveillance of opioid use and overdoses in Canada and Ontario as outlined in the Municipal Drug Strategy Co-ordinator's Network of Ontario's Prescription for Life report;

And that the Regional Municipality of Waterloo request the Minister of Health and Long-Term Care develop an overdose prevention and intervention plan for Ontario;

And that the Regional Municipality of Waterloo, for information, forward a copy of report PHE-IDS-16-03, dated April 12, 2016, to the federal Minister of Health, provincial Minister of Health and Long-Term Care, the Chief Medical Officer of Health for Ontario, Public Health Ontario, local area Members of Parliament (MPs), local area Members of Provincial Parliament (MPPs), and the Waterloo Wellington Local Health Integration Network.

Carried

Immunization of School Pupils Act: Elementary School Suspensions (Verbal Update)

K. Quigley-Hobbs provided an update on the number of suspensions that were issued for elementary school students. She noted that approximately 4000 orders were initially issued, but that it had been reduced to 127 at the time of the meeting. She explained that it had been a challenging year due to a new provincial data base and the addition of three new vaccines. She advised the Committee that enforcement for secondary school students is approaching and that students will have until May 10, 2016 to provide Public Health with the required information.

In response to a question from the Committee, K. Quigley-Hobbs explained that no suspensions were issued last year due to issues with the new database. She also noted that recently Public Health was able to offer full vaccinations to over 600 Syrian refugees and provide dental screening to over 300 refugee children.

Information/Correspondence

- a) Council Enquiries and Requests for Information Tracking List was received for information.

Next Meeting – May 3, 2016

Adjourn

Moved by K. Redman

Seconded by S. Shantz

That the meeting adjourn at 2:41 p.m.

2109629

Carried

Committee Chair, G. Lorentz

Committee Clerk, T. Brubacher



Tuesday, April 12, 2016
Sunnyside Home

MEDICAL DIRECTORS REPORT



A resident's story

- 91 year old woman
- Wrist and pelvis fractures
- Convalescent care 82 days
- Discharge home with IALP





Dr. Mark Nowaczynski

Another resident's story

87 year old lady with fracture to upper arm

- Convalescent care for 62 days
- Discharge Home First intensive services
- Admit to LTC





Region of Waterloo

Weekly Team Meeting

Sunnyside Home
Convalescent Care
Interdisciplinary Team





Region of Waterloo

The Interdisciplinary Team





Region of Waterloo

Heart Failure Study





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[< Previous Article](#)

[October 2015](#) Volume 31, Issue 10, Supplement, Page S128

[Next Article >](#)

INTERPROFESSIONAL CARE PROCESSES TO MANAGE RESIDENTS WITH HEART FAILURE IN LONG-TERM CARE

[K. Huson](#), [V. Boscart](#), [R. McKelvie](#), [J.P. Hirdes](#), [P. Stolee](#), [G. Heckman](#)

Kitchener, Ontario

243

Altmetric 0

DOI: <http://dx.doi.org/10.1016/j.cjca.2015.07.282>





Canadian Cardiovascular Congress October, 2015 - Lisa Brohman, RN



Inter-professional (IP) Care Processes to Manage Residents with Heart Failure in Long Term Care

RESULTS:

“...increase in staff confidence, strong assessment and proficiency skills, and more effective IP collaboration.”

The intervention was “useful and feasible, particularly the tools, education and bedside sessions.”

Inter-professional (IP) Care Processes to Manage Residents with Heart Failure in Long Term Care

CONCLUSION:

“The pilot study...has a favourable preliminary impact on staff knowledge and IP communication.”

Quality Improvement Plan

Priority QIP Indicators:

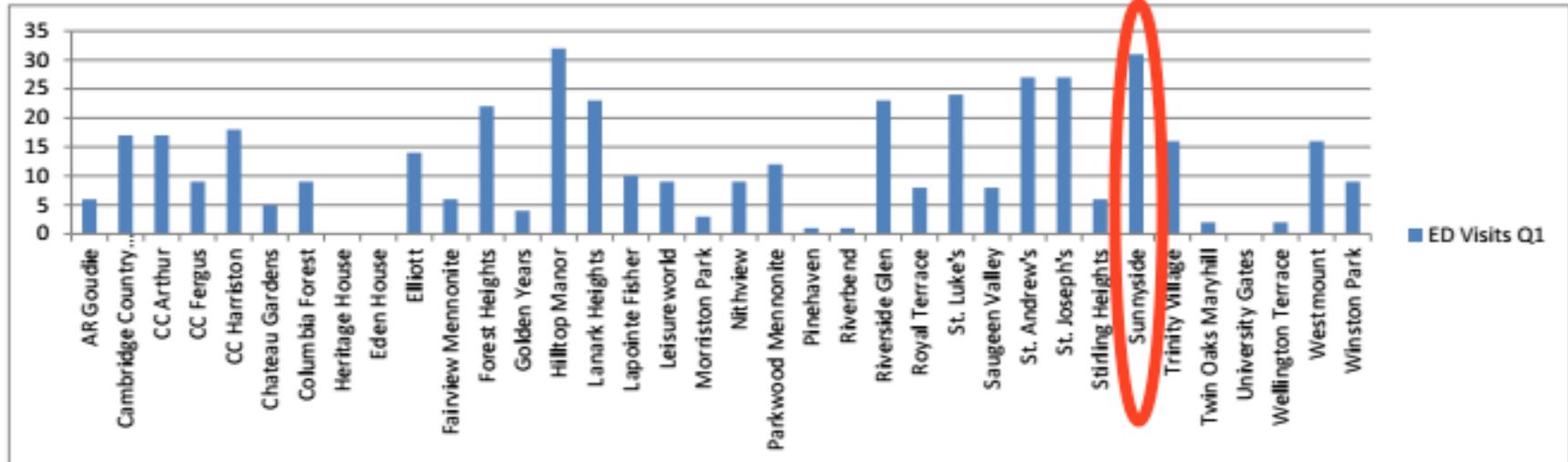
1. Falls
2. Pressure Ulcers
3. Restraints
4. Incontinence
5. Appropriate experience
6. Avoidable ED visits
7. Appropriate prescribing

Avoidable ER Transfers

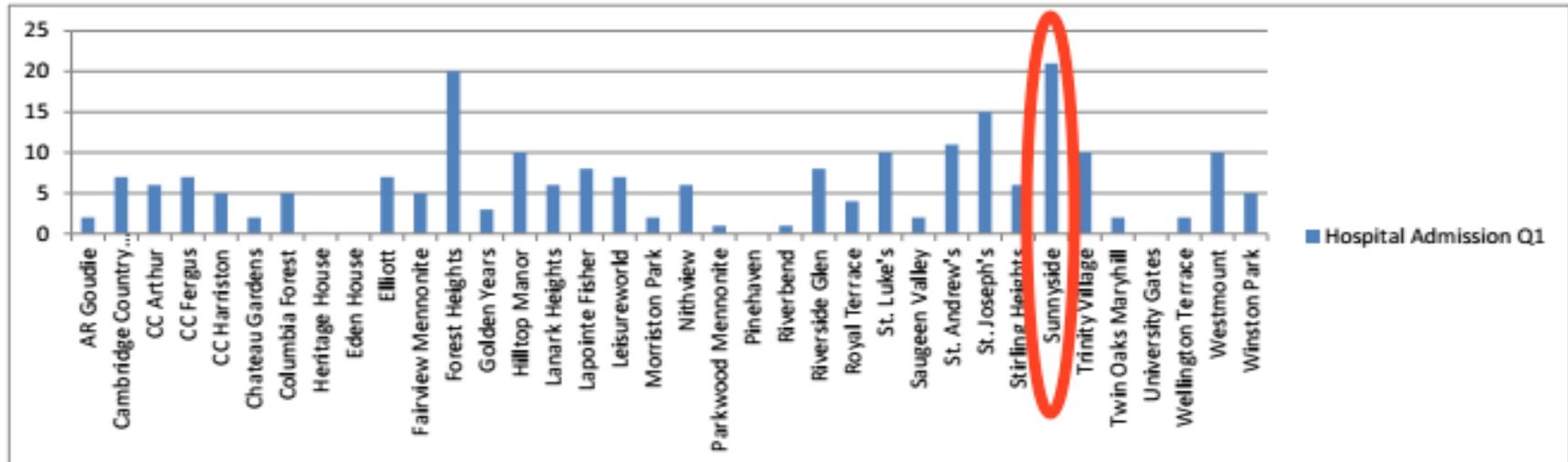
- Costly use of health care resources
- Inappropriate diagnostic tests and treatments
- Exposure to multi-resistant organisms.
- Comfort and dignity of the individual and their wishes.

WWLHIN LTCH ED Transfers & Hospital Admissions: FY 2015/16

WWLHIN LTCH ED Transfers: FY 2015/16 Q1

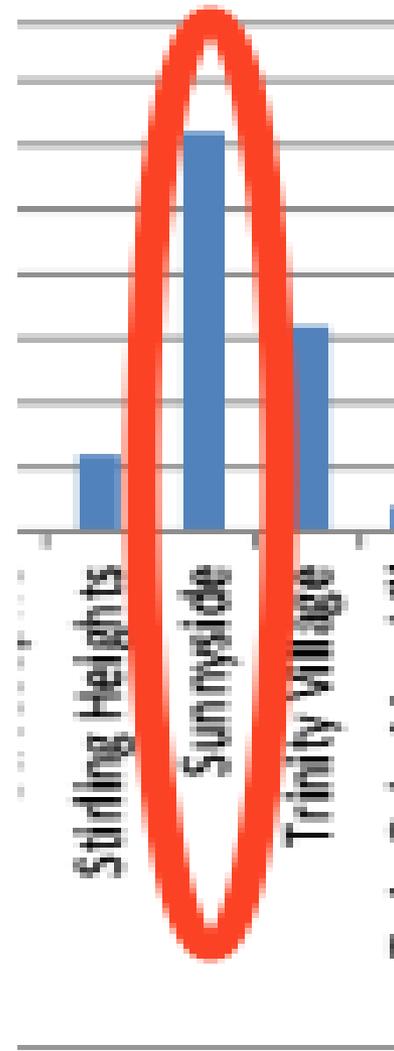


WWLHIN LTCH Hospital Admissions: FY 2015/16 Q1

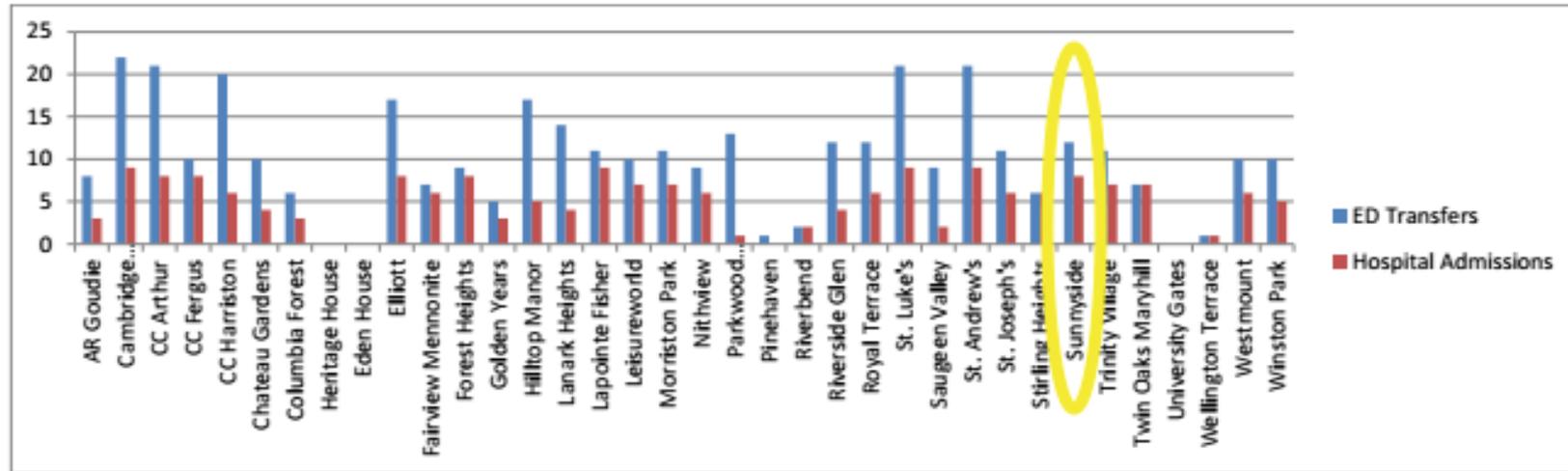


Thirty ER transfers
for the
First Quarter,
Year 2015/16

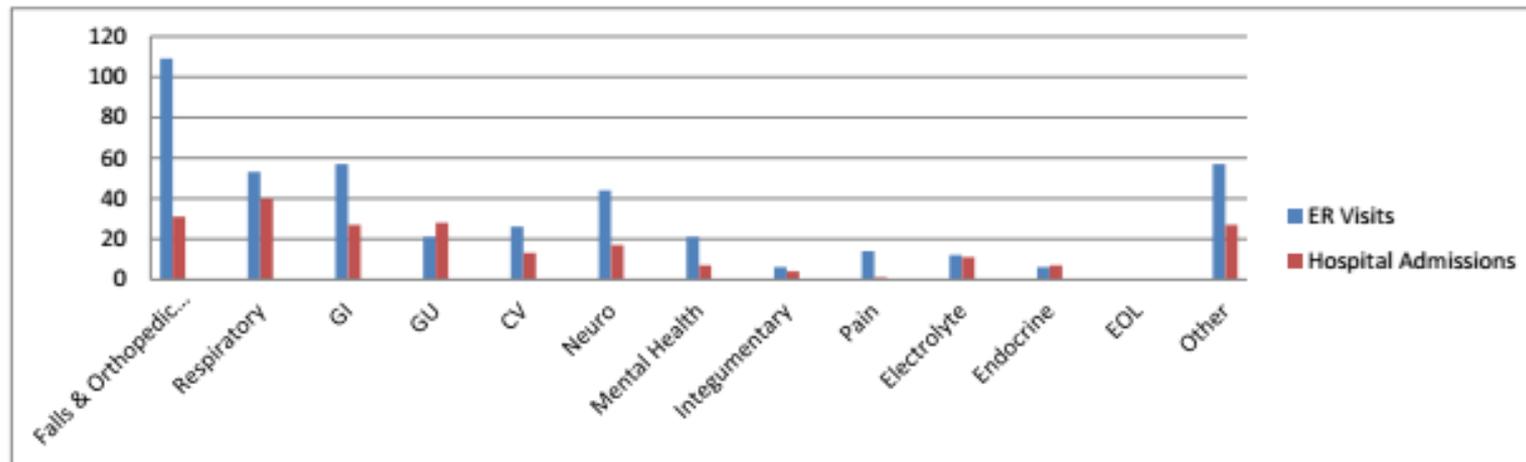
Twenty admissions

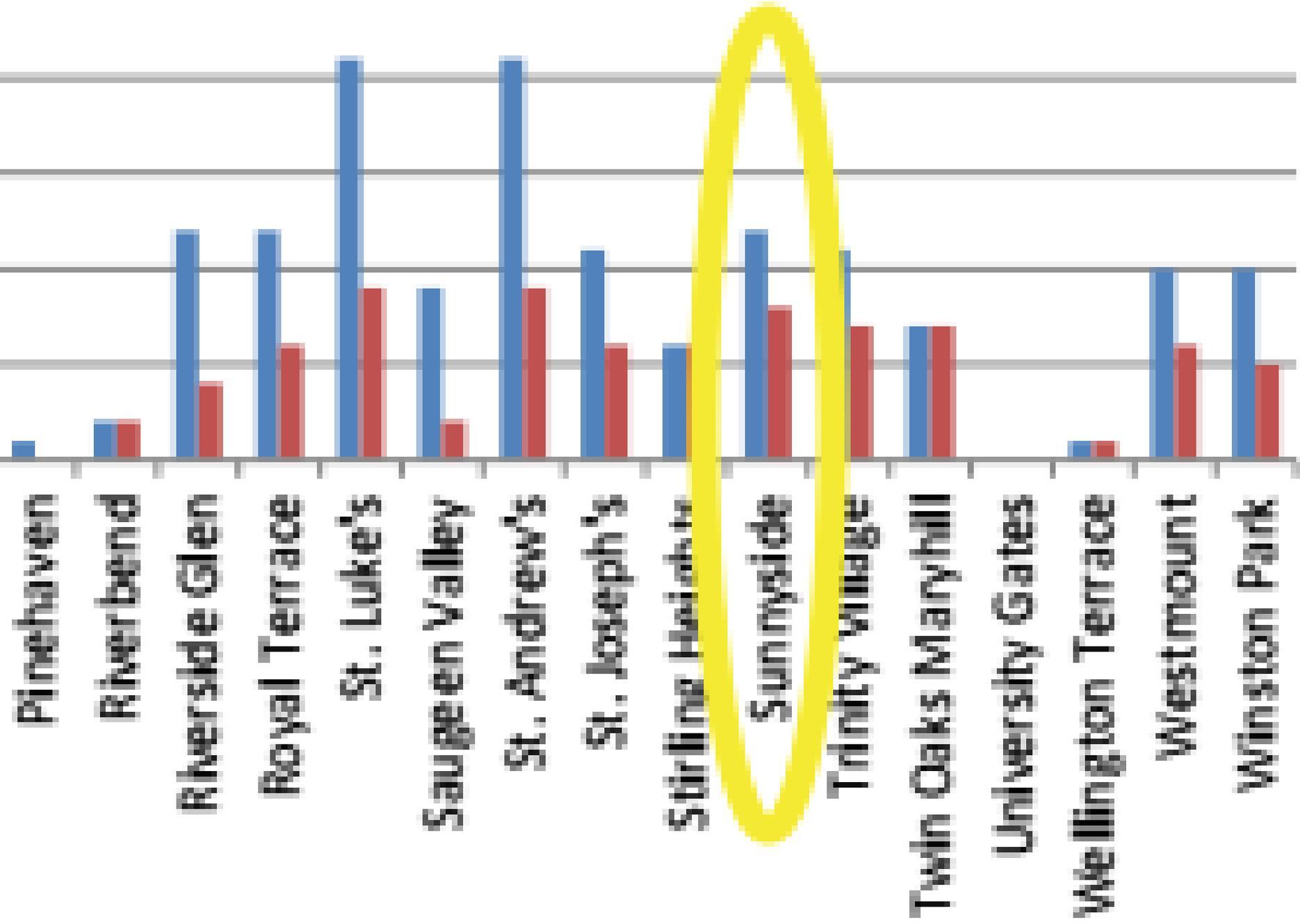


WWLHIN LTCH Total ED Transfers & Hospital Admissions per 100 Beds: FY 2015/16 Q1



ED Transfers & Hospital Admissions by Cause FY 2015/16 Q1



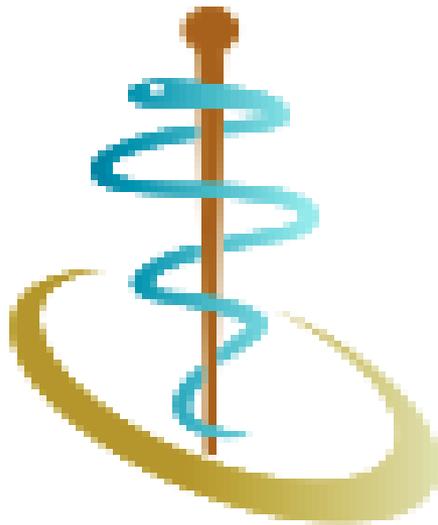


Avoiding Transfer

- Advance Care Plan
- Access to diagnostic services in the home seven days a week.



**ONTARIO LONG TERM
CARE PHYSICIANS**



**Ontario
Long Term Care
Clinicians**

**Non-Profit Organization
Founded in 2016**



Region of Waterloo

Leadership through learning, collaboration and communication





Region of Waterloo

Thank you



Community Services Committee Meeting April 12, 2016

Women's Crisis Services of Waterloo Region (WCSWR) is a not for profit charitable organization who operates two emergency shelters and outreach services for abused women and their children; Anselma House located in Kitchener; and Haven House located in Cambridge. Their history reaching back to 1978. *They are the only agency of its kind in Waterloo Region, serving a population of approximately 750,000.* Their mandate is to serve women, age 16+, with or without children, who are experiencing any form of abuse in an intimate or familial relationship.

In May 2011, the new Anselma House, which was rebuilt from the ground up, opened in Kitchener; it is a 45 bed, 32,000 square foot facility.

Currently, we are in the midst of construction for our "**She Deserves It**" campaign to rebuild **Haven House** in Cambridge; as a result of overcrowded, inadequate spaces for our clients. Women are currently sharing bedrooms, washrooms, and eating in shifts; undoubtedly we have out grown the existing facility. The new facility will have private bedrooms and washrooms. The new Haven House will be located at 10 Acorn Way in Cambridge; on a 2.286 acre property. The location is ideal; it is close to all amenities and in a residential neighbourhood.

The new Haven House will replicate Anselma House that was rebuilt in 2011 with a few minor adjustments; a larger children's programming area, a larger music therapy room and a new children's crisis area (which is adjacent to the women's crisis intake room). The latter will allow children to be near their moms when their intake is being completed, yet not within hearing distance of the details she is sharing.

Why are we rebuilding our shelters? As the population continues to grow in Waterloo Region, so does the demand for WCRWR's services. Serving more new immigrants and refugees than in past years, they carry the responsibility to ensure adequate and efficient shelters are in place to serve victims of abuse and violence. They provide a **safe and secure environment**, a women and children's home away from home.

Children are a critical part of the work we do; the following statistics highlight this:

- 45% of beds at Women's Crisis Services shelters are occupied by kids
- 45% of women staying at one of our shelters have children
- 80% of the kids staying with us are 10 years old or younger
- In any given year around 10 primary school classes of children are served.

Children who are exposed to abuse and violence often repeat the cycle, therefore education and counselling is critical to the success of breaking this intergenerational cycle. Our agency provides unique and innovative programming and counselling services; delivered by credentialed workers.

With over 6,100 calls a year to Waterloo Region Police Services for domestic violence (their 3rd highest call category) and knowing that studies show only around 20% of calls are actually made. Many government funded organizations throughout Waterloo Region depend on the

work being done at Women's Crisis Services as a long term strategy to keep their budgets in control. How?, the work completed by the professionals at WCSWR has shown to break the generational cycle of abuse thereby paying dividends to our childrens generation. Combined with the current and continued reduction in recidivism as the people and families serviced by WCSWR find a much better percentage of not falling back into the life before receiving help.

Studies have reported that the cost of violence against women in Canada for health care, criminal justice, social services, and lost wages and productivity has been calculated at \$4.2 billion per year.

This is why the WRPS have been one of our biggest supporters in helping spread the word regarding the rebuild campaign for Haven House. They have sent officers to events, raised awareness, spoken out and we thank them for that!

We are re-building this shelter for the thousands of Women and Children will come to this shelter in the future but also for the thousands who will not have to come because their prior generations came and were transformed by the work done by WCSWR!

The cost to rebuild Haven House is estimated at \$9.4M. Reid's Heritage Construction (RHC) is our builder. The new Haven House will be complete in June 2016.

A summary of the new Haven House project budget is outlined below.

Total projected cost to rebuild Haven House, including land	\$9,400,000
Funding sources	
Proceeds from the sale of previous Anselma House property	1,000,000
Sale of the existing Haven House property (upon completion of new shelter)	1,100,000
Transfer of funds from the agency's reserves	100,000
Community fundraising up until Feb.24, 2016	4,700,000
Balance still needed as of March 14, 2016	\$2,500,000

As noted above, we have secured \$6.9 M of the \$9.4 M funding needed to complete the new Haven House. Women's Crisis Services of Waterloo Region and the community have definitely demonstrated their diligence. We have worked diligently and strategically to fundraise in our community.

Raising the remaining funds is a timely matter as whatever amount is not raised by June 2016, will be turned into a mortgage, which undoubtedly will cause hardship on the agency.

SHE DESERVES IT

REBUILD HAVEN HOUSE

It All Starts With a Step

by John Goodwin

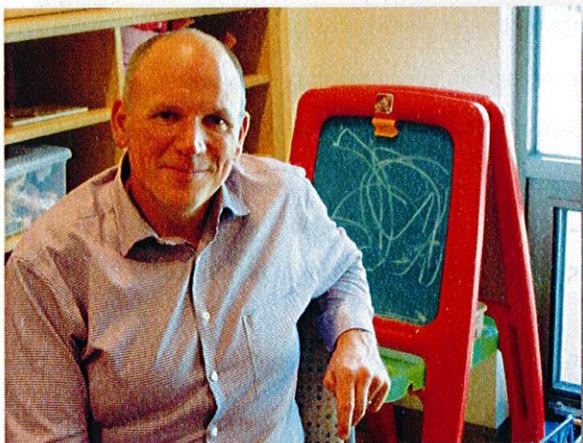
There are two types of change for a person, Involuntary and voluntary.

Involuntary change happens when a change is made for you by other forces or a change by someone else affects you. These can be things like losing your job to downsizing, a friend or family member passing, a restructuring at work, or your car breaking down and needing a new one. These are changes that have a finality to them. It is a change that does not allow you to revert or go back to the old way. You can try to walk into the president's office and say "I am not comfortable with the restructuring and I would like to go back to the old way", I am not sure that it would work! Involuntary change is an instantaneous thing, in most occasions, and dealing with it may be difficult. However, since there is no reversion back to the "old way", you do exactly that - you deal with it, find ways to cope, seek help, and try to move on because there is no "going back".

Voluntary Change is the most difficult as it is a choice that you require to make yourself. Whether it is going on a diet, changing a career, quitting smoking, and so on, it is very difficult. Why is it so difficult? It is because you are stepping into the unknown and your body and mind are very "comfortable" with the status quo, your mind knows what to expect with the current situation and does not like to be surprised.

Voluntary change can be like standing at the top of a set of stairs with a blindfold on. Your mind will tell you it is better to just stay on the top step as it knows what is happening on that top step. Taking a step down requires faith that there will be another step to land on, and then another, and another, and so on. At each step, your brain will try to convince you that no matter what your current situation is, the next step is risky and scary. Your brain is comfortable where it is with the known reality as opposed to the unknown potential or leap of faith that there will be another step to stand on.

Take being overweight for example. I am positive that in your mind you know that having extra weight on a body taxes your systems and can lead to health issues. Then why is it so hard for some to lose weight (present company included)? Our comfort zones con-



vince us that we are not really that overweight, or people enjoy the jolly fellow, or the many things our brains convince us to believe that our current state is where we should stay to not rock the boat and head into an unknown territory.

There are millions of self-help books out there as manuals to direct you through voluntary change; books on changing careers, love, dieting, making millions. This illustrates how hard voluntary change is. People spend millions possibly even billions of dollars on books to teach us how to change.

This brings me to the point of my article.

(Continued on page 2)



Women's Crisis Services
of Waterloo Region

HAVEN HOUSE

562 Concession Road, Cambridge, ON N3H 4L2

Telephone: 519.741.9184 ext. 2038

Email: admin@rebuildhavenhouse.org

SHE DESERVES IT

REBUILD HAVEN HOUSE

(Continued from page 1)

Let's take the example of a mother with two kids at a home with an abusive spouse. As terrible and painful as her and her children's situation is, it is their "normal". She has, over time, learned what to expect and is trying her best to cope with the current situation. Like the person at the top of the stairs with the blindfold on, the next step to her is extremely terrifying. It is hard to have faith that there will even be a second step. It feels like she and her children are standing on the edge of a cliff with no parachute, not the top of a set of stairs. What if she takes that step and their situation gets worse as her abuser takes the abuse to a new level? There are no manuals and self-help books to help her navigate out of what they are experiencing every day. She feels there is no way out. The decision she needs to make affects everything in their life at that moment: the safety of her children, her own safety, finances, the roof over her head, and the list goes on. This situation makes my plight to lose weight seem trivial even as hard as my brain makes it out to complete that change. Now magnify it for the situation I just described, it seems insurmountable does it not?

That is where Women's Crisis Services and **Haven House** step in.

They **ARE** the manual, the first step on the staircase or the parachute, and the only service of its kind in Waterloo Region. They offer a secure and safe haven to get away from the abuse. They offer the follow up steps on the staircase as well; counseling, pet and music therapy, help with moving forward and the constant support to dramatically increase the chances of success of continuing to take steps down the staircase of change in a safe and comfortable environment. The benefits of the change undergone during her stay at Haven house will pay off for generations as the cycle of abuse can be broken with children learning that where they once were was not "normal" or something that you just "dealt with". When it comes time to raise their families, that change has already happened!

The current Haven House has done a great job utilizing resources to the best that they can. However, with only 12 bedrooms, the need of the community is far greater than what the current facility can accommodate as there are 30 or more women and children utilizing the facility on any given night. Last year over 200 children stayed in shelter with Women's Crisis Services. This limits the work that they can do to help survivors of abuse move beyond violence. A new Haven House will benefit through additional counselling space, dedicated children and youth spaces, better security, private bedrooms and bathrooms, an environment more conducive to the healing process, an allowance to serve a greater population, and help to build a stronger and safer community for us all.

It will allow them to build tangible, visible, steps in the stairs of change to help strengthen our community.

We all have causes that are near and dear to our hearts, we appreciate and respect that, all we ask is that when you are prepared to give, please think of Haven House.

As for the Re-build of Haven House, it is right in front of our eyes!

We have the land, we have the plans, we have the builder. Almost everything is in place to make the Steps of Change for Haven House, **we just need you!**

You can make a donation, an investment to provide those safe steps of security. Visit www.wcswr.org/donate or call us to talk about how you can donate to change lives. 519-741-9184

It all starts with a step... will you walk with us?



Women's Crisis Services
of Waterloo Region

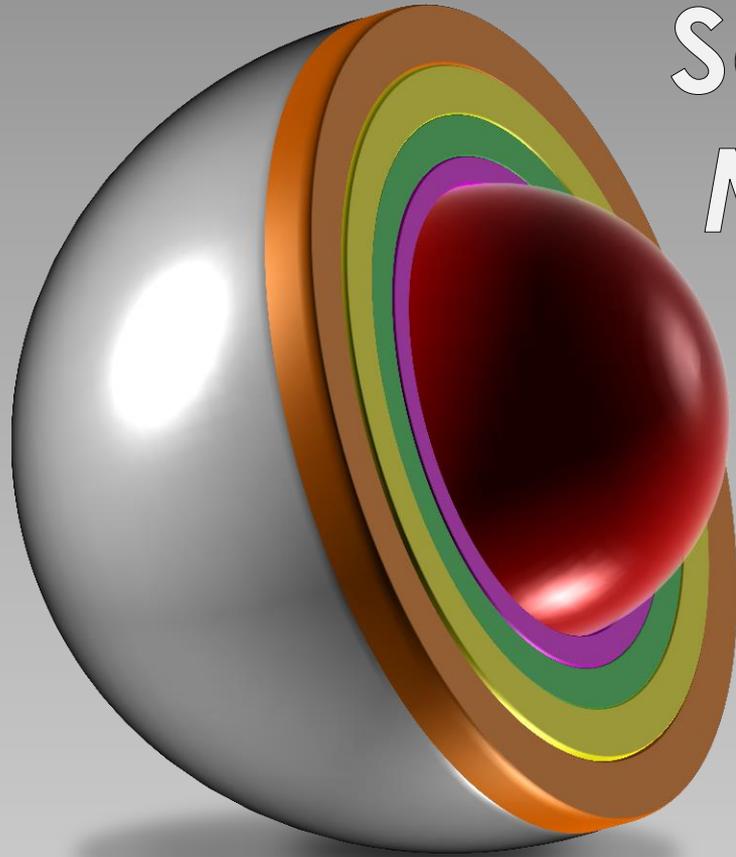
HAVEN HOUSE

562 Concession Road, Cambridge, ON N3H 4L2

Telephone: 519.741.9184 ext. 2038

Email: admin@rebuildhavenhouse.org



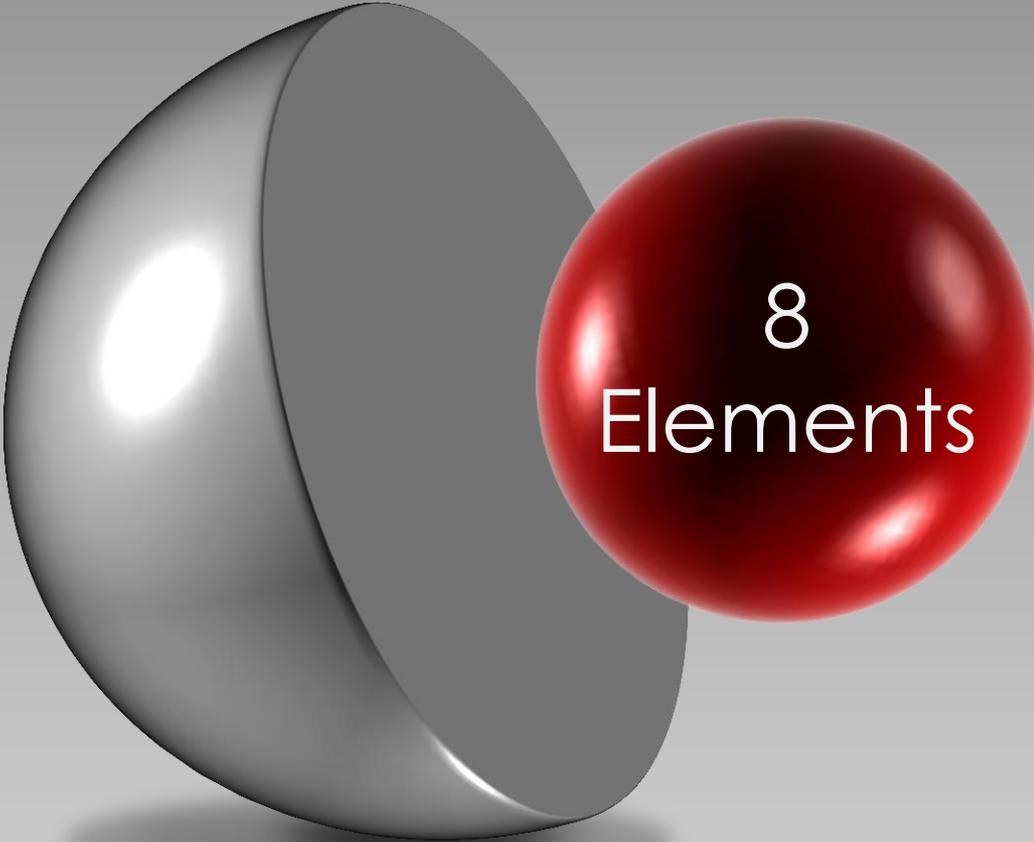


Service System Management

Capacity Building
Children's Services

Community Services Committee
April 12, 2016



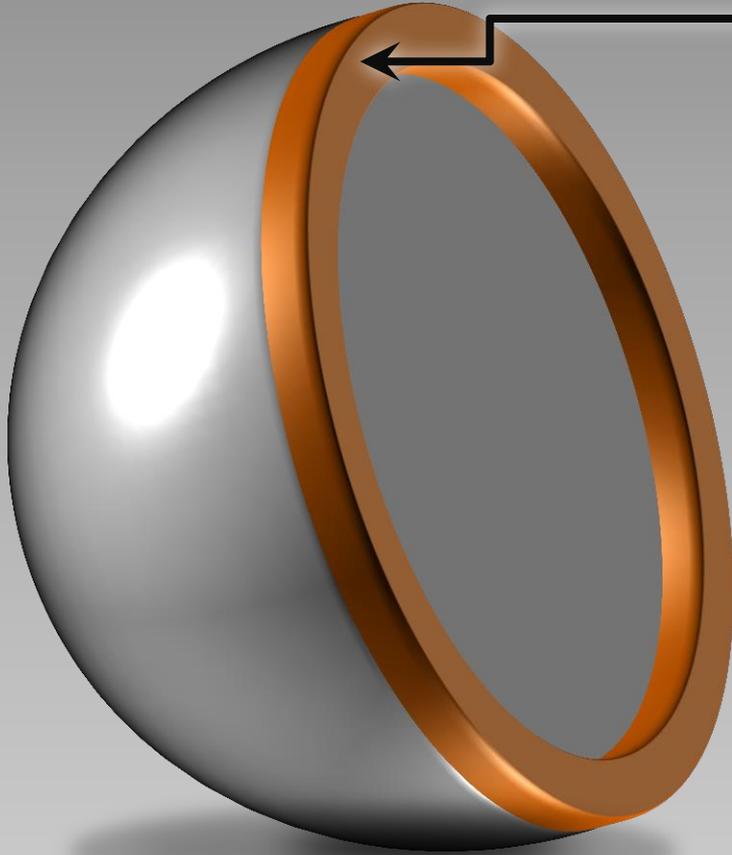


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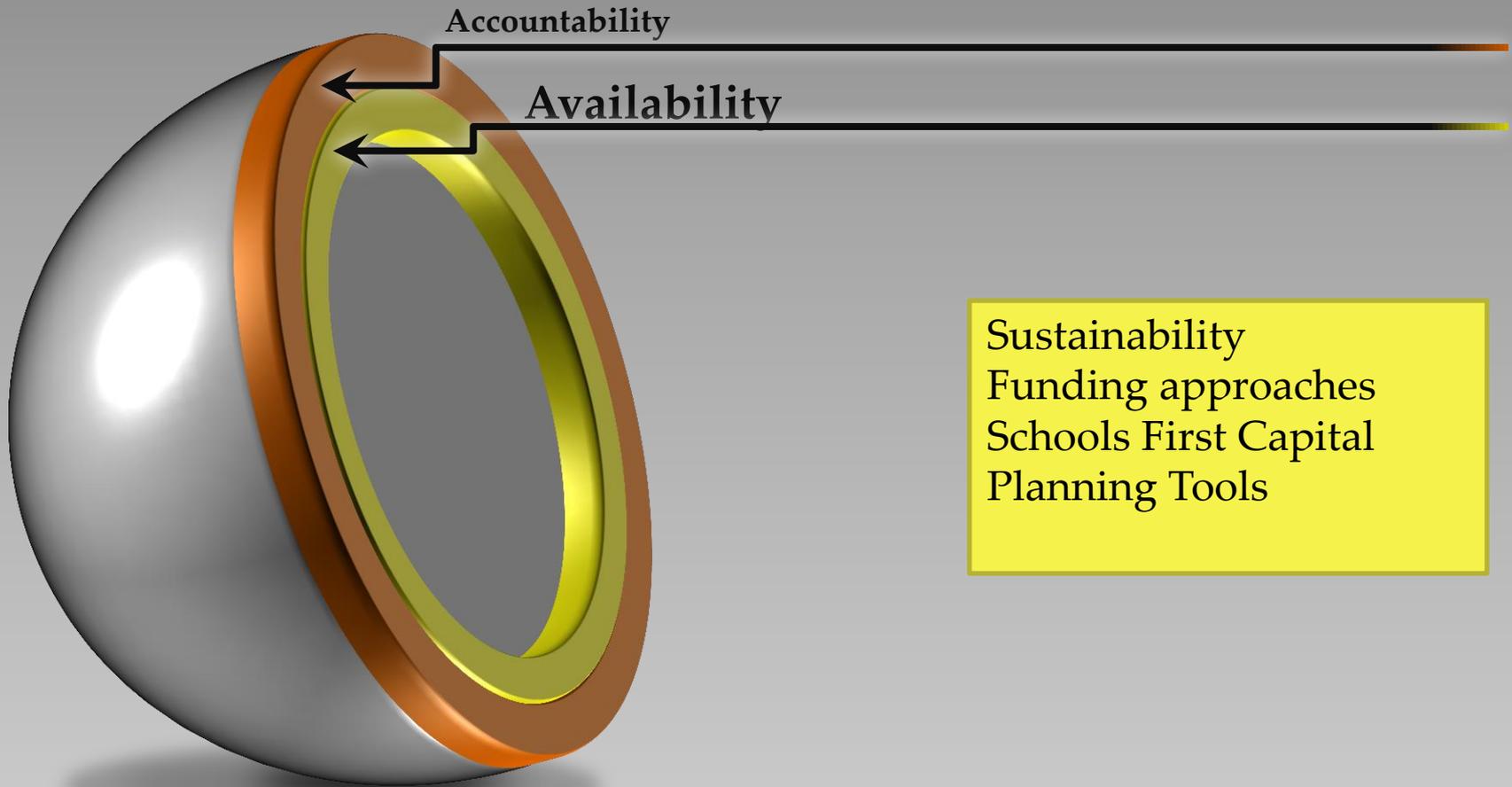
Quality by Design

Infrastructure
Physical Locations
Funding
Governance
Planning & Policy
Development
Data, Research &
Evaluation
Human Resources
Conceptual Framework

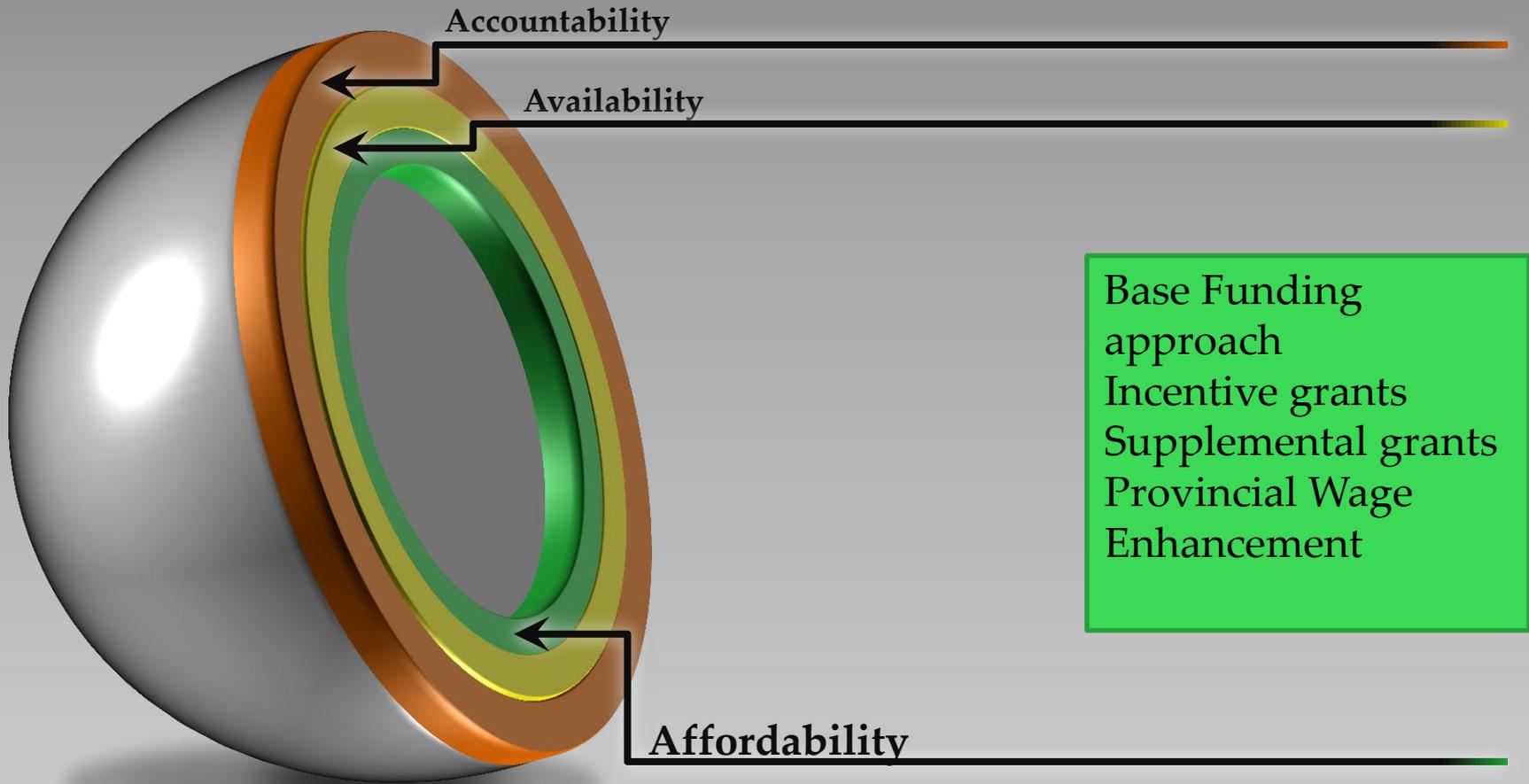
Accountability



Quality Initiatives/Assurance
Service Agreements
Professional Development
CMSM Role Clarity
Service Planning
ELCC Forums
Children's Planning Table
Partnerships



Sustainability
Funding approaches
Schools First Capital
Planning Tools

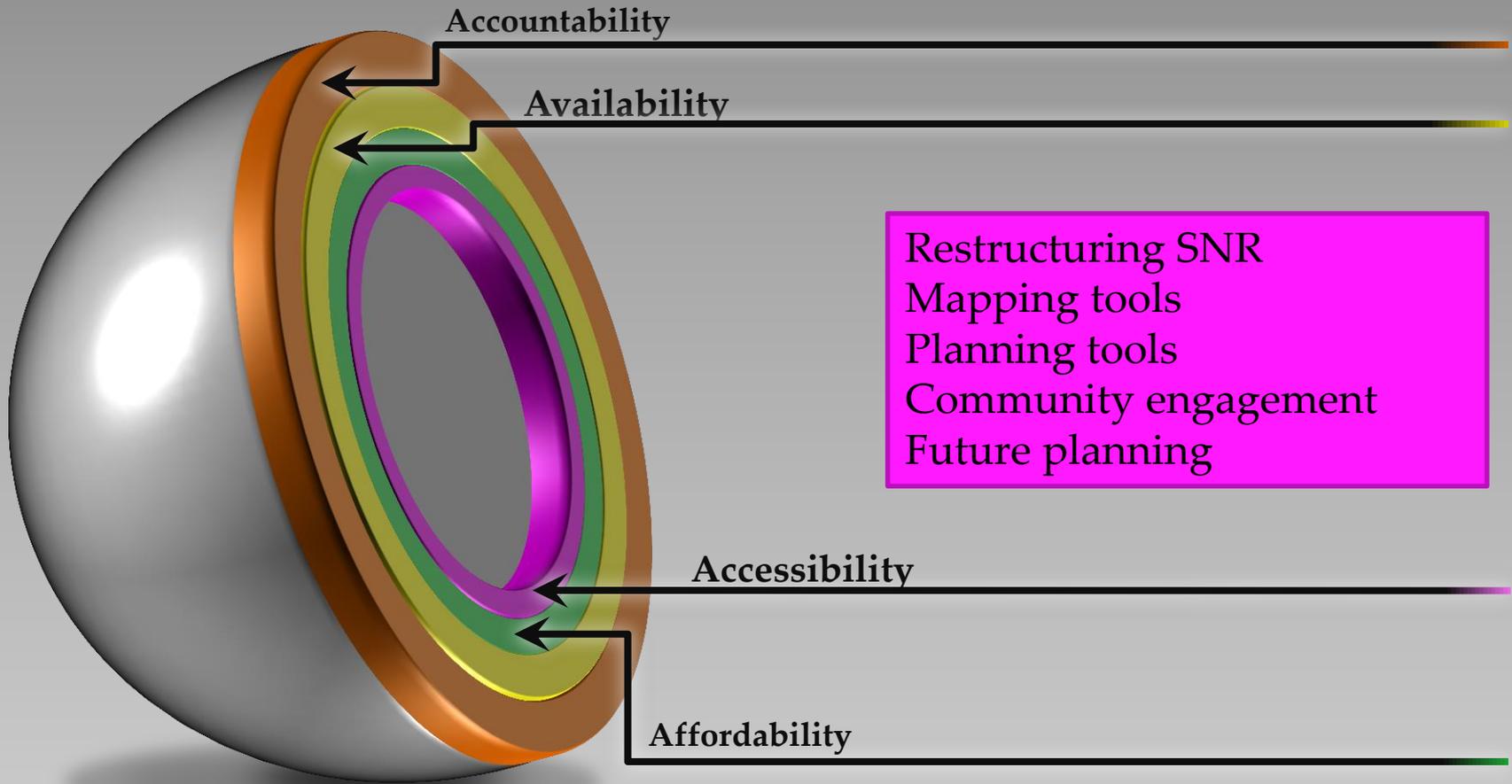


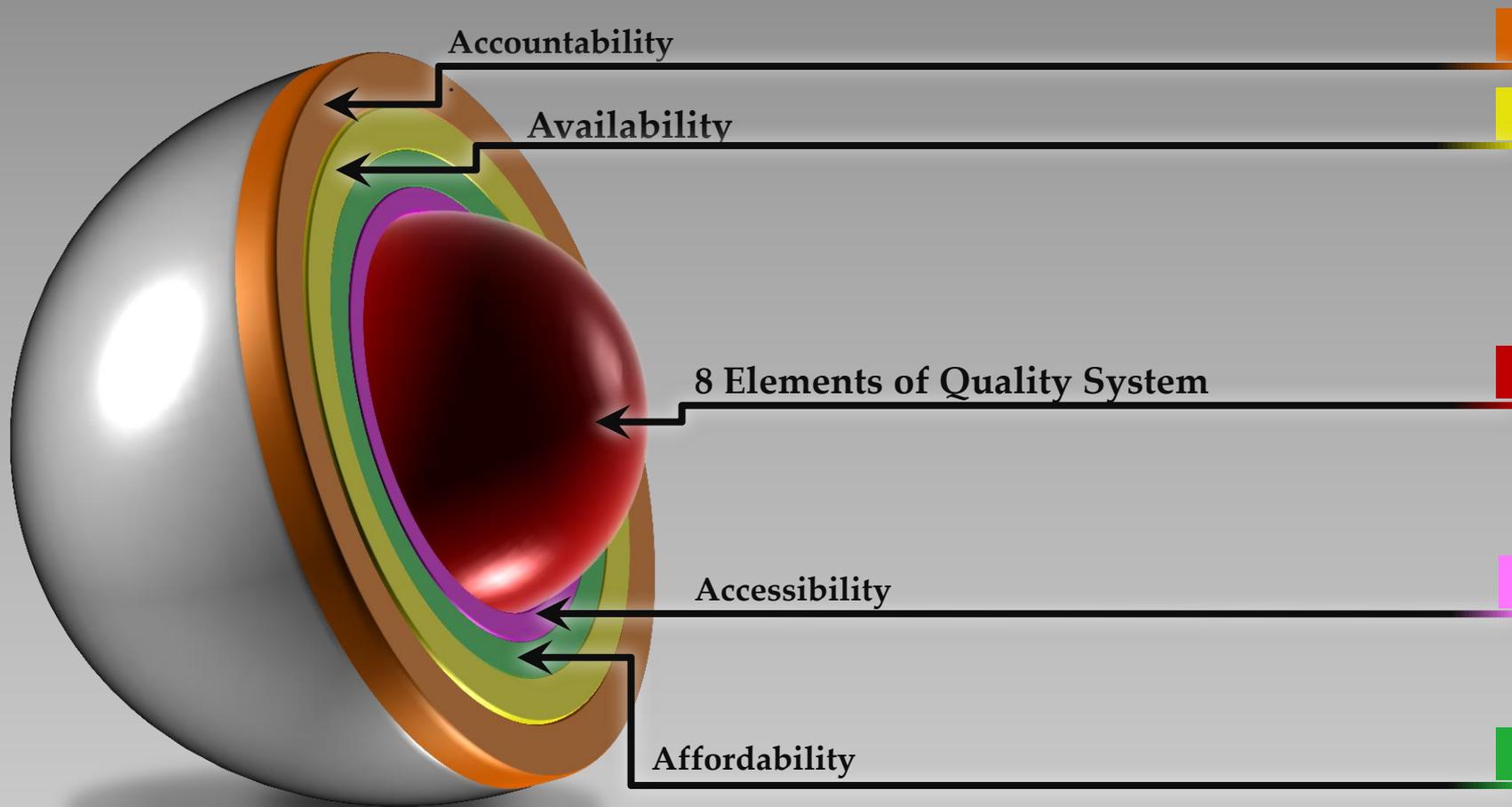
Accountability

Availability

Affordability

- Base Funding approach
- Incentive grants
- Supplemental grants
- Provincial Wage Enhancement





Next Steps

Community Engagement/Input

ELCC Service Plan 2016-2020

Infrastructure Planning

Increased Oversight

New Quality Initiative Approach