



**City of Kingston
Report to Council
Report Number 21-084**

To: Mayor and Members of Council
From: Lanie Hurdle, Chief Administrative Officer
Resource Staff: Ruth Noordegraaf, Director, Housing and Social Services
Date of Meeting: March 2, 2021
Subject: Integrated Care Hub Extension and Social Services Relief Fund
Phase 2 Holdback

Council Strategic Plan Alignment:

Theme: Corporate business

Goal: See above

Executive Summary:

The COVID-19 pandemic, which started in early 2020, shed light on social issues and gaps in services for the most vulnerable populations within the community. In response to these community needs, the City of Kingston, in partnership with HIV/AIDS Regional Services (HARS), temporarily established the Integrated Care Hub (ICH) at Artillery Park in late July 2020. The ICH operated at Artillery Park until November 2020 at which time, the City and partners relocated the ICH operations to 661 Montreal Street. The City established a lease agreement with the property owner at 661 Montreal Street until July 2021 based on provincial funding available at that time. Staff's previous reports identified a need to secure additional provincial funding to continue to support the ICH operations.

The ICH provides a 24/7 low barrier service for homeless individuals or individuals at risk of homelessness that are unable to access other services. Kingston's Consumption and Treatment Services (CTS) managed by Kingston Community Health Centres (KCHC) relocated its operations to the ICH in August 2020, following a Health Canada approval. The CTS also relocated its operations with the ICH at 661 Montreal Street as of November 2020, following a Health Canada approval. Most recently, KCHC entered into a partnership with the City and Spectra Plasmonics in order to implement an innovative and unique drug testing technology that is utilized at the CTS. This partnership is starting in 2021 and is being financed from the City's

March 2, 2021

Page 2 of 18

unused cannabis legalization funds and the Social Services operating budget. This initiative has just received Health Canada approval for its testing at the CTS and has started implementation in January.

Since establishment of the ICH in August 2020, HARS has been collecting data at various points to track number of clients and services accessed. Based on data collected, it is estimated that 100 to 150 unique clients utilize the service on a daily basis and overall about 200 unique clients have accessed services at the ICH since its opening. It is important to note data collection has evolved over time and as of January 2021, HARS and partners have been tracking impacts on police and EMS calls as well as hospital diversions. The data is attached as Exhibit A to this Report.

There is no question that services at the ICH have been and continue to be utilized by a large number of people and that the ICH has filled a gap in the community. Based on the data collected, staff believe that in the absence of a service like the ICH there would be a significant increase in overdoses, hospital visits, people sleeping in the rough and possibly an additional shelter required to meet the demand on vulnerable populations. Therefore, staff have been working on options to continue to support this service beyond July 2021.

The City, primarily through the Mayor's Office and staff, as well as its partners have not yet been able to secure ongoing or permanent provincial funding for the ICH. The only provincial funding that staff have identified that could be utilized to extend the operations of the ICH is the Provincial Social Services Relief Fund (SSRF) Phase 2 Holdback, which has to be allocated prior to March 31, 2021. Should the City fail to allocate the SSRF Phase 2 Holdback by the date, it will be required to return the funds to the Province. It is unknown if there will be additional rounds of SSRF in 2021 and if the City's inability to allocate the current funds could impact its ability in securing SSRF from the Province.

City staff recognize that there are challenges in the neighbourhood where the ICH is located due to the nature of its operations and its clientele's activities. Based on a number of concerns expressed by the neighbours surrounding the ICH, City staff have implemented additional security measures such as: surrounding the 661 Montreal Street premises including privacy screen, temporary fencing along the K&P Trail adjacent to the Rideau Street as well as the introduction of additional walkabout patrols in the neighbourhood that will occur throughout the day and nights, seven days a week.

Staff recognize that these measures are not going to prevent all unwanted activities but should help reduce the number of incidents in the neighbourhood. Staff did complete a recent search of properties on the market that could accommodate this service based on the list of criteria defined in the Option/Discussion section of this report. None of the properties currently available met the criteria and City staff would also not recommend a relocation of a temporary service for which future stable funding is unknown as most leases would most likely require a commitment of multiple months.

City staff are recommending an extension to the lease at 661 Montreal Street by five (5) months (until the end of December 31, 2021). The cost of the lease and cost of operations are being

March 2, 2021

Page 3 of 18

proposed to be funded through the SSRF Phase 2 Holdback, potential additional phases of the SSRF, contributions from community partners and as required a contribution from the Social Services Stabilization Reserve. This Reserve was established with monies allocated are from the Ontario Works Allowance and Benefit (provincial funding) surpluses over the years. The allocation from the Social Services Stabilization Reserve would not have an impact on property taxes previously paid or to be paid in the future. The Options/Discussion section of this report provides details on expenditures and financing for the ICH since August 2020 and into 2021.

It is important to note that KCHC and HARS are bringing other health system stakeholders together to discuss the sustainability of the ICH.

Staff recognize that the ICH does not address all needs within the community and that other services such as shelter services, supportive housing and encampment guidelines continue to be a priority for the City and its partners. This report also provides information on other services provided and initiatives underway to support the homeless population.

Recommendation:

That Council approve an extension of the lease at 661 Montreal Street until December 31, 2021 for the purpose of operating the Integrated Care Hub and the Consumption Treatment Services in partnership with HIV/AIDS Regional Services and Kingston Community Health Centres respectively; and

That Council approve the following measures and funding allocations to support the lease costs and operations of the Integrated Care Hub until December 31, 2021:

- Allocation of the \$457,700 remaining in the Social Services Relief Fund Phase 2 Holdback;
- Allocation of any future phases of the Social Services Relief Fund;
- Contributions from community partners, including but not limited to United Way KFL&A, Kingston Community Health Centres and HIV/AIDS Regional Services;
- Contribution of up to \$1.1M from the Social Services Stabilization Reserve, as required; and

That the Mayor and Clerk be authorized to execute a lease agreement with BPE and a sub-lease with Kingston Community Health Centres until December 31, 2021 for the occupancy of 661 Montreal Street, in a form acceptable to the Director of Legal Services; and

That the Mayor and Clerk be authorized to extend and amend the Service Agreement between the City of Kingston and HIV/AIDS Regional Services to operate and deliver services provided at the Integrated Care Hub, in a form acceptable to the Director of Legal Services.

March 2, 2021

Page 4 of 18

Authorizing Signatures:

ORIGINAL SIGNED BY CHIEF
ADMINISTRATIVE OFFICER

**Lanie Hurdle, Chief
Administrative Officer**

Consultation with the following Members of the Corporate Management Team:

Paige Agnew, Commissioner, Community Services	Not required
Peter Huigenbos, Commissioner, Business, Environment & Projects	
Brad Joyce, Commissioner, Corporate Services	
Jim Keech, President & CEO, Utilities Kingston	Not required
Desirée Kennedy, Chief Financial Officer & City Treasurer	
Sheila Kidd, Commissioner, Transportation & Public Works	Not required

March 2, 2021

Page 5 of 18

Options/Discussion:**Background & Previous Council Directions**

On June 23, 2020, City Council discussed [Report Number 20-153](#) on the Integrated Care Hub at Artillery Park and passed the following motion:

That Council endorse the use of Artillery Park as a temporary, until the end of September 2020, cooling/drop in centre to deliver wrap around services, including but not limited to Consumption and Treatment Services, in partnership with Kingston Community Health Centres, Street Health, HIV/AIDS Regional Services, Home Base Housing, Addictions & Mental Health Services and United Way KFL&A; and

That Council endorse other options such as permanent housing, camping at a formal campground and/or storage to meet various needs of campers; and

That Council approve up to \$300,000, to be funded where eligible from the Provincial Social Services Relief Fund and/or Community Homelessness Prevention Initiative (CHPI); supplemented by the Homelessness Reserve, if required, to support homelessness and vulnerable populations; and

That the Mayor and Clerk be authorized to enter into any agreements or other legal documents required to establish a drop in centre or delivery of other services from community partners to support vulnerable populations to the satisfaction of the Acting Director of Legal Services.

On August 11, 2020 City Council discussed [Report Number 20-190](#) on the Integrated Care Hub Permanent Relocation Option and passed the following motion:

That Council authorize the Mayor and Clerk to enter into an agreement of up to \$150,000 per year, starting in August 2020 until the end of July 2021, to relocate the Integrated Care Hub, to the satisfaction of the City Solicitor; and

That Council authorize the lease or acquisition of a portable of up to \$60,000 to establish the Consumption Treatment Service should it be required to deliver services at the Integrated Care Hub; and

That Council approves funding of up to \$210,000 from the Homelessness Reserve to cover 1 year of leasing property and the cost of a portable facility for the Consumption Treatment Services.

On September 1, 2020 City Council discussed [Report Number 20-192](#) on the Social Services Provincial Funding Allocation and approved the allocation of up to \$1,109,000 for the operations of the Integrated Care Hub (ICH) after the pilot phase.

March 2, 2021

Page 6 of 18

On January 19, 2021, City Council discussed [Report Number 21-051](#) on the Social Services Relief Fund (SSRF) Phase 2 Holdback and approved the allocation of \$500,000 for the operations of the Integrated Care Hub beyond the July 2021 timeframe.

Integrated Care Hub – Services, Partnerships and Operations

The Integrated Care Hub (ICH) pilot opened with a full suite of services including overnight rest accommodation on July 31, 2020 and it has been consistently operating at capacity. Clients have been attending all aspects of the service from day programming to overnight rest as well as the Consumption and Treatment Services (CTS) which was relocated at the Integrated Care Hub in the summer of 2020. The CTS service provides a safe and supportive place where anyone who wants to consume drugs can do so under supervision of people who are trained to respond to an overdose.

The ICH pilot initiative, which has been operating as a regular service at 661 Montreal Street since November 2020, was established as a partnership between the City, HIV/AIDS Regional Services (HARS) and Kingston Community Health Centres (KCHC).

The ICH has been and continues to provide 24/7 low barrier and wrap around services to people with high acuity that have not been accessing the traditional shelter services. The ICH supports clients with services which can be accessed in an environment rooted in harm reduction and trauma informed practices. There is a common area where individuals can access food and beverages as well as socialize with their peers. Staff are available to offer counseling supports and assistance to these individuals one-on-one should they require them. There is also an overnight, rest zone where individuals can sleep in a safe space. Healthy meals are provided three times per day and life skills such as behaviour modification workshops, self-regulation, grounding and mediation are offered. A mental health and addictions nurse is onsite daily to provide basic care and primary care referrals. There are practical services such as showers, storage and harm reduction supplies provided for clients.

It has become apparent that the challenges faced by the most marginalized individuals using the ICH are not primarily related to housing or lack thereof; there is a major medical (including mental health and addictions) component of work that needs to be addressed in order to assist individuals in living and thriving in housing.

Below are highlights on the current status of the ICH and CTS, which offers a harm reduction approach to consumption:

- Drop-in, rest zone and CTS services are extremely well used by clients. The rest zone was originally closed during daytime hours, but due to the demand and winter elements, the rest zone has now been opened during the daytime hours thereby allowing for 25 more spaces within the center.
- For the month of December the largest referral source to the ICH was the Kingston Police Department with 20 referrals. The second largest referral source was Kingston General Hospital with 7 referrals. More detailed data is provided for January in Exhibit A attached to this report.

March 2, 2021

Page 7 of 18

- In January and February, services at ICH have diverted close to 160 hospital visits. More details are included in Exhibit A of this report.
- The ongoing drug poisoning and opioid crisis is even more apparent due to the pandemic and has added much more pressure on the model and emergency supports/services. This has been seen in the sharp uptake of overdose situations. To date, all overdoses have been reversed on site and individuals have received medical care.
- Spectra Plasmonics' drug testing has been approved and been underway for about 3 weeks at the CTS. It has been successful in assisting clients within the CTS to know and understand what compounds can be found within their drugs. Preliminary information would indicate that this technology is helping to reduce overdoses. As this program is just starting, future months will enable more data collection and it is anticipated that as clients become more familiar with the testing process, they will be agreeable to having their drugs tested.
- Addictions & Mental Health Services (AMHS) has been sending a new outreach team to ICH who is assisting with crisis intervention and to secure long term psychiatric and mental health supports to the clients. This outreach will soon be expanded to include all shelters.
- As anticipated, there has been an increase in police and overall EMS calls to the property/area. This aligns with the increase in provincial and federal trends for EMS services. COVID-19 and the drug poisoning crisis has created a surge in calls in many communities;
- Ongoing work is needed to build the neighbourhood relations and safety and security supports. Commissionaires are providing 24/7 security support. HARS is working on hiring in house staff to reduce these costs and to provide a higher level of support. Fencing with privacy screening surrounds three sides of the premises and temporary fencing is being installed along the K&P Trail adjacent to the Rideau St. private properties for a 375m stretch south of Montreal St.
- Peer support workers and individuals with lived/living experience were hired through a United Way KFL&A grant. This has shifted the culture within the organization to become more of a 'collective care' centre where individuals are monitoring and positively influencing each other's behaviour.
- A nutrition strategy study has been completed and now staff is looking for grants for nutritional programming within the ICH.
- A Community Needs Assessment is being conducted using a rapid assessment and response model by interviewing residents who are staying at the ICH with complex concurrent disorders. The findings from the community needs assessment will provide a better understanding of the unique needs of this population in regards to homelessness and the impacts of the drug poisoning crisis. This report will provide recommendations to the city as well as health and social service agencies.

Since October 31, 2020 until February 2021 the statistics for the Integrated Care Hub and the Consumption Treatment Site are as follows:

March 2, 2021

Page 8 of 18

Integrated Care Hub (ICH statistics are until end of January):

- 178 unique individuals have accessed the rest zone overnight
- Rest zone accessed 2,187 times
- Average of 25 people staying in the resting area per night plus an additional 20 people staying in the drop-in (total of 45 individuals each night)
- Over 210 unique individuals have completed the program entry form.
- 67.6% male (142 people), 29% female (61 people)
- 29% identify as indigenous
- 86.2% of individuals attending drop-in do not have housing
- 44.3% of all the individuals who access the ICH are not on both 'Homeless Individuals and Families Information System' (HIFIS) and the 'By Name List', unrecorded in the to the homelessness system (this does not include people who are housed)
- 70% of individuals have indicated interest in being connected to housing, mental health, substance use or physical health supports
- 35 unique individuals have been connected to housing services since moving to 661 Montreal St.
- Case Management done by ICH staff includes: housing intakes, referrals to primary care, coordinating medical appointments, receiving medications, referrals to outside agencies, assisting with transportation to and from appointments, assistance with documentation, etc.
- ICH offers 24/7 access to basic need items including clothing, socks, underwear, winter gear, hygiene products, toiletries, etc.
- Showers have been made available throughout the day (total: 2,931 showers since moving to 661 Montreal St.)
- Rest zone has been made available during the day since January 19, 2021; 46 unique individuals have accessed the rest zone during the day, at an average of 15 people per day, steadily increasing
- Over 150 meals served/distributed per day, 4,500 per month, for a total of 13,500 in 3 months
- Harm reduction supplies and naloxone access continue to increase since moving to 661 Montreal St.
- 1,493 Naloxone Kits distributed since moving to 661 Montreal St.
- 3,380 total interactions at the Needle Exchange Program for Harm Reduction Supplies for November, December and January.
- AMHS staff onsite 5 days a week providing addiction & mental health support and referrals, nursing support, referrals to psychiatry, etc.
- Since moving to 661 Montreal St. and with funding through the United Way, there have been employment opportunities for clients at the ICH. A total of 26 individuals have engaged in the Community Support Program working 4 hours per week to assist with cleaning, meal preparation, working stations, meal service, property maintenance, snow removal, laundry and more.

March 2, 2021

Page 9 of 18

Consumption Treatment Site

- 107 new unique individuals accessed the CTS since collocating with the ICH (that had not accessed at KCHC Street Health location)
- 26 new unique individuals have accessed CTS in December and January
- 702 visits in November, 990 visits in December, 949 visits in January and 575 visits from February 1-18 (total: 3,216 visits since moving)
- Responded to more overdoses in January 2021 than combined total responses in all of 2018 & 2019
- 692 internal and external referrals made to other services such as: detox residential treatment assessments, OW/ODSP, psychiatry, primary care/opiate substitution therapy, hepatitis C treatment, housing and food bank

Integrated Care Hub Location

During the pandemic and while recreational facilities were closed, City Council approved the temporary use of Artillery Park to establish the Integrated Care Hub (ICH). The ICH operated at Artillery Park from July until November 2020. The ICH, along with the Consumption and Treatment Services (CTS), were relocated to 661 Montreal Street starting on November 1, 2020 and are scheduled to operate at this location until July 2021 based on the current lease approved by City Council.

City staff recognize that finding an ideal location for this service is challenging as there are many needs that must be taken into consideration. Below is the list of criteria that was developed by staff prior to recommending a temporary lease at 661 Montreal Street. A number of properties were evaluated against these criteria:

- Central and easily accessible to the population that uses the service which means that it needs to be located in centre of the City.
- Location has to accommodate both the ICH operations and CTS. The CTS has federal guidelines about location being away from sensitive uses like schools, parks and daycare facilities.
- Temporary location as the permanent funding for this service has not been secured. This means that a lease is the best option as an acquisition of a property would indicate that there is secured permanent funding for the service.
- Larger footprint to accommodate both the ICH and CTS as well as to provide space for other supportive programs to co-locate.
- Public visibility and accessible to frequent public transit.
- Not imbedded in a residential area.
- Willing landlord as not all landlords are interested in housing this service.
- Limited capital improvements required to make the space functional. This means that capital costs are minimized as some City owned properties would have required significant investment (in the range of \$500,000 to \$1M) to make them functional with temperature control, HVAC systems and internal reconfigurations.

March 2, 2021

Page 10 of 18

- Location should be zoned to permit residential use. If not currently zoned for residential use, sites that did not need a Record of Site Condition or an Official Plan amendment in addition to a zoning amendment are preferred due to timing.
- Ideally, the site selected could be considered for a longer-term location should there be funding available.

In the summer of 2020 and prior to recommending the 661 Montreal Street location as a site for relocation, staff reviewed and assessed the locations below which did not meet some key criteria. Staff also had limited time, a couple of months at most, to find a suitable alternative location to Artillery Park.

- Cooke's Arena – CTS cannot be in close proximity to a park as per federal regulations. Significant and expensive upgrades would have been required to make the space suitable, particularly insulating it for the upcoming winter season. Also, there are concerns related to the building condition from a health and safety perspective. Further studies would have been required.
- Memorial Centre – CTS cannot be in close proximity to a park or family facility (water park) as per federal regulations. The size and design of the facility and site would have made it very difficult to secure. There are other tenants that license space and operate from the premises such as Queen's University athletics and Church Athletic League. It was also identified by Council as a potential site to support Public Health's efforts during the pandemic.
- The Beer Store on Cataragui St. – Would have required purchasing which would mean that the City would have to either commit to funding the service in the long term or hold on to the property (including costs to maintain) until an alternative plan was developed and approved by Council. The property required a Record of Site Condition which typically takes up to a year or more to process.
- Warehouse(s) on Hickson Ave. – Would have required a Record of Site Condition which typically takes up to a year or more to process at the provincial level. Would have required significant upgrades to accommodate the ICH and CTS. Not as publicly visible and not very accessible to transit.
- In From the Cold Shelter on Montreal St. – This location was not considered as it needed to be maintained for shelter services.
- 805 Ridley Dr. – This location is too far west and clientele would not have accessed it. The need for a centrally located service was identified during the Belle Park encampment consultations.
- 610 Montreal St. – The building footprint is too small and there were limitations due to further environmental studies that would need to be completed prior to overnight accommodations being considered. Would have required a portable for short-term but otherwise the long-term solution required more expensive capital construction by the City.
- Churches – City staff reached out to the church community to inquire about interest in providing the space. None came back with options.
- St. Mathews Church on Weller Ave. – Property was for sale and not for lease. This would have required a long-term funding commitment from the City in the absence of secured provincial funding. The location is also further away from the city centre and would have

March 2, 2021

Page 11 of 18

put added social pressures, counter productive to the Rideau Heights Regeneration Plan endorsed by Council and being implemented in phases.

- Realtors – City staff reached out to realtors. Properties available had higher lease rates, were too far away, were dedicated to office uses or had multiple tenants in their buildings. This service was not attractive to most landlords.
- School Boards – City staff reached out to school boards who did not have anything that fit the criteria. Most school sites in the city centre are also in dense residential locations.

Recently City staff reached out to realtors to do a search of additional properties available for lease or recently available for sale. Some of the following properties have recently been viewed by city staff for other purposes. None of the property owners have been engaged or consulted at this point in the process. A comprehensive review of each specific location based on land use planning and other criteria has not been completed, but based on the information known, none of the locations were identified as suitable for a relocation of the ICH.

- 60 Concession St. (at Alfred St.) – This is a multi-unit commercial/residential building that would require significant capital investments to convert to the ICH use.
- 1412 Princess St. (at Portsmouth Ave.) – Recent tenant was DND Recruiting Centre. A full renovation would be required with significant capital investment to convert the space to the ICH use. The location is also further away from the city centre and would impact the number of clients accessing the service.
- 1440 Princess St. (former Church) – Unit has a small footprint that would not be able to accommodate the ICH and CTS operations. It is also located further away from the city centre and would impact the number of clients accessing the service.
- 710 Front Rd. (at Days Rd.) – Various spaces available but this location is over 7 km from city centre and this would definitely impact access for clientele and services.
- Several commercial spaces available for lease on Princess St. and other downtown locations – Typically these are smaller storefront units that do not have a footprint large enough to accommodate the ICH and CTS.

Based on the review and assessment of multiple properties, City staff have not identified another location that would meet as many locational criteria as 661 Montreal Street. In addition, the lease rate per square foot at 661 Montreal Street is much lower in comparison to most locations noted above, particularly those in the downtown core.

Under the [Emergency Order for Temporary Health or Residential Facilities](#), which is an Emergency Order passed under the *Reopening Ontario (A Flexible Response to COVID-19) Act, 2020*, temporary health or residential facilities that are being constructed or converted are exempt from compliance with the *Building Code Act* and its regulation, as well as compliance with the zoning by-law and site plan approval under the *Planning Act*, with the exception that drawings are to be submitted to the Chief Building Official by an architect for review and approval, and inspections undertaken to determine the facility safe for occupancy. The emergency order allowed for the operation of the temporary residential facility at 661 Montreal Street since November 1, 2020. Staff recognize that this Order would need to be extended until December 31st, 2021. Permanent zoning amendment for this property should only be pursued

March 2, 2021

Page 12 of 18

should the service become more permanent. As per the content of this report, there has been no ongoing and permanent funding secured for this service.

Financial Implications

The section provides information of funding allocated to and expenditures related to the Integrated Care Hub since its opening in August 2020 as well as recommended additional funding in 2021. Table 1 outlines the expenditures for the Integrated Care Hub at Artillery Park.

Table 1: Artillery Park Expenditures (July 31 until October 31, 2020)

Service Provider	\$ 380,991
Cleaning	100,309
Security	185,683
Portable Toilets	13,429
Waste Disposal & Bins	6,998
Repairs & Maintenance	6,060
Utilities	7,500
Other Supplies	5,375
Pest Control	2,335
Communications & Community Engagement	1,081
Total	\$ 709,761

March 2, 2021

Page 13 of 18

Table 2 below outlines the expenditures for the Integrated Care Hub from November 1, 2020 until January 31, 2021. This Table also includes lease and leasehold commitments until July 31, 2021.

Table 2: 661 Montreal Street Expenditures (from November 1, 2020 until January 31, 2021)

Service Provider	\$ 300,744
Cleaning	134,839
Security	113,143
Portable Toilets	2,961
Waste Disposal & Bins	6,381
Repairs & Maintenance	25,310
Utilities	10,000
Other Supplies	935
Pest Control	1,358
Snow Plowing	2,385
Lease and Fit Out (lease covered until July)	322,624
Commitments (utilities, fence, storage containers)	85,000
Total	\$ 1,005,680

The total Integrated Care Hub expenditure from July 31, 2020 until January 31, 2021 is \$1,715,441. This amount includes the lease and leasehold commitments at 661 Montreal Street until July 31, 2021. This has been previously approved by Council.

Since the spring of 2020, City staff have brought forward a number of recommendations to allocate provincial funding from the Social Services Relief Fund to support the ongoing operations of the Integrated Care Hub. Council also approved some funding from the Homelessness Reserve Fund to cover costs related to the lease and leasehold improvements. In the last number of months, United Way has also committed funding to the operations of the Integrated Care Hub until June 30, 2021. Table 3 below outlines the funding that has already been approved by Council and community partners.

March 2, 2021

Page 14 of 18

Table 3: City and Partners Approved Funding Allocations

Social Services Relief Fund Phase 1	\$ 588,000
Social Services Relief Fund Phase 2	1,109,000
Homelessness Reserve Fund	210,000
Social Services Relief Fund Phase 2 Holdback	500,000
United Way	375,000
Contribution from KCHC for CTS (Lease and Fit Out)	233,715
Canadian Medical Association Foundation (CMAF) Grant	16,000
Provincial Grant – Mental Health Supports	75,000
Total	\$ 3,106,715

Based on expenditures and funding allocated there is \$1,391,274 remaining in allocated funds. City staff have reviewed the Integrated Care Hub operations and budgets with HARS and KCHC. The operating costs from February until July 30, 2021 (which does not account for the lease and leasehold improvements which were covered within the November until January 31 commitments) are estimated to be approximately \$268,000 per month. This equates to a total of \$1,608,000 of operating costs from February until July 31, 2021.

Based on these estimates and remaining pre-allocated funds, there is a deficit of \$216,726 to support operations until July 31, 2021. Staff have also estimated operating costs at \$254,000 per month starting in August 2020. As previously indicated in the report, the City received \$964,700 through SSRF Phase 2 Provincial Holdback which can be allocated to operating and capital/property expenditures by March 31, 2021. In January, City Council endorsed a preliminary allocation as described below. Staff indicated that they would report back to ensure that funding is allocated prior to March 31, 2021.

1. Ongoing operational support of the Integrated Care Hub to extend support beyond July 1, 2021 (Staffing, Security, Cleaning, etc.)	\$ 500,000
2. Outbreak Management (Staffing, Hotels, PPE, Security, Transportation, etc.)	\$ 300,000
3. Contingency (Shelters, Food Security, Rent Bank, etc.)	\$ 164,700

The \$500,000 for the Integrated Care Hub has been included in the funding pre-allocated to the ICH operations. Staff have identified that only \$7,000 of the \$464,700 has been allocated and

March 2, 2021

Page 15 of 18

committed. Staff are recommending that the remaining \$457,700 to support the operations of the ICH. Based on the estimated expenditures until July and then from August until December and factoring in the additional funds from the SSRF Phase 2 Holdback, there would be a need for an additional funding of up to \$1.1M to support the operations of the ICH until the end of December 2021.

Staff recognize that the reallocated funds from the SSRF Phase 2 Holdback will not be sufficient to cover costs until December 31, 2021. Therefore, staff are recommending any future SSRF phases, should there be additional funding available in 2021, be reallocated to financially support the ICH operations. Community partners such as Kingston Community Health Centres, HIV/AIDS Regional Services and United Way have been providing some financial support and are working on options for future funding options.

Should these funding options not generate the necessary revenues to support the ICH operations until December 31, 2021, City staff are recommending that the City use funds from the Social Services Stabilization Reserve (up to \$1.1M) in order to ensure that the ICH can continue to operate should there not be any other sources of funding available. The Social Services Stabilization Reserve was established in 2002 (By-Law Number 2002-11) and By-Law Number 2018-88 at a time when the City was responsible for a portion of the Ontario Works benefits paid to the clients. This Reserve provided funding available should there be a significant change in the Ontario Works case numbers without having to impact tax rate. As Council is aware, benefit payments were uploaded to the Province a few years ago. There is a balance of \$2.35M remaining in this Reserve. The only draw from the Reserve in the last number of years has been for the health care support program for low income workers. The amount allocated to this program has been generally equivalent to the interests generated annually on this Reserve.

It will be critical to secure long-term/permanent funding for the ICH and this will require other levels of government as many services are to support issues with mental health and addictions.

Other Services for Vulnerable Populations

As previously indicated in this staff report, the Integrated Care Hub is one of the services provided to support vulnerable populations as there is a wide range of needs and circumstances in the community.

Shelters

In addition to the services at the Integrated Care Hub, the City continues to support the operations of homeless shelters to serve various demographics. In From The Cold, operated by Home Base Housing, provides services to men and women, Lily's Place, operated by Home Base Housing, provides services to families and the Kingston Youth Shelter provides services to youth aged 15 – 24. In partnership with the United Way, the City has also been offering a temporary overflow shelter located at 234 Brock Street.

March 2, 2021

Page 16 of 18

The table below provides information on average occupancy of shelters in the last 6 months.

Shelter	Average unique clients per month over last 6 months	Average occupancy in last 6 months
In From the Cold	3	88%
Kingston Youth Shelter	5	49%
Lily's Place	4	73%
Overflow Shelter	4	50-80% fluctuates

The City has also provided additional spaces through motels as required in addition to shelter spaces. The City is also working on making additional temporary spaces available at 805 Ridley Drive should there be an increase in community needs. There are other shelters providing services within the community such as Interval House that operate without direct financial support from the City.

The system partners work in close collaboration with Public Health KFL&A on outbreak management. All shelter facilities have infection prevention and control plans (IPAC) in place including vigilant screening. A scalable self isolation model is operated by Addictions and Mental Health Services (AMHS) at a local motel. Clients that can not access the shelter system due to COVID-19 symptoms have the ability to self isolate through this model and receive testing, medical and basic needs support. Over 50 clients have been referred to this service over the past few months.

Asymptomatic testing of clients and staff has been implemented at ICH and is rolling out at other shelters shortly. Plans are also in place should there be a larger scale outbreak exceeding the capacity of the AMHS self isolation model.

As part of the Public Health vaccination roll out shelter clients and staff have been identified as a high priority.

Supportive Housing

In 2020, the City acquired 113 Lower Union Street and 805 Ridley Drive with the intent to transform both properties to supportive housing units. These properties, primarily 113 Lower Union Street, have been utilized as temporary shelters and self-isolation sites during COVID-19.

In 2021, staff intend to make recommendations for both properties to operate as supportive housing that have 24/7 services on site. The update to the 10 year Housing and Homelessness Plan indicated that there is a gap in supportive housing options within the City. Supportive housing is required for people that may not have the capability to successfully access and retain

March 2, 2021

Page 17 of 18

housing independently. Supports required may include, but are not limited to mental health, and addictions counselling, life skills and other types of support services

Staff have initiated a roundtable with all supportive and transitional housing providers to work towards addressing this housing gap, create new partnerships and build capacity.

113 Lower Union Street is a former Addictions and Mental Health facility that provided support services but that closed a few years ago. The building is properly design for this type of services. A Request for Proposal (RFP) was issued in 2020 and staff are reviewing proposals submitted by not-for-profit organizations and assessing against the need for supportive housing as well as most vulnerable populations. City staff anticipate that a recommendation for 113 Lower Union Street will be provided to Council within the next couple of months.

805 Ridley Drive is a former retirement home and has a design that is conducive to supportive housing. This facility does require some repairs to make it functional. It is anticipated that a RFP will be issued shortly and that a recommendation will be submitted in the second half of 2021.

Encampment Guidelines

As directed by Council, City staff are working on collecting information on best practices to report back with guidelines for encampments in Q2 2021. City staff recognize that community needs vary, and some individuals do prefer to remain outside, regardless if there is capacity in shelters, the Integrated Care Hub and housing. This has been observed this winter with individuals that chose, regardless of multiple offers of support from various partners, to access private properties and camp outside. This has resulted in multiple concerns including trespassing on private properties and fire incidents. The Fire Department has been quite involved in ensuring that Fire orders have been complied with by the property owner. In response to these challenges, City staff have been working with a property owner to enable access with appropriate measures to address the Fire Orders and Fire Department concerns.

Homelessness System Review

Due to the expiring agreements with all of the current Homelessness services providers, the lessons learned of the homelessness system over the past five (5) years, including the pandemic, and the changing needs of the clients, a full system review is currently in progress.

The review is focusing on all elements of the system, including street outreach services, daytime services, prevention and diversion programming, Discretionary Residency Benefits, housing first, shelter services and the link to transitional and supportive housing. The role of the service manager, community partnerships and collaboration, and system accountability are also important components in this review. Staff will be bringing a report to Council in Q2 of 2021 with system changes and the proposed procurement process.

The City also continues to work to provide better services to the vulnerable populations through financial support to Street Outreach and Ontario Works shelter allowance which is provided to enable people to access and retain housing successfully. Ontario Works shelter allowance is

March 2, 2021

Page 18 of 18

available to those who are eligible for the provincial program on a monthly basis and can be offered to a maximum amount dependent on an individual's shelter expense. The City does provide additional financial support through the Discretionary Benefits for first and last months rent, utility arrears, or moving expenses.

Existing Policy/By-Law:

None

Notice Provisions:

None

Accessibility Considerations:

None

Financial Considerations:

As described in the Option/Discussion section of the report.

Contacts:

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Ruth Noordegraaf, Director, Housing & Social Services 613-546-4291 extension 4916

Other City of Kingston Staff Consulted:

Joanne Borris, Acting Manager, Housing & Homelessness

Scarlet Eyles, Manager, Financial Planning

Brandon Forrest, Director, Business, Real Estate & Environment

Exhibits Attached:

Exhibit A – Integrated Care Hub Inflow & Outflow Data (January – February 22, 2021)

Healthcare & First Responder Referrals – Inflow

For each month, service providers indicate the number of instances that a client was **directly** referred from one of the referral sources indicated. A referral is considered a direct referral when the client has come directly from the referral source (on their own accord or via an alternate method e.g. taxi) OR was discharged from such an institution within the last 72hrs. Clients may be captured more than once.

Referral Source	January	February	March	April	May	June	July	August	September	October	November	December	TOTAL 2020/21
AMHS - Crisis												1	1
AMHS - Other	2	6											8
EMS - Fire												1	1
EMS – Paramedics*												1	1
Healthcare - Other													0
Healthcare - Street Health												3	3
Hospital - Hotel Dieu	2	1										1	4
Hospital - KGH	5	5										6	16
Hospital - Providence Care													0
Police - KPF	15	6										20	41
Police - MCERT		2										1	3
Police - OPP													0
Sexual Assault Centre													0
TOTAL	24	20	0	0	0	0	0	0	0	0	0	34	78

*Select “EMS-Paramedics” when clients are transported to the agency via ambulance. All other healthcare referrals should be captured under the corresponding indicator.

Healthcare & First Responder Referrals – Outflow

For each month, service providers indicate the number of times a client was referred to a healthcare or first responder service. Count the number of instances, rather than the number of unique clients.

Referral Source	January	February	March	April	May	June	July	August	September	October	November	December	TOTAL 2020/21
Ambulance/Paramedics (911)*													0
Crisis Team	5	11											16
Fire Department - Emergency (911)	1												1
Fire Department - Non-Emergency													0
Hospital - Emergency Department*		3											3
Hospital - Urgent Care*		1											1
Police - Emergency (911)													0
Police - Non-emergency													0
Sexual Assault Centre													0
TOTAL	6	15	0	0	0	0	0	0	0	0	0	0	21

*Capture instances that require an ambulance under “Ambulance/Paramedics (911)”. Select “Hospital” when clients are directed to attend hospital either on their own accord or via taxi, etc.

