

**Regional Municipality of Waterloo  
Community and Health Services Committee  
Agenda**



Date: Tuesday, February 7, 2023  
 Regular Session: 4:00 p.m.  
 Location: Council Chambers

Should you require an alternative format please contact the Regional Clerk at Tel.: 519-575-4400, TTY: 519-575-4605, or [regionalclerk@regionofwaterloo.ca](mailto:regionalclerk@regionofwaterloo.ca)

**Pages**

**Start time is approximate the Community and Health Services Committee will start immediately following the Planning and Works Committee.**

1. Call to Order
2. Land Acknowledgement
3. Declarations of Pecuniary Interest under the “Municipal Conflict of Interest Act”
4. Presentations
5. Delegations
6. Consent Agenda

**6.1 Strategic Focus – Healthy, Safe and Inclusive Communities**

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

**Recommended Motion:**

That the Consent Agenda items be received for information and approved.

- 6.1.1 PHE-CFH-23-001, Region of Waterloo Public Health Dental Program Updates 7  
 For information.

**7. Regular Agenda**

**7.1 Strategic Focus – Healthy, Safe and Inclusive Communities**

- 7.1.1 PHE-SPS-23-001, Alternate Destination Clinic for Paramedic Services 16  
 For information.
- 7.1.2 CSD-HOU-23-005, Community Funding Requests in the Housing Stability System 30

For direction.

7.1.3 Verbal Update, Interim Housing Plan

For information.

**8. Information/Correspondence**

**8.1 Council/Committee Tracking List**

34

**9. Other Business**

**9.1 Councillor Rob Deutschmann Notice of Motion**

**Recommended Motion:**

Whereas the Region of Waterloo enacted Regional Bylaw number 13-050 with is entitled A By-law Respecting the Conduct of Persons Entering Upon Buildings, Grounds and Public Transportation Vehicles Owned or Occupied by The Regional Municipality of Waterloo dated December 11, 2013 (Bylaw 13-050);

And whereas the intent and purpose of Regional Bylaw 13-050 was to create a code of use with respect to the use of Regional property;

And whereas Regional Bylaw 13-050 provides the Region of Waterloo with steps and actions to be taken by the Region of Waterloo where a party, including individuals on Regional lands, is acting in violation of the said Bylaw;

And whereas Regional Bylaw 13-050 specifically provides the Region with the power to exercise any other rights or powers pursuant to the Trespass to Property Act that are reasonable in the circumstances;

And whereas Regional Bylaw 13-050 specifically provides that the Region of Waterloo may contact the Waterloo Regional Police Service (referred to as the "WRPS"), or any other police service having lawful jurisdiction, at any time to request assistance or to initiate any other action as the police service may deem necessary in the circumstances.

And whereas Regional Bylaw 13-050 provides that the Director of Facilities Management and Fleet Services, or successor, shall have all necessary authority to administer the Bylaw;

And whereas Regional Bylaw 13-050 specifically provides that Designated Personnel, being certain identified Regional personnel or a Regionally appointed individual "may contact the Waterloo Regional Police Service, or any other police service having lawful jurisdiction, at any time to request assistance or to initiate any other action as the police service may deem necessary in the circumstances.";

And whereas the Regional of Waterloo is also provided with powers under the Trespass to Property Act R.S.O. 1990 which provides for

specific actions and powers that can be taken by the Region of Waterloo against any party that is residing on Regional property without permission of the occupier/owner of the property;

And whereas, following the eviction of the encampment at Stirling Street, Kitchener, in November 2021, the Region of Waterloo adopted a policy in December 2021 (hereinafter referred to as the “Encampment Policy”) which policy is intended to supplement, not replace, Regional Bylaw 13-050;

And whereas the Encampment Policy is intended to guide the Region in dealing with individuals in providing outreach services to individuals living rough on lands owned or occupied by the Region of Waterloo. The Encampment Policy stresses the importance of outreach and service delivery as the first point of engagement and the need to balance the need for providing supports to vulnerable individuals with the civic responsibility of maintaining the use of lands for the public and/or operational needs of the municipality.

And whereas the Encampment Policy provides that The Commissioner of the Regional department having operational responsibility for the Region-owned or occupied public lands shall be responsible for making a determination to provide notice to individuals that camping is to be discontinued and that personal goods, debris and structures are to be cleared by the individuals from a public space or right of way. The Encampment Policy further provides that the Commissioner shall consult with the Regional Solicitor and Chief Administrative Officer in making this determination and that Regional Council will be notified of a decision to issue notices to vacate.

And whereas the Encampment Policy further provides that the primary objective of any enforcement activity will be to ensure the safety of all concerned and respect for the individuals experiencing homeless and their possessions.

And whereas the Encampment Policy further provides that these activities may be co-ordinated with the Waterloo Region Police Service and other Regional departments to maintain the safety of staff. In circumstances where a site is not vacant, by-law enforcement officers will consult with the Regional Solicitor prior to initiating on-site enforcement. The Regional Solicitor shall be responsible for providing advice to Regional Council on any proposed enforcement activity on a site where individuals refuse to accept supports and have not vacated a particular property.

And whereas an encampment, beginning early in 2022, developed at the

intersection of Victoria Street and Weber Street in Kitchener on Regionally owned land (referred to as the “Encampment”);

And whereas the Region of Waterloo commenced an eviction action on June 6, 2022, by posting a sign at the Encampment advising individuals to vacate the land by June 30, 2022;

And whereas no action was taken by the Region of Waterloo on or after June 30, 2022, to remove or evict individuals from the Encampment;

And whereas the Region completed a risk assessment report dated June 30, 2022, using a risk assessment tool for the Encampment, and the assessment predominantly identifies low and medium risk levels for most items save for the number of individuals, which provides for a high risk assessment.

And whereas the Region of Waterloo has no immediate plans for the use of the lands upon which the Encampment is located;

And whereas on July 5, 2022, the Region of Waterloo brought an application to the Superior Court of Justice (referred to as the “Application”), the primary purpose of the Application was to ask the court for direction with the Encampment, and in particular to obtain the courts guidance to engage the WRPS in the eviction of individuals from the Encampment and to provide operational guidance with respect to any such eviction;

And whereas the Region of Waterloo in its Application makes application to the court to grant specific powers, which includes the following:

b) A Declaration that the Respondents are in breach of By-law Number 13-050 of The Regional Municipality of Waterloo, A By-law Respecting the Conduct of Persons Entering Upon Buildings, Grounds and Public Transportation Vehicles Owned or Occupied by The Regional Municipality of Waterloo (the “Code of Use By-law”);

d) An Order that any police officer with the Waterloo Regional Police Service, and any other police authority (the “Police”), shall have authorization to arrest and remove any person who has knowledge of the Order and who the Police have reasonable and probable grounds to believe is contravening or has contravened any provision of the Order;

e) An Order that the Police or designated agents shall have authorization to remove any vehicles, personal property, equipment, structures, or other objects that are located on the Property;

f) An Order that the Police shall retain discretion: i) as to the timing and manner of enforcement of the Order, and specifically retain discretion as to the timing and manner of arrest and removal of any person pursuant to

the Order; ii) to detain and release any person without arrest who the Police have reasonable and probable grounds to believe is contravening, or has contravened, any provisions of the Order, upon that person agreeing to abide by the Order; and iii) to lay any charges or take any other lawful action;

g) An Order that any peace officer and any member of the Police who arrests or arrests and removes any person pursuant to the Order shall have authorization to release that person from arrest upon that person agreeing in writing to obey the Order;

k) An Order that the terms of the Order shall remain in force until varied or discharged by a further Order of the Court;

o) Such other relief as counsel may request and this Court may grant  
And whereas arguments with respect to the Application have been completed and a decision by the court has yet to be provided;

And whereas, prior to the Application, the Region of Waterloo Council approved a motion on June 22, 2022, directing staff to develop a plan to establish interim housing solutions for Regional residents experiencing homelessness including those currently residing in encampments;

And whereas, following the filing of the Application, the Region of Waterloo, in August 2022, received and approved a report from Waterloo Region staff entitled “Interim Housing Solutions: Recommendations to Community Services Committee” outlining an interim housing strategy approach for the Region of Waterloo (referred to as Interim Housing Strategy Report”);

And whereas the Interim Housing Strategy Report includes a Managed Hybrid Shelter/outdoor model, which is identified as any facility or property, the primary purpose of which is to provide a temporary shelter for those experiencing homelessness and which does not require occupants to sign leases or occupancy agreement and includes managed spaces for outdoor tenting options.

And whereas the next steps listed in the Interim Housing Strategy Report included, among other items, direction to Regional staff to immediately work on adding spaces to the System and develop a Homelessness Master Plan for Council’s consideration in 2023;

And whereas the Region of Waterloo continues to work on implementing the approved Housing Strategy Report including, but has not yet established, a site for a managed encampment or operator for the managed encampment;

And whereas the Region of Waterloo Anti-Racism Advisory Working

Group, in their October 2022 report, recommended under the section entitled “Achieving a Municipality Steeped in Reconciliation and Anti-Racist Practice”, that the Region of Waterloo:  
Stop evicting people from encampments before allocating Regional land or permanent accommodation,

Ensure that any response to encampment issues, including security be a civilian led response which includes trained mental health and addiction workers,

Provide additional funding to grassroots organizations and outreach groups working with encampments to ensure basic human needs are met,

And whereas the Region of Waterloo has the expertise, experience, necessary authority, and powers required to manage the existing Encampment, including the ability to evict encampment residents;

Therefore,

Be it resolved that the Region of Waterloo, including any employees, representatives and assigns, will not take any steps to enforce eviction of the individuals located at the Encampment, unless and until the issue of eviction has been brought before Regional Council and Regional Council, after a comprehensive review, passes a motion that permits the Region of Waterloo staff, its representatives and assigns, to carry out any eviction of the Encampment pursuant to Regional By-law 13-050, the Encampment Policy, the Trespass Act, any guidance obtained through the Application and any other relevant statute, bylaw or authority.

Be it further resolved that the Region of Waterloo will not take any steps to enforce the eviction of individuals on Regional lands located at 150 Main Street, Cambridge, Ontario unless and until the issue of eviction has been brought before Regional Council and Regional Council, after a comprehensive review, passes a motion that permits the Region of Waterloo staff, its representatives and assigns, to carry out any eviction of the encampment pursuant to Regional By-law 13-050, the Encampment Policy, the Trespass Act, any guidance obtained through the Application and any other relevant statute, bylaw or authority.

**10. Next Meeting - March 7, 2023**

**11. Adjourn**

**Recommended Motion:**

That the meeting adjourn at x:xx x.m.

**Region of Waterloo**  
**Public Health and Emergency Services**  
**Child, Family and Dental Health**

---

**To:** Community and Health Services Committee  
**Meeting Date:** February 7, 2023  
**Report Title:** Region of Waterloo Public Health Dental Program Updates

---

**1. Recommendation**

For information.

**2. Purpose / Issue:**

To update the Board of Health (Regional Council) on the Public Health Dental Program including pandemic recovery work.

**3. Strategic Plan:**

Focus Area 4: Healthy, Safe and Inclusive Communities

**4. Report Highlights:**

- The COVID-19 pandemic significantly affected dental services across the province. Dental services administered through Public Health were impacted in the following ways:
  - Dental clinics in Ontario were required to halt non-critical dental services and offer only emergency, urgent, and/or critical dental services. This directly impacted services available at Public Health dental clinics and services available to seniors enrolled in the Ontario Seniors Dental Care Program. Along with clinical preventive dental services being halted, community outreach initiatives and the school dental screening program were also paused.
  - There were delays with capital construction projects at both Langs and Kitchener Downtown Community Health Centers due to the pandemic. Interim support was provided through Public Health dental clinics for seniors requiring critical dental services (Appendix A).
- As pandemic recovery was underway, services began to resume, including:
  - In April 2022, in partnership with the public and catholic school boards, school dental screening resumed. In order to focus efforts on catching up the most vulnerable children, sixteen moderate and high-risk schools were selected for participation in a resumption pilot between April 21, 2022 and June 30, 2022. As of November 1, 2022, the dental screening program has fully resumed (Appendix B).

- Public Health Dental staff returned from pandemic redeployment in February 2022 at which point, preventive dental services at Public Health dental clinics resumed. Increased clinic time was made available in order to move through the backlog of children in need of preventive care.
- Community Health Centers began to resume preventive dental services for the Ontario Seniors Dental Care program in June 2020; and were fully operational by January 2022 upon completion of capital construction projects (Appendix C).
- There is significant demand for the Ontario Seniors Dental Care Program. Public Health continues to work with Community Health Centre partners to decrease the wait time for services including creation of a central intake line to triage clients with urgent needs; creation of a third OSDCP clinic in Wellesley scheduled to be complete the first quarter of 2024; and ongoing recruitment of local dental practitioners to support OSDCP referrals. One challenge with attracting support from local practitioners includes the Ministry's stipulation that a fee-for-service model cannot be used.
- In partnership with the Community Services Department, Public Health administers various dental subsidy programs for recipients of income support programs. Recipients of Ontario Works (OW) and Ontario Disability Support Program (ODSP) have access to the Adult Emergency Dental Program and/or the Denture and Discretionary Program. Non-social assistance recipients (NSARs) meeting eligibility criteria may qualify for temporary emergency dental coverage through the Discretionary Program. This critical work continued throughout the entirety of the pandemic.
- In December 2022, the Government of Canada and Canada Revenue Agency announced the Interim Canada Dental Benefit. The benefit is available to eligible families with children under age 12 and adjusted net household income below \$90,000. While health units do not administer the Interim Canada Dental Benefit, the Public Health Dental program plays an important role in promoting it to local families/caregivers and family-oriented programs (both within public health and with external partners). A Dental benefit for all ages is expected in 2025.

## 5. Background:

The Public Health Dental program aims to improve population health outcomes by supporting access to dental care through education, clinical services and financial assistance programs. Work is conducted in accordance with objectives and mandates within the [Ontario Public Health Standards](#), [Oral Health Protocol](#), under the [Health Protection and Promotion Act](#), [Regulated Health Professions Act](#), and the [Child, Youth and Family Services Act](#).

As per the [Oral Health Protocol](#), dental screening data from previous years informs the minimum number of grades that must be offered dental screenings. Through the screening, students in need of urgent dental care, non-urgent dental care, and preventive dental care are identified. Staff follow-up with families to ensure urgent dental care is completed and support them to access the Healthy Smiles Ontario program, a provincial program that offers free basic dental services to eligible children. Emergency dental screenings are available in Public Health dental clinics Monday through Friday during business hours.



Dental screenings and oral hygiene education sessions are also provided in partnership with community organizations to support access for people who may experience barriers to services including, newcomers, vulnerable women and youth, pregnant youth, and members of rural populations.

Some clinical dental services are offered for low-income clients through Public Health dental clinics at 150 Main Street in Cambridge and 99 Regina Street in Waterloo. These clinics provide free basic dental services to children enrolled into Healthy Smiles Ontario, children of low-income families whose adjusted net income exceeds financial eligibility for Healthy Smiles Ontario, and eligible low-income adults experiencing a dental emergency.

## **6. Area Municipality Communication and Public/Stakeholder Engagement:**

### **Area Municipality Communication:**

Nil.

### **Public/Stakeholder Engagement:**

Waterloo Region District School Board and Waterloo Catholic District School Board were key partners in resuming the school dental screening program. Parents received oral health notification forms with updated infection prevention and controls messaging related to COVID-19. Social media content was shared to promote the resumption of school dental screenings and to encourage families to return to routine dental care that may have been delayed during the pandemic. The Ontario Association of Public Health Dentistry (OAPHD) met virtually throughout the pandemic allowing constant communication across the province's health units to troubleshoot common challenges and to highlight concerns related to the seniors' program and the resumption of dental screenings in schools to the attention of the Ministry of Health.

## **7. Financial Implications:**

The preliminary 2023 Public Health Operating Budget includes:

- \$2.360M for Ontario Works Discretionary Benefits (including Ontario Disability Support Program Denture and Discretionary Services) and Adult Emergency Assistance programs funded 100% by the Ministry of Children, Community and Social Services (MCCSS). Program administration costs are funded 50% by MCCSS and 50% by the Region.
- \$1.956M for the Ontario Seniors Dental Care Program fully funded by the Province of Ontario. Public Health administers funds to Community Health Centre partners who provide the program.
- \$1.457M for other Public Health Dental Programs cost shared by the Ministry of Health (MOH) and the Region of Waterloo.

**8. Conclusion / Next Steps:**

Public Health will continue the important work in facilitating access to dental care by promoting financial assistance options available for eligible individuals (including Healthy Smiles Ontario, Ontario Seniors Dental Care Program, dental subsidy programs, Public Health Dental Clinics, and the Interim Canada Dental Benefit). Baselines will be re-established for the school dental screening program and efforts to improve access to the seniors program will continue by engaging community and provincial partners.

**9. Attachments:**

Appendix A: Phased Approach for OSDCP Implementation in Waterloo Region

Appendix B: School Dental Screening Resumption Plan

Appendix C: Service Delivery Data for OSDCP

**Prepared By:** Kirsten Barber, Dental Manager (A), Child, Family and Dental Health

**Reviewed By:** Grace Bermingham, Director, Child Family and Dental Health

**Approved By:** Hsiu-Li Wang, Commissioner/Medical Officer of Health

## **Appendix A: Phased approach for Ontario Seniors Dental Care Program Implementation in Waterloo Region**

### **Phase 1 (Complete) - Capital projects at Langs Community Health Center and Kitchener Downtown Community Health Center**

As of January 2022, both Ontario Seniors Dental Care Program capital projects at Langs Community Health Center and Kitchener Downtown Community Health Center have come to completion.

Langs' capital project came to completion as scheduled and on budget including:

- Two dental treatment rooms
- One reception/waiting area
- One panoramic x-ray room
- One sterilization room and equipment room
- One office space for use by dental staff
- Staffing includes one part time dentist (one full time dentist is on a leave of absence), one full time registered dental hygienist, one full time clinical dental assistant, and one full time administrative dental assistant

The capital project at Kitchener Downtown faced significant COVID-19 related delays and came to completion in January 2022. This location includes:

- Two dental treatment rooms
- One reception/waiting area
- One panoramic x-ray room
- One sterilization room and equipment room
- One office space for used by dental staff
- Staffing includes one full time dentist, one full time dental hygienist, one full time clinical dental assistant, and one full time administrative dental assistant

### **Support during renovation phase**

While both Langs and Kitchener Downtown were in the middle of their capital renovations, Public Health dental clinics in Cambridge and Waterloo provided short-term support by offering emergency services for eligible seniors. As of January 1, 2022, the Public Health dental clinics are no longer accepting new clients under the program and are referring all new emergencies to Langs and Kitchener Downtown. To allow for continuity of care, the Public Health dental clinics continued with existing client treatment plans until their completion.

Both Public Health dental clinics have now refocused on providing dental services for

children of low-income families (through Healthy Smiles Ontario or through the regionally funded dental clinics). Public Health dental staff continue to support the Ontario Seniors Dental Care Program by assisting clients with program navigation and completing applications.

**Phase 2 (in progress) - Expansion of Ontario Seniors Dental Care Program to include new dental clinic in the Wellesley Health Center located at the new Wellesley Recreation Complex**

In January 2022, health units across the province were invited to revise and re-submit previously rejected capital project submissions for the Ontario Seniors Dental Care Program. The Region of Waterloo Public Health worked in partnership with Woolwich Community Health Centre to revise the capital submission for a dental clinic within in a centralized rural location. The revisions made included:

- Relocation of the dental clinic to the new Wellesley Health Centre, which would be incorporated into the construction of the Wellesley Recreation Complex in the Township of Wellesley.
- A new build was determined to be a lower overall cost rather than the original submission in 2020, and the new location would serve as a more central site for low-income seniors living in rural communities.

In May of 2022, the Ministry approved \$583.8K for the capital re-submission (\$113.6K by March 31, 2023 and remaining \$470.2K by March 31, 2024). The plans for expansion include:

- Adding square footage to the existing construction project of a brand new Health Clinic and Recreation Complex in Wellesley (recreation complex and health center is funded by Wellesley Township whereas the construction dedicated to the Ontario Seniors Dental Care Program will be 100% funded by the Ministry).
- Build will include one fully equipped dental suite, one fully equipped sterilization room, equipment room, and office space for use by dental staff.

Construction for the Wellesley Recreation Complex began on May 2, 2022 and has an anticipated completion time of early 2024, pending any delays.

## Appendix B- School Dental Screening Resumption Planning

### Background

During a typical school year, the Public Health Dental Program attends all publically funded elementary schools in Waterloo Region to offer free dental screenings to children in various grades. The program aims to promote oral health, identify unmet oral needs and connect children in need with appropriate provincially/regionally funded dental programs. Children identified as a Child in Need of Urgent Care (CUC) require regular follow up to ensure dental treatment is completed. A team of public health dental hygienists is responsible for this work and for facilitating enrolment into the Healthy Smiles Ontario Emergency and Essential Services Stream (HSO-EESS) for those who meet eligibility criteria.

The current Oral Health Protocol under the Ontario Public Health Standards (OPHS) mandates boards of health screen *at minimum* the following grades depending on risk level determined<sup>1</sup>:

- i) JK, SK, and Grade 2 in low screening intensity schools;
- ii) JK, SK, Grade 2 and 7 in medium screening intensity schools;
- iii) JK, SK, Grade 2, 4, and 7 in high screening intensity schools.

### Assessing Oral Health Needs following program disruption due to COVID-19

During the last full screening school year of 2019-2020, the dental team had planned to screen 151 publicly funded schools within Waterloo Region; however, due to the pandemic, only 55 (36.4%) schools were reached. In the 2020-2021 school year, there were no school dental screenings. In April 2022, phase one of program resumption began with a pilot developed to help staff rapidly assess the impact of the pandemic on children's oral health. Through the pilot, staff screened children in all grades (JK-Gr.8) from sixteen moderate or high-risk schools who had not received screening since the 2018-2019 school year. The results of the pilot were analyzed and compared against previous screening results to inform a plan for the 2022-2023 school year including which schools and grades would be prioritized.

### Results and findings

- Compared to the 2018-19 school year, urgent dental needs for children in the pilot in junior kindergarten, senior kindergarten and grades 2, 3, 4, 5, 7 and 8 more than doubled.
- There was a slight increase in urgent dental needs among grade 1 students in the pilot compared to grade 1 students in the 2018-19 school year (13.8% vs. 10.5%)

---

<sup>1</sup> The Oral Health Protocol defines risk level calculation based on Grade 2 decay screening results from the previous school year; where number of teeth with active decay is recorded in both primary and secondary dentition and an overall percentage is calculated for each school. Schools with grade 2 decay rates of  $\geq 14\%$  are deemed high risk,  $\geq 9.5\%$  but  $< 14\%$  are moderate risk, and  $< 9.5\%$  are deemed low risk.

- The pilot did not reveal a difference in dental care needs for grade 6 children in the pilot compared to 2018-2019.
- Comparing total number of CUCs found in the 2018-2019 school year (where 24,589 students were screened) with the total number of CUCs found in the 2022 pilot (where 4,854 students were screened) the percentage of those requiring enrolment in the HSO-EESS program in order to access dental services has increased by 5 per cent.

### **Next Steps**

Based on the findings from the pilot, along with program capacity considerations, the following approach to school dental screening was developed for the 2022-2023 school year (phase two of resumption):

- i) The OPHS recommends screening for JK, SK, and Grade 2 students in low screening intensity schools. Based on the pilot findings, additional screening for **Grade 4** students was implemented.
- ii) The OPHS recommends screening for JK, SK, Grade 2, and Grade 7 students in medium screening intensity schools. Based on the pilot findings, adding screening for **Grade 4** students was implemented.
- iii) The OPHS recommends screening for all JK, SK, Grade 2, 4, and 7 students in high screening intensity schools. Based on the pilot findings, adding screening for **Grade 3** in high screening intensity schools was implemented.

Data collected over the course of the 2022-2023 school year will be used to re-establish baselines for the school dental screening program and will aid in planning for the 2023-2024 school year.

## Appendix C- Service Delivery for the Ontario Seniors Dental Care Program

In 2022, Community Health Centers were operating at full capacity for majority of the calendar year completing 2030 OSDCP appointments (dentist and dental hygienist appointments combined). This milestone helped to shape future projections of OSDCP in Waterloo Region, as demand for services continues to grow. 478 unique clients accessed services under the program between the CHC partners and community referrals during the 2022 operating year. This includes 373 new patient assessments and 246 emergency assessments (data as of November 1, 2022).

### 2022 Service Delivery Data

<b>OSDCP Dentist Schedule of Services</b>	
Total number of unique clients who have received dentist or dental specialist services	478
Total number of procedures completed	2637
<b>OSDCP Dental Hygienist Schedule of Services</b>	
Total number of unique clients who have received preventive services	409
Total number of procedures completed	1555
<b>OSDCP Denturist Schedule of Services</b>	
Total number of unique clients who have received denturist services	51
Total number of procedures completed	83

As of December 31, 2022 the Region's waitlist for services is 980 OSDCP-enrolled seniors. The average wait time to access routine dental care is now 24 months.

### Overall Service Delivery Data in Waterloo Region (September 1, 2019 to November 1, 2022)

<b>OSDCP Dentist Schedule of Services</b>	
Total number of unique clients who have received dentist or dental specialist services	888
Total number of procedures completed	7041
<b>OSDCP Dental Hygienist Schedule of Services</b>	
Total number of unique clients who have received preventive services	630
Total number of procedures completed	3105
<b>OSDCP Denturist Schedule of Services</b>	
Total number of unique clients who have received denturist services	120
Total number of procedures completed	200

**Region of Waterloo**  
**Public Health and Emergency Services**  
**Strategy, Performance and Organizational Standards**

---

**To:** Community and Health Services Committee  
**Meeting Date:** February 7, 2023  
**Report Title:** Alternate Destination Clinic for Paramedic Services

---

**1. Recommendation**

For information.

**2. Purpose / Issue:**

To provide an overview of the 911 mental health and addiction (MHA) crisis response pathways in Waterloo Region and outline the proposed Alternate Destination Clinic for Paramedic Services.

**3. Strategic Plan:**

Healthy, safe and inclusive communities: 4.4 Prevent and reduce problematic substance use and its consequences, 4.5 Enhance community safety and wellbeing in Waterloo Region.

**4. Report Highlights:**

- Over the past year, Public Health and other Regional departments have explored mental health and addition (MHA) crisis response in Waterloo Region. Despite new models of service emerging, a gap remains for Paramedics caring for patients with MHA concerns. See Appendix A for visual of the 911 MHA crisis response pathways.
- A proven model operating in London-Middlesex, is the prototype for an Alternate Destination Clinic in Waterloo Region. Under such a model, Paramedic Services would transfer eligible patients with a MHA concern to a clinic instead of transporting them to the Emergency Department. Walk in options would be available to support those not able, or wanting to call 911. See Appendix B for a summary of the London-Middlesex Model.
- The Alternate Destination Clinic would be informed by the Community Safety and Wellbeing Plan and address these identified needs:
  - More resources and appropriate supports for people in crisis



- Alternative safety and crisis response models that centre community-led approaches
- Paramedic Services and Public Health will facilitate a collaborative leadership model that supports community agencies, health-care leaders, and persons with lived/ living expertise to lead and develop a proposal to the province.
- Next steps are to expand out-facing communications and form a community Steering Committee with key partners and individuals with lived/living experience to guide the development of the model and prepare an application to the province for base funding. See Appendix C for project goal and timelines.

## **5. Background:**

- Provincial legislation changes in 2019 enable the diversion of select patient cohorts to appropriate community-based care. Paramedic Services have the option to transport eligible patients to a community setting (e.g. clinic) if those community services are willing to accept the patients and the proposed protocols are approved by the Ministry.

## **6. Area Municipality Communication and Public/Stakeholder Engagement:**

### **Area Municipality Communication:**

- Area municipalities including both rural and urban communities will be included in upcoming communication about the initiative (see public/stakeholder engagement)

### **Public/Stakeholder Engagement:**

- In January 2023, staff held a meeting with key partners to discuss the London-Middlesex model. All partners were supportive of pursuing this model in Waterloo Region. See Appendix C for list of partners.
- The community Steering Committee will be formed through an expression of interest process. See Appendix C for potential members.
- In February 2023, communication will begin with the community, and offer opportunities for involvement.
- Secondary analysis of existing community consultation data will inform the funding application.
- Once funding is secured, community engagement and co-design for the service delivery model will begin.

## **7. Financial Implications:**

Staff expect such a program to be fully funded through provincial funding sources, and as such a request to Council for regional funding is not anticipated.

**8. Conclusion / Next Steps:**

- Communicate to the community about the initiative and opportunities for involvement.
- Work toward the key milestones, with forming the community Steering Committee as the first step.
- Update Council once a funding application is ready.

**9. Attachments:**

Appendix A: Visual of 911 Mental Health and Addiction Call Pathways

Appendix B: Summary of London-Middlesex Model

Appendix C: Project Goal and Timelines

Appendix D: Presentation Slides

**Prepared By:**

Katie McDonald, Manager Strategic and Quality Initiatives

Ann Bettles, Supervisor Community Paramedicine Program

**Reviewed By:**

Rhonda Nicholls, Director Strategy Performance and Organizational Standards

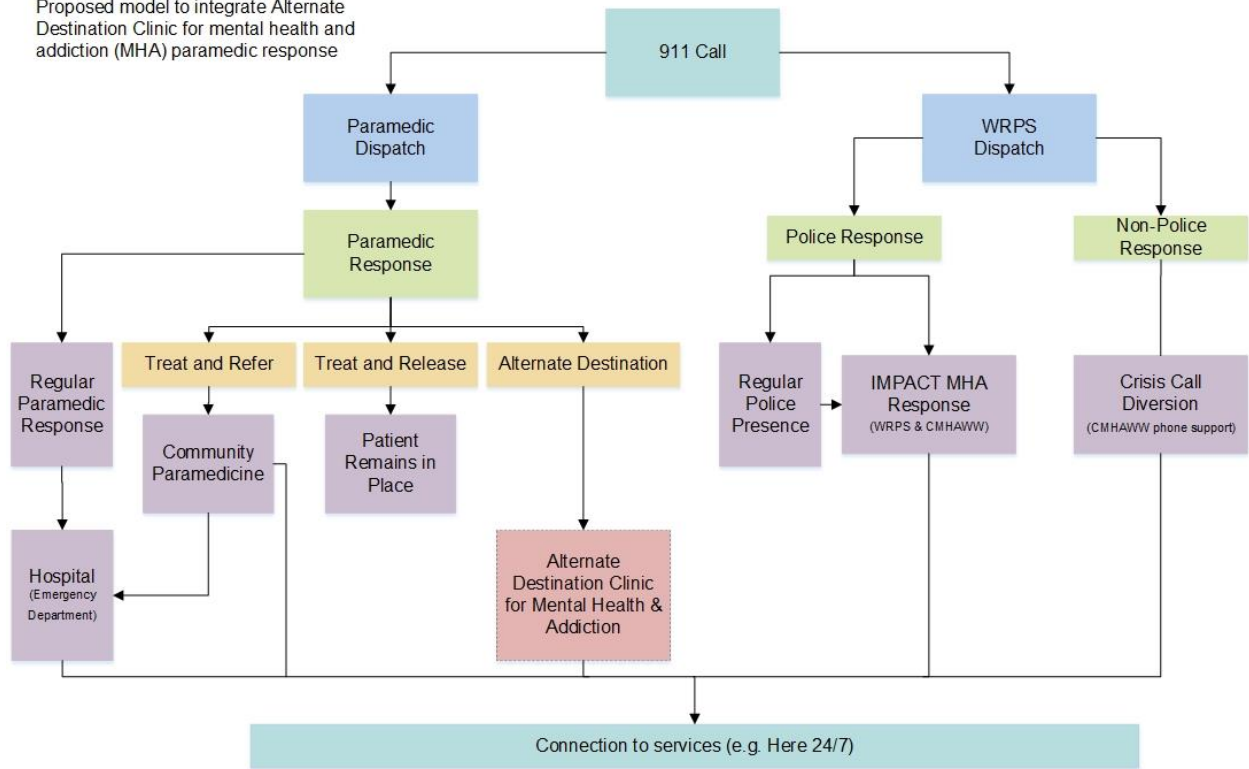
Kevin Petendra, Deputy Chief Paramedic Services

**Approved By:**

Dr. Hsiu-Li Wang, Commissioner Public Health and Emergency Services/Medical Officer of Health

## 911 Mental Health & Addiction Response Pathways

Proposed model to integrate Alternate Destination Clinic for mental health and addiction (MHA) paramedic response



# Summary of London-Middlesex Alternate Destination Model

Prepared by: Region of Waterloo Public Health

## Overview

Starting in October 2017, Middlesex-London Paramedic Services (MLPS) implemented a Mental Health and Addiction (MHA) Alternate Destination pilot project to serve individuals with MHA crises that did not require care in the Emergency Department (ED). In this model, MLPS were able to transfer eligible patients who call 9-1-1 to a 24/7 Walk-In Crisis Clinic instead of dropping them off at an ED.

The goals included:

- Providing the right care in the right place
- Reducing the possibility of individuals falling through the cracks
- Enhancing system benefits (a reduction in paramedic offloading times)

## Model Description

### Objectives

1. To enhance the individual and provider use of community-based services
2. To improve health outcomes and support ending the problem of Hallway Health Care
3. To enhance the ability of paramedics to manage mental health calls appropriately
4. To enhance the individual and caregiver experience in dealing with MHA issues
5. To reduce unnecessary ambulance visits to the ED
6. To reduce delays in offloading ambulances

**Project partners:** the Canadian Mental Health Association (CMHA) Middlesex, Middlesex-London Paramedic Service (MLPS) and London Health Sciences Centre (LHSC).

**Financial support from:** the South West Local Health Integration Network (SW LHIN).

**Eligible patients:** select 9-1-1 patients with care needs related to mental health and addictions.

**Key services offered:** Paramedics are able to provide an on-scene assessment, including determining if the patient is medically stable and conduct an assessment for appropriateness to be transferred. If the patient consents, is cooperative and non-combative, paramedics can call ahead and transfer/offload patient at a Crisis Centre.

Individuals are provided with crisis intervention and support including connection to appropriate community resources and education about crisis services available in the community.

**Location:** The Crisis Centre is a 24/7 walk-in centre operated by CMHA Middlesex. The primary goals of the Crisis Centre are to reduce barriers to crisis support and provide services within a non-institutional and welcoming environment.

Phase 1: From October 2017 to early 2020, the MLPS MHA Alternate Destination operated out of a designated Crisis Centre satellite space located in the LHSC ED to facilitate testing of the pathway and processes to ensure readiness. CMHA Middlesex crisis staff working out of this location supported individuals warm transferred by paramedics from MLPS.

Phase 2: In March 2020, the MLPS MHA Alternate Destination transitioned out of the ED to the 24/7 Walk-In Crisis Centre at Huron Street, which is able to serve more individuals who meet criteria, resulting in fiscal savings, operational efficiencies and a benefit to individuals and the entire system.

## Results

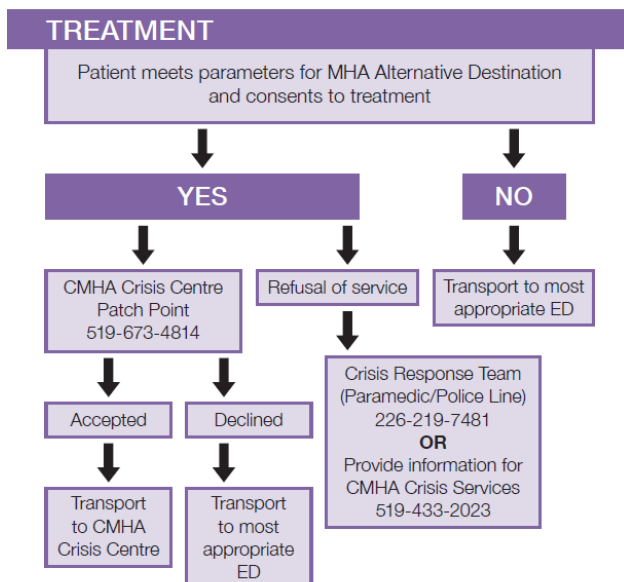
### Phase 1

- Individuals were highly satisfied with the MLPS MHA Alternate Destination and would return to community crisis services in the future, rather than using the ED
- Utilization and diversion from the ED has increased since the launch of satellite
- A number of clients who presented to the Crisis Satellite have subsequently access the Huron Street Crisis Centre, demonstrating some success in changing help-seeking behaviours
- Partner satisfaction with the MLPS MHA Alternate Destination was high
- Ambulance offload times were decreased by approximately 50%, suggesting a system impact
- Paramedics' awareness of and ability to manage mental health crises was improved
- There have been zero adverse outcomes reported using the proposed MHA Alternate Destination patient care model

### Phase 2

- 94% successful discharge from CMHA to the community
- No adverse outcomes
- Reallocated 28 days of a single fully staffed ambulance back to emergency coverage during pilot period (2.5 years – March 2020 to October 6, 2022).
- Ambulance offload times were decreased to 11 minutes on average for those who fit the alternate care pathway (normally an average of 28 minutes)
- The Ministry deemed the MLPS MHA Alternate Destination as successful for continuation as it: proved to be a safe and appropriate alternative treatment option; improved access to appropriate care; improved patient experience; avoiding non essential ED presentations; and improved land ambulance emergency coverage availability.

## MLPS Mental Health and Addiction Alternate Destination Protocol



References available upon request.

## Paramedic Services Alternate Destination Clinic: Goal and Timelines

The goal of the project is to develop, secure funding, and implement, an Alternate Destination Clinic for mental health and addiction calls that will:

- Enhance the individual and caregiver experience with mental health and addiction
- Enhance use of community-based services
- Improve health outcomes of residents
- Improve the ability of paramedics to manage mental health and addiction calls
- Reduce offloading delays

**Table 1:** Key Project Milestones

<b>Milestone</b>	<b>Details</b>	<b>Timeline (approx.)</b>
Key partner validation	<ul style="list-style-type: none"> <li>• Ensure all partners have a good understanding of the current system in Waterloo Region and the proposed model</li> <li>• Determine level of support to move forward with the Alternate Destination Clinic</li> <li>• See below for list of partners</li> </ul>	Jan 2023 - Complete
Community Communication	<ul style="list-style-type: none"> <li>• Introduce to the initiative and opportunities for community involvement</li> <li>• Communicate through Community Safety and Wellbeing Listserv and key partners</li> </ul>	Feb 2023
Community Steering Committee formation	<ul style="list-style-type: none"> <li>• The community Steering Committee will guide the model development and funding application submission</li> <li>• See below for list of potential members and additional details</li> </ul>	Feb-Mar 2023
Funding application submission	<ul style="list-style-type: none"> <li>• Develop an application for provincial funding (looking for base funding from the province)</li> <li>• Report to Council when application is ready for submission</li> </ul>	Apr-Jun 2023
Community engagement and co-design	<ul style="list-style-type: none"> <li>• Identify how the model could be adapted and implemented in Waterloo Region (including service delivery and referral pathways)</li> </ul>	Once funding is available
Implementation	<ul style="list-style-type: none"> <li>• Implement and evaluate the Alternate Destination Clinic in Waterloo Region</li> </ul>	Once funding is available

**Key partners** for the initial consultation in January were selected based on current interactions with Paramedic Services. This group included the following organizations:

- Canadian Mental Health Association Waterloo Wellington
- Cambridge Memorial Hospital
- Grand River Hospital
- Lutherwood
- Ontario Health West
- Local Ontario Health Teams
- Waterloo Regional Police Services

A **community Steering Committee** will be formed to guide the funding application process. Steering Committee members will be recruited in consultation with the key partners and through a broad expression of interest process. Potential members for the Steering Committee include:

- People with lived/living experience, including family members
- Service providers
- Paramedic Services
- Police Services
- Hospitals
- Ontario Health Teams
- Ontario Health
- Community Services Department

The community Steering Committee will also ensure that existing and new services are well integrated into the Alternate Destination Clinic and clear referral pathways are developed and sustained. Once funding is secured, the community Steering Committee will guide the community engagement and implementation process.

# Alternate Destination Clinic for Paramedic Services in Waterloo Region



Region of Waterloo

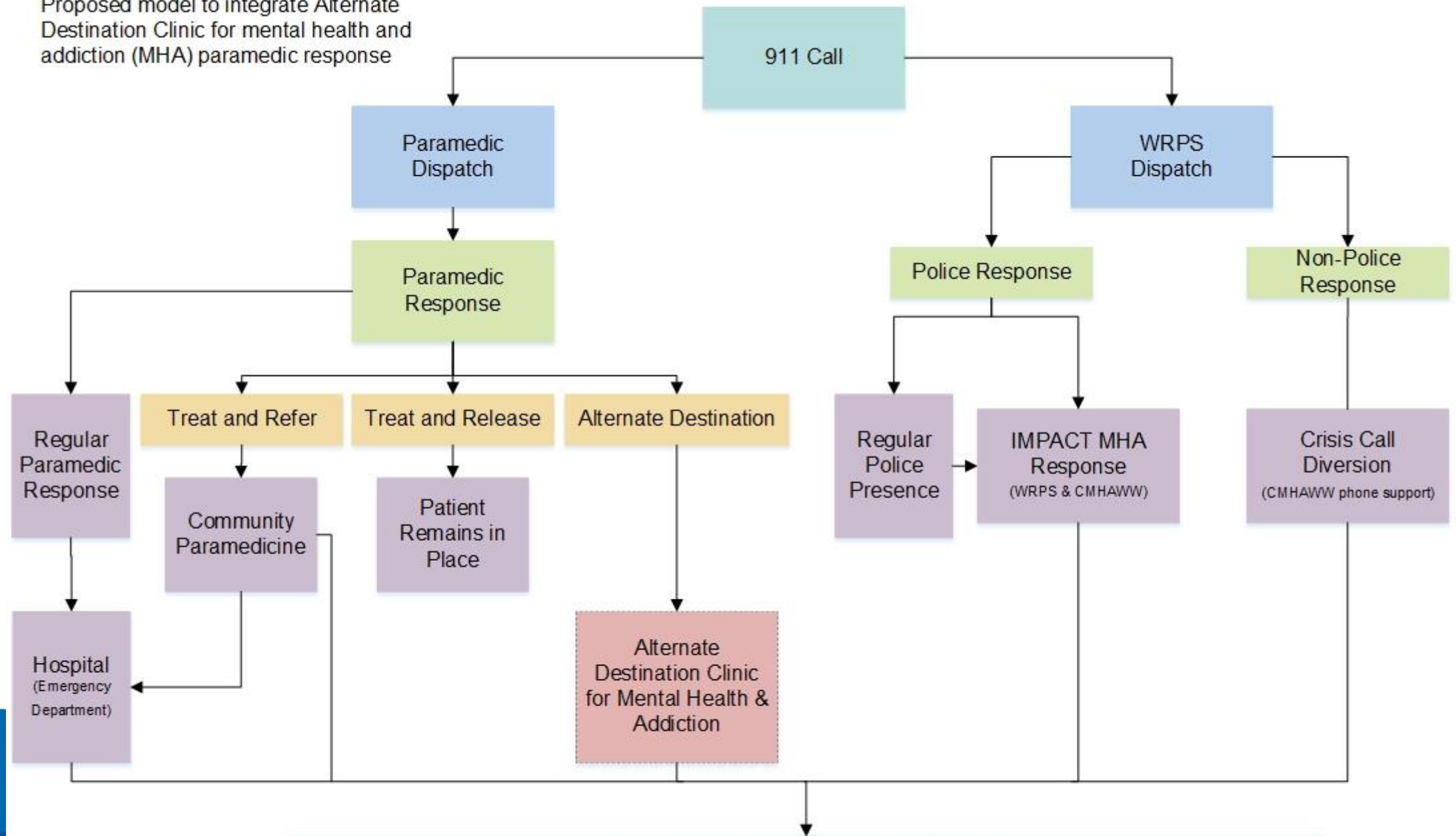


# Background

- Provincial legislation changes in 2019 enable the diversion of select patient cohorts to appropriate community-based care.
- New models of care have emerged due to this legislation change:
  - Treat and Release
  - Treat and Refer
  - Alternate Destination
- Approx 10% of calls for Paramedics are due to MHA related concern.
- At present, Paramedics only option is to transport patients to Emergency Departments.

# 911 Mental Health & Addiction Response Pathways

Proposed model to integrate Alternate Destination Clinic for mental health and addiction (MHA) paramedic response



# Alternate Destination Clinic: London-Middlesex Model

- Paramedics Services transfer eligible patients to a 24/7 Walk-In Crisis Centre instead of dropping them off at a hospital emergency department.
  - Paramedics provide an on-scene assessment.
  - If the patient consents, is cooperative and non-combative, paramedics can call ahead and transfer/offload patient at the Crisis Centre.

# Waterloo Region Key Milestones



# Questions?

**Region of Waterloo**  
**Community Services**  
**Housing Services**

---

**To:** Community and Health Services Committee  
**Meeting Date:** February 7, 2023  
**Report Title:** Community Funding Requests in the Housing Stability System

---

**1. Recommendation:**

For direction.

**2. Purpose / Issue:**

This report provides Regional Council with an overview of funding requests received in the latter part of 2022 from Community Agencies serving the Housing Stability System, as well as options for Committee's consideration.

**3. Strategic Plan:**

Integral to fostering healthy, safe, and inclusive communities is ending homelessness in all of its forms. Efforts to ensure a safe place to call home for everyone in Waterloo Region align with the Region of Waterloo 2019-2023 Corporate Strategic Plan, Focus Area 4: Healthy, Safe, and Inclusive Communities. The report specifically addresses Strategic Objective 4.3, 'promote and enhance equity in policies, planning, services, and decision-making in order to positively impact community wellbeing.'

**4. Report Highlights:**

- Housing Services received a number of funding requests from Community Agencies that serve the Housing Stability System between July and December 2022. These requests were not part of the 2022 Housing and Homelessness Prevention operating budget.
- Beginning in March 2020, Housing Services began receiving additional temporary Federal and Provincial COVID-response funding through a number of different phases and initiatives. Through this temporary funding, several new programs were implemented and existing programs enhanced to protect the health and safety of staff and those experiencing homelessness, and to respond to increasing capacity pressures across the system. Although all temporary COVID-response funding has now ended, the Region continues to fund many of these new and

enhanced programs, creating a budget pressure.

- With the growing gap between the funding provided by Federal and Provincial Governments and the needs of the local population, the Region of Waterloo increasingly funds this gap using the municipal tax levy, leaving less funding for other essential services.
- Staff are initiating the development of a strategic accountability framework for evaluating the funding requests from community partners that are beyond current funding agreements.

## 5. Background:

The Region of Waterloo is the Provincially-designated Service Manager for Housing and Homelessness. In this role, the Region is responsible for program planning, service delivery, distribution of resources, and quality assurance. The Region also administers various programs and services aimed to prevent and end homelessness, including Region-funded emergency shelters and housing support programs.

The following chart outlines the additional funding requests received from community agencies that Housing Services was unable to fund within the 2022 Housing & Homelessness Prevention operating budget:

AGENCY	PROJECT	AMOUNT	DURATION
A Better Tent City	Staffing & Operating Funding	\$180,000	Annualized
AIDS Committee of Cambridge, Kitchener, Waterloo and Area (ACCKWA)	Staffing request for one full-time staff for the Multi Agency Community Space (Coordinated, Collaborative Homelessness Hub) at 150 Main, Cambridge	\$83,000	Annualized
Argus Residence	Staffing request for one full-time FirstConnect Outreach Worker to do in-person follow-ups in emergency shelters	\$65,309	Annualized
Cambridge Shelter	Staffing request for a 0.5 Mental Health Peer Support Worker staff person	\$25,000	Annualized
Community Justice Initiative	Staffing/Programming for their Home Share initiative that matches home providers and home seekers	\$80,000	Annualized
Community Justice Initiative	Staffing and Programming support for the Restorative Justice Program	\$108,939	Annualized

<b>AGENCY</b>	<b>PROJECT</b>	<b>AMOUNT</b>	<b>DURATION</b>
Healing of the Seven Generations	Gift cards to Indigenous Community Members to celebrate the festive season safely in their homes in place of the cancelled Community Feast (request made in November)	No funding amount was specified	One Time
oneROOF Youth Services	Creation of separate shelter sites for youth of different gender identities - no increase in number of beds	\$230,136	Annualized
oneROOF Youth Services	Request for 4 full-time Security staff	\$190,000	Annualized
oneROOF Youth Services	Combined request to support an expansion to Cambridge, including a Host Homes and Family Reconnect Program along with a 10-bed youth emergency shelter.	\$517,700	Annualized
Porchlight Counselling & Addictions	Staffing support for expansion of their women's Recovery Home	\$36,000	Annualized
Ray of Hope	Operating funding to remain open from 9AM to 9PM on weekdays and to increase weekend hours	\$150,000	Annualized
Social Development Centre	Request to support funding gap for three Peer-based Eviction Prevention Workers	\$40,000	Annualized
YWCA K-W	Coverage of external Agency Staffing needed to close staffing gaps in the shelter	\$146,000	One Time
<b>Total</b>		<b>\$1,852,084</b>	

Options available to Council include:

- 1) Take no action: there is no capacity in the Preliminary 2023 Homelessness operating budget for these requests. If this is chosen the current 2023 Housing and Homelessness Prevention Operating budget would proceed to budget approval in its current form.
- 2) Amend the Preliminary 2023 Homelessness operating budget by adding a quantum of funds (e.g. up to \$1.85 million), pending further review and due diligence by staff, to accommodate some or all of these requests.

Although the Region has not received the Provincial 2023/24 Homelessness Prevention



Program (HPP) funding allocation, staff do not anticipate an increase from the 2022/23 funding allocation. Staff will continue work to develop a strategic framework for evaluating the ongoing funding requests from community agencies.

#### **6. Area Municipality Communication and Public/Stakeholder Engagement:**

Through the Region's role as Service Manager and Community Entity, Region staff regularly engage with area municipalities, service providers, and community partners on work to achieve affordability for all and end chronic homelessness. Through a Municipal Housing and Homelessness Leads Committee, Region staff remain closely connected with area municipalities in the collective work of addressing housing and homelessness related issues in the region. This includes meeting and communicating regularly on housing and homelessness issues, the sharing of data, and identifying opportunities to leverage resources for maximum impact in ensuring a place to call home for everyone in Waterloo Region. Several working groups also convene regularly and collaboratively focus on plans and actions related to distinct groups of community members experiencing homelessness.

#### **7. Financial Implications:**

The preliminary 2023 Housing Services operating budget includes \$124 million in expenditure and a property tax levy of \$73.4 million. This covers a variety of housing and homelessness programs but does not include sufficient funding for the requests outlined in this report. The 2023 Preliminary Homelessness operating budget already includes an expenditure increase of \$9.4 million and a loss of provincial and federal funding of over \$6 million. Should Council wish to approve these requests, up to \$1.85M would need to be added to the 2023 Housing Services budget, funded from the property tax levy.

#### **8. Attachments:**

Nil

**Prepared By:** Katie Lout, Social Planning Associate, Housing Services

**Reviewed By:** Kelly-Anne Salerno, Assistant Director, Housing Services

Ryan Pettipiere, Director, Housing Services

Cheryl Braan, Director, Corporate Finance

**Approved By:** Peter Sweeney, Commissioner, Community Services

Craig Dyer, Commissioner, Corporate Services/Chief Financial Officer

<b>Council Enquiries and Requests for Information</b>				
<b>Community and Meeting date</b>	<b>Requestor</b>	<b>Request</b>	<b>Assigned Department</b>	<b>Anticipated Response Date</b>
May 10, 2022	Committee	That the Regional Chair's office circulate a letter related to Paramedic Services systemic issues.	Regional Chair	TBD
January 10, 2023	Committee	The Committee directed Staff to review the urgent security concerns at all Regional shelter sites and the opportunity for security funding in the 2023 budget with consideration of potentially applicable community resources.	Community Services	Feb-2023
January 10, 2023	Committee	Staff were directed to review the potential in extending warming center hours of operation and to conduct a debrief with area municipalities to better coordinate efforts around the Region during inclement weather.	Community Services	TBD