



Social Services | Services Sociaux
Zhawenimi-Anokiitaagewin
Sault Ste. Marie District

District of Sault Ste. Marie Social Services
Administration Board

Conseil d'Administration des Services du District Sault Ste. Marie
Zhawenimi-Anokiitaagewin

DSSMSSAB REGULAR BOARD MEETING AGENDA

Thursday, March 21, 2024 at 4:30 PM
540 Albert Street East, Sault Ste. Marie, ON

1. CALL TO ORDER

2. LAND ACKNOWLEDGEMENT

I acknowledge, with respect, that we are in Robinson-Huron Treaty territory, that the land on which we are gathered is the traditional territory of the Anishinaabe and known as Bawating. Bawating is the home of Garden River First Nation, Batchewana First Nation, the Historic Sault Ste. Marie Metis Council.

3. APPROVAL OF AGENDA

Resolution #24-024

Moved By: S. Spina

Seconded By: A. Caputo

- 3.1 “**BE IT RESOLVED THAT** the **Agenda for March 21, 2024** District of Sault Ste. Marie Social Services Administration Board meeting be approved as presented.”

4. DECLARATIONS OF PECUNIARY INTEREST

5. APPROVAL OF PREVIOUS MINUTES

Resolution #24-025

Moved By: M. Bruni

Seconded By: L. Vezeau-Allen

- 5.1 “**BE IT RESOLVED THAT** the **Minutes** from the District of Sault Ste. Marie Social Services Administration Board meeting dated **February 15, 2024** be adopted as recorded.

6. MANAGERS REPORTS

HOUSING AND HOMELESSNESS

Resolution #24-026

Moved By: E. Palumbo

Seconded By: A. Caputo

- 6.1 **“BE IT RESOLVED** the district of Sault Ste. Marie Social Services Administration Board (DSSMSSAB) allocate remaining 2023/24 Homelessness Prevention Program (HPP) funding of \$371,000 in one time investments as follows:

1. \$250,000 towards staffing the Housing and Homelessness System,
2. \$121,000 City of SSM for the Downtown Ambassador Program”

Resolution #24-027

Moved By: E. Palumbo

Seconded By: A. Caputo

- 6.2 **“BE IT RESOLVED THAT** the District of Sault Ste. Marie Social Services Administration Board approve the Homelessness Prevention Program Investment Plan for the period of April 1, 2024 to March 31, 2025 as outlined in the report”

Resolution #24-028

Moved By: J. Hupponen

Seconded By: A. Caputo

- 6.3 **“WHEREAS** Reaching Home: Canada’s Homelessness Strategy is a community-based program aimed at preventing and reducing homelessness across Canada. This program provides funding to urban, rural, and remote communities to help them address their local homelessness needs;

AND WHEREAS Reaching Home supports the goals of the National Housing Strategy, by supporting the most vulnerable Canadians in maintaining safe, stable, and affordable housing and to reduce chronic homelessness nationally by 50% by fiscal year 2027 to 2028;

AND WHEREAS Homelessness has an impact on every community in Canada. It affects individuals, families, women fleeing violence, youth, seniors, veterans, and people with disabilities. In 2016, an estimated 129,000 people experienced homelessness at an emergency shelter in Canada.

AND WHEREAS only five of the 11 NOSDA members are funded to deliver the Reaching Home Program and they have been informed that their reaching home funding will be cut 57% in fiscal 2026-27;

AND WHEREAS this 57% reduction will mean that, the 5 NOSDA members who deliver Reaching Home will lose \$2.6 million annually by fiscal 2026-27.

THEREFORE BE IT RESOLVED THAT The District of Sault Ste. Marie Social Services Administration Board (DSSMSSAB) support NOSDA's call on the government of Canada to meet its obligations as announced in 2016, and reaffirmed in 2022, by immediately reversing the decision to reduce the Reaching Home Funding by 57%;

AND FURTHERMORE BE IT RESOLVED THAT DSSMSSAB support NOSDA's call on the Federal Government to increase the annualized funding allocated for Reaching Home and provide Reaching Home Funding for all eleven NOSDA members;

AND FURTHERMORE BE IT RESOLVED THAT DSSMSSAB support NOSDA's call on the Federal Government to maintain its commitment to reduce chronic homelessness nationally by 50% by fiscal year 2027-28 and fund each northern Service Manager equal to their provincial Homelessness Prevention Program allocation; and

AND FINALLY BE IT RESOLVED THAT the DSSMSSAB support NOSDA's call on the Federal Government to work in partnership with the Province of Ontario to meet the provinces' goal of creating 1.5 million new homes by 2030."

EARLY YEARS

Resolution #24-029

Moved By: S. Spina

Seconded By: A. Caputo

- 6.4 **"BE IT RESOLVED THAT** the District of Sault Ste. Marie Social Services Administration Board accept the Early Years Emergency Issues report as information."

Resolution #24-030

Moved By: J. Hupponen

Seconded By: E. Palumbo

- 6.5 **"BE IT RESOLVED THAT** the District of Sault Ste. Marie Social Services Administration Board reallocate \$218,500 in administrative funding from the Homelessness Prevention Program (HPP) and \$125,000 from 137 East Street to offset the Early Years funding reduction implemented by the Ministry of Education".

COMMUNITY AND CLIENT SUPPORT

Resolution #24-031

Moved By: L. Vezeau-Allen

Seconded By: A. Caputo

- 6.6 **“BE IT RESOLVED THAT** the District of Sault Ste. Marie Social Services Administration Board approve the 2024 Ontario Works Service Plan Addendum.”

PARAMENDIC SERVICES

Resolution #24-032

Moved By: L. Vezeau-Allen

Seconded By: S. Spina

- 6.7 **“BE IT RESOLVED THAT** the District of Sault Ste. Marie Social Services Administration Board accept the offload delay report as information.”

Resolution #24-033

Moved By: A. Caputo

Seconded By: E. Palumbo

- 6.8 **“BE IT RESOLVED THAT** that the District of Sault Ste. Marie Social Services Administration Board accept funding from the Ministry of LTC to deliver community paramedic services in 2024/25 and 2025/26”

Resolution #24-034

Moved By: J. Hupponen

Seconded By: E. Palumbo

- 6.9 **“BE IT RESOLVED THAT** the District of Sault Ste. Marie Social Services Administration Board (DSSMSSAB) enter into a data sharing agreement with the Ministry of Health for connectivity to the Ontario Laboratories Information System.

FURTHER BE IT RESOLVED that the DSSMSSAB also enter into a data sharing agreement with Ontario Health’s Home and Community Care Support Service (HCCSS) to gain access to the Health Partner Gateway”.

Resolution #24-035

Moved By: E. Palumbo

Seconded By: J. Hupponen

- 6.10 **“BE IT RESOLVED THAT** the District of Sault Ste. Marie Social Services Administration Board now enter into closed session for labour relations purposes.”

Resolution #24-036

Moved By: L. Vezeau-Allen

Seconded By: A. Caputo

- 6.11 **“BE IT RESOLVED THAT** the District of Sault Ste. Marie Social Services Administration Board now enter into open session.”

7. CORRESPONDENCE

8. NEW BUSINESS

Resolution #24-037

Moved By: L. Vezeau-Allen

Seconded By: S. Spina

- 8.1 **“BE IT RESOLVED THAT** the District of Sault Ste. Marie Social Services Administration Board (DSSMSSAB) appoint Enzo Palumbo to the Finance Committee effective immediately”

9. ADJOURNMENT

Resolution #24-038

Moved By: E. Palumbo

Seconded By: S. Spina

- 9.1 **"BE IT RESOLVED THAT** we do now adjourn."



District of Sault Ste. Marie Social Services
Administration Board

Conseil d'Administration des Services du District Sault Ste. Marie
Zhawenimi-Anokiitaagewin

DSSMSSAB REGULAR BOARD MEETING MINUTES

Thursday, February 15, 2024 at 4:30 PM
390 Bay Street, Suite 405

Present: **Lisa Vezeau- Allen** **Luke Dufour**
 Sonny Spina **Judy Hupponen**
 Angela Caputo
 Stephanie Hopkin

David Petersson **Mike Nadeau**
 Miranda Scott **Louie Bruni**
 Joanne Pearson **Katie Kirkham**
 Antonio Borrelli **Jeff Barban**
 Pam Patteri

1. **CALL TO ORDER at 4:02pm**

2. **LAND ACKNOWLEDGEMENT**

I acknowledge, with respect, that we are in Robinson-Huron Treaty territory, that the land on which we are gathered is the traditional territory of the Anishinaabe and known as Bawating. Bawating is the home of Garden River First Nation, Batchewana First Nation, the Historic Sault Ste. Marie Metis Council.

3. **APPROVAL OF AGENDA**

Resolution #24-013

Moved By: S. Spina

Seconded By: A. Caputo

- 3.1 “**BE IT RESOLVED THAT** the Agenda for February 15, 2024 District of Sault Ste. Marie Social Services Administration Board meeting be approved as presented.”

Carried

4. DECLARATIONS OF PECUNIARY INTEREST

5. APPROVAL OF PREVIOUS MINUTES

Resolution #24-014

Moved By: L. Dufour

Seconded By: L. Vezeau-Allen

- 5.1 “**BE IT RESOLVED THAT** the Minutes from the District of Sault Ste. Marie Social Services Administration Board meeting dated January 18, 2024 be adopted as recorded.

Carried

6. PRESENTATION

7. MANAGERS REPORTS

Housing and Homelessness

Resolution #24-015

Moved By: J. Hupponen

Seconded By: L. Vezeau-Allen

- 7.1 “**BE IT RESOLVED THAT** the District of Sault Ste. Marie Social Services Administration Board approve the 2024-2028 Reaching Home Investment Plan as outlined in the report,

Further be it resolved that the DSSMSSAB write to the Prime Minister to outline the impact the Reaching Home funding cut will have on the local homelessness system and send a copy to the Minister of Infrastructure, the local MP and our municipal levy partners”.

Carried

Housing and Development

Resolution #24-016

Moved By: E. Palumbo

Seconded By: A. Caputo

- 7.2 “**BE IT RESOLVED THAT** the District of Sault Ste. Marie Social Services Administration Board accept the Sault Ste. Marie Housing Corporation (SSMHC) request to allocate \$253,142.60 of Homelessness Prevention Program (HPP) for the construction of a new four-plex apartment building on 61 and 65 Wellington St. E. as information”
Carried

Early Years

Resolution #24-017

Moved By: L. Dufour

Seconded By: S. Spina

- 7.3 “**BE IT RESOLVED THAT** the District of Sault Ste. Marie Social Services Administration Board accept the report outlining CWELCC Emerging Issues as information”.
Carried

Resolution #24-018

Moved By: L. Vezeau-Allen

Seconded By: A. Caputo

- 7.4 “**BE IT RESOLVED THAT** the District of Sault Ste. Marie Social Services Administration Board (DSSMSSAB) accept the report outlining the reduction in program administration funding as information

Further be it resolved that the DSSMSSAB write to the Minister of Education advocating for the reinstatement of administration funding to ensure the Canada Wide Early Years Child Care program be properly implemented to support parents and ensure growth in local spaces”.

Carried

Paramedic Services

Resolution#24-019

Moved By: S. Spina

- 7.5 Seconded By: A. Caputo

"BE IT RESOLVED THAT the District of Sault Ste. Marie Social Services Administration Board accept the Recruitment Strategies report as information"

Carried

Resolution #24-020

Moved By: J.Hupponen
Seconded By: S.Spina

- 7.6 **“BE IT RESOLVED THAT** the District of Sault Ste. Marie Social Services Administration Board accept the offload delay report as information.”
Carried

CEO

Resolution #24-021

Moved By: A. Caputo
Seconded By: J. Hupponen

“BE IT RESOLVED THAT the District of Sault Ste. Marie Social Services Administration Board now enter into closed session for labour relations purposes.”

Carried

Resolution #24-022

Moved By: L. Vezeau-Allen
Seconded By: A. Caputo

“BE IT RESOLVED THAT the District of Sault Ste. Marie Social Services Administration Board now enter into open session.”

Carried

8. CORRESPONDENCE

Letter from Associate Minister Robert J. Flack

9. OTHER BUSINESS / NEW BUSINESS

Luke Dufour communicated to the District of Sault Ste. Marie Social Services Administration Board (DSSMSSAB) that effective immediately he will be stepping down from Board Chair and will he would be leaving the DSSAB Board at the conclusion of this Board Meeting.

10. ADJOURNMENT

Resolution #23-023

Moved By: E. Palumbo
Seconded By: S. Spina

- 10.1 **“BE IT RESOLVED THAT** we do now adjourn.”

Carried

Adjourned at 6:02 pm



District of Sault Ste. Marie Social Services
Administration Board

Conseil d'Administration des Services du District Sault Ste. Marie
Zhawenimi-Anokiitaagewin

DSSMSSAB BOARD REPORT

AUTHOR: Joanne Pearson

DATE: March 21, 2024

RE: Homelessness Prevention Program Funding Surplus 2023/2024

RECOMMENDATION

It is recommended the District of Sault Ste. Marie Social Services Administration Board (DSSMSSAB) allocate remaining 2023/24 Homelessness Prevention Program (HPP) funding of approximately \$371,000 in one time investments as follows:

3. \$250,000 towards staffing the Housing and Homelessness System,
4. \$121,000 City of SSM for the Downtown Ambassador Program

BACKGROUND INFORMATION

In December of 2023, the DSSMSSAB approved a total of \$774,518.33 of 23/24 HPP surplus funds to be allocated for a supportive housing program at 101 Chapple, funding to facilitate the move of tenants to/from 101 Chapple, and a temporary contract for staffing at the Community Resource Centre.

Since December's presentation, there continued to be challenges, specifically with the funding allocated for the Youth Portable Housing Benefit. The challenges experienced for youth has been the difficulty of securing private sector landlords willing to rent to youth, despite increasing rent supplement assistance and efforts of agencies assisting youth with their housing search. In addition, the amount of subsidy provided was much lower than anticipated. The average subsidy has been approx. \$583 vs. the \$1,000 originally anticipated. As a result, there remains approximately \$175,000 in this budget line. Other funds as part of 23/24 were a result of delays in staff recruitment, which has been problematic across the sector, as well as underutilization in the Housing Stability Bank than originally anticipated.

SUMMARY/OVERVIEW

The chart below outlines the approximate underutilized funds:

Youth Portable Housing Benefit (estimated)	\$175,000
Housing Stability Bank (estimated)	\$110,000
Staff recruitment/contract delays (estimated)	\$86,000
TOTAL	\$371,000

The recommendation is to re-allocate **one-time** funding as follows:

1. \$250,000 for staffing Housing and Homelessness System
Various staff, supports and outreach services that have assist the homelessness system and community.
2. \$121,000 for City of SSM for the Downtown Ambassador Program.

CMHA's Downtown Ambassador Program (DAP) provides alternate support to those who may be unsheltered and are vulnerable, instead of relying on emergency services ie police/ambulance. Those who don't require intensive emergency level assistance are able to access street level services provided by the DAP. The goal of this investment is to provide outreach by peer support workers that aims to minimize harm, provide referrals and supply resources to our community's most vulnerable people.

STRATEGIC PLAN IMPACT

The Homelessness Prevention Program aligns with the pillar of Service Delivery and Community Partnerships.

FINANCIAL IMPLICATIONS

There are no net municipal financial implications since the Homelessness Prevention Program funding is 100% provincial funding.

CONCLUSION

There were several budget line items in 23/24 that were impacted as a result of our need to consult with community partners, contract delays, staff recruitment, difficulty for youth securing housing and the late implementation period, which required re-allocation of funding. While management tries to develop a firm plans for funding investment, the homelessness situation, service realty, etc. require flexibility and continued focus on outcomes being achieves.

Respectfully submitted,



Joanne Pearson
Integrated Program Manager

Approved by:

Mike Nadeau
Chief Executive Officer



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DSSMSSAB BOARD REPORT

AUTHOR: Joanne Pearson

DATE: March 21, 2024

RE: Homelessness Prevention Program (HPP) Investment Plan 2024/2025

RECOMMENDATION

It is recommended the District of Sault Ste. Marie Social Services Administration Board (DSSMSSAB) accept the Homelessness Prevention Program Investment Plan for the period of April 1, 2024 to March 31, 2025 as outlined in the report below.

BACKGROUND INFORMATION

The Homelessness Prevention Program is a provincially funded program that supports 47 Municipal Service Managers to provide affordable housing and support services for individuals at risk of, or experiencing homelessness. The HPP's objective is to support Service Managers in preventing, addressing and reducing homelessness, including chronic homelessness.

The intention of the Homelessness Prevention Program is to allow for a flexible streamlined program allowing Service Managers to target funding where the specific community need is greatest and can make the most impact on reducing and preventing homelessness.

In July of 2023, the Board approved the 2023/24 Homelessness Prevention Program investment plan. This plan outlined in detail the services to be provided with the increase of funding from \$1,841,100 to **\$5,102,300**. As a result of the significant increase, it was essential to consult with community partners and to ensure the existing gaps in the Housing and Homelessness system would be addressed.

Our experience in administering the funding in 2023/2024 highlighted the need to adjust the HPP 2024/2025 investment plan to reflect some of the challenges that were not anticipated- specifically with the Youth Portable Housing Benefit. The feedback from youth-serving agencies revealed a reluctance on the part of private sector landlords to rent to youth and consequently, securing housing for youth has been problematic. The

level of subsidy was also lower than anticipated with the average subsidy being \$583.00 vs the \$1000 originally anticipated. This budget line has been reduced in fiscal 2024/2025 to reflect the challenges being experienced

SUMMARY/OVERVIEW

The 2024/2025 investment plan below, outlines the recommendation by management for operations only, and does not include any capital funding allocations. There is a current balance remaining in the amount of **\$852,068** that will require further consideration in terms of projects/services to be funded, and management will return to the Board next month with a recommendation for the balance remaining.

2024-2025 HPP Proposed Budget		2024-25
EMERGENCY SHELTER SOLUTIONS		
	CMHA Emergency Shelter Cost (721 Wellington St E)	\$ 893,694.00
	Pauline's Place	\$ 525,000.00
		\$ 1,418,694.00
HOUSING ASSISTANCE		
	Housing Stability Bank	\$ 300,000.00
	Youth Portable Housing Benefit	\$ 100,000.00
		\$ 400,000.00
COMMUNITY OUTREACH AND SUPPORT SERVICES		
	Social Services Tenant Support Worker	\$ 95,000.00
	Temp Housing & Homelessness Coordinator (12 months)	\$ 100,000.00
	CMHA Housing Outreach Worker	\$ 37,500.00
	System Training and Development	\$ 70,000.00
	CRC/Drop-In Centre	\$ 25,000.00
	Harvest Algoma Meal Preparation Services - UW & SSMIC	\$ 116,000.00
	Indigenous Supports – Niiganiin	\$ 550,000.00
	Social Services- Indigenous Community TSW	\$ 95,000.00
		\$ 1,088,500.00
OPERATING SUPPORTIVE HOUSING		
	Pauline's Place - bridge supports	\$ 50,000.00
	101 Chapple Avenue - John Howard Society	\$ 135,000.00
	Phoenix Rising - bridge supports at Paulines Place	\$ 80,000.00
	136 Pilgrim - CMHA supports	\$ 54,000.00
	721 Wellington Street - CMHA	\$ 768,923.00
		\$ 1,087,923.00
CAPITAL COSTS		
	To Be Determined by DSSMSSAB Board	\$ 852,068.00
ADMINISTRATION COSTS		
	Administration Costs	\$ 255,115.00
Total		\$ 5,102,300.00

STRATEGIC PLAN IMPACT

The Homelessness Prevention Program aligns with the pillar of Service Delivery and Community Partnerships.

FINANCIAL IMPLICATIONS

There are no municipal financial implications since the Homelessness Prevention Program funding is 100% provincial funding.

CONCLUSION

We will continue to monitor the programs and services funded under the Homelessness Prevention Program to ensure individuals at risk of, or experiencing homelessness, continue to receive the necessary supports.

Respectfully submitted,



Joanne Pearson
Integrated Program Manager

Approved by:

Mike Nadeau
Chief Executive Officer



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DSSMSSAB BOARD REPORT

AUTHOR: Tanya Ritter

DATE: March 21, 2024

RE: CWELCC Emerging Issues Update

RECOMMENDATION

That the District of Sault Ste. Marie Social Services Administration Board accept the Early Years Emergency Issues report as information.

BACKGROUND INFORMATION

In February 2024 the Board was updated on the CWELCC Emerging Issues funding allocation. It was reported that the Early Years team submitted a report to the Ministry identifying that, based on the 2023 actual cost of care exercise, \$1,239,156 may be required to cover child care operator emerging issues at the local level.

At the time of the report, the Early Years team was in the process of modifying the Board approved actual cost of care exercise (Resolution #23-081) into an emerging issues application. The application will allow the Early Years team to implement a transparent process to allocate emerging issues funding to child care operators who demonstrate that their revenue for eligible spaces is insufficient to support non-discretionary costs.

SUMMARY/OVERVIEW

The Early Years Division has received emerging issues applications from child care operators for the current year which shows that up to \$1,376,415 may be required to cover emerging issues and the identified gap between base rates and the actual cost of care for centre-based child care.

Licensed Home Child Care (LHCC) is also included in the application process and the Early Years Division expects to receive a completed application in the coming months. It is anticipated that the number of providers supporting CWELCC expansion and the creation of new licensed home-based child care spaces in our community will continue to increase.

STRATEGIC PLAN IMPACT

The Early Years Division will closely monitor operator budgets to implement the CWELCC plan in a way that ensures adequate funding is provided. Organizational excellence, service delivery and community partnerships are key to successful service system management and it is essential that operators are supported to fully implement the requirements of Canada-Wide Early Learning and Child Care.

FINANCIAL IMPLICATIONS

At the local level, the Ministry has allocated emerging issues funding in the amount of \$52,976 for January to March and \$342,950 for the remainder of the calendar year. These funds can be allocated throughout the calendar year and is 100% Federal dollars totaling \$395,926. This amount is insufficient to cover the estimated need of \$1,376,415.

	INFANT	TODDLER	PRESCHOOL	JK/SK (B/A)	JK/SK (FD)	Additional Emerging Issues	CWELCC TOTAL
Alternative	\$ (83,408.44)	\$ (4,368.68)	\$ 46,259.06	\$ -	\$ -	\$ (23,000.00)	\$ (64,518.06)
Child Care Algoma	\$ (394,688.39)	\$ (415,066.20)	\$ 53,803.75	\$ 248,246.51	\$ 13,618.51	\$ (106,631.00)	\$ (600,716.82)
DSSMSAB	\$ (144,851.20)	\$ (95,365.65)	\$ (8,428.14)	\$ 20,674.99	\$ -	\$ -	\$ (227,970.00)
Hand in Hand	\$ -	\$ (74,150.64)	\$ 17,187.97	\$ -	\$ -	\$ (11,000.00)	\$ (67,962.67)
Prince Township	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Riverside	\$ -	\$ (1,338.83)	\$ 21,309.78	\$ -	\$ -	\$ (6,000.00)	\$ 13,970.95
Thrive CDC	\$ -	\$ (73,582.83)	\$ (10,685.15)	\$ -	\$ -	\$ (30,478)	\$ (114,745.98)
Waterfront	\$ (99,315.06)	\$ (29,310.66)	\$ 20,865.67	\$ -	\$ -	\$ (15,800.00)	\$ (123,560.05)
YMCA	\$ (170,699.16)	\$ (117,590.46)	\$ 62,571.98	\$ 150,066.14	\$ 2,074.24	\$ (103,364)	\$ (176,941.26)
Total Operator Identified Pressures:							\$ (1,376,414.84)

To address the local need, the Early Years Division recommends that a mix of Federal and Provincial funding be allocated to child care operators to provide stability and support their continued participation in the CWELCC system. Utilizing the Board approved special purpose funding formula at \$1 per point (Resolution #23-082) \$317,430 in Provincial funding will reduce the identified pressures to \$663,058.84.

Special Purpose Funding:

Age Group	Operating Capacity	X	Points per Space	X	# of Months Operated in Year	/	Hours/Week Range (chart above)	=	Points	X	\$ per point	=	General Operating Grant
Infant	91	X	50	X	12	/	1	=	54600	X	\$1.00	=	\$54,600.00
Toddler	240	X	40	X	12	/	1	=	115200	X	\$1.00	=	\$115,200.00
Preschool	424	X	22.5	X	12	/	1	=	114480	X	\$1.00	=	\$114,480.00
JK/SK BASP	195	X	17	X	10	/	1	=	33150	X	\$1.00	=	\$33,150.00
Total Allocation											\$317,430.00		

Total Identified Pressure	\$1,376,414.84
CWELCC Emerging Issues Funding (Federal)	-\$395,926
Special Purpose Funding (Provincial)	-\$317,430
Remaining Pressures	\$663,058.84

The Early Years Division will update the report to the Ministry identifying that based on the emerging issues applications an additional \$663,058.84 in Federal emerging issues funding is required to address local needs. The Ministry Guidelines state that the DSSMSSAB has the flexibility within the CWELCC allocation to support fee reductions, workforce compensation, cost escalation and emerging issues where needed. Although there may be flexibility within the current CWELCC allocation, the Early Years is working with child care operators to increase to licensed capacities. As operators increase enrollment, it will impact the amount of flexibility within the current CWELCC allocation and additional CWELCC emerging issues funding may be required from the Ministry.

The Early Years Division continues to work with child care operators to identify critical needs that will be prioritized.

CONCLUSION

The emerging issues funding and the ability to utilize the flexibility within the 2024 CWELCC allocation is essential to stabilize child care operators and ensure they can continue to provide inclusive and high quality child care for children and families in Sault Ste. Marie and encourage future space creation to expand our local child care system .

Respectfully submitted,



Tanya Ritter
Integrated Program Manger

Approved by:



Mike Nadeau
Chief Executive Officer



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Sault Ste. Marie District

District of Sault Ste. Marie Social Services
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Conseil d'Administration des Services du District Sault Ste. Marie
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DSSMSSAB BOARD REPORT

AUTHOR: Louie Bruni

DATE: March 21, 2024

RE: Early Years Funding Reduction Mitigation Report

RECOMMENDATION

BE IT RESOLVED THAT the District of Sault Ste. Marie Social Services Administration Board (DSSMSSAB) reallocate \$218,500 in administrative funding from the Homelessness Prevention Program (HPP) and \$125,000 from 137 East Street to offset the Early Years funding reduction implemented by the Ministry of Education”.

BACKGROUND INFORMATION

In February 2024 the Board was updated on the reduction to the Early Years administration funding allocation. It was reported that the administrative funding allocation would reduce from 10% to 5%. Management was to report back with a mitigation strategy to absorb the reductions in 2024.

SUMMARY/OVERVIEW

The management team has reviewed the budgetary impacts resulting from funding reductions and determined the total impact to be \$438,449 based on what was communicated by the Ministry of Education in late 2023. Management was able to identify means to offset this administration funding cut through an integrated lens without negatively impacting the municipal levy.

STRATEGIC PLAN IMPACT

There is a risk that the cut to administration funding will decrease the DSSMSSAB's ability to effectively support child care operators to fully implement the requirements of the CWELCC program if not offset from other internal areas or funded directly. However, management is fully aware of the reluctance to increase the municipal levy to implement federal and provincial program areas, due to inadequate provincial administration funding levels.

Organizational excellence, service delivery and community partnerships are key to successful service system management and this administrative reduction will force the DSSMSSAB to prioritize service delivery, increase the administrative burden on child care operators, and put the DSSMSAB at risk of delinquent reporting if not offset.

FINANCIAL IMPLICATIONS

The table below summarizes the total financial impacts and the plan to mitigate the administrative funding reductions.

Total	Provincial	Funding	Reduction	(\$438,449)
<i>Mitigation Plan</i>				
Program Area		2024 Approved Budget	EY Mitigation Strategy	
137 East Street Supports		\$125,000	(\$125,000)	
HPP Administration		\$255,115	(\$218,500)	
1 EY Vacant non-union (Salary and Benefits)		\$94,949	(\$94,949)	
TOTAL		\$475,064	(\$438,449)	

*\$36,615 will remain in HPP Administration

CONCLUSION

Following management’s recommendations will result in little service impacts. 137 East Street supports have been offset by increases to HPP funding and re-alignment of supportive units to Chapple Avenue. Due to retirements and staff function re-alignment, management can reduce one non-union FTE in our Early Years division. It should be noted that although mitigation strategies were able to be implemented, the DSSMSSAB requires adequate funding to implement CWELC requirements and support child care operators during this transitional phase.

Respectfully submitted,

Approved by:




Louie Bruni
Chief Operating Officer

Mike Nadeau
Chief Executive Officer



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Sault Ste. Marie District

District of Sault Ste. Marie Social Services
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DSSMSSAB BOARD REPORT

AUTHOR: Pam Patteri

DATE: March 12, 2024

RE: 2024 Ontario Works Service Plan Addendum

RECOMMENDATION

To approve and accept the 2024 Ontario Works Service Plan Addendum.

BACKGROUND INFORMATION

The Ontario Works service plan is a mandatory document and is completed by all CMSM/DSSAB's every two years and must be submitted to the Ministry of Children, Community Social Services (MCCSS) for approval in terms of the delivery of the Ontario Works program and respective funding. Service delivery sites provide an outline on how these priorities will be met locally. For the 2024 fiscal year the ministry is requesting an addendum to the 2021/2022 Service Plan as we transition our of employment service delivery.

SUMMARY/OVERVIEW

The Service Plan guidelines provided by the MCCSS details the provincial priorities for the Service year.

Service plan priorities for 2024 as outlined by MCCSS are as follows:

- Accelerated digital delivery solutions,
- Centralized and automated delivery,
- Risk-based , eligibility review
- Access to employment and training

STRATEGIC PLAN IMPACT

The Service Plan aligns with the Corporate Strategic plan on all three pillars ensuring organizational excellence, high quality person focused services and strengthening partnerships with various community agencies.

FINANCIAL IMPLICATIONS

There are no financial impacts resulting from the service plan. The Service Plan is submitted to MCCSS with the annual Budget submission for 2024.

Respectfully submitted,

Approved by:

Pam Patteri



Pam Patteri
Integrated Program Manager

Mike Nadeau
Chief Executive Officer



Social Services | Services Sociaux
Zhawenimi-Anokiitaagewin
Sault Ste. Marie District

District of Sault Ste. Marie Social Services
Administration Board

Conseil d'Administration des Services du District Sault Ste. Marie
Zhawenimi-Anokiitaagewin

DSSMSSAB BOARD REPORT

AUTHOR: Kate Kirkham

DATE: March 21, 2024

RE: Monthly Offload Delay Report – February Update

RECOMMENDATION

It is recommended that the District of Sault Ste. Marie Social Services Administration Board (DSSMSSAB) accept this report as information.

BACKGROUND INFORMATION

The availability of ambulance services is critically important to meeting the emergency needs of a community. A significant contributor to ambulance availability comes from offload delays. An offload delay refers to any time spent waiting to transfer patient care from paramedics to Emergency Department (ED) hospital staff. Offload delays are calculated as the difference in time from when the ambulance arrives in the ED until Transfer of Care (TOC) is documented and acknowledged, less the standard thirty (30) minutes it takes ambulances to return to service.

Ambulance offload delays (AOD) are a well-recognized issue throughout Ontario. A combination of ED crowding and high call demand for ambulances are key contributors to the AOD challenges in the District of Sault Ste. Marie. Sault Area Hospital (SAH) staffing pressures have further worsened this issue. These complications have left us with resource inefficiencies, affecting our emergency response times and our ability to provide community safety.

Several mitigating strategies are in place to manage ambulance offload delays, and we continue to work with SAH and the Ministry of Health (MOH) to find solutions. We will provide monthly status updates to the District of Sault Ste. Marie Social Services Administrative Board (DSSMSSAB).

SUMMARY/OVERVIEW

District of Sault Ste. Marie Paramedic Services

	February 2023	February 2024
# of Patients to SAH	747 patients	874 patients
Max # of minutes on offload delay	432 minutes (7 hours, 12 minutes)	321 minutes (5 hours, 21 minutes)
Total pts over 30 minutes	163	216
Total offload hours for period	339 hours	428 hours
Average Offload Time per Day	12.11 hours/ day	14.76 hours/ day

2024 - Current Year Results

	January	February
# of Patients to SAH	1002 patients	874 patients
Max # of minutes on offload delay	719 minutes (11 hours, 59 minutes)	321 minutes (5 hours, 21 minutes)
Total pts over 30 minutes	322	216
Total offload hours for period	685 hours	428 hours
Average Offload Time per Day	22.10 hours/ day	14.76 hours/ day

SAH has been experiencing extensive increases in patient volumes over the last four months, but we are starting to see improvements. Like the rest of the province, SAH has seen escalated volumes of community seasonal illnesses such as COVID-19, Influenza, and Respiratory Syncytial Virus (RSV). This influx has put more pressure on an already strained system. Now, as we are seeing less of these seasonal illnesses, the ED is able to manage their patient numbers better, slowly resulting in offload time improvements.

Because our healthcare system is under pressure, we need novel solutions to protect our patients' health outcomes. As such, we are exploring alternative projects to reduce our reliance on the emergency department and provide more targeted care within the community. Here are some of the ideas being considered:

Rapid Response Community Paramedics

These paramedics would be called to manage acute, low-acuity patients in their homes or long-term care (LTC) facilities, collaborating with different organizations to avoid unnecessary emergency department visits. We are actively working with Ontario Health, SAH, and representatives from LTC facilities to analyze this project idea and explore funding options.

Integrate Case Mangers into the Community Paramedic (CP) Team

Social and physical health are intertwined in complex ways, with social factors exerting a profound influence on health behaviours, mental well-being, access to resources, and biological processes. Recognizing and addressing the intersection of these health issues is crucial for promoting holistic well-being and reducing health disparities within communities. Adding case managers to the CP team would allow this to happen, helping patients make the health and social connections they need in the community.

Alternative Pathways

The paramedic service is looking for alternative patient care pathways outside of our traditional transfer to the emergency department. By doing this, we can identify and divert patients to existing community resources that may be better suited for managing specific needs. We currently have alternative pathways in place for withdrawal management and the CRC shelter. We want to expand our diversion options to other shelter locations, primary care clinics, and enhanced mental health referrals. These efforts would help alleviate pressure on the hospital and provide more tailored and appropriate care for individual needs in the community.

STRATEGIC PLAN IMPACT

Many initiatives are in place to manage the increasing rate of offload delays, while still offering high quality, person-focused services. Aligning with the pillars of Service Delivery and Community Partnerships, DSSMSSAB continues to collaborate with community partners in an effort to navigate system-wide healthcare challenges. This strategic engagement will enhance community well-being and provide service excellence.

FINANCIAL IMPLICATIONS

The actual financial implications of offload delays are difficult to discern within the paramedic-operating budget. However, there is no question that significant costs are associated with delayed patient offloading, including forced overtime, missed meal breaks, and up-staffing of additional paramedic units to meet community emergency response needs. With continued reduction in offload delays, we will have fewer associated costs, and paramedic operations will be managed more efficiently and economically.

CONCLUSION

Effectively managing ambulance-to-hospital offload processes remains one of our biggest challenges in providing appropriate emergency care to the community. We continue to work closely with Sault Area Hospital, the Ministry of Health and Ontario Health to find the best approaches and solutions. We will continue to report our statistics on a monthly basis.

Respectfully submitted,

Approved by:



Kate Kirkham
Chief Paramedic Services



Mike Nadeau
Chief Executive Officer



Social Services | Services Sociaux
Zhawenimi-Anokiitaagewin
Sault Ste. Marie District

**District of Sault Ste. Marie Social Services
Administration Board**

Conseil d'Administration des Services du District Sault Ste. Marie
Zhawenimi-Anokiitaagewin

DSSMSSAB BOARD REPORT

AUTHOR: Kate Kirkham

DATE: March 21, 2023

RE: Community Paramedic Long-term Care Funding Announcement

RECOMMENDATION

It is recommended that the District of Sault Ste. Marie Social Services Administration Board accept funding from the Ministry of LTC to deliver community paramedic services in 2024/25 and 2025/26”.

BACKGROUND INFORMATION

In 2019-20, the Ministry of Long-Term Care began to fund community paramedic programs focused on the growing waitlist for long-term care. At that time, the Ministry of LTC invited paramedic services to apply for this funding as an opportunity to bring the Community Paramedicine for Long-Term Care (CPLTC) program to more communities. The objective of this program was to help individuals stay safely in their own homes for as long as possible while also providing peace of mind to caregivers. We successfully applied and were allotted \$2.5 million of funding over the fiscal years 2020-21 to 2023-24. This funding helped us introduce a community paramedic program to the District of Sault Ste. Marie, and this much-needed program has had great success since its implementation.

SUMMARY/OVERVIEW

Since receiving the funding, we have developed the operational infrastructure to run a robust CP program. We now have four full-time community paramedics working under this funding envelope. Through this program, we have worked closely with community health and social service partners to identify the gaps between the care people need and their available resources. These gaps in care are helped through home visits, city-wide mobile wellness clinics in various senior buildings, and in conjunction with primary caregivers. The program aims to reduce 911 and emergency department use while providing better, more appropriate care to people who need it in the community.

Now, with a successful CPLTC program in place, the Ministry of LTC has announced that it will continue to support our program with an additional **\$2,000,000** in funding from now until March 31st, 2026. This great news will allow us to continue our program that supports those community members who need long-term care support.

STRATEGIC PLAN IMPACT

Aligning with the pillars of Service Delivery and Community Partnerships, DSSMSSAB continues to collaborate with community partners in an effort to navigate system-wide healthcare challenges. This strategic engagement will enhance community well-being and provide service excellence.

FINANCIAL IMPLICATIONS

All program costs will fall within provincial funding envelope within \$1,000,000 per fiscal year. There will be no additional financial implications for the DSSMSSAB.

CONCLUSION

The District of Sault Ste. Marie Social Services Administration Board is encouraged to accept this funding from Ministry of Long-Term Care's over two fiscal years (2024/25-2025/26). This funding will support the continuation of our community paramedic program designed to address the growing need for long-term care support within our community. With the successful implementation of the Community Paramedicine for Long-Term Care (CPLTC) program, we have demonstrated our commitment to enhancing community well-being and providing service excellence. This continued funding will allow us to sustain and further develop the program, ensuring that individuals can receive appropriate care in the comfort of their own homes while reducing strain on emergency services.

Respectfully submitted,



Kate Kirkham
Chief Paramedic Services

Approved by:



Mike Nadeau
Chief Executive Officer



Social Services | Services Sociaux
Zhawenimi-Anokiitaagewin
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DSSMSSAB BOARD REPORT

AUTHOR: Kate Kirkham

DATE: March 21, 2024

RE: Ontario Laboratories Information System (OLIS) and Health Partner Gateway (HPG) Access

RECOMMENDATION:

“It is recommended that the District of Sault Ste. Marie Social Services Administration Board (DSSMSSAB) enter into a data sharing agreement with the Ministry of Health for connectivity to the Ontario Laboratories Information System.

FURTHER BE IT RESOLVED that the DSSMSSAB also enter into a data sharing agreement with Ontario Health’s Home and Community Care Support Service (HCCSS) to gain access to the Health Partner Gateway”.

BACKGROUND INFORMATION

Ontario Health IDNow Initiative

An opportunity to participate in a COVID-19 IDnow initiative facilitated by Ontario Health recently became available to our paramedic services. In this initiative, Ontario Health would provide Abbott ID Now devices at no cost to various healthcare programs, including the Community Paramedic program. Access to these devices enables rapid COVID-19 testing and reporting, enhancing the ability of healthcare providers to diagnose and manage cases efficiently. Although not part of this immediate initiative, these devices can also give rapid, molecular point-of-care results for Respiratory Syncytial Virus (RSV), Influenza A & B, and Strep A. We plan to expand our device use to include these tests shortly.

HCCSS HPG Initiative

The Community Paramedic program collaborates closely with the Home and Community Care Support Service (HCCSS) to provide comprehensive healthcare services to community individuals. This collaboration typically involves several key aspects, such as

referral and patient coordination, health assessment and monitoring, health education and support, and resource referral.

As an initiative, the Community Paramedicine program has sought access to the Health Partner Gateway (HPG) as a way to facilitate seamless communication and information sharing with HCCSS and other healthcare partners. HPG integration allows community paramedics to access client health information, streamline referral management processes, and collaborate effectively with stakeholders. This access enhances the program's ability to provide targeted and efficient care to individuals in the community, ultimately improving overall service delivery and patient outcomes.

SUMMARY/OVERVIEW

Ontario Laboratories Information System (OLIS)

As part of the Ontario Health IDNow initiative, healthcare providers can submit COVID-19 lab test orders and receive rapid point-of-care test results directly through the Ontario Laboratories Information System (OLIS) through the Mobile Orders and Results Entry (OLIS-MORE) web form. This platform is advantageous for both providers and patients because it minimizes the potential for errors by streamlining the process and eliminating manual data entry at the lab. Moreover, it enhances efficiency by providing faster test results to patients.

Access to OLIS-MORE is required under Ontario Health's agreement to supply Abbott ID Now devices cost-free to our Community Paramedic program. We are required to provide all Covid-19 test results to this platform. For the Community Paramedic program, access to OLIS-MORE ensures timely information exchange for better decision-making and care interventions.

HCCSS and HPG Access Initiative

The Health Partner Gateway (HPG) is a comprehensive platform designed to facilitate the secure exchange of information between Home and Community Care Support Service (HCCSS) and its partners. Primarily integrated with Client Health and Related Information System (CHRIS), it facilitates essential functions like service offers, billing, and document sharing. Further, it enables seamless communication and information sharing between HCCSS and Health Partners, such as our Community Paramedic program.

In our Community Paramedicine program, this data sharing will allow us to access client health information through the Community Health Portal (CHP) and enhance our referral management processes, enabling efficient collaboration and service delivery among stakeholders. This initiative will significantly benefit community paramedics by providing timely and comprehensive client information, improving their ability to deliver targeted and efficient care to the community.

STRATEGIC PLAN IMPACT

Entering into data-sharing agreements with the MOH and the HCCSS for access to OLIS and HPG fosters an organizational culture of excellence and service. Paramedic

engagement with these platforms cultivates autonomy and innovation. By supporting these new services, the DSSMSSAB ensures that a highly skilled team will deliver high-quality, person-focused services. This commitment to innovation streamlines the process and enhances service delivery, exceeding customer expectations and positively impacting the community.

FINANCIAL IMPLICATIONS

There are no financial implications to either of these initiatives.

CONCLUSION

The integration of the Ontario Laboratories Information System (OLIS) and the Health Partner Gateway (HPG) into our Community Paramedic program represents a significant step forward in enhancing our local healthcare delivery. These platforms enable seamless communication, efficient data sharing, and timely access to critical information, ultimately empowering community paramedics to deliver targeted and efficient care to the community. By leveraging these technologies, we are poised to improve patient outcomes and better meet the evolving healthcare needs of our community.

Respectfully submitted,



Kate Kirkham
Chief Paramedic Services

Approved by:



Mike Nadeau
Chief Executive Officer