

COMMUNITY SERVICES/DUFFERIN OAKS/MUSEUM COMMITTEE AGENDA

Thursday, August 22, 2019 at 6:30 p.m. 55 Zina Street, Orangeville – Sutton Room (2nd Floor)

Declarations of Pecuniary Interests

PUBLIC QUESTION PERIOD

Members of the public will be provided an opportunity to ask questions of the Committee during this time (limited to 10 minutes).

COMMUNITY SERVICES

 COMMUNITY SERVICES/DUFFERIN OAKS/MUSEUM – August 22, 2019 – ITEM #1 <u>Headwaters Communities In Action (HCIA) Mid Year Report</u>

A report from Headwaters Communities In Action, dated August 2019, to provide Council with a mid-year update on activities.

Recommendation:

THAT the report from Headwaters Communities In Action, dated August 2019, regarding a mid-year update on activities, be received.

COMMUNITY SERVICES/DUFFERIN OAKS/MUSEUM – August 22, 2019 – ITEM #2
 Quarterly Community Services Activity Report – Second Quarter 2019

A report from the Director of Community Services, dated August 22, 2019, to provide Council with the quarterly info-graphics that summarizes work being undertaken by the Community Services Housing, Ontario Works and Children's Services Divisions.

Recommendation:

THAT the report of the Director, Community Services, dated August 22, 2019, titled Quarterly Community Services Activity Report – Second Quarter 2019, be received.

3. COMMUNITY SERVICES/DUFFERIN OAKS/MUSEUM – August 22, 2019 – ITEM #3

<u>Community Safety and Well-Being Plan</u>

A report from the Director of Community Services, dated August 22, 2019, to recommend to Council, that the County of Dufferin take the lead on coordinating the development of a Dufferin Community Safety and Well-Being Plan.

Recommendation:

THAT the report of the Director, Community Services, titled Community Safety and Well-Being Plan, dated August 22, 2019, be received;

AND THAT the County of Dufferin be recognised as the lead for the coordination and development of the Dufferin CSWB plan;

AND THAT staff be directed to conduct a Request For Quote (RFQ) process to obtain a consultant to develop the Dufferin Community Safety and Well-Being Plan;

AND THAT staff and the successful consultant from the RFP work with the Dufferin Situation Table and local municipalities to create the Dufferin Community Safety and Well-Being plan;

AND THAT the cost of consulting services and administrative support to coordinate and development the Dufferin CSWB plan be paid for from the Rate Stabilization Reserve at a cost no greater than \$10,000.

4. COMMUNITY SERVICES/DUFFERIN OAKS/MUSEUM – August 22, 2019 – ITEM #4 Annual Rent Increase Guideline 2020

A report from the Director of Community Services, dated August 22, 2019, to seek direction with respect to possible changes to the market rents and affordable rents for County-owned social housing locations.

Recommendation:

THAT the report of the Director of Community Services, dated August 22, 2019, titled Annual Rent Increase Guideline 2020 be received;

AND THAT the 2020 market rents of Dufferin owned housing units be increased by the maximum level of 2.2% over the previous year.

5. COMMUNITY SERVICES/DUFFERIN OAKS/MUSEUM – August 22, 2019 – ITEM #5

<u>Dufferin Portable Housing Allowance Implementation (2020)</u>

A report from the Director of Community Services, dated August 22, 2019, to seek approval for the implementation of a Dufferin Portable Housing Allowance program, for the Dufferin homeless population, with the goal of achieving safe, permanent, and sustainable housing at no additional cost to the County.

Recommendation:

THAT the report of the Director, Community Services, titled Dufferin Portable Housing Allowance Implementation (2020), dated August 22, 2019, be received;

AND THAT approval be given for the creation of a Dufferin Portable Housing Allowance, to assist the Dufferin homeless population, commencing in April 2020, to be funded from the Social Assistance Restructuring Reinvestment (SARR) budget.

6. COMMUNITY SERVICES/DUFFERIN OAKS/MUSEUM – August 22, 2019 – ITEM #6

<u>Dufferin County Age-Friendly Needs Assessment and Strategic Action Plan</u>

A report from the Director of Community Services, dated August 22, 2019, to recommend adoption of the final version of the Dufferin County Age-Friendly Needs Assessment and Strategic Action Plan.

Recommendation:

THAT the report of the Director, Community Services, titled Dufferin County Age- Friendly Needs Assessment and Strategic Action Plan, dated August 22, 2019, be received;

AND THAT Dufferin County Age-Friendly Needs Assessment and Strategic Action Plan be adopted.

REPORTS

7. COMMUNITY SERVICES/DUFFERIN OAKS/MUSEUM – August 22, 2019 – ITEM #7
August 2019 Financial Report

A report from the Treasurer, dated August 22, 2019, to provide Committee with a monthly financial summary.

Recommendation:

THAT the August 2019 Financial Report from the Treasurer, dated August 22, 2019, be received.

Next Meeting

Thursday, September 26, 2019 at 6:30 p.m. 55 Zina St, Orangeville – Sutton Room (2nd Floor)





Headwaters Communities In Action

Mid Year Progress Report August 2019

Introduction:

HCIA entered into a partnership with the County of Dufferin in January 2018 to undertake work in the community that supported the County strategic plan. The activities outlined form HCIA's current project groups and primary areas of activity.



Volunteer Dufferin:

DC alignment: Economic Vitality, Communication and Connections

<u>Deliverables:</u> Track the <u>Volunteer Dufferin website</u> activity via google analytics, increase in number of site visits, increased length of stay on site. Quarterly newsletters to increase connectivity with volunteer base. Upgrade website functionality to better search and provide support seniors and youth.

Mid-Year Status:

- √ 100 member organizations (up 17% since Dec 2018 report)
- ✓ 1,275 registered volunteers (up 16% since Dec 2018 report)
- √ 3,391 average monthly page views
- √ 700 average sessions per month
- ✓ 3M 27S average session duration















Currently volunteer stories are shared via the HCIA monthly newsletter as well as the Volunteer Dufferin quarterly newsletter and a further ask has gone out for stories to increase engagement. The Volunteer Dufferin logo is on all municipal sites.

In May, Lisa Post was hired as the Volunteer Dufferin Coordinator. Lisa is tasked with growing Volunteer Dufferin and further increasing engagement with volunteers and organizations.



HFFA Admin and HUB support

DC Alignment: Economic Vitality

<u>Deliverables:</u> Supporting six HFFA HUB meetings per year, issue Farm Fresh Food map in partnership with In The Hills magazine, Farm to School Sustainability plan.

Mid Year Status: Achieved/On track.

HFFA HUB Meeting Support – There have been 4 HFFA HUB meetings so far this year as it was determined that greater frequency provided more continuity for Food Charter focus and food system support. The chair role is rotating to encourage various inputs and the newsletters are also undertaken by rotation with monthly seasonal or theme focus. The HUB continues to scan for actionable items from the Food Charter and champions community efforts via social media and event support.

Food Charter Endorsements & Activity – The Charter has progressed through the following activities:















HFFA successfully partnered with In The Hills to produce a new version of the Dufferin Food Map which was included in the June print issue. View the <u>Dufferin Food Map online</u>

Food Charter endorsements are up? and remain ongoing via the HFFA site. <u>Visit the endorsement page.</u>

Farm to School Sustainability Plan – The Farm to School coordinator and volunteer team are actively fundraising to continue the program. A sustainability strategy has been put into action. For the winter, there was a partnership with 4 Headwaters restaurants called the Willing Hearts Winter Harvest dinning series. The series offers an exclusive dining experience each month (January to April) where participants enjoy the best locally grown food at an eclectic selection of interesting dining establishments. The summer Farm to Table series includes 3 on the farm dinners will further connect residents with local farmers and farms and is in progress.



Trails/CHATT

DC Alignment: Economic Vitality, Communications and Connections

Deliverables: Execute a Trails project that engages various stakeholders from the community.

<u>Mid-Year Status:</u> A cycling route project appealed to the new Tourism executive who saw the trails assets in Dufferin as being a foundational strategy to move Tourism forward with increased economic benefit and begin building the central system for all trail initiatives to plug into. This forward movement is on hold while Tourism reorganizes. The CHATT team is working on the creation of a Dufferin focused Trails organization.

















Dufferin Community Foundation

DC Alignment: Economic Vitality

<u>Deliverables:</u> Incorporation & charitable status toward independence & support of Charitable & NFP sectors.

<u>Status:</u> No longer under the umbrella of HCIA. The Dufferin Community Foundation has fully incorporated and obtained charitable status before year end. The launch event at Adamo Winery in Mono, was a success and will be repeated, along with the community grants, this coming September. The charitable status will facilitate the development of a next phase communications and growth strategy. View <u>DCF website</u> and <u>press releases</u>. Funding from this year will be transferred over to Dufferin Community Foundation.



Community Granting Process:

DC Alignment: Service Excellence















<u>Deliverables:</u> New and expanded intake process. Further application development to better align with strategic priorities. Updates and recommendations for the 2019 intake to be submitted with this report.

Mid Year Status: Achieved. The 2018 grant applications were assessed, a report drafted, and the allocations approved by GGSC and finally by Council at the June County Council meeting. The application form continues to evolve with a more streamlined version being proposed for the 2020 budget year. Attached.

HCIA Management and Admin – additional Backbone Grant activities:

HCIA provides the administrative and legal supports and expertise to allow our project groups and <u>other community groups</u> the ability to apply for grant funding. The following grant requests have been submitted by HCIA in 2019:

<u>Donner Foundation</u>: request to consider the work of HCIA in support of children's programs (Farm to School) *In progress*

<u>RBC</u>: staff provide volunteer assistance along with 1000 in funding towards Food Club efforts. *Approved*

<u>Town of Orangeville, Town of Mono, Township of Mulmur, and Town of Caledon</u> have all provided funds towards the Farm Fresh Food Guide published in the recent edition of In The Hills. *Approved*

<u>Canada Post Community Foundation</u>: Two grant applications were drafted to access these community funds. One in support of the Grand Pals project connecting kids with seniors, and one for Education workshops for Farm to School. *Declined* <u>Community Well-Being Survey:</u>

HCIA led the region with the first Well-Being survey in 2012. The first iteration was all-encompassing with Statistics Canada and Public Health inputs as well as citizens feedback. In 2019 planning will begin on the next version. With Public Health increasingly publishing health and poverty statistics, although not currently a strong partner due to funding cuts, there is still a gap in feedback from citizens. Citizen feedback is essential to forming a balanced well-being picture of community. Planning will begin in 2019 to articulate the















reporting gaps and how that should be addressed. The Dufferin Community Foundation could eventually take this over with what the industry terms the Vital Signs report, though will not be in a position to do so for several years.

2019 Challenges:

<u>HFFA</u> needs to fundraise towards actual costs for all of our programs which requires significant resources. The partnerships with In the Hills and Tourism have highlighted the potential of our Food and Farming sector

The HCIA website is outdated and badly needs a redesign for greater functionality and engagement opportunities.

Funding and Fundraising continue to challenge. Please see foundation Search opportunity below.

Opportunities for further budget allocation:

HCIA Website (visit the site): Developed back in 2012 at a time when mobile-friendly was yet to be conceived, the HCIA website is old technology. Today there are fresh templates and plug-in functionality that could significantly improve the ability to connect and communicate. A new site would allow for new functionality to further citizen engagement.

Volunteer Dufferin: There are numerous opportunities to expand the functionality and value of Volunteer Dufferin to the benefit of the community. It will grow in capability and as a sound community investment.

Community Funding Resource: Foundation Search: With the purchase of license agreements (both Canadian and US based), a resource would be able to locate unspent funding available from a wide variety of foundations in North America. The funding would have to be applied for via grant applications, and could potentially provide new streams of sustainable funding to NFP's who qualify.















HCIA 2020 Budget

Program	Key activities	Current	Opportunity
Trails	Project development, partnership formation, alignment with Tourism towards integrated trail system	4k	
Headwaters Food and Farming Alliance	Min 6 meetings per year, monthly newsletter, Farm to School admin and program management, Website admin, social media, event support	4k	
Volunteer Dufferin	Volunteer management and communications, quarterly newsletters, outreach into schools, website upgrades towards better functionality and youth and senior engagement. *Opportunity funding.	15k	5k
Community Grant Process	Refine application and screening criteria, form assessment committee, ensure connection to County priorities, draft decisions/recommendation report and share previous grant stories via social media.	10k	
Community Well-Being	Planning for next Well-Being effort. Determine appropriate data via existing gaps and future needs. Plan approach and format.	2k	
Dufferin Community Foundation	Administration funding to grow communications and outreach activities.	5k	
HCIA Management and Administration	Program management, financial admin, insurance, Constant Contact database management tool and distribution lists for all initiatives, Newsletters, communications, event management, Social Media content and execution. *Opportunity funding.	5k	5k
Community Funding Resource:	*Opportunity funding. Foundation Search		7.3















Program	Key activities	Current	Opportunity
	Current funding to support Dufferin County in achieving strategic objectives using HCIA backbone structure and reach into the community.	45k	
	Funding for actual operational costs and further impact and reach into the community.		62.3k













REPORT TO COMMITTEE

To: Chair Ryan and Members of the Community Services/Dufferin

Oaks/Museum Committee

From: Anna McGregor, Director of Community Services

Meeting Date: August 22, 2019

Subject: Quarterly Community Services Activity Report - Second

Quarter 2019

In Support of Strategic Plan Priorities and Objectives:

Good Governance - ensure transparency, clear communication, prudent financial management

Inclusive & Supportive Community – support efforts to address current and future needs for a livable community

Purpose

The purpose of this report is to provide Council with the quarterly infographics that summarizes work being undertaken by the Community Services Housing, Ontario Works and Children's Services Divisions.

Background and Discussion

Attached is the Housing Services, Ontario Works and the Children's Services Activity Reports for the second quarter of 2019. The attached documents provide quick reference information for consideration. The infographics have been reformatted to better align with the new County of Dufferin branding and logo.

The Housing Services infographic report summarizes:

- Housing Access Dufferin (HAD) Wait List Composition
- Housing Access Dufferin (HAD) Average Wait Times for Housed Applicants
- Housing Access Dufferin (HAD) Applicants Housed
- Homelessness Prevention Program (HPP) Statistics
- Ongoing Property and Unit Composition

- County Housing Move In and Move Out
- New Announcements

The Ontario Works infographic report summarizes:

- Intake Statistics
- Client Outcomes
- Caseload Statistics
- Case Composition
- Orangeville & Shelburne Employment Resource Centre (ERC) Statistics
- New Announcements

The Children's Services infographic report summarizes:

- Fee Subsidy Statistics
- Jean Hamlyn Average Monthly Number of Children
- EarlyON Child and Family Centre Number of Visits
- Raising the Bar Program
- Special Needs Resourcing Program i-CAN (Inclusion for Children with Additional Needs)
- New Announcements

Changes from the Previous Quarter

Housing Services:

- The total number of applicants on the HAD waitlist continues to increase
- There were less applicants housed in Q2 2019 compared with Q1 2019
- The Homelessness Prevention Program served slightly more clients in Q2 2019 than in Q1 2019

Ontario Works:

- Slight increase in the number of applications received, including online applications received in Q2 compared with Q1
- The average number of business days from screening to financial eligibility decision has remained at one day
- The Orangeville ERC saw a slight reduction in the number of visits; however, the Shelburne ERC remained at the same number as Q1

Children Services:

- Slight increase in the number of applications received, including online applications received in Q2 compared with Q1
- The average number of business days from screening to financial eligibility decision has remained at one day
- The Orangeville ERC saw a slight reduction in the number of visits; however, the Shelburne ERC remained at the same number as Q1

Local Municipal Impact

No impact.

Financial, Staffing, Legal, or IT Considerations

No impact.

Recommendation

THAT the report of the Director, Community Services, dated August 22, 2019, titled Quarterly Community Services Activity Report – Second Quarter 2019, be received for information purposes.

Respectfully Submitted By:

Anna McGregor Director, Community Services

Attachments:

Attachment Quarterly Community Services Report Housing Second Quarter 2019 Attachment Quarterly Community Services Report Ontario Works Second Quarter 2019 Attachment Quarterly Community Services Report Children Second Quarter 2019



Housing Services Activity Report

2019 Q2

■ HAD¹ COMPOSITION & AVERAGE WAIT TIMES





725

222

因 1,198 **12 yrs**

Average number of applicants on waitlist

Total household members

Current longest wait time in HAD¹ **HAD¹ Average Wait Times for Housed Applicants** 7 yrs 5 yrs 5 yrs 3 yrs 7 yrs 2 Bdrm 4 Bdrm 1 Bdrm Bachelor 3 Bdrm

Please note: Wait times vary depending on family size, age of applicant and choice of location the applicant selects

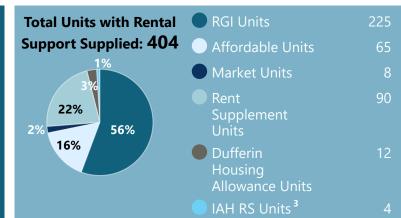
HOUSED APPLICANTS 🗥



RGI² 10

Affordable/ Rent Supplement Market 0 4

UNIT COMPOSITION



M HOMELESSNESS PREVENTION PROGRAM (HPP) 🖳



Number of clients served



Financial assistance provided urHome/PEPP



Intake assistance provided for LEAP/OESP



Total number of contacts (walk in and telephone)



Number of referrals made



Number ineligible for HPP financial assistance



NEW ANNOUNCEMENTS THIS QUARTER



The Spring Harvest Program was able to provide 564 families (920 children) with assistance for healthy eating. Each family with a child enrolled in one of our programs received a \$20 PC gift card per child

each of the County-owned buildings. The virtual tours showcasing the units will be posted on the website over the coming months in order to assist current and potential applicants on the waitlist to more effectively choose their housing options

was granted funds from the Ontario Renovates Program and two households were successfully assisted in purchasing their own homes through the Homeownership Program

¹ HAD - Housing Access Dufferin

² RGI - Rent Geared to Income

³ IAH RS - Investment in Affordable Housing Rent Supplement

[†] please note: statistics are accurate as of July 15, 2019



Ontario Works Activity Report

2019 Q2

INTAKE 🖳







165

Total applications received in Q2

1.4% 3.5%

35%

Average number of business days¹

Online applications received

CLIENT OUTCOMES



Total exits to employment

CASE COMPOSITION (2)

Singles

Couples

Sole Support

Couples with

Dependents

Parent (SSP)



60.0%

35.0%

1.4%

3.5%



CASELOAD



Average monthly caseload

666

202

Average monthly beneficiaries

1,138



Total emergency assistance cases

28



Average months on assistance

25



60%

EMPLOYMENT RESOURCE CENTRES



Orangeville (OERC)







62

1,932

Total number of days open in Q2

Total number of visits

Total number of new clients visiting OERC

Shelburne (SERC)







62

1,385

Total number of days open in O2

Total number of visits

Total number of visitors requiring oneon-one support



NEW ANNOUNCEMENTS THIS QUARTER



The Ministry announced that effective July 31, 2019, the ministry will no longer fund the Addiction Services Initiative (ASI). The ministry expects that no participants will be cut off from their treatment

The Ministry also announced that as of November 1, 2019 the Transition Child Benefit (TCB) will be ending. Payments will be discontinued for all recipients under both Ontario Works ODSP and no new applicants will receive the benefit

To provide more information about the upcoming transformation of employment services, the Ministry held a Market Sounding for Employment Services Transformation event on May 15 and 16, 2019

Average # of business days from screening to financial eligibility decision

[†] please note: statistics are accurate as of July 15, 2019



Children's Services Activity Report

TITLE STATE OF THE PARK THE P

Kindergarten

Jean Hamlyn Average Monthly Number of

2019 Q2

CHILD CARE FEE SUBSIDY (%)



Average monthly number of children receiving fee subsidy

465

Total number of new children served

79

Fee Subsidy Age Groups by Percentage

7% 14% Infant Toddler 28%

16%

34%

Preschool Kindergarten School Age

EARLYON CHILD & FAMILY CENTRES

40

20

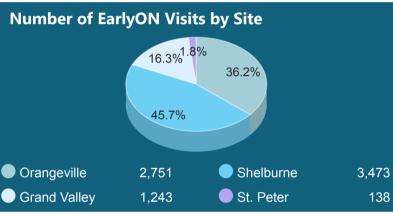
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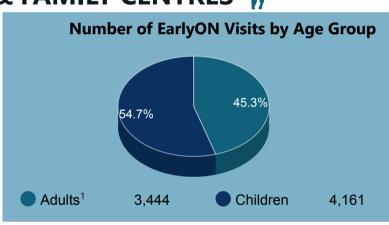
Preschool

Enrolled



Children by Age Group





RAISING THE BAR



Raising the Bar² Program

Total number of workshops

Total number of RECEs³ served in workshops

134

SPECIAL NEEDS RESOURCING

Special Needs Resourcing Program i-CAN⁴

Average monthly number of children ages up to Kindergarten receiving Special Needs Programming

Average monthly number of school age children receiving Special Needs **Programming**



NEW ANNOUNCEMENTS THIS QUARTER



The EarlyON Centre began a pilot Public Health Nurse Liaison program in Shelburne on Tuesday mornings to support our families with any health needs

EarlyON and Jean Hamlyn engaged in three sessions together with Lorrie Baird on Reflective Practice. It was amazing to see all the staff brainstorm, reflect and just be together

Jean Hamlyn staff and the Pedagogist engaged in an experience with Museum of Dufferin to offer exposure and pedagogical connections to the exhibits

Adults include parents and caregivers

² Raising the Bar (Early Learning Quality Accreditation Program)

³ RECEs (Registered Early Childhood Educators)

⁴ i-CAN (Inclusion for Children with Additional Needs)

[†] please note: statistics are accurate as of July 15, 2019



REPORT TO COMMITTEE

To: Chair Ryan and Members of the Community Services/Dufferin

Oaks/Museum Committee

From: Anna McGregor, Director of Community Services

Meeting Date: August 22, 2019

Subject: Community Safety and Well-Being Plan

In Support of Strategic Plan Priorities and Objectives:

Good Governance - ensure transparency, clear communication, prudent financial management

Inclusive and supportive community – support efforts to address current and future needs for a livable community

Purpose

The purpose of this report is to recommend to Council, that the County of Dufferin take the lead on coordinating the development of a Dufferin Community Safety and Well-Being Plan.

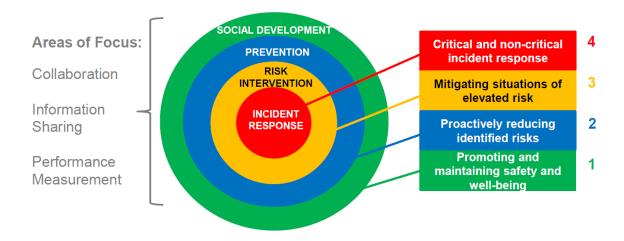
Background and Discussion

Legislative Requirements

The Provincial Government has enacted legislation through the Comprehensive Police Services Act (2019), which requires municipal governments to adopt Community Safety and Well-Being (CSWB) plans. The legislation states every municipal council is required to develop and adopt these plans by working in partnership with a multi-sectoral advisory committee, effective January 1, 2019 and to be completed by January 1, 2021.

The advisory committee should be reflective of the community and include multisectoral representation. It may involve the creation of a new body or the utilization of an existing body. Municipalities have the discretion and flexibility to develop joint plans with surrounding municipalities. The recommended planning framework is detailed below:

Community Safety and Well-Being Planning Framework



CSWB plans must be published within 30 days after adoption, online, in print for review by anyone who requests it and in any other form determined by the municipality.

The provincial government have stated that additional regulations prescribing requirements related to monitoring, evaluating, reporting, and reviewing of the CSWB plan may be outlined at a later date.

Existing Body

In Dufferin, there is already, in operation, the Dufferin Situation Table (DST). Discussions were first initiated in 2015 by a group of community service providers who were aware of the community safety and well-being model. At that time, grant funding for the development of the DST aligned with the province's theme of "Building a Safer Ontario through Stronger Communities and Well-Being Planning". The goal was to create a stronger community with an increased capacity to address highly complex situations for better outcomes, for highly vulnerable individuals in Dufferin County.

DST is a resource to individuals, families and the human services sector. It provides a timely, holistic response to a situation of acutely elevated risk that, if left unattended, may result in harm to an individual, family and/or the community. DST adheres to a strict privacy model to ensure personal information is protected.

DST facilitates harm reduction by connecting those identified in a situation of acutely elevated risk to the most appropriate services in order to avert a crisis. For those who are already connected to resources, the DST offers a safety net but, it can also be an entry point for those not previously known to and/or involved with services in the community.

The ultimate goal is to ensure public and personal safety by recognizing and intervening before a crisis. In addition to clinical intervention, the DST can identify community needs/concerns/gaps in the human service sector.

DST meets weekly on Tuesdays at Dufferin Child and Family Services (DCAFS). At meetings agencies quickly cycle through a disciplined discussion that covers three areas:

- Identifying situations of imminent risk of harm;
- Deciding which agencies should customize interventions to reduce those risks; and,
- Mounting planned and co-ordinated interventions to reduce them.

DST member agencies include Family Transition Place (FTP), Dufferin Child and Family Services (DCAFS), Canadian Mental Health Association (CMHA), Services and Housing In the Province (SHIP), Orangeville Police Services, Shelburne Police Services, County of Dufferin (Community Services) and Ontario Provincial Police (OPP), Choices Youth Shelter, Headwaters Health Care Centre (HHCC) and Dufferin Area Family Health Team (DAFHT).

Moving Forward

The County is best positioned for the lead role in the coordination of the development of the CSWB plan, for a variety of reasons.

The County is already involved in several community tables, including the DST. The County offers linkages with all three (3) police services within Dufferin, it has strong connections with local municipalities/agencies, and it has contact with the public, which all helps to identify and address risk factors. This is all done while continuing to facilitate community partnerships and collaborations.

The County can access a wide range of social services, such as housing and homelessness services child care and early learning, financial assistance and employment support. These come together, with other agency services, to build on frameworks that support community safety within Dufferin County.

A number of local municipalities at both the staff and/or Council level have expressed interest in having the County of Dufferin take the lead on this work. Other two-tier municipalities have also opted to have the upper-tier be the lead.

Local Municipal Impact

Ultimately, the goal of CSWB planning is to achieve greater coordination and collaboration on issues and situations before they can escalate into a crisis. Dufferin is already on the path to CSWB planning. The development of the documented plan will not only meet legislative requirements, it will also highlight and promote a lot of the work that is already being done, in Dufferin, and will make it more readily accessible for the local community.

Financial, Staffing, Legal, or IT Considerations

The County recognises this work does require a dedicated set of resources. Current capacity does not allow for the development of the plan using existing resources. Therefore, a consultant would be required to help with the development of the CSWB plan. The costs associated with the development of, a County wide, CSWB plan would be covered by the Rate Stabilization Reserve. This would include money for additional administrative support required during development. The consultant and County staff will be able to utilise Provincial guidance in the form of published material, including "Community Safety and Well-Being Planning Framework: A Shared Commitment in Ontario, Booklet 3, Version 2".

Recommendation

THAT the report of the Director, Community Services, titled Community Safety and Well-Being Plan, dated August 22, 2019, be received;

AND THAT the County of Dufferin be recognised as the lead for the coordination and development of the Dufferin CSWB plan;

AND THAT staff be directed to conduct a Request For Quote (RFQ) process to obtain a consultant to develop the Dufferin Community Safety and Well-Being Plan;

AND THAT staff and the successful consultant from the RFP work with the Dufferin Situation Table and local municipalities to create the Dufferin Community Safety and Well-Being plan;

AND THAT the cost of consulting services and administrative support to coordinate and development the Dufferin CSWB plan be paid for from the Rate Stabilization Reserve at a cost no greater than \$10,000.

Respectfully Submitted By:

Anna McGregor
Director of Community Services

Attachments:

Community Safety and Well-Being Planning Framework: A Shared Commitment in Ontario Booklet 3, Version 2

COMMUNITY SAFETY AND WELL-BEING PLANNING FRAMEWORK

A Shared Commitment in Ontario

Booklet 3, Version 2



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Message from the Minister of Community Safety and Correctional Services on Behalf of Cabinet



The safety and well-being of Ontarians is, and will always be, a top priority for our government.

That is why we have committed to providing our front-line police officers with the tools and resources they need to combat violence and increase public safety.

But fighting crime head-on is only one part of the equation. We also need to address the root causes of crime and complex social issues by focusing on social development, prevention and risk intervention.

Community safety and well-being cannot rest solely on the shoulders of the police. It is a shared responsibility by all members of the community and requires an

integrated approach to bring municipalities, First Nations and community partners together to address a collective goal. Breaking down existing silos and encouraging multi-sectoral partnerships are essential in developing strategies, programs and services to help minimize risk factors and improve the overall well-being of our communities.

This booklet, which includes a framework and toolkit, is designed to support municipalities, First Nations and their partners — including the police — in this undertaking. We need to combat the cycle of crime from happening at all. We need to develop effective crime prevention methods that will improve the quality of life for all.

Our government is committed to fighting crime, victimization and violence on every front because each and every person deserves to live in a safe, secure community. On behalf of Cabinet, we are committed to supporting our local and provincial partners - to keep Ontario safe today, tomorrow and for future generations.

Honourable Sylvia Jones
Minister of Community Safety and Correctional Services

Message from the Deputy Minister of Community Safety on Behalf of the Deputy Ministers' Social Policy Committee



As ministry leaders, we are dedicated to promoting a coordinated, integrated sphere for the development and management of the human services system. We recognize the many benefits of community safety and well-being planning within Ontario communities, including the coordination of services. This booklet provides an excellent platform for communities to undertake collaborative planning, resulting in the development of local community safety and well-being plans.

We have been working hard at the provincial level to mirror the type of collaboration that is required for this type of planning at the municipal level, and we strongly encourage community agencies and organizations that partner with our respective ministries to become involved in the development and implementation of their local plans. Our hope is that this

booklet will inspire Ontario communities to form and enhance multi-sectoral partnerships and align policies and programs in all sectors through the community safety and well-being planning process. By working together, we can more efficiently and effectively serve the people of Ontario.

I would like to thank those dedicated to ensuring the safety and well-being of Ontario communities for their involvement in local initiatives and continued support in the development of this booklet.

Mario Di Tommaso, Deputy Minister of Community Safety, on behalf of:

Deputy Minister of Correctional
Services/Responsible for Anti-Racism
Deputy Minister of Training, Colleges and
Universities
Deputy Attorney General
Deputy Minister Cabinet Office Communications
and Intergovernmental Affairs
Deputy Minister Cabinet Office Policy and Delivery
Deputy Minister of Children, Community and Social
Services/Responsible for Women's Issues
Deputy Minister of Education
Deputy Minister of Treasury Board Secretariat

Deputy Minister of Consumer Services/Responsible for ServiceOntario and Open Government
Deputy Minister of Finance
Deputy Minister of Francophone Affairs/Seniors and Accessibility
Deputy Minister of Health and Long-Term Care
Deputy Minister of Municipal Affairs and Housing
Deputy Minister of Indigenous Affairs
Deputy Minister of Labour
Deputy Minister of Tourism, Culture and Sport
Deputy Minister of Transportation/Infrastructure

Deputy Minister of Government Services

Section 1 – Introduction

Setting the Stage

The ministry has been working with multi-sectoral government partners and local community and policing stakeholders to develop the Provincial Approach to Community Safety and Well-Being.

As ministry staff travelled across our diverse province throughout 2013 to 2016, we listened closely to local voices that spoke about the need to change the way we look at service delivery in all sectors. The common goal for Ontarians is to get the services they need, when they need them, in an effective and efficient way. Police are often called upon to respond to complex situations that are non-criminal in nature as they operate on a 24/7 basis. We also know that many of these situations, such as an individual experiencing a mental health crisis, would be more appropriately managed through a collaborative service delivery model that leverages the strengths of partners in the community. After engaging Ontario communities on our way forward, we have affirmed that all sectors have a role in developing and implementing local community safety and well-being plans. By working collaboratively at the local level to address priority risks and needs of the community through strategic and holistic planning, we will be better prepared to meet current and future expectations of Ontarians.

This type of planning requires less dependance on reactionary, incident-driven responses and re-focusing efforts and investments towards the long-term benefits of social development, prevention, and in the short-term, mitigating acutely elevated risk. It necessitates local government leadership, meaningful multi-sectoral collaboration, and must include responses that are centred on the community, focused on outcomes and evidence-based (i.e., derived from or informed by the most current and valid empirical research or practice). It is important to note that although there is a need to rely less on reactionary, incident-driven responses, there continues to be a strong role for the police, including police services boards, in all parts of the planning process.

The ultimate goal of this type of community safety and well-being planning is to achieve sustainable communities where everyone is safe, has a sense of belonging, opportunities to participate, and where individuals and families are able to meet their needs for education, health care, food, housing, income, and social and cultural expression. The success of society is linked to the well-being of each and every individual.

Purpose

Community Safety and Well-Being Planning Framework: A Shared Commitment in Ontario is the third booklet in the series that outlines the Provincial Approach to Community Safety and Well-Being. It is a follow-up to community feedback highlighted in the Community Safety and Well-Being in Ontario: A Snapshot of Local Voices, released in 2014, and is grounded in research outlined in the first booklet, Crime Prevention in Ontario: A Framework for Action, released in 2012.



Communities across the province are at varying levels of readiness to develop and implement a community safety and well-being plan. As such, this booklet is intended to act as a resource to assist municipalities, First Nations and their partners at different stages of the planning process, with a focus on getting started. More specifically, it highlights the benefits of developing a plan, the community safety and well-being planning framework that supports a plan, critical success factors, and connects the framework to practice with a toolkit of practical guidance documents to assist in the development and implementation of a plan. It also incorporates advice from Ontario communities that have started the process of developing a plan that reflects their unique local needs, capacity and governance structures. Planning partners in Bancroft, Brantford, Chatham-Kent, Kenora, Rama, Sault Ste. Marie, Sudbury and Waterloo tested aspects of the community safety and well-being planning framework and the toolkit to ensure that they are as practical and helpful as possible.

Legislative Mandate

This booklet supports the legislative requirements related to mandating community safety and well-being planning under the *Police Services Act* (effective January 1, 2019). As part of legislation, municipalities are required to develop and adopt community safety and well-being plans working in partnership with a multi-sectoral advisory committee comprised of representation from the police service board and other local service providers in health/mental health, education, community/social services and children/youth services. Additional requirements are also outlined in legislation pertaining to conducting consultations, contents of the plan, and monitoring, evaluating, reporting and publishing the plan. This approach allows municipalities to take a leadership role in defining and addressing priority risks in the community through proactive, integrated strategies that ensure vulnerable populations receive the help they need from the providers best suited to support them.

Municipalities have the flexibility to engage in community safety and well-being planning individually, or in partnership with neighbouring municipalities and/or First Nation communities to develop a joint plan. When determining whether to develop an individual or joint plan, municipalities may wish to consider various factors, such as existing resources and boundaries for local service delivery. It is important to note that First Nation communities are also encouraged to undertake this type of planning, however, they are not required to do so by legislation.

Benefits

Through the ministry's engagement with communities that are developing a plan, local partners identified the benefits they are seeing, or expect to see, as a result of their work. The following benefits are wide-ranging, and impact individuals, the broader community, and participating partner agencies and organizations:

- enhanced communication and collaboration among sectors, agencies and organizations;
- stronger families and improved opportunities for healthy child development;
- healthier, more productive individuals that positively contribute to the community;
- increased understanding of and focus on priority risks, vulnerable groups and neighbourhoods;
- transformation of service delivery, including realignment of resources and responsibilities to better respond to priority risks and needs;
- increased engagement of community groups, residents and the private sector in local initiatives and networks;

- enhanced feelings of safety and being cared for, creating an environment that will encourage newcomers to the community;
- increased awareness, coordination of and access to services for community members and vulnerable groups;
- more effective, seamless service delivery for individuals with complex needs;
- new opportunities to share multi-sectoral data and evidence to better understand the community through identifying trends, gaps, priorities and successes; and
- reduced investment in and reliance on incident response.

"I believe that community safety and well-being planning situates itself perfectly with many other strategic initiatives that the City is currently pursuing. It has allowed us to consider programs and activities that will produce synergistic impacts across various areas of strategic priority in our community such as poverty reduction, educational attainment and building stronger families. Planning for simultaneous wins is efficient public policy." - Susan Evenden, City of Brantford

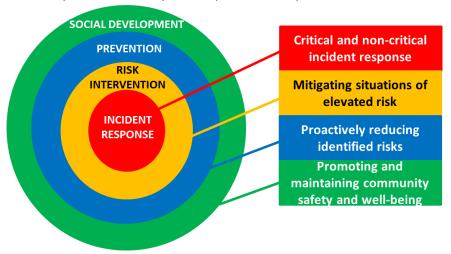
Section 2 – The Community Safety and Well-Being Planning Framework

The community safety and well-being planning framework outlined in this section will help to guide municipalities, First Nations communities and their partners as they develop their local plans. It is crucial for

all members involved in the planning process to understand the following four areas to ensure local plans are as efficient and effective as possible in making communities safer and healthier:

- 1. Social Development;
- 2. Prevention;
- 3. Risk Intervention; and
- 4. Incident Response.

Social Development Promoting and maintaining community safety and well-being



Social development requires long-term, multi-disciplinary efforts and investments to improve the social determinants of health (i.e., the conditions in which people are born, grow, work, live, and age such as education, early childhood development, food security, quality housing, etc.) and thereby reduce the probability of harm and victimization. Specifically, social development is where a wide range of sectors, agencies and organizations bring different perspectives and expertise to the table to address complex social issues, like poverty, from every angle. The key to successful social development initiatives is working together in ways that challenge conventional assumptions about institutional boundaries and organizational culture, with the goal of ensuring that individuals, families and communities are safe, healthy, educated, and have housing, employment and social networks that they can rely on. Social development relies on planning and establishing multi-sectoral partnerships. To work effectively in this area, all sectors need to share their longterm planning and performance data so they have a common understanding of local and systemic issues. Strategies need to be bolstered or put into place that target the root causes of these issues. Social development in action will be realized when all community members are aware of services available to them and can access those resources with ease. Knowing who to contact (community agency versus firstresponder) and when to contact them (emerging risk versus crisis incident) allows communities to operate in an environment where the response matches the need. Communities that invest heavily in social development by establishing protective factors through improvements in things like health, employment and graduation rates, will experience the social benefits of addressing the root causes of crime and social disorder. The municipality in Sault Ste. Marie has partnered with a local business owner, college and school board to develop the Superior Skills program. Superior Skills provides eight-week intensive skills training to individuals in receipt of social assistance. Skills training is provided based on identified market gaps in the community; such as sewing, light recycling, spin farming, etc. At the end of the training program, the local business owner incorporates a new company for program graduates to begin employment. The goal is to employ 60% of program graduates at the newly formed businesses.

Prevention

Proactively reducing identified risks

Planning in the area of prevention involves proactively implementing evidence-based situational measures, policies or programs to reduce locally-identified priority risks to community safety and well-being before they result in crime, victimization and/or harm. In this area, community members who are not specialists in "safety and well-being" may have to be enlisted depending on the priority risk, such as business owners, if the risk is retail theft, and property managers, if the risk is occurring in their building. Service providers, community agencies and organizations will need to share data and information about things like community assets, crime and disorder trends, vulnerable people and places, to identify priority risks within the community in order to plan and respond most effectively. Successful planning in this area may indicate whether people are participating more in risk-based programs, are feeling safe and less fearful, and that greater engagement makes people more confident in their own abilities to prevent harm. While planning in this area is important, municipalities, First Nations and their partners should be focusing their efforts on developing and/or enhancing strategies in the social development area to ensure that risks are mitigated before they become a priority that needs to be addressed through prevention.

Based on an identified priority risk within their community, Kenora has implemented Stop Now And Plan, which teaches children and their parents emotional regulation, self-control and problem-solving skills. Partners involved in this initiative include a local mental health agency, two school boards and the police. Additional information on this program, and others that could be used as strategies in the prevention area of the plan (e.g., Caring Dads and Triple P – Positive Parenting Program), can be found in the *Snapshot of Local Voices* booklet.

Risk Intervention Mitigating situations of elevated risk

Planning in the risk intervention area involves multiple sectors working together to address situations where there is an elevated risk of harm - stopping something bad from happening, right before it is about to happen. Risk intervention is intended to be immediate and prevent an incident, whether it is a crime, victimization or harm, from occurring, while reducing the need for, and systemic reliance on, incident response. Collaboration and information sharing between agencies on things such as types of risk has been shown to create partnerships and allow for collective analysis of risk-based data, which can inform strategies in the prevention and social development areas. To determine the success of strategies in this area, performance metrics collected may demonstrate increased access to and confidence in social supports, decreased victimization rates and the number of emergency room visits. Municipalities, First Nations and their partners should be focusing their efforts on developing and/or enhancing strategies in the prevention area to ensure that individuals do not reach the point of requiring an immediate risk intervention.

Chatham-Kent has developed a Collaborative, Risk-Identified Situation Intervention Strategy, involving an agreement between local service providers to support a coordinated system of risk identification, assessment and customized interventions. Service providers bring situations of acutely elevated risk to a dedicated coordinator who facilitates a discussion between two or three agencies that are in a position to develop an intervention. The *Snapshot of Local Voices* booklet includes information on other risk intervention strategies like Situation Tables and threat management/awareness services in schools.

Incident Response

Critical and non-critical incident response

This area represents what is traditionally thought of when referring to crime and safety. It includes immediate and reactionary responses that may involve a sense of urgency like police, fire, emergency medical services, a child welfare organization taking a child out of their home, a person being apprehended under the *Mental Health Act*, or a school principal expelling a student. Many communities invest a significant amount of resources into incident response, and although it is important and necessary, it is reactive, and in some instances, enforcement-dominated. Planning should also be done in this area to better collaborate and share relevant information, such as types of occurrences and victimization, to ensure the most appropriate service provider is responding. Initiatives in this area alone cannot be relied upon to increase community safety and well-being.

Mental Health Crisis Intervention Teams provide an integrated, community-based response to individuals experiencing mental health and/or addictions issues. They aim to reduce the amount of time police officers spend dealing with calls that would be better handled by a trained mental health specialist, and divert individuals experiencing a mental health crisis from emergency rooms and the criminal justice system. Additional information on a local adaptation of these teams, the Community Outreach and Support Team, can be found in the *Snapshot of Local Voices* booklet.

Refocusing on Collaboration, Information Sharing and Performance Measurement

In order for local plans to be successful in making communities safer and healthier, municipalities, First Nations and their partners need to refocus existing efforts and resources in a more strategic and impactful way to enhance collaboration, information sharing and performance measurement. This can be done by identifying the sectors, agencies and organizations that need to be involved, the information and data required, and outcomes to measure the impacts of the plan. Different forms of collaboration, information sharing and performance measurement will be required in each of the planning areas (i.e., social development, prevention, risk intervention and incident response). Those involved in the plan should be thinking continuously about how their respective organizational strategic planning and budgeting activities could further support strategies in the plan.

Conclusion

Planning should occur in all four areas, however, the majority of investments, time and resources should be spent on developing and/or enhancing social development, prevention and risk intervention strategies to reduce the number of individuals, families and communities that reach the point of requiring an incident response. Developing strategies that are preventative as opposed to reactive will ensure efficiency,

effectiveness and sustainability of safety and well-being service delivery across Ontario. It is also important to explore more efficient and effective ways of delivering services, including front-line incident response, to ensure those in crisis are receiving the proper supports from the most appropriate service provider. Keeping in mind the focus on the community safety and well-being planning framework, the next section will highlight critical success factors for planning.

Section 3 – Critical Success Factors

The community safety and well-being planning framework is intended to get municipalities, First Nations and their partners thinking in new ways about local issues and potential solutions by exploring options to address

risks through social development, prevention and risk intervention. While this may spark interest in beginning a local collaborative planning process, there are several factors that will be critical to the successful development and implementation of a plan.

The following critical success factors should be taken into consideration when developing a plan:

- Strength-Based;
- Risk-Focused;
- Awareness and Understanding;
- Highest Level Commitment;
- Effective Partnerships;
- Evidence and Evaluation; and
- Cultural Responsiveness.

Cultural Risk-Focused Risk-Focused Risk-Focused Awareness & Understanding Evaluation Evaluation

Strength-Based

Community safety and well-being planning is not about reinventing the wheel — it's about recognizing the great work already happening within individual agencies and organizations, and using collaboration to do more with local experience and expertise. Ontario communities are full of hard-working, knowledgeable and committed individuals who want to make their communities safe and healthy places, and it is important to leverage these individuals when developing a plan. Helpful information and guidance may also be found by talking to other communities in order to build on their successes and lessons learned.

"Community safety and well-being touches every resident and is important to all aspects of our community - from education to health to economic development. It is an area of community planning in which many community members are greatly interested and excited to be involved." - Lianne Sauter, Town of Bancroft

Risk-Focused

Community safety and well-being planning is based on an idea that has been a focus of the health sector for many years – it is far more effective, efficient and beneficial to an individual's quality of life to prevent something bad from happening rather than trying to find a "cure" after the fact. For that reason, local plans should focus on risks, not incidents, and should target the circumstances, people and places that are most

vulnerable to risk. As a long-term prevention strategy, it is more effective to focus on *why* something is happening (i.e., a student has undiagnosed Attention Deficit Disorder and challenges in the home) than on *what* is happening (e.g., a student is caught skipping school). Risks should be identified using the experiences, information and data of community members and partners to highlight the issues that are most significant and prevalent in the community. For example, many communities are engaging a wide range of local agencies and organizations to discuss which risks they come across most often, and are compiling available data to do additional analysis of trends and patterns of risk to focus on in their plan.

Awareness and Understanding

Community safety and well-being planning requires that each community member understands their role in making the community a safe and healthy place to live. It is important to engage individuals, groups, agencies, organizations and elected officials to work collaboratively and promote awareness and understanding of the purpose and benefits of a strategic, long-term plan to address community risks. For example, it may be more helpful to speak about outcomes related to improved quality of life in the community – like stronger families and neighbourhoods – rather than reduced crime. This is not just about preventing crime. This is about addressing the risks that lead individuals to crime, and taking a hard look at the social issues and inequalities that create risk in the first place. Potential partners will likely need to understand what they are getting into – and why – before they fully commit time and resources.

"I think it is important to change the conversation early on in the process. A social development approach to community safety and well-being is a marathon rather than a sprint." - Susan Evenden, City of Brantford

Highest Level Commitment

As the municipality has the authority, resources, breadth of services and contact with the public to address risk factors and to facilitate community partnerships, Ontario communities confirmed that municipalities are best placed to lead the community safety and well-being planning process. In First Nations communities, obtaining buy-in from the Chief and Band Council will provide a strong voice in supporting community safety and well-being planning. This type of planning is a community-wide initiative that requires dedication and input from a wide range of sectors, agencies, organizations and groups. To ensure that all the right players are at the table, it is critical to get commitment from local political leadership, heads of agencies and organizations, as well as other key decision-makers who can champion the cause and ensure that their staff and resources are available to support the planning process.

Effective Partnerships

No single individual, agency or organization can fully own the planning exercise — a plan will only be as effective as the partnerships and multi-sector collaboration that exist among those developing and implementing the plan. Due to the complex nature of many of the issues that impact the safety and well-being of individuals, families and communities, including poverty, mental health issues, addictions, and domestic violence, a wide range of agencies, organizations and services need to be involved to create comprehensive, sustainable solutions. This may begin through **communication** between service providers, where information is exchanged to support meaningful relationships while maintaining separate objectives and programs. **Cooperation** between agencies and organizations is mutually beneficial because it means that they provide assistance to each other on respective activities. **Coordination** takes partnerships a step further

through joint planning and organization of activities and achievement of mutual objectives. **Collaboration** is when individuals, agencies or organizations are willing to compromise and work together in the interest of mutual gains or outcomes. Working in this way will be critical to the development of an effective, multi-sector plan. Many municipalities, First Nations and their partners that are developing local plans have found that having a dedicated coordinator is very helpful in supporting and facilitating collaboration among all the different partners involved in the development of the plan. As partners work together and find new and more effective ways of tackling common challenges, they may begin to operate in **convergence**, which involves the restructuring of services, programs, budgets, objectives and/or staff.

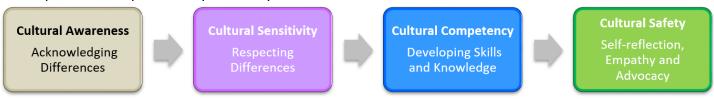
In Sault Ste. Marie, a local multi-agency service delivery model focuses on providing vital services and programs under one roof, and acts as a support to a specific neighbourhood through the Neighbourhood Resource Centre – a collaborative effort of 32 local agencies and groups.

Evidence and Evaluation

Before a plan can be developed, it will be important to gather information and evidence to paint a clear picture of what is happening in the community to support the identification of local priority risks. Some communities have already started to gather and analyze data from various sources, including Statistics Canada, police and crime data, as well as data on employment levels, educational attainment rates, social services and health care information. If gaps in service or programming are found in locally-identified areas of risk, research should be done to determine the most appropriate evidence-based response to be put into place. On the other hand, communities that already have evidenced-based strategies in place that directly respond to a local priority risk identified in their plan should review each strategy to ensure outcome measures are established and that they are showing a positive impact. Depending on these results, enhancing or expanding these strategies should be considered. Once a completed plan is implemented, data and information will be equally critical in order to evaluate how effective it has been in addressing the priority risks and creating positive changes in the community. The same data and information sources that indicated from the beginning that housing and homelessness, for example, was a priority risk in the community, should be revisited and reviewed to determine whether that risk has been reduced. Sharing evidence that the plan is creating better outcomes for community members will help to build trust and support for the implementing partner agencies and organizations, the planning process, and the plan itself.

Cultural Responsiveness

Cultural responsiveness is the ability to effectively interact with, and respond to, the needs of diverse groups of people in the community. Being culturally responsive is a process that begins with having an awareness and knowledge of different cultures and practices, as well as one's own cultural worldview. It involves being open to, and respectful of, cultural differences and developing skills and knowledge to build effective cross-cultural relationships. It also includes developing strategies and programs that consider social and historical contexts, systemic and interpersonal power imbalances, acknowledge the needs and worldviews of different groups, and respond to the specific inequities they face.



As part of the planning process, community safety and well-being plans should take into consideration, at a minimum, the following elements of diversity, as well as how these elements intersect and shape the experiences of individuals/groups (e.g., increasing risks to harm, victimization and crime):

- Ethnicity (e.g., racialized communities, Indigenous communities);
- Gender identity and sexual orientation (e.g., lesbian, gay, bisexual, transgender, transsexual, 2 spirited, intersex, queer and questioning);
- Religion;
- Socioeconomic status;
- Education;
- Age (e.g., seniors, youth);
- Living with a disability;
- Citizenship status (e.g., newcomers, immigrants, refugees); and/or
- Regional location (e.g., living in northern, rural, remote areas).

Communities should tailor programs and strategies to the unique needs and strengths of different groups, as well as to address the distinct risk factors they face. Planners should strive towards inclusion in their communities by proactively removing barriers to participation and engaging diverse groups in meaningful ways.

See Appendix B for Engaging Youth, Appendix C for Engaging Seniors, and Appendix D for Engaging Indigenous Partners.

Conclusion

Municipalities, First Nations and their partners should be considering the critical success factors throughout the process of developing, implementing, reviewing, evaluating and updating the plan. The next section will connect the community safety and well-being planning framework and critical success factors to practical advice and guidance when undergoing this planning process.

Section 4 – Connecting the Framework to Practice

This section is meant to connect the community safety and well-being planning framework and critical success factors of community safety and well-being planning with the operational practice of developing, implementing, reviewing, evaluating and updating the plan. There is no right or wrong first or last step. Communities have suggested that it can take anywhere between one to two years to develop a plan, and those with the municipality or Band Council in a lead role made the most headway. To provide additional operational support and resources, Section 6 includes a toolkit of guidance documents that builds on the following concepts and identifies specific tools in each area for consideration:

- Obtaining Collaborative Commitment;
- Creating Buy-In;
- Focusing on Risk;
- Assessing and Leveraging Community Strengths;
- · Evidence and Evaluation; and
- Putting the Plan into Action.

Obtaining Collaborative Commitment

Demonstrated commitment from local governance, whether it is the municipality or Band Council, can have a significant impact on multi-sector buy-in, and is most effective if completed at the beginning of the planning process. This type of commitment can be demonstrated in various ways — through a council resolution, attending meetings, creating a coordinator position, realigning resources and/or creating awareness among staff. Collaboration exists in communities across Ontario, whether it is through strong bilateral partnerships or among multiple partners. The community safety and well-being planning process requires drawing on existing partnerships as well as creating new ones. This may involve leveraging an existing body, or creating a new structure to develop, refine or reaffirm outcomes, strategies and measures in social development, prevention, risk intervention and incident response. Commitment from multiple sectors will usually occur once they have an understanding of what community safety and well-being planning is meant to achieve and its benefits. Commitment may be solidified through agreeing upon goals, objectives, performance measurement and roles and responsibilities.

See Tool 1 for guidance on participants, roles and responsibilities, Tool 2 for guidance on start-up, and Tool 3 for guidance on asset mapping.

Creating Buy-In

In order to ensure that each community member, agency and organization understands what community safety and well-being planning is, and to begin to obtain buy-in and create partnerships, municipalities, First Nations and their partners may choose to start by developing targeted communication materials. They may also wish to meet with and/or bring together service providers or community members and take the time to explain the community safety and well-being planning framework and important concepts and/or get their feedback on local risks. Designing a visual identity and creating marketing and/or promotional material may also help to obtain multi-sectoral buy-in and allow community members to identify with the plan.

See Tool 4 for guidance on engagement.

Focusing on Risk

Engaging community members and service providers to document risks is the first step. The range of risks identified will be dependent on the sources of information, so it is important to engage through various methods, such as one-on-one interviews with multi-sectoral service providers, focus sessions with vulnerable groups, and/or surveys with public drop boxes. Risk identification and prioritization is the next task that should be done by looking at various sources of data and combining it with feedback from the community.

See Tool 4 for guidance on engagement and Tool 5 for analyzing community risks.

Assessing and Leveraging Community Strengths

Achieving a community that is safe and well is a journey; before partners involved in the development of a plan can map out where they want to go, and how they will get there, they need to have a clear understanding of their starting point. It is important that community members do not see community safety and well-being planning as just another planning exercise or creation of a body. It is about identifying local priority risks and examining current strategies through a holistic lens to determine if the right sectors, agencies and organizations are involved or if there are overlaps or gaps in service or programming. Some communities may find there is a lack of coordination of existing strategies. To address this they should look at existing bodies and strategies and see how they can support the development and implementation of the plan. Other communities may discover that there are gaps in service delivery, and should do their best to fill these gaps through, for example, the realignment of existing resources. As every community is different in terms of need and resources, it is recognized that some communities, such as some First Nations communities, may experience difficulties identifying existing strategies due to a lack of resources. It may be of value for some communities to collaborate with neighbouring municipalities and/or First Nations communities to create joint community safety and well-being plans. For example, where capacity and resources are limited, or many services are delivered across jurisdictions, communities can leverage the assets and strengths of neighbouring communities to create a joint plan that will address the needs of the area.

See Tool 3 for guidance on asset mapping.

Evidence and Evaluation

Once risks are prioritized, if gaps in service or programming are found in any or all areas of the plan, research should be done to determine the most appropriate evidence-based response to be put into place to address that risk, while considering local capacity and resources. Some may find after risk prioritization that they already have evidence-based strategies in place that directly respond to identified risks that will be addressed in their plan. At the planning stage, it is important to identify the intended outcomes of those activities in order to measure performance and progress towards addressing identified risks through the development of a logic model and performance measurement framework. Some outcomes will be evident immediately after activities are implemented and some will take more time to achieve. Whether planning for promoting and maintaining community safety and well-being through social development, working to reduce identified risks, or mitigating elevated risk situations or incident responses, it is equally important for planning partners to set and measure their efforts against predetermined outcomes.

See Tool 6 for guidance on performance measurement.

Putting the Plan into Action

It is important to ensure that strategies put into place in each area of the plan for each priority are achievable based on local capacity and resources. To achieve success, the right individuals, agencies and organizations need to be involved, outcomes benchmarked, and responsibilities for measurement identified. Developing an implementation plan will help municipalities, First Nations and their partners stay organized by outlining who is doing what and when, in each planning area, who is reporting to whom, and the timing of progress and final reports. The date of the next safety and well-being planning cycle should align with the other relevant planning cycles (e.g., municipal cycle) and budgeting activities to ensure alignment of partner resources and strategies. Once the plan is documented and agreed upon by multi-sector partners, it is then time to put it into action with regular monitoring, evaluation and updates to achieve community safety and well-being.

See Appendix G for a sample plan.

Conclusion

Municipalities, First Nations and their partners should consider these steps when planning for community safety and well-being. The most important considerations to remember when planning is that the framework is understood, the critical success factors exist in whole or in part, and that the plan responds to local needs in a systemic and holistic way.

Section 5 – Ontario's Way Forward

Overall, this booklet responds to the most common challenge articulated by communities across the province – the need to change the way we look at service delivery in all sectors moving forward so that Ontarians can get the services they need, when they need them. To ensure that community safety and well-being planning achieves its intended outcomes, champions will need to continue to lead the way forward to address the root causes of crime and social disorder and increase community safety and well-being now and into the future.

This booklet strongly encourages municipalities, First Nations and their partners to undertake an ongoing holistic, proactive, collaborative planning process to address local needs in new and innovative ways. Developing local plans with multi-sectoral, risk-based strategies in social development, prevention and risk intervention will ensure that risk factors associated with crime and victimization are addressed from every angle. In the longer term, information and data gathered through the planning process will provide an opportunity for multi-sector partners at the local and provincial levels to evaluate and improve the underlying structures and systems through which services are delivered.

The ministry will continue to support Ontarians as they undertake community safety and well-being planning, implementation and evaluation, in collaboration with community, policing and inter-ministerial partners. To further support this shift at the provincial level, the ministry will be looking at smarter and better ways to do things in order to deliver services in a proactive, targeted manner. This will be done through the use of evidence and experience to improve outcomes, and continuing well-established partnerships that include police, education, health and social services, among others, to make Ontario communities safer and healthier.

Section 6 – Toolkit for Community Safety and Well-Being Planning

The ministry has prepared a toolkit to assist municipalities, First Nations and their partners in developing, implementing, reviewing, evaluating and updating a local plan. These tools have been tested by Ontario communities and include valuable feedback from local practitioners across the province. Overall learnings from these communities have been incorporated into the toolkit, including the processes undertaken to develop local plans.

The following toolkit includes:

- Tool 1 Participants, Roles and Responsibilities
- Tool 2 Start-Up
- Tool 3 Asset Mapping
- Tool 4 Engagement
- Tool 5 Analyzing Community Risks
- Tool 6 Performance Measurement
- Appendix A Information Sharing
- Appendix B Engaging Youth
- Appendix C Engaging Seniors
- Appendix D Engaging Indigenous Partners
- Appendix E Definitions
- Appendix F Risk and Protective Factors
- Appendix G Community Safety and Well-Being Plan Sample

In addition, as part of the Provincial Approach to Community Safety and Well-Being, the ministry has developed other resources that are available to municipalities, First Nations and their partners to support local community safety and well-being planning. These include:

- Crime Prevention in Ontario: A Framework for Action
- Community Safety and Well-Being in Ontario: A Snapshot of Local Voices

Tool 1 - Participants, Roles and Responsibilities

The Champion and Coordinator(s)

Each community will approach community safety and well-being planning from a different perspective and starting point that is specific to their unique needs, resources and circumstances. Some communities may have champions and others may need to engage them to educate the public and serve as a face for the plan. In municipalities, the community safety and well-being planning process should be led by a clearly identifiable coordinator(s) that is from the municipality. In First Nations communities, the coordinator(s) may be from the Band Council or a relevant agency/organization.

Role of Champion(s)

Champions are public figures who express their commitment to community safety and well-being planning and rally support from the public and community agencies/organizations. It should be an individual or group who has the ability to motivate and mobilize others to participate, often because of their level of authority, responsibility or influence in the community. The more champions the better. In many communities this will be the mayor and council, or Chief and Band Council in a First Nations community.

A champion may also be a:

- Community Health Director;
- Local elected councillor at the neighbourhood level;
- Chief Medical Officer of Health;
- Municipal housing authority at the residential/building level; or
- School board at the school level.

Role of the Coordinator(s)

The coordinator(s) should be from an area that has knowledge of or authority over community safety and well-being, such as social services. As the coordinator(s) is responsible for the coordination/management of the plan, this should be someone who has working relationships with community members and agencies/organizations and is passionate about the community safety and well-being planning process.

Key Tasks of the Coordinator(s)

• The key tasks include recruiting the appropriate agencies/organizations and individuals to become members of an advisory committee. This should include multi-sectoral representation and people with knowledge and experience in responding to the needs of community members.

"The City of Brantford is best positioned in terms of resources, breadth of services and contact with the public to both address risk factors and to facilitate community partnerships. Specifically, the City can access a wide range of social services, housing, child care, parks and recreation and planning staff to come together to create frameworks that support community safety." - Aaron Wallace, City of Brantford

Responsibilities of the Coordinator(s)

- Planning and coordinating advisory committee meetings.
- Participating on the advisory committee.
- Planning community engagement sessions.
- Ensuring the advisory committee decisions are acted upon.
- Preparing documents for the advisory committee (e.g., terms of reference, logic model(s), the plan).
- Receiving and responding to requests for information about the plan.
- Ensuring the plan is made publicly available.

See Appendix F for risk and protective factors, Tool 6 for guidance on performance measurement and Appendix G for a sample plan.

Advisory Committee

The advisory committee should be reflective of the community and include multi-sectoral representation. For example, a small community with fewer services may have seven members, and a larger community with a wide range of services may have 15 members. It may involve the creation of a new body or the utilization of an existing body. To ensure the commitment of the members of the advisory committee, a document should be developed and signed that outlines agreed upon principles, shared goals, roles and resources (e.g., terms of reference).

Members of the Advisory Committee

- Member agencies/organizations and community members recruited to the advisory committee should be reflective of the diverse make-up of the community and should have:
 - Knowledge/information about the risks and vulnerable populations in the community;
 - Lived experience with risk factors or part of a vulnerable group in the community;
 - Understanding of protective factors needed to address those risks;
 - Experience developing effective partnerships in the community;
 - Experience with ensuring equity, inclusion and accessibility in their initiatives; and
 - A proven track record advocating for the interests of vulnerable populations.
- Individual members will ideally have the authority to make decisions on behalf of their respective
 agencies/organizations regarding resources and priorities, or will be empowered to do so for the purposes
 of developing the plan.
- Advisory committees should, at a minimum, consist of the following representation:
 - An employee of the municipality or First Nations community;
 - A person who represents the education sector;
 - A person who represents the health/mental health sector;
 - A person who represents the community/social services sector;
 - A person who represents the children/youth services sector;
 - A person who represents an entity that provides custodial services to children/youth;
 - o A person who represents the police service board or a Detachment Commander.

See Tool 2 for guidance on start-up and Tool 3 for guidance on asset mapping.

Responsibilities of the Advisory Committee

- Leading community engagement sessions to inform the development of the plan.
- Determining the priorities of the plan, including references to risk factors, vulnerable populations and protective factors.
- Ensuring outcomes are established and responsibilities for measurement are in place and approving performance measures by which the plan will be evaluated, as well as the schedule and processes used to implement them.
- Ensuring each section/activity under the plan, for each priority risk, is achievable.
- Ensuring the right agencies/organizations and participants are designated for each activity.
- Owning, evaluating and monitoring the plan.
- Aligning implementation and evaluation of the plan with the municipal planning cycle and other relevant sector specific planning and budgeting activities to ensure alignment of partner resources and strategies.
- Setting a future date for reviewing achievements and developing the next version of the plan.
- Thinking about ways in which the underlying structures and systems currently in place can be improved to better enable service delivery.

See Tool 4 for guidance on engagement and Tool 5 for analyzing community risks.

Key Tasks of the Advisory Committee

- Developing and undertaking a broad community engagement strategy to build on the members' awareness of local risks, vulnerable groups and protective factors.
- Developing and maintaining a dynamic data set, and ensuring its ongoing accuracy as new sources of information become available.
- Determining the priority risk(s) that the plan will focus on based on available data, evidence, community engagement feedback and capacity.
 - After priority risks have been identified, all actions going forward should be designed to reduce these
 risks, or at least protect the vulnerable groups from the risks.
- Based on community capacity, developing an implementation plan or selecting, recruiting and instructing a small number of key individuals to do so to address the selected priority risk(s) identified in the plan.

Implementation Teams

For each priority risk determined by the advisory committee, if possible and appropriate, an implementation team should be created or leveraged to implement strategies (e.g., programs or services) to reduce the risk. The need for implementation team(s) will depend on the size and capacity of the community and the risks identified. For example, a small community that has identified two priority risks that can be effectively addressed by the advisory committee may not require implementation teams. On the other hand, a large community with six priority risks may benefit from implementation teams to ensure each risk is addressed. They may also establish fewer teams that focus on more than one priority risk. If planning partners determine it is appropriate for them to have a new implementation team to ensure the commitment, a document should be developed and signed that outlines agreed upon principles, shared goals and roles.

"It's important to ensure that committee members want to be there and have a strong understanding of safety and well-being planning." - Dana Boldt, Rama Police Service

Members of Implementation Teams

Members of the implementation team(s) should be selected based on their knowledge of the risk factors and vulnerable groups associated with the priority, and have access to relevant information and data. They may also have lived experience with risk factors or be part of a vulnerable group in the community. Members of implementation teams should have:

- In-depth knowledge and experience in addressing the priority risks and which protective factors and strategies are needed to address those risks.
- A proven track record advocating for the interests of vulnerable populations related to the risk.
- The ability to identify the intended outcomes or benefits that strategies will have in relation to the priority risk(s) and suggest data that could be used to measure achievement of these outcomes.
- Experience developing effective stakeholder relations/ partnerships in the community.
- Experience ensuring equity, inclusion and accessibility in their initiatives.

See Tool 6 for guidance on performance measurement and Appendix G for a sample plan.

Responsibilities and Tasks of Implementation Teams

- Identify strategies, establish outcomes and performance measures for all four planning areas related to the priority risk, including promoting and maintaining community safety and well-being, reducing identified risks, mitigating elevated risk situations and immediate response to urgent incidents.
- Engage community members from the vulnerable populations relevant to the priority risk to inform the development of the strategies in each area.
- Establish an implementation plan for the strategies in each area which clearly identifies roles, responsibilities, timelines, reporting relationships and requirements.
- Monitor the actions identified in the implementation plan, whether it is the creation, expansion and/or coordination of programs, training, services, campaigns, etc.
- Report back to the advisory committee.

Tool 2 - Start-Up

Once partners involved in community safety and well-being planning have established an advisory committee or implementation team(s), they should document important information pertaining to each group, including background/context, goals/purpose, objectives and performance measures, membership, and roles and responsibilities. Making sure that everyone knows what they are trying to achieve will help the group(s) stay on track and identify successes of the plan.

For many planning partners, this will be done using a terms of reference. The following was created to guide the development of this type of document. Some planning partners may decide to develop a terms of reference for their advisory committee and each implementation team, while others may decide to develop one that includes information on each group; this will depend on a variety of factors such as the community's size, their number of risk factors and implementation team(s).

Background and Context

When developing a terms of reference, planning partners may wish to begin by providing the necessary background information, including how they have reached the point of developing an advisory committee or implementation team, and briefly describing the context within which they will operate. This should be brief, but include enough detail so that any new member will have the necessary information to understand the project's context.

Goals and Purpose

Planning partners may then wish to identify:

- the need for their advisory committee or implementation team (i.e., why the group was created and how its work will address an identified need); and
- the goal(s) of their group/project. A goal is a big-picture statement, about what planning partners want to achieve through their work it is the change they want to make within the timeframe of their project.

Objectives and Performance Measures

If the planning partners' goal is **what** they plan to achieve through their work, then their objectives are **how** they will get there – the specific activities/tasks that must be performed to achieve each goal. It is important to ensure that goals and objectives are **S**pecific, **M**easurable, **A**chievable, **R**esults-focused and **T**ime-bound (SMART) so that partners will know exactly what information to look at to tell if they have achieved them. Information and data that help planning partners monitor and evaluate the achievement of goals and objectives are called performance measures or performance indicators. See Section 5 of the toolkit for more information and guidance on performance measures.

For each goal identified, planning partners may list specific objectives/deliverables that will signify achievement of the goal when finished. For each objective/deliverable, they may list the measures that will be used to evaluate the success of the results achieved. To help planning partners stay organized, they may wish to create a chart such as the one below, which includes example goals/objectives and performance measures.

These may look different for the advisory committee and implementation team(s). For example, the goals/objectives of the advisory committee may relate to the development of the plan, where the goals/objectives of an implementation team may be related to reducing a specific risk identified in the plan through the expansion of an existing program. Planning partners should develop their own goals/objectives and performance measures depending on need, resources and capacity.

Goal/Objectives	Performance Measures
Goal: To engage a diverse range of	Number of engagement sessions held
stakeholders in the development and	Number of different sectors engaged
implementation of the plan	Number of community members and organizations that see their
	role in community safety and well-being planning
Objective: Develop a community	Knowledge of what community safety and well-being planning
engagement/communications	means and association with the plan brand
strategy	
Goal: To reduce youth homelessness	Number of youth accessing emergency shelters
	Number of youth without a home address
Objective: To help youth without a	Number of youth living/sleeping on the streets
home address find stable housing	Number of youth living in community housing
Goal: Increased educational	Number of youth dropping out of high-school
attainment rates	Number of youth graduating high-school
	Number of youth enrolling in post-secondary education
Objective: To prevent youth from	Number of youth graduating from post-secondary education
leaving school and encourage higher	Number of education sessions held for post-secondary institutions
education	Number of youth meeting with academic advisors

Membership

Planning partners' terms of reference should also identify the champion and coordinator(s) of their plan and members of the advisory committee or implementation team(s) by listing the names and agencies/organizations of each member in a chart (see example below). This will help to identify if there are any sectors or agencies/organizations missing and ensure each member is clear about what their involvement entails.

Notes:

- The champion is a public figure who expresses their commitment to developing and implementing a plan and rallies support from the public and community agencies/organizations. The coordinator(s), from the municipality or Band Council, should be responsible for the coordination/management of the plan and should be someone who has working relationships with community members and agencies/organizations and is passionate about the community safety and well-being planning process.
- Member agencies and organizations recruited to the advisory committee should have knowledge of and supporting data about the risks and vulnerable populations in the area to be covered under the plan, as well as have established stakeholder relations. Members must have the authority to make decisions on behalf of their respective agencies/organizations regarding resources and priorities, or will be empowered to do so for the purposes of developing the plan.
- Members of the implementation team(s) should be selected based on their knowledge about the risk factors and vulnerable groups associated with the priority, have access to more information about them,

have established stakeholder relations with the vulnerable groups to effectively carry out the project, experience with developing and implementing local strategies, and have the specialized knowledge and technical capacities to specify objectives, set benchmarks and measure outcomes.

• It is important to include community leaders/organizations that advocate for the interests of the vulnerable populations on both the advisory committee and implementation teams. It is also important to ensure representation from diverse communities and equity, inclusion and accessibility in the planning and implementation of initiatives.

Name	Organization	Role
Mayor John B.	City of X	Champion – advocates for the plan through
		public speaking engagements, etc.
Jane D.	City of X	Coordinator – coordinates meetings, assists in
		planning community engagement sessions,
		records meeting minutes, etc.
Shannon T.	Public Health Centre	Member – attends meetings, identifies
		potential opportunities for collaboration with
		organizations activities, etc.

Roles and Responsibilities

It will also be important for planning partners to define the specific functions of their advisory committee or implementation team(s) to ensure that its members understand what they are trying to achieve and ultimately what they are responsible for.

See pages 22 for examples of advisory committee responsibilities and page 23 for examples of implementation team responsibilities.

Logistics and Process

Planning partners should also document logistics for their advisory committee or implementation team(s) so that its members know how much of their time they are required to commit to the group and are able to plan in advance so they can attend meetings as required. This may include:

- membership (e.g., identifying and recruiting key stakeholders);
- frequency of meetings;
- quorum (how many members must be present to make and approve decisions);
- meeting location;
- agenda and materials;
- meeting minutes; and
- expectations of members.

Support and Sign-Off

Finally, after all members of the advisory committee or implementation team(s) agree to the information outlined above, in order to solidify their acceptance and commitment, each member should sign the terms of reference.

Tool 3 – Asset Mapping

Achieving community safety and well-being is a journey; before partners involved in the development of a plan can map out where they want to go, and how they will get there, they need to have a clear understanding of their starting point. Early in the planning process, they may wish to engage in asset mapping to help to:

- identify where there is already work underway in the community to address a specific issue and to avoid duplication;
- identify existing strengths and resources;
- determine where there may be gaps in services or required resources; and
- capture opportunities.

Mapping community assets involves reviewing existing bodies (i.e., groups/committees/ boards), analyzing social networks, and/or creating an inventory of strategies. This will help to ensure that planning is done as efficiently and effectively as possible.

Existing Body Inventory

When the community safety and well-being planning coordinator(s) from the municipality or Band Council is identifying members of their bodies to assist in the development and implementation of their plan, creating an inventory of existing bodies will help to determine if it is appropriate for them to take on these roles. Often there is repetition of the individuals who sit on committees, groups, boards, etc., and utilizing a body that already exists may reduce duplicative efforts and ultimately result in time savings.

Mapping existing bodies is also beneficial in order to make connections between a community's plan and work already being done, revealing potential opportunities for further collaboration. The chart below outlines an example of how bodies may be mapped:

Existing Body	Purpose/Mandate	Members	Connection to Plan	Opportunities for Collaboration
Youth Homelessness Steering Committee	To address youth homelessness by increasing employment opportunities for youth and reducing waitlists for affordable housing	Municipality School Board Mental Health Agency Child Welfare Organization Employment Agency	Unemployment is a priority risk factor within the community that the plan will focus on addressing	A representative from the municipality sits on this committee as well as the advisory committee and will update on progress made
Mental Health Task Force	To ensure community members that are experiencing mental health issues are receiving the proper supports	Band Council Hospital Drop-in Health Clinic Mental Health Agency Child Welfare Organization Homeless Shelter	Mental health is a priority risk factor within the community that the plan will focus on addressing	This group will be used as an implementation team to develop and enhance strategies to address mental health in social development and prevention

Social Network Mapping

Social network mapping is used to capture and analyze relationships between agencies/organizations within the community to determine how frequently multi-sectoral partners are working together and sharing information, and to assess the level of integration of their work. This information may be collected through surveys and/or interviews with community agencies/organizations by asking questions such as: What agencies/organizations do you speak to most frequently to conduct your work? Do you share information? If yes, what types of information do you share? Do you deliver programs or services jointly? Do you depend on them for anything?

Relationships may be assessed on a continuum such as this:

Relationship	Description	Example
No relationship	No relationship of any kind	All sectors, agencies/organizations are working independently in silos
Communication	Exchanging information to maintain meaningful relationships, but individual programs, services or causes are separate	A school and hospital working together and sharing information only when it is required
Cooperation	Providing assistance to one another with respective activities	The police visiting a school as part of their annual career day
Coordination	Joint planning and organization of schedules, activities, goals and objectives	Community HUBs across Ontario – Various agencies housed under one structure to enhance service accessibility, with minimal interaction or information shared between services
Collaboration	Agencies/organizations, individuals or groups are willing to compromise and work together in the interest of mutual gains or outcomes	Situation Tables across Ontario – Representatives from multiple agencies/organizations meeting once or twice a week to discuss individuals facing acutely elevated risk of harm to reduce risk
Convergence	Relationships evolve from collaboration to actual restructuring of services, programs, memberships, budgets, missions, objectives and/or staff	Neighborhood Resource Center in Sault Ste. Marie – Agencies/organizations pool together resources for renting the space and each dedicate an individual from their agency to physically work in one office together to support wraparound needs

Collecting this information will allow planning partners to identify relationship gaps and opportunities. For example, through this exercise there may be one agency/organization that has consistently low levels of collaboration or convergence with others. In this case, the community safety and well-being planning coordinator(s) from the municipality or Band Council may wish to reach out to their local partners, including those represented on their advisory committee, to develop strategies for enhancing relationships with this agency/organization. If appropriate, this may involve inviting them to become involved in the advisory committee or implementation team(s).

Strategy Inventory

When deciding on strategies to address priority risks within a plan, it is important to have knowledge of strategies (e.g., programs, training, etc.) that are already being offered within the community. In some instances, a community may have several programs designed to reduce an identified risk, but there is a lack of coordination between services, resulting in a duplication of efforts. The community safety and well-being planning coordinator from the municipality or Band Council may then bring each agency/organization together to develop an approach to more efficiently deliver that strategy. Other planning partners may find that there are significant service gaps in relation to a specific area of risk, and that implementing a new strategy in order to close the gap may have a significant impact on the lives of the people experiencing that risk.

To assist with planning, it may be helpful to identify the risks addressed by each strategy, the area of the framework that the program falls under (i.e., social development, prevention, risk intervention and incident response), funding, and anticipated end dates. This will provide a sense of what strategies have limited resources and lifespans, as well as insight into which strategies may require support for sustainability.

When undertaking this exercise, planning partners may develop a template similar to this:

Strategy Name/Lead	Description	Key Risk Factors Addressed	Area of the Framework	Funding/ Source	End- Date
Stop Now and Plan (SNAP) Children's	SNAP is a gender sensitive, cognitive behavioural family-focused program that provides a framework for effectively teaching children and their parents how to	Youth impulsivity, aggression, poor self-control and	Prevention	\$100,000/ year Federal Grant	12/2018
Mental Health Agency	regulate emotions, exhibit self- control and use problem-solving skills.	problem solving		Grant	

Threat	Threat Management/Awareness	Negative	Risk	\$100,000/	12/2018
Management	Services aim to reduce violence,	influences in	Intervention	year	
/Awareness	manage threats of violence and	the youth's			
Services	promote individual, school and	life, sense of		Provincial	
Protocol	community safety through early	alienation		Grant	
	intervention, support and the	and cultural			
School Board	sharing of information. It promotes	norms			
	the immediate sharing of	supporting			
	information about a child or youth	violence			
	who pose a risk of violence to				
	themselves or others.				
Age-Friendly	Age Friendly Community Plan aims	Sense of	Social	\$50,000/	03/2017
Community	to create a more inclusive, safe,	alienation,	Development	year	
Plan	healthy and accessible community	person does	·		
	for residents of all ages.	not have		Provincial	
Municipal		access to		Grant	
Council		housing			

Tool 4 - Engagement

In the development of local plans, municipalities or Band Councils should conduct community engagement sessions to ensure a collaborative approach and inform the community safety and well-being planning process. Partners may want to create promotional and educational materials in order to gain public support for and encourage participation in the plan. They may want to collect information from the community to contribute to the plan (i.e., identifying and/or validating risks).

This section is intended to guide planning partners as they develop communication materials and organize community engagement; each section may be used for either purpose.

Introduction and Background

Planning partners may begin by providing the necessary background and briefly describing the context of community safety and well-being planning.

Purpose, Goals and Objectives

Planning partners may then wish to identify why communication materials are being developed and/or why the community is being engaged by asking themselves questions such as: What are the overall goals of the plan? What are the specific objectives of the communication materials and/or community engagement sessions?

Stakeholders

A plan is a community-wide initiative, so different audiences should be considered when encouraging involvement in its development/implementation. For a plan to be successful in enhancing community safety and well-being, a variety of diverse groups and sectors must be involved in the planning process.

This may include:

- community members with lived experiences and neighbourhood groups, including but not limited to
 individuals from vulnerable groups, community youth and seniors (see Appendix B for Engaging Youth and
 Appendix C for Engaging Seniors), faith groups, non-for-profit community based organizations and tenant
 associations;
- local First Nations, Métis and/or Inuit groups, on or off reserve, and urban Indigenous organizations (see Appendix D for Engaging Indigenous Partners);
- police, fire, emergency medical and other emergency services, such as sexual assault centres and shelters for abused women/children, to collect data on the occurrences they have responded to most frequently, as well as relevant locations and vulnerable groups;
- acute care agencies and organizations, including but not limited to child welfare and programs for at-risk youth, mental health, women's support, primary health care, addictions treatment, to collect information on the people they serve;
- health agencies and organizations, including but not limited to Public Health Units, Community Care Access Centres, Community Health Centres, Indigenous Health Access Centres, and Long-Term Care Homes;

- social development organizations, such as schools and school boards, social services, youth drop-in centres, parental support services, community support service agencies and Elderly Persons Centres, to collect information on the people they serve;
- cultural organizations serving new Canadians and/or ethnic minorities, including Francophone organizations; and
- private sector, including but not limited to bankers, realtors, insurers, service organizations, employers, local business improvement areas, local business leaders and owners, to collect information about the local economy.

"Develop an engagement strategy that is manageable and achievable given the resources available – you won't be able to engage every single possible partner, so focus on a good variety of community organizations, agencies and individuals and look for patterns." - Lianne Sauter, Town of Bancroft

Planning partners should consider keeping a record of the groups that they have reached through community engagement, as well as their identified concerns, to support the analysis of community risks for inclusion in their plan.

See Tool 5 for guidance on analyzing community risks.

Approach

In order to gain support and promote involvement, planning partners should think about how they can best communicate why they are developing a plan and what they want it to achieve. Some planning partners may do this through the development of specific communication tools for their plan. For example, one community that tested the framework and toolkit created a name and logo for the work undertaken as part of their plan – Safe Brantford – and put this on their community surveys, etc. This allows community members to recognize work being done under the plan and may encourage them to become involved.

Additionally, when planning for community engagement, partners involved in the plan should think about the different people, groups or agencies/organizations they plan to engage with, and the best way to engage them. They should ask themselves questions such as: what information do I want to get across or get from the community and what method of communication or community engagement would help me do this most effectively? For example, planning partners could have open town hall meetings, targeted focus groups by sector, one-on-one interviews with key people or agencies/organizations, or provide an email address to reach people who may be uncomfortable or unable to communicate in other ways. They may also distribute surveys and provide drop-boxes throughout the community. It is important to consider not only what planning partners want to get from engaging with community members, stakeholders and potential partners, but also what they might be hoping to learn or get from this process. As much as possible, partners to the plan should use these considerations to tailor their communication/community engagement approach based on the people/groups they are engaging.

See Appendix B for guidance on engaging youth and Appendix C for guidance on engaging seniors.

Materials and Messaging

Based on the type of engagement undertaken, planning partners may need to develop supporting materials to share information about their work and to guide their discussions. Materials should strive to focus the discussions to achieve the intended objectives of the engagement sessions, and may include some key messages about the community's work that they want people to hear and remember. Regardless of the audience, partners to the plan should develop basic, consistent information to share with everyone to ensure they understand what is being done, why they are a part of it, and what comes next. It will be important to ensure that materials and messages are developed in a way that manages the expectations of community members – be clear about what can be achieved and what is unachievable within the timeframe and resources.

With that, planning partners should ensure that all materials and messaging are accessible to a wide range of audiences, so that everyone is able to receive or provide information in a fair manner. For additional information, please refer to the *Accessibility for Ontarians with Disabilities Act*, 2005.

Logistics

When engaging the community, it will be important to have logistics sorted out so that the individuals/groups targeted are able to attend/participate. To do this, planning partners may want to consider the following:

- scheduling (e.g., How many community engagement sessions are being held? How far apart should they be scheduled? What time of day should they be scheduled?);
- finances (e.g., Is there a cost associated with the meeting space? Will there be snacks and refreshments?);
- travel accommodations (e.g., How will individuals get to the community engagement sessions? Is it being held in an accessible location? Will hotel arrangements be required?);
- administration (e.g., consider circulating an attendance list to get names and agency/organization and contact details, assign someone to take notes on what is being said at each session); and
- accessibility issues/barriers to accessibility (e.g., information or communication barriers, technology barriers and physical barriers).

Risks and Implications

While community engagement should be a key factor of local plans, some planning partners may encounter difficulties, such as resistance from certain individuals or groups. To overcome these challenges, they should anticipate as many risks as possible, identify their implications and develop mitigation strategies to minimize the impact of each risk. This exercise should also be done when developing communication materials, including identifying potential risks to certain messaging. This may be done by using a chart such as the one below.

Risk	Implication	Mitigation Strategy
Organizations from various sectors do not see their role in community safety and wellbeing planning	Risks are not being properly addressed using a collaborative, multi-sector approach	Reach out to multi-sector organizations and develop clear communication materials so they are able to clearly see their role
Individuals experiencing risk will not attend or feel comfortable speaking about their experiences	Information collected will not reflect those with lived experience	Engage vulnerable groups through organizations that they may be involved with (e.g., senior's groups, homeless shelters, etc.)
Outspoken individuals who do not believe in planning for community safety and wellbeing in attendance	Opinions of everyone else in attendance may be negatively impacted	Assign a strong, neutral individual who holds clout and feels comfortable taking control to lead the engagement session

Community Engagement Questions

Whether planning partners are engaging individual agencies/organizations one-on-one or through town hall meetings, they should come prepared to ask questions that will allow them to effectively communicate what they want to get across or information they want to receive. Questions asked may vary depending on the audience. For example, a neighbourhood-wide town hall session might include only a few open-ended questions that initiate a broad discussion about a range of safety and well-being concerns. A more focused community engagement session with a specific organization or sector might include questions that dive deeper into a specific risk, challenges in addressing that risk, and potential strategies to be actioned through the plan to mitigate those risks.

Timelines

To ensure all required tasks are completed on time or prior to engagement, planning partners may wish to develop a work plan that clearly identifies all of the tasks that need to be completed in advance.

This may be done using a chart such as this:

Activity/Task	Lead(s)	Timelines
Prepare a presentation with discussion questions	Kate T. (municipality) and Shannon F. (public health)	Two weeks in advance of engagement session
Reach out to community organizations that work with vulnerable groups for assistance in getting them to the sessions	Fionne P. (municipality) and Emily G. (education)	Twelve weeks in advance of engagement session

Tool 5 – Analyzing Community Risks

One of the ways partners involved in planning may choose to identify or validate local risks is through town hall meetings, where agencies/organizations and community members are provided with an opportunity to talk about their experiences with risk. Others may decide to have one-on-one meetings with community agencies/organizations or focus groups to discuss risks that are most common among those they serve.

This section is intended to assist planning partners in capturing the results of their community engagement, including who was engaged, what risks were identified, and how those risks can be analyzed and prioritized. This process will be crucial as they move towards developing risk-based approaches to safety and well-being.

Summary of Community Engagement Sessions

Planning partners may begin by writing a summary of their community engagement sessions, including the time period in which they were conducted, types of outreach or communication used, successes, challenges and findings, and any other key pieces of information or lessons learned. They may then record the people, agencies/organizations and sectors that were engaged and participated in their community engagement sessions in a chart similar to the one below, in order to show the diverse perspectives that have fed into their plan, and to help assess whether there are any other groups or sectors that still need to be engaged.

Sector/Vulnerable Group	Organization/Affiliation
Health	Hospital
	Public Health Unit
	Community Care Access Centre
Education	School Board
	High School Principal
	Alternative Education Provider
Housing	Community Housing Office
	Landlords
Emergency responders	Police service/Ontario Provincial Police
	Fire Department
	Ambulance
Social services	Employment Centre
	Family/Parenting Support Services
	Community Recreation Centre
	Women's Shelters
	Local Indigenous Agencies
Mental health and addictions	Treatment/Rehabilitation Centre
	Mental Health Advocacy
	Addiction Support Group
Indigenous peoples	Band/Tribal Councils
	Local Indigenous community organizations (e.g., local Métis
	Councils)
	Local Indigenous service providers (e.g., Indigenous Friendship
	Centres)

At-risk youth	Youth from the Drop-in Centre
Seniors	Elder Abuse Response Team
	Community Support Service Agencies

Identified Risks

Planning partners will then want to capture the risks identified through their community engagement, and indicate who has identified those risks. If a risk has been identified by many different sectors and agencies/organizations, it will demonstrate how widely the community is impacted by that risk, and will also indicate the range of partners that need to be engaged to address the risk. Examples of this kind of information are included in the table below.

Risk	Identifying Sectors/Organizations/Groups
Missing school – chronic absenteeism	principal, school board, police, parents in the community
Physical violence – physical violence in the	women's shelter, police services, hospital, school, child
home	welfare agency
Housing – person does not have access to	emergency shelter, police, mental health service
appropriate housing	provider, citizens

Priority Risk Analysis

Once planning partners have compiled the risks identified through their community engagement, it is likely that some will stand out because they were referenced often and by many people, agencies/organizations. These risks should be considered for inclusion in the priority risks that will be addressed in the plan. The number of risks planning partners choose to focus on in their plan will vary between communities and will depend on the number of risks identified and their capacity to address each risk. For example, planning partners from larger communities where multiple risks have been identified may choose to have five priority risks in their plan. On the other hand, planning partners from smaller communities with multiple risks identified may choose to address three priority risks. Partners should not include more risks than they have the resources and capacity to address.

"There are some priorities that seem to affect many sectors on different levels through preliminary discussion. Data reports and community engagement sessions will assist in the overall identification of prioritized risks for initial focus within the plan." - Melissa Ceglie, City of Sault Ste. Marie

Additionally, planning partners should refer to local research to support and/or add to priority risks identified during their community engagement. This is important as in order for plans to effectively increase a community's safety and well-being, they should focus on risks that **experience and evidence** show are prevalent. When analyzing the identified risks to determine which ones will be priorities, and how they would be addressed in the plan, planning partners may wish to walk through and answer the following questions for each risk:

What is the risk?

- For example, is the risk identified the real problem, or is it a symptom of something bigger? As with
 the above example of the risk of poor school attendance, planning partners might think about what is
 causing students to miss school, and consider whether that is a bigger issue worth addressing.
- Which community members, agencies/organizations identified this risk, and how did they describe it (i.e., did different groups perceive the risk in a different way)?

What evidence is there about the risk – what is happening now?

- How is this risk impacting the community right now? What has been heard through community engagement?
- o Is there specific information or data about each risk available?
- O How serious is the risk right now? What will happen if the risk is not addressed?

What approach does the community use to address what is happening now?

- Incident response or enforcement after an occurrence;
- Rapid intervention to stop something from happening;
- o Implement activities to reduce/change the circumstances that lead to the risk; or
- o Ensure that people have the supports they need to deal with the risk if it arises.

How could all of the approaches above be used to create a comprehensive strategy to address each priority risk that:

- Ensures all community members have the information or resources they need to avoid this risk;
- Targets vulnerable people/groups that are more likely to experience this risk and provide them with support to prevent or reduce the likelihood or impact of this risk;
- Ensures all relevant service providers work together to address shared high-risk clients in a quick and coordinated way; and
- o Provides rapid responses to incidents using the most appropriate resources/agencies?
- Where will the most work need to be done to create a comprehensive strategy to address the risk? Who will be needed to help address any existing service gaps?

Risk-driven Tracking Database

Many communities have already started implementing strategies in the four planning areas of the Framework to address their local risks. In support of the planning process, the ministry initiated the Risk-driven Tracking Database to provide a standardized means of gathering de-identified information on situations of elevated risk of harm in the community.

The Risk-driven Tracking Database is one tool that can be used by communities to collect information about local priorities (i.e., risks, vulnerable groups and protective factors) and evolving trends to help inform the community safety and well-being planning process. It is recommended that this data be used in conjunction with other local data sources from various sectors.

For additional information on the Risk-driven Tracking Database, please contact SafetyPlanning@Ontario.ca.

Tool 6 - Performance Measurement

In the development stage of a plan, it is necessary to identify and understand the key risks and problems in the community and then to explore what can be done to address them.

In order to choose the best strategies and activities for the specific risk or problem at hand, partners involved in planning should seek out evidence of what works by conducting research or engaging others with experience and expertise in that area. Leverage the strengths of existing programs, services or agencies/organizations in the community and beyond to implement activities that are proven to achieve results and improve the lives of those they serve.

At the planning stage, it is also important to identify the intended outcomes of those activities in order to measure performance and progress made towards addressing identified problems. **Outcomes** are the positive impacts or changes activities are expected to make in a community. Some outcomes will be evident immediately after activities are implemented and some will take more time to achieve. Whether planning for incident response, mitigating elevated risk situations, working to reduce identified risks, or promoting and maintaining community safety and well-being through social development, it is equally important for planning partners to set and measure their efforts against predetermined outcomes.

When performance measurement focuses on outcomes, rather than completion of planned activities, it presents opportunities for ongoing learning and adaptation to proven good practice. Performance measurement can be incorporated into the planning process through a logical step-by-step approach that enables planning partners to consider all the components needed to achieve their long-term outcome, as outlined below.

- Inputs: financial, human, material and information resources dedicated to the initiative/program (e.g., grant funding, dedicated coordinator, partners, analysts, evaluators, laptop, etc.).
- Activities: actions taken or work performed through which inputs are used to create outputs (e.g., creation of an advisory committee and/or implementation team(s), development, ehancement or review of strategies in social development, prevention, risk intervention or incident response, etc.).
- Outputs: direct products or services resulting from the implementation of activities (e.g., multi-sector collaboration, clients connected to service, development of a plan, completion of a program, etc.).
- Immediate Outcomes: change that is directly attributable to activities and outputs in a short time frame. Immediate outcomes usually reflect increased awareness, skills or access for the target group (e.g., increased awareness among partners and the community about the plan and its benefits, increased protective factors as a result of a program being implemented like increased self-esteem, problem solving skills, etc.).

- Intermediate Outcomes: Change that is logically expected to occur once one or more immediate outcomes have been achieved. These outcomes will take more time to achieve and usually reflect changes in behaviour or practice of the target group (e.g., increased capacity of service providers, improved service delivery, reduction of priority risks, etc.).
- Long-term Outcome: The highest-level change that can reasonably be attributed to the initiative/program as a consequence of achievement of one or more intermediate outcomes. Usually represents the primary reason the intiative/program was created, and reflects a positive, sustainable change in the state for the target group (e.g., improved community safety and well-being among individuals, families and communities, reduced costs associated with and reliance on incident responses, etc.).

When choosing which outcomes to measure, it is important for planning partners to be realistic about what measurable impact their activities can be expected to have in the given timeframe. For example, their project goal might be to reduce the number of domestic violence incidents in the community. This would require sustainable changes in behaviour and it may take years before long-term trends show a measurable reduction. It may be easier to measure immediate to intermediate level outcomes such as increased speed of intervention in situations of high-risk for domestic violence, or increased use of support networks by victims or vulnerable groups.

A logic model should be completed during the planning phase of the plan in order to map out the above components for each identified risk or problem that will be addressed. Please see below for a logic model sample.

Following the identification of outcomes, corresponding indicators should be developed. An **indicator** is an observable, measurable piece of information about a particular outcome, which shows to what extent the outcome has been achieved. The following criteria should be considered when selecting indicators:

- relevance to the outcome that the indicator is intended to measure;
- understandability of what is being measured and reported within an organization and for partners;
- span of influence or control of activities on the indicator;
- feasibility of collecting reasonably valid data on the indicator;
- cost of collecting the indicator data;
- uniqueness of the indicator in relation to other indicators;
- objectivity of the data that will be collected on the indicator; and
- comprehensiveness of the set of indicators (per outcome) in the identification of all possible effects.

Outcomes, indicators and other information about the collection of indicator data should be mapped out early on in order to ensure that performance measurement is done consistently throughout the implementation of activities, and beyond, if necessary. This information forms the **performance measurement framework (PMF)** of the plan (or for each risk-based component of the plan). Please see below for a sample PMF template where this information may be captured.

A PMF should be completed to correspond with a logic model, as follows:

- 1. Specify the geographical **location**; a bounded geographical area or designated neighbourhood.
- 2. From the Logic Model, list the identified **outcomes** at the immediate, intermediate and long-term level, as well as the **outputs**. It is important to measure both outputs and outcomes output indicators show that planning partners are doing the activities they set out to do, and outcome indicators show that their activities and outputs are having the desired impact or benefit on the community or target group.
- 3. Develop key performance indicators;
 - a. Quantitative indicators these are numeric or statistical measures that are often expressed in terms of unit of analysis (the number of, the frequency of, the percentage of, the ratio of, the variance with, etc.).
 - b. Qualitative indicators qualitative indicators are judgment or perception measures. For example, this could include the level of satisfaction from program participants and other feedback.
- 4. Record the **baseline data**; information captured initially in order to establish the starting level of information against which to measure the achievement of the outputs or outcomes.
- 5. Forecast the achievable **targets**; the "goal" used as a point of reference against which planning partners will measure and compare their actual results against.
- 6. Research available and current **data sources**; third party organizations that collect and provide data for distribution. Sources of information may include project staff, other agencies/organizations, participants and their families, members of the public and the media.
- 7. List the **data collection methods**; where, how and when planning partners will collect the information to document their indicators (i.e., survey, focus group).
- 8. Indicate data collection **frequency**; how often the performance information will be collected.
- 9. Identify who has **responsibility**; the person or persons who are responsible for providing and/or gathering the performance information and data.

Sample Logic Model:

PRIORITY/RISKS: poor school performance, low literacy, low graduation rates

VULNERABLE/TARGET GROUP: youth and new immigrants

LONG-TERM OUTCOME Increased Community Safety and Well-Being

INTERMEDIATE OUTCOME Increased Educational Attainment

IMMEDIATE OUTCOMES

- Community is better informed of issues faced related to community safety and well-being (education specifically)
- Impacts of not graduating from high-school communicated to students, community members and service providers
- Increased access to education for students in receipt of social assistance
- Expansion of lunch-time and after-school reading programs in schools

OUTPUTS

- Forty-seven youth and youth service providers engaged in the plan
- Awareness of evidence-based strategies to increase graduation
- Partnerships created between local university, college, social services
- Twenty-five students from low income neighbourhoods provided access to free summer tutoring

ACTIVITIES

- Distribution of engagement survey
- Community engagement sessions
- One-on-one meetings with local university, college and social services
- Broker partnerships between social services, neighbourhood hubs, library and school boards

INPUTS

- Over 1,000 hours of the community safety and well-being planning coordinator's time
- Two thousand copies of an engagement survey
- Refreshment and transportation costs for engagement sessions
- Five hundred hours of the manager of strategic planning and community development's time
- Five hours of time dedicated by representatives of the local college, university, social service center, school board and library

Sample Performance Measurement Framework:

Expected Outcomes	Indicators	Baseline Data	Targets	Data Sources	Data Collection Methods	Frequency	Responsibility
Long-Term Outcomes Use outcome from Logic Model - e.g., Increased community safety and well-being	# of people employed	employment rate from the year the plan starts	5% increase	municipality	collect from municipality	every 2 years (the plan is for 4 years)	municipality
Intermediate Outcomes Use outcomes from Logic Model - e.g., Increased educational attainment	# of students graduated from high- school	graduation rate from the year the plan starts	5% increase	school board(s)	collect from school boards	at the end of every school year	school board
Immediate Outcomes Use outcomes from Logic Model - e.g., Community is better informed of issues faced related to community safety and well-being (education specifically)	# of community members that have attended engage- ment sessions	no comparison - would start from "0"	200 people	municipal community safety and well-being planning coordinator	collect attendance sheets at the end of every session	at the end of the first year of planning	municipal community safety and well-being planning coordinator
Outputs Use outputs from Logic Model - e.g., 25 students from low income neighbourho- ods provided access to free tutoring	# of students that have completed the tutoring program	no comparison - would start from "0"	100% comple- tion	social service tutors	collect attendance sheets	each year at the end of summer	social services manager running the program

Appendix A – Information Sharing

There are many different types of activities that may be used to address priority risks in each of the four planning areas. Collaborative, multi-sectoral risk intervention models, such as Situation Tables, are one example of initiatives that are widely used across the province in risk intervention. They involve multi-sector service providers assisting individuals, families, groups and places facing acutely elevated risk of harm by connecting them to resources in the community within 24 to 48 hours. As information sharing has been identified by many communities as a barrier to the success of these models, this section was developed to provide guidance. In addition to the information sharing guidance below, the Risk-driven Tracking Database is another tool available to support communities implementing their multi-sectoral risk intervention models (see Tool 5 – Analyzing Community Risks).

While the following speaks specifically to multi-sectoral risk intervention models, the importance of sharing information in each of the four planning areas cannot be understated. In order for planning to be effective, multi-sector agencies and organizations must work together, including sharing information in social development on long-term planning and performance data between sectors, in prevention on aggregate data and trends to inform priority risks, in risk intervention on risks facing individuals, families, groups and places and in incident response on a situation at hand.

Guidance on Information Sharing in Multi-Sectoral Risk Intervention Models

Please note that not all aspects of the information sharing principles and Four Filter Approach outlined below are prescribed in legislation and many may not be mandatory for your specific agency or organization. Together, they form a framework intended to guide professionals (e.g., police officers, educators from the school boards, mental health service providers, etc.) that are engaged in multi-sectoral risk intervention models (e.g., Situation Tables) that involve sharing information.

The sharing of personal information and personal health information ("personal information") requires compliance with the Freedom of Information and Protection of Privacy Act (FIPPA), Municipal Freedom of Information and Protection of Privacy Act (MFIPPA), the Personal Health Information Protection Act (PHIPA), and/or other pieces of legislation by which professionals are bound (e.g., the Youth Criminal Justice Act). With that, before engaging in a multi-sectoral risk intervention model, all professionals should familiarize themselves with the applicable legislation, non-disclosure and information sharing agreements and professional codes of conduct or policies that apply to their respective agency or organization.

Considerations should also be made for undergoing a Privacy Impact Assessment (PIA) and entering into a confidentiality agreement. Conducting a PIA and entering into information sharing agreements is recommended to ensure that adequate standards for the protection of personal information are followed.

For information on PIAs, refer to the "Planning for Success: Privacy Impact Assessment Guide" and "Privacy Impact Assessment Guidelines for the Ontario Personal Health Information Protection Act" which are available on the Information and Privacy Commissioner of Ontario website.

Once the decision has been made to participate in a multi-sectoral risk intervention model, such as a Situation Table, agencies/organizations should also ensure transparency by making information about their participation publicly available, including the contact information of an individual who can provide further information or receive a complaint about the agency/organization's involvement.

*Note: Information contained below should not be construed as legal advice.

Information Sharing Principles for Multi-Sectoral Risk Intervention Models

Information sharing is critical to the success of collaborative, multi-sectoral risk intervention models and partnerships that aim to mitigate risk and enhance the safety and well-being of Ontario communities. Professionals from a wide range of sectors, agencies and organizations are involved in the delivery of services that address risks faced by vulnerable individuals and groups. These professionals are well-placed to notice when an individual(s) is at an acutely elevated risk (see definition outlined on page 46) of harm, and collaboration among these professionals is vital to harm reduction.

Recognizing that a holistic, client-centered approach to service delivery is likely to have the most effective and sustainable impact on improving and saving lives, professionals involved in this approach, who are from different sectors and governed by different privacy legislation and policy, should consider the following common set of principles. It is important to note that definitive rules for the collection, use and disclosure of information are identified in legislation, and the following principles highlight the need for professional judgment and situational responses to apply relevant legislation and policy for the greatest benefit of individual(s) at risk.

Consent

Whenever possible, the ideal way to share personal information about an individual is by first obtaining that individual's consent. While this consent may be conveyed by the individual verbally or in writing, professionals should document the consent, including with respect to the date of the consent, what information will be shared, with which organizations, for what purpose(s), and whether the consent comes with any restrictions or exceptions.

When a professional is engaged with an individual(s) that they believe is at an acutely elevated risk of harm, and would benefit from the services of other agencies/ organizations, they may have the opportunity to ask that individual(s) for consent to share their personal information. However, in some serious, time-sensitive situations, there may not be an opportunity to obtain consent. In these instances, professionals should refer to pieces of legislation, including privacy legislation, which may allow for the sharing of personal information absent consent.

With or without consent, professionals may only collect, use or disclose information in a manner that is consistent with legislation (i.e., FIPPA, MFIPPA, PHIPA and/or other applicable legislation to which the agency/organization is bound), and they must always respect applicable legal and policy provisions.

Professional Codes of Conduct

It is the responsibility of all professionals to consider and adhere to their relevant professional codes of conduct and standards of practice. As in all aspects of professional work, any decision to share information must be executed under appropriate professional discipline. This presumes the highest standards of care, ethics, and professional practice (e.g., adherence to the policies and procedures upheld by the profession) will be applied if and when personal information is shared. Decisions about disclosing personal information must also consider the professional, ethical and moral integrity of the individuals and agencies/organizations that will receive the information. The decision to share information must only be made if the professional is first satisfied that the recipient of the information will also protect and act upon that information in accordance with established professional and community standards and legal requirements. As this relates to collaborative community safety and well-being practices, this principle reinforces the need to establish solid planning frameworks and carefully structured processes.

Do No Harm

First and foremost, this principle requires that professionals operate to the best of their ability in ways that will more positively than negatively impact those who may be at an acutely elevated risk of harm. Decisions to share information in support of an intervention must always be made by weighing out the benefits that can be achieved for the well-being of the individual(s) in question against any reasonably foreseeable negative impact associated with the disclosure of personal information. This principle highlights what professionals contemplate about the disclosure of information about an individual(s) in order to mitigate an evident, imminent risk of harm or victimization. This principle ensures that the interests of the individual(s) will remain a priority consideration at all times for all involved.

Duty of Care

Public officials across the spectrum of human services assume within their roles a high degree of professional responsibility – a duty of care – to protect individuals, families and communities from harm. For example, the first principle behind legislated child protection provisions across Canada is the duty to report, collaborate, and share information as necessary to ensure the protection of children. Professionals who assume a duty of care are encouraged to be mindful of this responsibility when considering whether or not to share information.

Due Diligence and Evolving Responsible Practice

The Office of the Information and Privacy Commissioner of Ontario (IPC) is available and willing to provide general privacy guidance to assist institutions and health information custodians in understanding their obligations under FIPPA, MFIPPA and PHIPA. These professionals are encouraged to first seek any clarifications they may require from within their respective organizations, as well as to document, evaluate and share their information sharing-related decisions in a de-identified manner, with a view to building a stronger and broader base of privacy compliant practices, as well as evidence of the impact and effectiveness of information sharing. The IPC may be contacted by email at info@ipc.on.ca, or by telephone (Toronto Area: 416-326-3333, Long Distance: 1-800-387-0073 (within Ontario), TDD/TTY: 416-325-7539). Note that FIPPA,

MFIPPA and PHIPA provide civil immunity for any decision to disclose or not to disclose made reasonably in the circumstances and in good faith.

Acutely Elevated Risk

For the purposes of the following Four Filter Approach, "acutely elevated risk" refers to any situation negatively affecting the health or safety of an individual, family, or specific group of people, where professionals are permitted in legislation to share personal information in order to eliminate or reduce imminent harm to an individual or others.

For example, under section 42(1)(h) of FIPPA, section 32(h) of MFIPPA and section 40(1) of PHIPA, the following permissions are available.

Section 42(1)(h) of FIPPA and section 32(h) of MFIPPA read:

An institution shall not disclose personal information in its custody or under its control except,

in compelling circumstances affecting the health or safety of an individual if upon disclosure notification is mailed to the last known address of the individual to whom the information relates.

*Note: written notification may be made through methods other than mail to the last known address. The individual should be provided with a card or document listing the names and contact information of the agencies/organizations to whom their personal information was disclosed at filters three and four, at or shortly after the time they are provided information on the proposed intervention.

Section 40(1) of PHIPA reads:

A health information custodian may disclose personal health information about an individual if the custodian believes on reasonable grounds that the disclosure is necessary for the purpose of eliminating or reducing a significant risk of serious bodily harm to a person or group of persons.

"Significant risk of serious bodily harm" includes a significant risk of both serious physical as well as serious psychological harm. Like other provisions of PHIPA, section 40(1) is subject to the mandatory data minimization requirements set out in section 30 of PHIPA.

Four Filter Approach to Information Sharing

In many multi-sectoral risk intervention models, such as Situation Tables, the discussions may include sharing limited personal information about an individual(s) such that their identity is revealed. For that reason, the Ministry encourages professionals to obtain express consent of the individual(s) before the collection, use and disclosure of personal information. If express consent is obtained to disclose personal information to specific agencies/organizations involved in a multi-sectoral risk intervention model for the purpose of harm reduction, the disclosing professional may only rely on consent to disclose personal information and collaborate with the specific agencies/organizations and only for that purpose.

If it is not possible to obtain express consent and it is still believed that disclosure is required, professionals in collaborative, multi-sectoral risk intervention models are encouraged to comply with the Four Filter Approach outlined below.

Under the Four Filter Approach, the disclosing agency/organization must have the authority to disclose and each recipient agency/organization must have the authority to collect the information. The question of whether an agency/organization "needs-to-know" depends on the circumstances of each individual case.

Filter One: Initial Agency/Organization Screening

The first filter is the screening process by the professional that is considering engaging partners in a multi-sectoral intervention. Professionals must only bring forward situations where they believe that the subject individual(s) is at an acutely elevated risk of harm as defined above. The professional must be unable to eliminate or reduce the risk without bringing the situation forward to the group. This means that each situation must involve risk factors beyond the agency/organization's own scope or usual practice, and thus represents a situation that could only be effectively addressed in a multi-sectoral manner. Professionals must therefore examine each situation carefully and determine whether the risks posed require the involvement of multi-sectoral partners. Criteria that should be taken into account at this stage include:

- The intensity of the presenting risk factors, as in: Is the presenting risk of such concern that the individual's privacy intrusion may be justified by bringing the situation forward for multi-sectoral discussion?
- Is there a significant and imminent risk of serious bodily harm if nothing is done?
- Would that harm constitute substantial interference with the health or well-being of a person and not mere inconvenience to the individual or a service provider?
- Did the agency/organization do all it could to mitigate the risks before bringing forward the situation?
- Do the risks presented in this situation apply to the mandates of multiple agencies/organizations?
- Do multiple agencies/organizations have the mandate to intervene or assist in this situation?
- Is it reasonable to believe that disclosure to multi-sectoral partners will help eliminate or reduce the anticipated harm?

Before bringing a case forward, professionals should identify in advance the relevant agencies or organizations that are reasonably likely to have a role to play in the development and implementation of the harm reduction strategy.

Filter Two: De-identified Discussion with Partner Agencies/Organizations

At this stage, it must be reasonable for the professional to believe that disclosing information to other agencies/organizations will eliminate or reduce the risk posed to, or by, the individual(s). The professional then presents the situation to the group in a de-identified format, disclosing only descriptive information that is reasonably necessary. Caution should be exercised even when disclosing de-identified information about the risks facing an individual(s), to ensure that later identification of the individual(s) will not inadvertently result in disclosure beyond that which is necessary at filter three. This disclosure should focus on the information necessary to determine whether the situation as presented appears to meet, by consensus of the table, both the threshold of acutely elevated risk, outlined above, and the need for or benefit from a multiagency intervention, before any identifying personal information is disclosed.

The wide range of sectors included in the discussion is the ideal setting for making a decision as to whether acutely elevated risk factors across a range of professionals are indeed present. If the circumstances do not meet this threshold, no personal information may be disclosed and no further discussion of the situation should occur. However, if at this point the presenting agency/organization decides that, based on the input and consensus of the table, disclosing limited personal information (e.g., the individual's name and address) to the group is necessary to help eliminate or reduce an acutely elevated risk of harm to an individual(s), the parties may agree to limited disclosure of such information to those agencies/organizations at filter three.

Filter Three: Limited Identifiable Information Shared

If the group concludes that the threshold of acutely elevated risk is met, they should determine which agencies/organizations are reasonably necessary to plan and implement the intervention. Additionally, the presenting agency should inform the table of whether the individual has consented to the disclosure of his or her personal information to any specific agencies/organizations. All those agencies/organizations that have not been identified as reasonably necessary to planning and implementing the intervention must then leave the discussion until dialogue about the situation is complete. The only agencies/organizations that should remain are those to whom the individual has expressly consented to the disclosure of his or her personal information, as well as those that the presenting agency reasonably believes require the information in order to eliminate or reduce the acutely elevated risk(s) of harm at issue.

Identifying information may then be shared with the agencies/organizations that have been identified as reasonably necessary to plan and implement the intervention at filter four.

Any notes captured by any professionals that will not be involved in filter four must be deleted. Consistency with respect to this "need-to-know" approach should be supported in advance by way of an information sharing agreement that binds all the involved agencies/organizations.

*Note: It is important that the agencies/organizations involved in multi-sectoral risk intervention models be reviewed on a regular basis. Agencies/organizations that are rarely involved in interventions should be removed from the table and contacted only when it is determined that their services are required.

Filter Four: Full Discussion Among Intervening Agencies/Organizations Only

At this final filter, only agencies/organizations that have been identified as having a direct role to play in an intervention will meet separately to discuss limited personal information required in order to inform planning for the intervention. Disclosure of personal information in such discussions shall remain limited to the personal information that is deemed necessary to assess the situation and to determine appropriate actions. Sharing of information at this level should only happen to enhance care.

After that group is assembled, if it becomes clear that a further agency/organization should be involved, then professionals could involve that party bearing in mind the necessary authorities for the collection, use and disclosure of the relevant personal information.

If at any point in the above sequence it becomes evident that resources are already being provided as required in the circumstances, and the professionals involved are confident that elevated risk is already being mitigated, there shall be no further discussion by the professionals other than among those already engaged in mitigating the risk.

The Intervention

Following the completion of filter four, an intervention should take place to address the needs of the individual, family, or specific group of people and to eliminate or mitigate their risk of harm. In many multi-sectoral risk intervention models, the intervention may involve a "door knock" where the individual is informed about or directly connected to a service(s) in their community. In all cases, if consent was not already provided prior to the case being brought forward (e.g., to a Situation Table), obtaining consent to permit any further sharing of personal information in support of providing services must be a priority of the combined agencies/organizations responding to the situation. If upon mounting the intervention, the individual(s) being offered the services declines, no further action (including further information sharing) will be taken.

It is important to note that institutions such as school boards, municipalities, hospitals, and police services are required to provide written notice to individuals following the disclosure of their personal information under section 42(1)(h) of FIPPA and section 32(h) of MFIPPA (see note on page 46). Even where this practice is not required, we recommend that all individuals be provided with written notice of the disclosure of their personal information. This should generally be done when the intervention is being conducted. In the context of multi-sectoral risk intervention models, such written notices should indicate the names and contact information of all agencies to whom the personal information was disclosed at filters three and four, whether verbally or in writing.

Report Back

This "report back" phase involves professionals receiving express consent from the individual(s) to provide an update regarding their intervention to the group, including to those who did not participate in the intervention. This may involve reporting back, in a de-identified manner, on pertinent information about the risk factors, protective factors and agency/organization roles that transpired through the intervention. In the absence of express consent of the individual(s), the report back must be limited to the date of closure and an indication that the file can be closed or whether the intervening agencies need to discuss further action. If the file is being closed, limited information may be shared regarding the reason for closure (e.g., connected to service).

Appendix B – Engaging Youth

Many communities that tested the framework and toolkit identified youth as a priority group for their plan, facing risk factors such as coming from a single parent family, leaving care, unsupervised children, etc. There is also significant research literature that supports the active participation and inclusion of youth in decision-making as a way of addressing exclusion and marginalization. This section was developed for adults in communities that are undertaking the community safety and well-being planning process to help them understand a youth perspective and how to meaningfully engage youth.

Benefits of Youth Engagement

The following are some of the benefits to engaging youth in the community safety and well-being planning process:

- opportunity for new understanding of the lived reality of youth;
- opportunity to inform broader community safety and well-being plans, and other initiatives that may be developed to address identified risk areas;
- opportunity to breakdown stereotypes/assumptions about young people. In particular, assumptions related to risk areas that may involve youth;
- long-term opportunity for creation of on-the-ground community policies and programs that are increasingly responsive to the needs of youth;
- shared learning of current issues as youth often raise questions that have not been thought of by adults;
- new ideas, energy and knowledge;
- creates healthy and positive community connections between youth and adults, leading to social cohesion;
- opportunity to ask what youth are traditionally excluded from and offers an opportunity to get them to the table.

Additionally, the following are benefits that youth engagement can have on the youth themselves:

- build pride/self-esteem for being contributors to a larger purpose (i.e., local plans with a youth perspective);
- opportunities to build skills, for example:
 - communication opportunities for youth to assist in the creation of material (i.e., advertisement, pamphlets, etc.);
 - o **analytical** opportunities to analyze and interpret information that is gathered to inform the plan from a different perspective;
- connection to positive adult(s); and
- inclusion and a voice into what is happening in the community.

Practical Tips

The following are some practical tips for engaging youth during the community safety and well-being planning process.

Explaining the Project

- Create youth-friendly materials about community safety and well-being planning posters, postcards and social media, such as Facebook, Twitter, etc.
- Work with youth to define how they will participate by allowing the youth to help co-create the purpose of their engagement and their role in planning.
- When young people are able to design and manage projects, they feel some sense of ownership in the
 project. Involvement fosters motivation, which fosters competence, which in turn fosters motivation for
 future projects.
- Explain upfront what their role will be. Try and negotiate roles honestly while ensuring any promises made are kept.
- Try for a meaningful role, not just token involvement, such as one-off consultation with no follow-up.

Collaboration

- Adults should collaborate with youth and not take over.
- Provide youth with support and training (e.g., work with existing community agencies to host consultation sessions, ask youth allies and leaders from communities to facilitate consultation, recruit youth from communities to act as facilitators and offer support and training, etc.).
- Partner with grassroots organizations, schools and other youth organizations. By reaching out to a variety of organizations, it is possible to gather a wider range of youth perspectives.
- Provide youth with opportunities to learn and develop skills from the participation experience. For
 example, an opportunity to conduct a focus group provides youth with the opportunity to gain skills in
 facilitation and interviewing.

Assets

- Look at youth in terms of what they have to offer to the community and their capacities not just needs and deficits.
- Understand that working with youth who are at different ages and stages will help adults to recognize how
 different youth have strengths and capacities.
- Ask youth to help map what they see as community assets and community strengths.

Equity and Diversity

- Identify diverse groups of youth that are not normally included (e.g., LGBTQ (Lesbian, gay, bi-sexual, two-spirited, transgendered, questioning, queer), racialized youth, Indigenous youth, Francophone youth, youth with disabilities, immigrant youth, etc.).
- Proactively reach out to youth and seek the help of adults that the youth know and already trust.
- When working with diverse communities, find people that can relate to youth and their customs, cultures, traditions, language and practices.
- Understand and be able to explain why you are engaging with particular groups of youth and what you will do with the information that you gather.

Forming an Advisory Group

One way of gathering youth perspectives is to form a youth advisory group.

- Look for a diversity of participants from wide variety of diverse backgrounds. For example, put a call out to local youth-serving organizations, schools, etc.
- Spend time letting the youth get to know each other and building a safe space to create a dialogue.
- Depending on the level of participation, have youth and/or their parents/guardians sign a consent form to participate in the project.
- Keep parents/guardians of the youth involved and up-to-date on progress.
- Find different ways for youth to share their perspectives as not all youth are 'talkers'. Engage youth through arts, music and taking photos.
- An advisory group provides a good opportunity for youth to socialize with peers in a positive environment and to work as a team.

Recognition and Compensation

- Youth advisory group members can be volunteers, but try to compensate through small honorariums and by offering food and covering transportation costs where possible. This will support youth that might not traditionally be able to get involved.
- Recognition does not have to be monetary. For example, meaningful recognition of the youth's participation can include letters for community service hours or a letter that can be included in a work portfolio that describes in detail their role in the initiative.

Appendix C – Engaging Seniors

There are many reasons to engage seniors (those aged 65 and over) in the development of local plans. For example, encouraging youth and providing them with opportunities to form relationships with seniors may help to reduce intergenerational gaps. Demographic aging is also impacting many Ontario communities as older persons increasingly make up greater portions of the population. The importance of safety and security for older Ontarians has been recognized under Ontario's Action Plan for Seniors and a growing number of initiatives present opportunities to connect community safety and well-being planning to seniors and their service providers. This section was developed to assist partners involved in the community safety and well-being planning process to identify opportunities to engage seniors and create linkages with other activities that are already underway.

Benefits of Seniors' Engagement

Engaging seniors in the community safety and well-being planning process is a natural extension of the roles that they already play in their communities, as employees, volunteers, or members of various agencies/organizations. It may involve direct engagement with seniors themselves, senior's agencies/organizations or service providers, and provide an:

- opportunity for new understanding of the lived reality of seniors;
- opportunity to breakdown stereotypes/assumptions about older people and the contributions they can make to their communities;
- long-term opportunity for creation of on-the-ground community policies and programs that are
 increasingly responsive to the needs of seniors and the shared benefits these may have for people of all
 ages;
- source for new ideas, energy, knowledge and experience; and
- opportunity to create healthy and positive community connections between people of all ages, leading to social cohesion.

Additionally, the following are benefits that engagement can have on the seniors themselves:

- provide opportunities to apply skills and share knowledge with other generations;
- maintain or enhance social connections; and
- build a sense of inclusion and voice into what is happening in the community as a contributor to a larger community purpose.

Building Connections

The following are some opportunities and considerations for engaging seniors during the community safety and well-being planning process.

Seniors Organizations

Seniors are members of many local agencies/organizations and a number of large senior's agencies/organizations have local chapters across the province. Partnering with a variety of these groups will allow for a wide range of seniors' perspectives and access to the diverse strengths and capacities of seniors from different ages and lived experience. For more information on seniors agencies/organizations that may be active in your community, please refer to the Ontario Seniors' Secretariat website.

When reaching out to seniors, planning partners are encouraged to consider the following approaches to ensure diversity and equity:

- identify diverse groups of seniors (e.g., LGBTQ, Indigenous seniors and elders, older adults with disabilities, immigrant or newcomer seniors);
- identify individuals/groups that can relate to seniors and their customs, cultures, traditions, language and practices; and
- when forming advisory groups with seniors' representation, consider compensation options such as small
 honorariums or offering food and covering transportation costs where possible (this will support seniors
 that might not traditionally be able to get involved).

Service Providers

When forming an advisory group or other engagement approaches that include service provider perspectives, consider reaching out to agencies/organizations that are familiar with the needs of older adults, including:

- Community Care Access Centres;
- Long Term Care Homes, Retirement Homes, or seniors housing providers;
- police services, including those with Seniors Liaison Officers and Crimes against Seniors Units;
- Elderly Person Centres;
- community support service agencies (funded by Local Health Integration Networks to provide adult day programs, meal delivery, personal care, homemaking, transportation, congregate dining, etc.);
- Municipal Recreation and Health and Social Service Departments; and
- Social Planning Councils and Councils on Aging.

Local Linkages

Existing local engagement and planning mechanisms may be leveraged to help connect seniors and service providers throughout the community safety and well-being planning process. By making these linkages, synergies and efficiencies may be achieved. Some of these mechanisms may include:

- Seniors/Older Adult Advisory Committees
 - Established by local governments to seek citizen and stakeholder input into the planning and delivery of municipal services that impact older adults.

Local Elder Abuse Prevention Networks

There are over 50 local networks across the province that help address the needs of vulnerable seniors and the complex nature of elder abuse. They link health, social services and justice agencies/organizations to improve local responses to elder abuse and help deliver public education, training, and facilitate cross-sectoral knowledge exchange between front-line staff, often including advice on managing elder abuse cases. Contact information for local elder abuse prevention networks can be found on the Elder Abuse Ontario website.

Age-Friendly Community (AFC) Planning Committees

- Based on the World Health Organization's eight dimension framework, the AFC concept highlights the importance of safe and secure environments, social participation and inclusion, all of which are aligned with senior's participation in the community safety and well-being planning process.
- Many communities are developing AFC plans to help create social and physical environments that allow people of all ages, including seniors, to participate fully in their communities. Local AFC planning committees are being established to lead the completion of needs assessments and multisectoral planning. To support planning, the Ontario Seniors' Secretariat has created an AFC Planning Guide and an AFC Planning Grant Program. More information about AFCs and local activity underway can be found on the Ministry of Seniors Affairs website.

Accessibility Advisory Committees

- Under the Ontarians with Disabilities Act, 2001, municipalities with more than 10,000 residents have to establish local accessibility advisory committees. Most of the members of these committees are people with disabilities, including seniors.
- Over 150 Ontario municipalities have set up local accessibility advisory committees. The committees
 work with their local councils to identify and break down barriers for people with disabilities.
- Engaging accessibility advisory committees in community safety and well-being planning would contribute to the development of inclusive policies and programs that serve all members of a community. For more information about Accessibility Laws, please visit the Government of Ontario accessibility laws web page.

Appendix D – Engaging Indigenous Partners

Engaging and collaborating with Indigenous partners, including those who are First Nations, Inuit and Métis, is an important part of local community safety and well-being efforts. Ontario has the largest Indigenous population in Canada, with 85 per cent of Indigenous peoples in Ontario living in urban and rural areas. Indigenous peoples are also the youngest, most diverse and rapidly growing population in Canada and continue to present unparalleled opportunities through their values, innovative practices and approaches that can enhance the lives of all Canadians.

Cultural responsiveness is crucial to the community safety and well-being planning process and should be captured in the development of strategies and programs that are identified in local plans. By including community specific culture and identity as part of planning, it will enable the development of sustainable and strategic programming at the local level. Communities should acknowledge that effective planning involves understanding and responding to the unique factors and inequalities that different groups face. For example, Indigenous peoples may face specific risk factors due to the impact of historical events, such as colonialism and assimilation policies. In addition, social emergencies that overwhelm services in Indigenous communities can also impact services delivered by surrounding municipalities.

Building relationships with Indigenous partners early in the planning process can help ensure that local plans incorporate the strengths, perspectives, contributions and needs of Indigenous peoples, organizations and communities. By respecting each other's priorities and perspectives, municipalities can build trust with Indigenous partners. This can also help to develop relationships, respond to potentially challenging issues and work collaboratively to achieve social and economic well-being for all community members.

This section has been developed as a guide for municipalities that are undertaking the community safety and well-being planning process in understanding how to meaningfully engage and collaborate with Indigenous partners.

Outcomes of Indigenous Engagement

The following are some of the positive outcomes that can be realized by working with Indigenous partners as part of the community safety and well-being planning process:

- Creating and supporting communities where Indigenous peoples feel safe, have a sense of belonging, and are seen as equal contributors to the decisions that affect community safety and well-being;
- Establishing partnerships and positive relationships founded in mutual respect;
- Gaining an understanding of, and better responding to, the lived realities of Indigenous peoples and the intergenerational trauma that they face;
- Acknowledging and addressing systemic biases within existing systems and breaking down stereotypes impacting Indigenous peoples;
- Co-developing culturally relevant solutions to meet the unique and diverse needs of Indigenous peoples;

¹ Statistics Canada, 2016 Census

² Statistics Canada, 2016 Census

 Creating new or supporting existing grassroots community strategies that are well-grounded in cultural recognition, led by Indigenous peoples and communities, and have shared, long-term benefits for all community members.

Key Principles for Engagement

When engaging with Indigenous partners, there is not a one-size fits all approach, as each partner offers a unique perspective and may have specific governance structures, engagement processes or protocols that should be respected.

The following are some key principles to consider when engaging and collaborating with Indigenous partners during the community safety and well-being planning process:

- Take time to build trust and understanding: When engaging with Indigenous partners, it may take several meetings to build a strong connection, due to factors such as historical events, cultural protocols and availability of resources. Successful engagement occurs in the context of effective working relationships, which are developed over time and built on respect and trust. Be willing to develop lasting relationships.
- Know the history: Before you enter the conversation, you should have some understanding of the
 relationships between Indigenous and non-Indigenous communities. Learn from local Indigenous
 community members, political/organizations' leadership, provincial Indigenous organizations, Elders,
 youth and others, to understand the historical and present day circumstances. The Report and Calls to
 Action from the Truth and Reconciliation Commission of Canada can also be a useful resource to guide
 discussions.
- Understand the impact of lived experiences: Recognize that many Indigenous peoples, communities and
 organizations are dealing with the intergenerational and on-going impact of colonization. Indigenous
 partners may be at different stages in reconnecting and reclaiming their cultural traditions and teachings
 and therefore engagement and collaboration may have different outcomes for everyone involved.
 Consideration of additional diversities that exist within and between Indigenous peoples and communities
 will also strengthen the outcomes of this work.
- **Be prepared for the conversation:** Step into your conversations with a good sense of what you can bring to a partnership and establish clear expectations. Invest in your staff to be ready for the conversation, for example a starting point could include participating in Indigenous cultural competency training. Further, knowledge of protocol creates a stable foundation of mutual respect, and sets the tone for the engagement. It is common practice when meeting with Indigenous partners to acknowledge the territory and follow any cultural protocol to start new relationships in a positive way.
- Identify shared priorities and objectives: Engagement is an opportunity to collaborate with Indigenous partners. When determining objectives for engagement, a best practice is to work with Indigenous partners to develop an engagement process that works for everyone. Be open to creating a joint agenda of issues and priorities and work together to develop initiatives and strategies.
- Engage early and often: Indigenous partners are often engaged at the end of a project's development when there is little opportunity to provide meaningful input. Engage Indigenous partners early on in a project's development and work together to determine the best approach for engagement. Ask Indigenous partners how they would like to be involved and develop clear roles and responsibilities that will support and strengthen mutual accountability. For example, invite Indigenous community representatives or organizations to participate on the advisory committee as part of the community safety and well-being planning process.

• Have reasonable timelines and create safe spaces for engagement: Effective planning requires you to build in adequate timelines for partners to respond to requests for engagement. Recognize that different Indigenous partners may have unique circumstances which impact their ability to participate in engagement sessions. Engagement should be culturally safe and accessible for all who want to participate.

As a starting point for engagement, reach out and ask if and how Indigenous partners may wish to be involved. Municipalities may look to engage members and/or leadership of urban Indigenous communities within the municipality, neighbouring First Nation communities (e.g., Band/Tribal Councils), First Nation police services, local Indigenous community organizations (e.g., local Métis Councils), provincial Indigenous organizations (e.g., Tungasuvvingat Inuit) and local Indigenous service providers (e.g., Indigenous Friendship Centres).

For additional guidance, municipalities should refer to Ontario's Urban Indigenous Action Plan, which has been co-developed by the Government of Ontario, the Ontario Federation of Indigenous Friendship Centres, the Métis Nation of Ontario and the Ontario Native Women's Association. It is a resource and guide that supports the development of responsive, inclusive policies, programs and evaluations with, and that meet the needs of, urban Indigenous communities.

Appendix E – Definitions

Acutely elevated risk: a situation negatively affecting the health or safety of an individual, family, or specific group of people where there is a high probability of imminent and significant harm to self or others (e.g., offending or being victimized, lapsing on a treatment plan, overt mental health crisis situation, etc.). In these situations, agencies and organizations may be permitted in legislation to share personal information in order to prevent imminent harm. This often involves circumstances that indicate an extremely high probability of the occurrence of victimization from crime or social disorder, where left unattended, such situations will require targeted enforcement or other emergency, incident response.

Collaboration: individuals, agencies or organizations, working together for a common purpose; acknowledging shared responsibility for reaching consensus in the interest of mutual outcomes; contributing complementary capabilities; willing to learn from each other; and benefiting from diverse perspectives, methods and approaches to common problems.

Community engagement: the process of inviting, encouraging and supporting individuals, human services agencies, community-based organizations and government offices and services to collaborate in achieving community safety and well-being.

Community safety and well-being: the ideal state of a sustainable community where everyone is safe, has a sense of belonging, opportunities to participate, and where individuals and families are able to meet their needs for education, health care, food, housing, income, and social and cultural expression.

Crime prevention: the anticipation, recognition and appraisal of a crime risk and the actions taken – including the integrated community leadership required – to remove or reduce it.

Evidence-based: policies, programs and/or initiatives that are derived from or informed by the most current and valid empirical research or practice that is supported by data and measurement.

Partners: agencies, organizations, individuals from all sectors, and government which agree to a common association toward mutual goals of betterment through shared responsibilities, complementary capabilities, transparent relationships, and joint decision-making.

Protective factors: positive characteristics or conditions that can moderate the negative effects of risk factors and foster healthier individuals, families and communities, thereby increasing personal and/or community safety and well-being.

Risk factors: negative characteristics or conditions in individuals, families, communities or society that may increase social disorder, crime or fear of crime, or the likelihood of harms or victimization to persons or property.

Social determinants of health: the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These are protective factors of health and well-being including access to income, education, employment and job security, safe and healthy working conditions, early childhood development, food security, quality housing, social inclusion, cohesive social safety network, health services, and equal access to all of the qualities, conditions and benefits of life without regard to any socio-demographic differences. The social determinants of health are the same factors which affect individual, family and community safety and well-being.

Appendix F – Risk and Protective Factors

The following definitions were adopted, created and/or refined by the ministry in consultation with its community and provincial partners. They are complementary to the risk and protective factors identified in the *Crime Prevention in Ontario: A Framework for Action* booklet, and are also consistent with the Risk-driven Tracking Database. They are intended to guide partners involved in the community safety and well-being planning process as they identify local risks to safety and well-being and develop programs and strategies to address those risks. These risk and protective factors are commonly used by communities across the province that have implemented multi-sectoral risk intervention models.

Risk Factors

Antisocial/Problematic Behaviour (Non-criminal)

Risk Factor	Definition
Antisocial/Negative Behaviour - antisocial/negative behaviour within the home	resides where there is a lack of consideration for others, resulting in damage to other individuals or the community (i.e., obnoxious/disruptive behaviour)
Antisocial/Negative Behaviour - person exhibiting antisocial/negative behaviour	is engaged in behaviour that lacks consideration of others, which leads to damages to other individuals or the community (i.e., obnoxious/disruptive behaviour)
Basic Needs - person neglecting others' basic needs	has failed to meet the physical, nutritional or medical needs of others under their care
Basic Needs - person unable to meet own basic needs	cannot independently meet their own physical, nutritional or other needs
Elder Abuse - person perpetrator of elder abuse	has knowingly or unknowingly caused intentional or unintentional harm upon older individuals because of their physical, mental or situational vulnerabilities associated with the aging process
Gambling - chronic gambling by person	regular and/or excessive gambling; no harm caused
Gambling - chronic gambling causes harm to others	regular and/or excessive gambling that causes harm to others
Gambling - chronic gambling causing harm to self	regular and/or excessive gambling; resulting in self-harm
Housing - person transient but has access to appropriate housing	has access to appropriate housing but is continuously moving around to different housing arrangements (i.e., couch surfing)
Missing - person has history of being reported to police as missing	has a history of being reported to police as missing and in the past has been entered in the Canadian Police Information Centre (CPIC) as a missing person

Risk Factor	Definition
Missing - person reported to police as	has been reported to the police and entered in CPIC as a
missing	missing person
Missing - runaway with parents'	has run away from home with guardian's knowledge but
knowledge of whereabouts	guardian is indifferent
Missing - runaway without parents	has run away and guardian has no knowledge of whereabouts
knowledge of whereabouts	lias full away and guardian has no knowledge of whereabouts
Physical Violence - person perpetrator	has instigated or caused physical violence to another person
of physical violence	(i.e., hitting, pushing)
Sexual Violence - person perpetrator of	has been the perpetrator of sexual harassment, humiliation,
sexual violence	exploitation, touching or forced sexual acts
Threat to Public Health and Safety -	is currently engaged in behaviour that represents danger to the
person's behaviour is a threat to public	health and safety of the community (i.e., unsafe property,
health and safety	intentionally spreading disease, putting others at risk)

Criminal Involvement

Risk Factor	Definition
Criminal Involvement - animal cruelty	has been suspected, charged, arrested or convicted of animal cruelty
Criminal Involvement - arson	has been suspected, charged, arrested or convicted of arson
Criminal Involvement - assault	has been suspected, charged, arrested or convicted of assault
Criminal Involvement - break and enter	has been suspected, charged, arrested or convicted of break and enter
Criminal Involvement - damage to property	has been suspected, charged, arrested or convicted of damage to property
Criminal Involvement - drug trafficking	has been suspected, charged, arrested or convicted of drug trafficking
Criminal Involvement - homicide	has been suspected, charged, arrested or convicted of the unlawful death of a person
Criminal Involvement - other	has been suspected, charged, arrested or convicted of other crimes
Criminal Involvement - possession of weapons	has been suspected, charged, arrested or convicted of possession of weapons
Criminal Involvement - robbery	has been suspected, charged, arrested or convicted of robbery (which is theft with violence or threat of violence)
Criminal Involvement - sexual assault	has been suspected, charged, arrested or convicted of sexual assault
Criminal Involvement - theft	has been suspected, charged, arrested or convicted of theft
Criminal Involvement - threat	has been suspected, charged, arrested or convicted of uttering threats

Education/Employment

Risk Factor	Definition
Missing School - chronic absenteeism	has unexcused absences from school without parental knowledge, that exceed the commonly acceptable norm for school absenteeism
Missing School - truancy	has unexcused absences from school without parental knowledge
Unemployment - person chronically unemployed	persistently without paid work
Unemployment - person temporarily unemployed	without paid work for the time being

Emotional Violence

Risk Factor	Definition
Emotional Violence - emotional	resides with a person who exhibits controlling behaviour, name-
violence in the home	calling, yelling, belittling, bullying, intentional ignoring, etc.
Functional Violence manner officeted by	has been affected by others falling victim to controlling
Emotional Violence - person affected by emotional violence	behaviour, name-calling, yelling, belittling, bullying, intentional
emotional violence	ignoring, etc.
Emotional Violence - norsen	has emotionally harmed others by controlling their behaviour,
Emotional Violence - person perpetrator of emotional violence	name-calling, yelling, belittling, bullying, intentionally ignoring
	them, etc.
Emotional Violence - person victim of emotional violence	has been emotionally harmed by others who have controlled
	their behaviour, name-called, yelled, belittled, bullied,
	intentionally ignored them, etc.

Family Circumstances

Risk Factor	Definition
Parenting - parent-child conflict	ongoing disagreement and argument between guardian and child that affects the functionality of their relationship and communication between the two parties
Parenting - person not providing proper parenting	is not providing a stable, nurturing home environment that includes positive role models and concern for the total development of the child
Parenting - person not receiving proper parenting	is not receiving a stable, nurturing home environment that includes positive role models and concern for the total development of the child
Physical Violence - physical violence in the home	lives with threatened or real physical violence in the home (i.e., between others)
Sexual Violence - sexual violence in the home	resides in a home where sexual harassment, humiliation, exploitation, touching, or forced sexual acts occur

Risk Factor	Definition
Supervision - person not properly supervised	has not been provided with adequate supervision
Supervision - person not providing proper supervision	has failed to provide adequate supervision to a dependant person (i.e., child, elder, disabled)
Unemployment - caregivers chronically unemployed	caregivers are persistently without paid work
Unemployment - caregivers temporarily unemployed	caregivers are without paid work for the time being

Gang Issues

Risk Factor	Definition
Gangs - gang association	social circle involves known or supported gang members but is not a gang member
Gangs - gang member	is known to be a member of a gang
Gangs - threatened by gang	has received a statement of intention to be injured or have pain inflicted by gang members

Housing

Risk Factor	Definition
Housing - person doesn't have access to	is living in inappropriate housing conditions or none at all (i.e.,
appropriate housing	condemned building, street)

Mental Health and Cognitive Functioning

Risk Factor	Definition
Cognitive Functioning - diagnosed cognitive impairment/limitation	has a professionally diagnosed cognitive impairment/limitation
Cognitive Functioning - suspected cognitive impairment/limitation	suspected of having a cognitive impairment/limitation (no diagnosis)
Cognitive Functioning - self-reported	has reported to others to have a cognitive
cognitive impairment/limitation	impairment/limitation
Mental Health - diagnosed mental health problem	has a professionally diagnosed mental health problem
Mental Health - grief	experiencing deep sorrow, sadness or distress caused by loss
Mental Health - mental health problem in the home	residing in a residence where there are mental health problems
Mental Health - not following	not following treatment prescribed by a mental health
prescribed treatment	professional; resulting in risk to self and/or others

Risk Factor	Definition
Mental Health - self-reported mental health problem	has reported to others to have a mental health problem(s)
Mental Health - suspected mental health problem	suspected of having a mental health problem (no diagnosis)
Mental Health - witnessed traumatic	has witnessed an event that has caused them emotional or
event	physical trauma
Self-Harm - person has engaged in self-	has engaged in the deliberate non-suicidal injuring of their own
harm	body
Self-Harm - person threatens self-harm	has stated that they intend to cause non-suicidal injury to their own body
Suicide - affected by suicide	has experienced loss due to suicide
Suicide - person current suicide risk	currently at risk to take their own life
Suicide - person previous suicide risk	has in the past, been at risk of taking their own life

Neighbourhood

Risk Factor	Definition
Poverty - person living in less than adequate financial situation	current financial situation makes meeting the day-to-day housing, clothing or nutritional needs, significantly difficult
Social Environment - frequents negative locations	is regularly present at locations known to potentially entice negative behaviour or increase the risks of an individual to be exposed to or directly involved in other social harms
Social Environment - negative neighbourhood	lives in a neighbourhood that has the potential to entice negative behaviour or increase the risks of an individual to be exposed to or directly involved in other social harms

Peers

Risk Factor	Definition
Negative Peers - person associating	is associating with people who negatively affect their thoughts,
with negative peers	actions or decisions
Negative Peers - person serving as a	is having a negative impact on the thoughts, actions or decision
negative peer to others	of others

Physical Health

Risk Factor	Defintion
Basic Needs - person unwilling to have	person is unwilling to meet or receive support in having their
basic needs met	own basic physical, nutritional or other needs met
Physical Health - chronic disease	suffers from a disease that requires continuous treatment over
	a long period of time

Risk Factor	Defintion
Physical Health - general health issue	has a general health issue which requires attention by a medical health professional
Physical Health - not following	not following treatment prescribed by a health professional;
prescribed treatment	resulting in risk
Physical Health - nutritional deficit	suffers from insufficient nutrition, causing harm to their health
Physical Health - physical disability	suffers from a physical impairment
Physical Health - pregnant	pregnant
Physical Health - terminal illness	suffers from a disease that cannot be cured and that will soon result in death

Substance Abuse Issues

Risk Factor	Definition
Alcohol - alcohol abuse by person	known to excessively consume alcohol; causing self-harm
Alcohol - alcohol abuse in home	living at a residence where alcohol has been consumed excessively and often
Alcohol - alcohol use by person	known to consume alcohol; no major harm caused
Alcohol - harm caused by alcohol abuse in home	has suffered mental, physical or emotional harm or neglect due to alcohol abuse in the home
Alcohol - history of alcohol abuse in home	excessive consumption of alcohol in the home has been a problem in the past
Drugs - drug abuse by person	known to excessively use illegal/prescription drugs; causing self-harm
Drugs - drug abuse in home	living at a residence where illegal (or misused prescription drugs) have been consumed excessively and often
Drugs - drug use by person	known to use illegal drugs (or misuse prescription drugs); no major harm caused
Drugs - harm caused by drug abuse in	has suffered mental, physical or emotional harm or neglect due
home	to drug abuse in the home
Drugs - history of drug abuse in home	excessive consumption of drugs in the home has been a problem in the past

Victimization

Risk Factor	Definition
Basic Needs - person being neglected by others	basic physical, nutritional or medical needs are not being met
Crime Victimization - arson	has been reported to police to be the victim of arson
Crime Victimization - assault	has been reported to police to be the victim of assault (i.e., hitting, stabbing, kicking, etc.)

Risk Factor	Definition
Crime Victimization - break and enter	has been reported to police to be the victim of break and enter (someone broke into their premises)
Crime Victimization - damage to property	has been reported to police to be the victim of someone damaging their property
Crime Victimization - other	has been reported to police to be the victim of other crime not mentioned above or below
Crime Victimization - robbery	has been reported to police to be the victim of robbery (someone threatened/used violence against them to get something from them
Crime Victimization - sexual assault	has been reported to police to be the victim of sexual assault (i.e., touching, rape)
Crime Victimization - theft	has been reported to police to be the victim of theft (someone stole from them)
Crime Victimization - threat	has been reported to police to be the victim of someone uttering threats to them
Elder Abuse - person victim of elder abuse	has knowingly or unknowingly suffered from intentional or unintentional harm because of their physical, mental or situational vulnerabilities associated with the aging process
Gambling - person affected by the gambling of others	is negatively affected by the gambling of others
Gangs - victimized by gang	has been attacked, injured, assaulted or harmed by a gang in the past
Physical Violence - person affected by physical violence	has been affected by others falling victim to physical violence (i.e., witnessing; having knowledge of)
Physical Violence - person victim of physical violence	has experienced physical violence from another person (i.e., hitting, pushing)
Sexual Violence - person affected by sexual violence	has been affected by others falling victim to sexual harassment, humiliation, exploitation, touching or forced sexual acts (i.e., witnessing; having knowledge of)
Sexual Violence - person victim of sexual violence	has been the victim of sexual harassment, humiliation, exploitation, touching or forced sexual acts

Protective Factors

Education

Protective Factor	Definition
Academic achievement	successful at school (i.e., obtains good grades)
Access to/availability of cultural education	availability of programming and/or curriculum that includes cultural diversity, including First Nations, Francophone, etc.
Adequate level of education	has obtained at least their high school diploma

Protective Factor	Definition
Caring school environment	attends a school that demonstrates a strong interest in the safety and well-being of its students
Involvement in extracurricular activities	engaged in sports, school committees, etc., that provide stability and positive school experience
Positive school experiences	enjoys/enjoyed attending school and generally has/had a positive social experience while at school
School activities involving the family	school and family supports are connected through activities

Family Supports

Protective Factor	Definition
Adequate parental supervision	caregivers are actively involved in ensuring safety and well- being
Both parents involved in childcare	two parents that are both strong, positive figures in their life
Family life is integrated into the life of the community	family life is integrated into the life of the community, creating strong social bonds
Open communication among family members	communication among family members allows for open and honest dialogue to discuss problems
Parental level of education	parents have at least received their high school diplomas
Positive relationship with spouse	relationship with spouse is positive and their spouse positively affects their thoughts, actions or decisions
Positive support within the family	positive and supportive caregivers/relatives whom they can rely on
Single parent family with a strong father or mother figure	although they are from a single parent family, they have one strong, positive father or mother figure
Stability of the family unit	consistent family environment
Strong family bond	relationships with parents and/or other family members based on bond which may prevent them from engaging in delinquent behaviour
Strong parenting skills	strong parental monitoring, discipline, clear standards and/or limits set with child/youth

Financial Security and Employment

Protective Factor	Definition
Financial stability	financially stable and able to provide the necessities of life
Ongoing financial supplement	receiving a financial supplement which provides a regular non- taxable benefit (e.g., housing subsidy, Guaranteed Income Supplement, Old Age Security, Ontario Disability Support Program, etc.)

Protective Factor	Definition
Positive work environment	working in an environment that is safe, supportive and free of harassment/discrimination
Stable employment	steady paid employment
Temporary financial support	receiving a financial supplement on a short or fixed-term basis in order to overcome a temporary obstacle (e.g., Ontario Works, etc.)
Work life balance	positive use of time; employment schedule includes adequate down-time and time to pursue personal interests

Housing and Neighbourhood

Protective Factor	Definition
Access to/availability of resources, professional services and social supports	access to/availability of resources, professional services and social supports
Access to stable housing	stable housing is available that they may access at any time
Appropriate, sustainable housing	lives in appropriate, sustainable housing, in which they are reasonably expected to remain
Housing in close proximity to services	lives in close proximity to resources, professional services and social supports
Positive, cohesive community	resides in a community that promotes positive thoughts and/or behaviour and has a reasonable level of social cohesion
Relationships established with neighbours	relationships with neighbours assist in providing a strong network of support

Mental Health

Protective Factor	Definition		
Accessing resources/services related to	currently accessing resources and/or services (i.e., involved in		
mental health	counselling, seeing a psychologist, addictions counselling, etc.)		
Adaptability	oility and willingness to adjust to different situations while ommunicating and building relationships		
Personal coping strategies	the ability to solve/minimize personal and interpersonal problems related to stress or conflict		
Self-efficacy	belief in their own ability to complete tasks and reach goals; self-motivated		
Self esteem	positive perceptions of his/her self-worth		
Taking prescribed medication	taking prescribed medication for a mental health disorder in accordance with doctor's instructions		

Physical Health

Protective Factor	Definition
Accessing consistent resources/services to improve on-going physical health issue	established and ongoing medical support for a chronic health issue through a consistent service provider
Accessing resources/services to improve a temporary physical health issue	accessing resources and/or services to treat a short-term illness or injury
Demonstrates commitment to maintaining good physical health	exercises regularly, eats a balanced diet
Positive physical health	appears to be in good physical health
Primary care physician	has a family doctor

Pro-social/Positive Behaviour

Protective Factor	Definition		
Optimism and positive expectations for	has a positive expectation for their future which could lead to		
future	positive decisions/behaviour		
Positive interpersonal skills	the ability to interact positively and work effectively with others		
	engages in activities/behaviours that positively impact others		
Positive pro-social behaviours	prompted by empathy, moral values, sense of personal		
	responsibility (e.g., sharing, volunteering, etc.)		
Sense of responsibility	takes responsibility for their own actions		
Strong engagement/affiliation in	involved in positive activities with cultural, religious, spiritual		
community, spiritual and/or cultural	and/or social groups that strengthen community ties and social		
activities	support		
Strong problem colving skills	the ability to address issues and solve day-to-day problems in		
Strong problem-solving skills	an effective, calm manner		

Social Support Network

Protective Factor	Definition	
Close friendships with positive peers	associates with people who positively affect their thoughts,	
	actions or decisions	
High level of trust in community	believes community support services are willing/able to	
support services	help/influence them in a positive way	
High level of trust in police	believes the police are willing/able to help them in a positive	
High level of trust in police	way	
Positive role models/relationship with	engagement with a positive role model/adult who they receive	
adult	support from and can look up to	

Appendix G – Community Safety and Well-Being Plan Sample

The following is an example of what a plan may look like. It is intended to guide local partners involved in the community safety and well-being planning process as they summarize work undertaken in the development of their plan. While planning partners should include information in their plan related to the headings below (i.e., members of their advisory committee and implementation team(s), overview of community engagement, risks, activities and outcomes, etc.) it is left up to local discretion.

A plan is meant to be a living document, and should be updated as communities move forward in their work. While the plan itself will be important for planning partners to stay organized and inform the community of the way forward, the most valuable outcomes from this process will be improved coordination of services, collaboration, information sharing and partnerships between local government, agencies and organizations and an improved quality of life for community members.

Municipality/First Nation: Municipality of Grassland

Coordinator(s):

Coordinator: Claudia T., Social Services, Municipality of Grassland

Co-Coordinator: Steffie A., Department Head, Grassland Catholic School Board

Grassland Community Safety and Well-Being Planning Committee Members (Advisory Committee):

- Claudia T., Municipality of Grassland (Social Services)
- Silvana B., Municipality of Grassland (Communications)
- Steffie A., Grassland Catholic School Board
- James L., Grassland Public School Board
- Morgan T., Community Elder
- Fionne Y., Children's Mental Health Centre
- Yoko I., Grassland Hospital
- Stephanie L., Social Services
- Shannon C., Ontario Works
- Ram T., Ontario Disability Support Program
- Emily J., Grassland Police Services Board
- Nicole P., Grassland Police Service
- Sheniz K., Grassland Probation and Parole
- Stephen W., Local Indigenous Agency
- Oscar M., University of Grassland, Data Analytics

Community Background:

The Grassland community has a population of 64,900, with approximately 40% made up of those between the ages of 15 and 29. There are 54% males and 46% females in the community. The majority of residents living in Grassland were born in Grassland, with only 20% coming from another community, province or country. As a result, most of the population is English speaking; however, there are some smaller neighbourhoods with a strong presence of French-speaking individuals. Most residents of Grassland are single, with 30% of the population being married or in a common-law relationship; there is also a high presence of single-parent households. Most of the land is residential, with several retail businesses in the downtown core. Households living in Grassland have an average annual income of \$65,000.

Community Engagement:

To support the identification of local risks, partners involved in the development of Grassland's community safety and well-being plan hosted two community engagement sessions at the community centre. The first session had 25 participants, and the second session had 53 participants. Each of these sessions were open to the public, and included representation from a variety of agencies/organizations from a wide range of sectors, including but not limited to local elementary and secondary schools, university, hospital, community agencies, private businesses, addictions support centres, mental health centres, long-term care homes, retirement homes and child welfare organizations. Members of the public and vulnerable groups also attended, including youth and seniors themselves. A number of open-ended questions were posed at the engagement sessions to encourage and facilitate discussion, such as: What is the Grassland community doing well to ensure the safety and well-being of its residents? What are challenges/issues in the Grassland community and opportunities for improvement?

To receive more specific information regarding risks, planning partners conducted 14 one-on-one meetings with community agencies/organizations (some attended the town-hall meeting and some did not). These meetings were initiated by the municipal coordinator, as she grew up in the community and already had a strong working relationship with many of these agencies/organizations. Questions were asked such as: What are the barriers to success that you see in your organization? What are the risks most often faced by the individuals and families that you serve? Agencies/organizations that were engaged during this phase include:

- Grassland Catholic School Board
- Employment Centre
- Children's Mental Health Centre
- Grassland Hospital
- Ontario Works
- Grassland Police Service
- Grassland Senior's Association
- Local Homeless Shelter
- Organization that works with offenders
- Addictions Centre
- Women's Shelter
- Local First Nations and Métis Organization
- Francophone Organization
- LGBTQ Service Organization

Priority Risks:

The following risks were selected by the planning committee as priorities to be focused on in their four year plan:

- Low Educational Attainment Rates
 - At the town-hall community engagement sessions, members of the public and the local school boards identified a lack of educational attainment in Grassland. Statistics provided by Ontario Works also indicated that Grassland has an above-average number of individuals being financially supported by their services that have not obtained their high-school diploma. The local school boards have noticed a significant increase in the number of individuals dropping out before they reach grade 12 in the past two years. This was supported by statistics received from Statistics Canada, which show Grassland having a significantly high number of people that have not completed high-school compared to other municipalities of a similar size.

Mental Health

 Mental health was identified most frequently (12 out of 14) by the agencies/organizations that were engaged on a one-on-one basis as being a risk faced by many of the individuals and families they serve.

Domestic Violence

 Statistics provided by the Grassland Police Service indicate that they respond to more calls related to domestic violence than any other type of incident. Grassland also has the largest women's shelter within the region; it is often over-populated with women having to be referred to services outside of the municipality.

Implementation Teams and Members:

- Increasing Educational Attainment Working Group
 - Purpose: to increase educational attainment in Grassland by creating awareness about the impacts of dropping out of school and ensuring youth receive the support they need to graduate.
 - Membership: this group includes representation from the planning committee as well as organizations that were engaged during community engagement whose mandate aligns with this group's purpose. Specifically, membership consists of:
 - Julie M., Grassland Catholic School Board
 - Ray A., Grassland Public School Board
 - Shannon C., Ontario Works
 - Ram T., Ontario Disability Support Program
 - Claudia T., Municipality of Grassland (Social Services)
 - Sam S., Employment Centre
 - Stephen W., Local Indigenous Agency
 - Allan R., youth living in the community
- Mental Health Task Force
 - Purpose: to ensure Grassland community members who are experiencing mental health issues are
 properly diagnosed and have access to the most appropriate service provider who can assist in
 addressing their needs.
 - Membership: this group has been in place for the past two years and was identified after completing an asset mapping exercise of existing bodies as a body that could be responsible for coordinating/developing strategies related to mental health. Existing members will continue to be on this implementation team and include:

- Mary M., Municipality of Grassland (Social Services)
- Fionne Y., Children's Mental Health Centre
- James Y., Grassland Hospital
- Susan B., Addictions Centre
- Todd S., Grassland Catholic School Board
- Lynn W., Grassland Public School Board
- Morgan T., Community Elder
- Domestic Violence Prevention Working Group
 - Purpose: to ensure victims of domestic violence are receiving the proper supports from the most appropriate service provider and are provided with assistance in leaving their abusive relationships.
 - Membership: this group includes representation from the planning committee as well as organizations that were engaged during community engagement whose mandate aligns with this group's purpose. Specifically, membership consists of:
 - Emily J., Grassland Police Service
 - Aiesha Z., Women's Shelter
 - Stephanie L., Social Services
 - Lisah G., Social Services
 - Kail L., Grassland Hospital
 - Frank C., Victim Services
 - Sean D., Local Indigenous Agency

Plans to Address Priority Risk

Priority Risk #1: Low Educational Attainment

Approximately 20% of the population of Grassland has not obtained their high school diploma. As a result, employment opportunities for these individuals are limited and the average household income is much lower than the provincial average. This has resulted in an increase in property crime in the past several years as these individuals strive to provide for themselves and their families.

Vulnerable Group: youth between the ages of 12-17

Risk Factors: missing school – chronic absenteeism, truancy, low literacy, low educational attainment, learning difficulties, behavioural problems

Protective Factors: positive school experiences, optimism and positive expectations for future, self-esteem, positive support within the family

Activities:

- Broker partnerships between social services, neighbourhood hubs, library and school boards (social development) this will be done collectively by the Increasing Educational Attainment Working Group
- Community engagement sessions involving youth (prevention) this will be done at the onset by the planning committee
- One-on-one meetings with local university, college and social services (prevention) this will be done at the onset by the planning committee

- Review outcomes of lunch-time and after-school reading programs in schools to consider enhancement and expansion (prevention)
- Implement the Violent Threat Risk Assessment Protocol (risk intervention) this will be a joint effort of the Grassland Catholic and Public School Boards

Immediate Outcomes:

- Community is better informed of issues faced related to community safety and well-being (education specifically)
- Impacts of not graduating from high-school communicated to students, community members and service providers
- Increased access to education for students in receipt of social assistance
- Expansion of lunch-time and after-school reading programs in schools
- A coordinated approach to supporting youth who pose a risk of violence to themselves or others
- Better school experiences for troubled youth

Intermediate Outcomes:

Increase graduations rates

Long-Term Outcomes:

• Increase community safety and well-being through an increase in employment rates and income levels

Priority Risk #2: Mental Health

More than 50% of the Grassland Police Services' social disorder calls are responding to those with a mental health issue. This has created tension within the community as the police are not properly equipped to handle these types of situations. These individuals are becoming involved in the criminal justice system, rather than receiving the support that they require.

Vulnerable Group: individuals between the ages of 15 and 45

Risk Factors: poor mental health, learning difficulties, low self-esteem, impulsivity, mistreatment during childhood, neglect

Protective Factors: self-esteem, adaptability, housing in close proximity to services, access to/availability of resources, professional services and social supports

Activities:

- Broker partnerships between mental health service providers (social development) this will be done collectively by the Mental Health Task Force
- Community engagement sessions (prevention) this will be done at the onset by the Planning Committee
- One-on-one meetings with local mental health service providers (prevention) this will be done at the
 onset by the planning committee and additional meetings will also be arranged by the Mental Health Task
 Force
- Broker partnerships with private sector building development companies with the aim of increasing housing opportunities in priority neighbourhoods (prevention) – this will be done by the Mental Health Task Force

- Implementation of the Youth Outreach Under 18 Response Service to eliminate service gaps for youth on waitlists by providing them with short-term support until other services may be accessed (risk intervention) – this will be led by the Children's Mental Health Centre
- Implementation of an evidence-based collaborative model of police and mental health workers responding to mental health calls together (e.g., COAST) (incident response)

Immediate Outcomes:

- Mental health service providers interacting to reduce a duplication of services
- Individuals experiencing mental health issues receiving support from the most appropriate service provider
- Individuals in the community are aware and more sensitive to those experiencing mental health issues
- Individuals experiencing mental health issues are connected to stable housing that is in close proximity to services
- Development of relationship with private sector building companies

Intermediate Outcomes:

The level of mental health service availability meets the needs of the population

Long-Term Outcomes:

 Increase community safety and well-being through availability of affordable housing in areas of need due to partnership between the municipality and private sector building company

Priority Risk #3: Domestic Violence

There are a significant number of women (as well as some men) in Grassland in violent relationships. While the severity varies between cases, many of these victims continue to return to their spouses after the police have been involved. As a result, there are a significant number of children being taken away from their families and being put into foster care.

Vulnerable Group: women and children in the community

Risk Factors: physical violence in the home, emotional violence in the home, mistreatment during childhood, parent's own abuse/neglect as a child, unsupportive/abusive spouses, young mothers

Protective Factors: self-esteem, positive relationship with spouse, strong family bond, positive support within the family, stability of the family unit

Activities:

- Engage women's shelters, local hospital and police to create an anti-relationship-violence campaign (social development) – this will be done collectively by the Domestic Violence Prevention Working Group with support from the municipality
- Engagement of victims in community engagement (prevention) this will be done at the onset by the planning committee and additional meetings will also be arranged by the Domestic Violence Prevention Working Group
- Implementation of a healthy relationships program (prevention) this will be a joint effort of the local Women's Shelter and Grassland Hospital

 Implementation of a Situation Table to ensure individuals at risk of victimization and/or harm are connected to a service provider before an incident occurs (risk intervention) – this will be led by the municipality with participation from all planning committee members and other agencies/organizations who were engaged one-on-one

Immediate Outcomes:

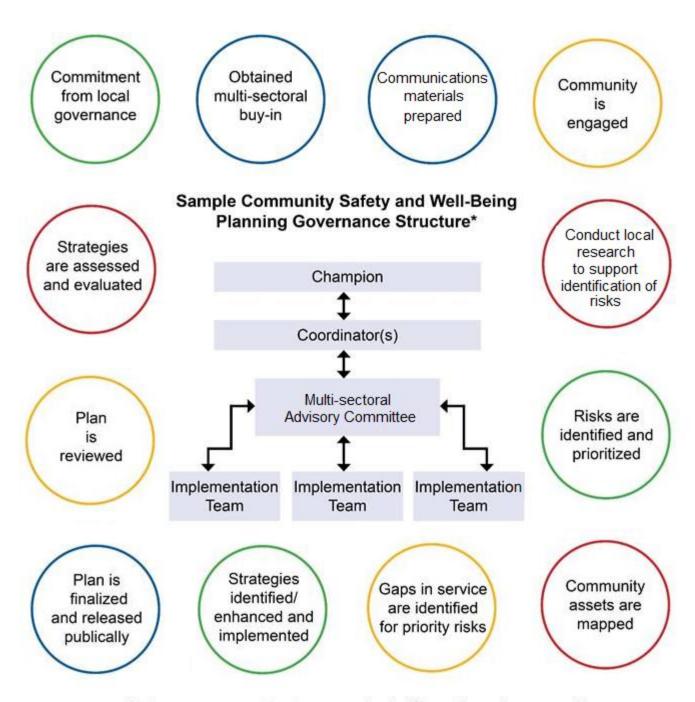
- Increase victim's awareness of services in the community
- Awareness of the impact of domestic violence on children
- Enrolment in a healthy relationships program for those who have been arrested for domestic-violence related offences
- Connecting individuals with acutely elevate risk to service

Intermediate Outcomes:

 Victims of domestic violence are provided with the support they require to leave their situation and/or victims and perpetrators are provided with the support they require to improve their situation

Long-Term Outcomes:

• Increase community safety and well-being



*Note: governance structures may look different in each community

This diagram includes an example of a governance structure for the community safety and well-being planning process. The roles and responsibilities of the participants represented in this diagram are highlighted in Tool 1: Participants, Roles and Responsibilities. The diagram also highlights different steps to the community safety and well-being planning process that are described throughout this document. As community safety and well-being planning may look different in each community, the different steps can be flexible and adaptable for each community across Ontario.

Thank you for your commitment to community safety and well-being planning. The ministry welcomes your thoughts, comments and input on this booklet. Please send your comments to SafetyPlanning@Ontario.ca.

In addition, the ministry would also like to thank our inter-ministerial, policing and community partners who participated in the development of this booklet, including the pilot communities who tested components of the community safety and well-being planning framework and toolkit. Thank you for your ongoing support and feedback throughout this process.

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REPORT TO COMMITTEE

To: Chair Ryan and Members of the Community Services/Dufferin Oaks

Committee

From: Anna McGregor, Director of Community Services

Date: August 22, 2019

Subject: Annual Rent Increase Guideline 2020

In Support of Strategic Plan, Priorities and Objectives:

Good Governance - ensure transparency, clear communication, prudent financial management

Service Efficiency & Value - determine the right services for the right price **Inclusive and supportive community** – support efforts to address current and future needs for a livable community

Purpose

The purpose of this report is to seek direction with respect to possible changes to the market rents and affordable rents for County-owned social housing locations.

Background and Discussion

The Housing Services Act, 2011 makes it a requirement of all social housing landlords that in its leases with its tenants that:

The lease cannot be for longer than one year and should state both the market rent for their unit and the RGI rent as well as other charges that the tenants must pay.

The County of Dufferin, currently directly owns and manages 298 units. This includes 65 units constructed under the Canada Ontario Affordable Housing Program, i.e. Affordable Housing where rent is set at 80% of the area's Average Market Rent.

The Ontario government is capping rent increases for 2020 at 2.2% per cent for the province's one million tenant households. The cap, also known as the Rent Increase Guideline, is the maximum amount a landlord can increase a tenant's rent without seeking the approval of the Landlord and Tenant Board.

Local Municipal Impact

Of the total 298 units in 2020 approximately eighty-two (82) units may be impacted by the rent increase: seventeen (17) households paying market rent (no subsidy attached) and sixty-five (65) households paying affordable rent. The remaining 216 households in receipt of Rent Geared to Income (RGI) subsidy will not be impacted by the increase because their subsidy is aligned to their income and not the rent charge.

The following table shows the current (2019) Market Rents at County of Dufferin owned units:						
County Operated		Unit Size				
	Bachelor	1 Bedroom	2 Bedroom	3 Bedroom	4 Bedroom	
Orangeville	\$801	\$962	\$1,076	\$1,246	\$1,372	
Shelburne		\$816	\$942			
Grand Valley		\$844				
	1 Bedroom Affordable	1 Bedroom Market Rent	2 Bedroom Affordable	2 Bedroom Market Rent	3 Bedroom Markent Rent	4 Bedroom Markent Rent
40 Lawrence Avenue	\$762	\$954	\$879	\$1,098		
54 Lawrence Avenue	\$802	\$1,002	\$948	\$1,186	\$1,600	\$1,726
301 First Avenue	\$751	\$940	\$889	\$1,111		

The following table shows 2019 Market Rents with a 2.2% increase applied:						
County Operated		Unit Size				
	Bachelor	1 Bedroom	2 Bedroom	3 Bedroom	4 Bedroom	
Orangeville	\$819	\$983	\$1,100	\$1,273	\$1,402	
Shelburne		\$834	\$963			
Grand Valley		\$863				
	1 Bedroom	1 Bedroom	2 Bedroom	2 Bedroom	3 Bedroom	4 Bedroom
	Affordable	Market Rent	Affordable	Market Rent	Markent Rent	Markent Rent
40 Lawrence Avenue	\$779	\$975	\$898	\$1,122		
54 Lawrence Avenue	\$820	\$1,024	\$969	\$1,212	\$1,635	\$1,764
301 First Avenue	\$768	\$961	\$909	\$1,135		

Services included with all rental units in all Municipalities (Market, Affordable and RGI):			
Unit Style	Services Included - most locations		
Apartment	Heat, hot water, water, refrigerator, stove, hydro, microwave (40 Lawrence Ave.)		
Semi-detached	Heat, hot water, water		
54 Lawrence Ave. (RGI)	Heat, hot water, water, refrigerator, stove, washer, dryer, A/C		
54 Lawrence Ave. (Mkt)	Refrigerator, stove, washer, dryer, A/C		

Historical Increase Trends	Location				
	Orangeville Shelburne		Grand Valley		
2015	1.6%	1.6%	1.6%		
2016	2.0%	2.0%	2.0%		
2017	1.5%	1.5%	1.5%		
2018	1.8%	1.8%	1.8%		
2019	1.8%	1.8%	1.8%		

Financial, Staffing, Legal, or IT Considerations

County of Dufferin owned units are priced competitively within each local market, and offer good value based on the services (utilities) included. With the intention of social housing being to provide support to those individuals and families in need of affordable accommodation, the County of Dufferin has very few tenants paying the maximum rent and therefore rental increases will be minimal.

Recommendation

THAT the report of the Director of Community Services, dated August 22, 2019, titled Annual Rent Increase Guideline 2020 be received;

AND THAT the 2020 market rents of Dufferin owned housing units be increased by the maximum level of 2.2% over the previous year.

Respectfully Submitted By;

Anna McGregor Director, Community Services



REPORT TO COMMITTEE

To: Chair Ryan and Members of the Community Services/Dufferin

Oaks/Museum Committee

From: Anna McGregor, Director of Community Services

Meeting Date: August 22, 2019

Subject: Dufferin Portable Housing Allowance Implementation (2020)

In Support of Strategic Plan Priorities and Objectives:

Good Governance - ensure transparency, clear communication, prudent financial management

Service Efficiency & Value - determine the right services for the right price **Inclusive & Supportive Community** – support efforts to address current and future needs for a livable community

Purpose

The purpose of this report is to seek approval for the implementation of a Dufferin Portable Housing Allowance program, for the Dufferin homeless population, with the goal of achieving safe, permanent, and sustainable housing at no additional cost to the County.

Background and Discussion

Homelessness in Dufferin

A PiT (Point in Time) Count conducted May 14th-15th, 2018, found 44 individuals to be homeless in Dufferin County. Of these, 4 individuals reported being completely unsheltered, meaning they were staying in parks, coffee shops, on the streets, or in other public spaces. Nineteen individuals were emergency sheltered, nine were couch surfing, three were staying in a motel and nine were staying at a transitional shelter.

Tracking

The BNL (By Names List) which is a real-time list of all of the individuals experiencing homelessness in the community and prioritizes clients based on need with the goal to end chronic homelessness within the County was launched in May, 2019.

The BNL is currently at 44, and will continue grow without a strategy to support these clients. Many of these clients are Ontario Works recipients, who are eligible to receive \$733.00 per month for shelter and basic needs. The average affordable rent for a 1 (one) bedroom unit in the County is \$931.00. Affordability determines access. Without financial help there is no affordability for many. The Housing Access Dufferin (HAD) centralized waitlist is currently at 718, the highest ever in the County. The average time to be housed is 4 to 8 years.

Proposal

The proposed Dufferin Portable Housing Allowance can be funded at no cost to the County through the repurposing of existing municipal monies from the Social Assistance Restructuring and Reinvestment (SARR) budget. Funds could be paid direct to tenants or direct to landlords depending on circumstances.

SARR funds were established by the municipality under direction from the then Ministry of Community and Social Services (MCSS). SARR is deemed to be savings which have to be reinvested into programs that support the vulnerable population in Dufferin County. This was a result of changes to Ontario Works programming when 'children' were taken out of Ontario Works financial assistance. Families now receive Child Tax Credits instead.

The SARR budget is \$100,000 which funds programs such as the Spring Harvest, Education Supplies, Snow Angels, and Bridging You Home. These programs provide nominal assistance at best and are often duplicated in the County by other agencies and/or can now be funded from other existing program budgets.

The SARR budget is Municipal money and can be used innovatively without the constraints of Federal/Provincial directives. This falls in line with the provincial and municipal drive to find more efficient ways of providing service. The SARR budget can stabilize housing for approximately 15 clients per month.

Local Municipal Impact

The implementation of a Dufferin Portable Housing Allowance will provide a meaningful and sustainable response to the homeless population in Dufferin County. Stabilized housing has been demonstrated to reduce poverty and lead to improved health, quality of life, and economic success. This new programming will also offset a funding reduction, where the County lost \$96,000 on the Community Homelessness Prevention Initiative (CHPI) in recently announced Provincial funding cuts.

Financial, Staffing, Legal, or IT Considerations

The first table is an illustration of the financial scenario for a single person on Ontario Works. The second table provides a possible example of how many households could be assisted. The third table illustrates the current use of SARR funds.

In order to have time to advise households who receive Gift Cards that programming will end, it is proposed financial allocation for the implementation of a Dufferin Portable Housing Allowance commence in April 2020. This will also coincide with the new fiscal year and federal funding dollars that support the operation of the BNL.

Table 1		
Ontario Works Financial Assistance		
Single Person Example		
Income Amount	\$733	
Average Rent	\$931	
Surplus/Deficit	\$(197)	
Shelter Portion Ontario		
Works Financial Assistance	\$390	
Portable Housing Allowance	\$541	
Total shelter	\$931	
Table 2		
Overview Overall Possible Cost		
# Clients Served/month	15	
Total Monthly Payout	\$8,115	
Total Annual Payout	\$97,380	

Table 3 SARR Budget	Amount
Spring Harvest (Gift Cards)	\$18,500
Educational Supplies (Gift Cards)	\$32,000
Snow Angels (Gift Cards)	\$39,000
Bridging You Home (Allowance	
moved to Seniors Services)	\$1,000
Transitional Allowance - Now Expired	\$2,500
Emergency Gift Cards	\$2,000
Hotel Stays – Can be funded from	
other programming	\$1,000
Duff Buck\$ (Coffee Hub Vouchers)	\$4,000
Total Spend	\$100,000

It is to be noted that any surplus funds will be reinvested in programming.

Recommendation

THAT the report of the Director, Community Services, titled Dufferin Portable Housing Allowance Implementation (2020), dated August 22, 2019, be received;

AND THAT approval be given for the creation of a Dufferin Portable Housing Allowance, to assist the Dufferin homeless population, commencing in April 2020, to be funded from the Social Assistance Restructuring Reinvestment (SARR) budget.

Respectfully Submitted By:

Anna McGregor Director of Community Services



REPORT TO COMMITTEE

To: Chair Ryan and Members of the Community Services/Dufferin Oaks

Committee

From: Anna McGregor, Director of Community Services

Meeting Date: August 22, 2019

Subject: Dufferin County Age-Friendly Needs Assessment and Strategic

Action Plan

In Support of Strategic Plan Priorities and Objectives:

Good Governance - ensure transparency, clear communication, prudent financial management

Inclusive and Supportive Community – support efforts to address current and future needs for a livable community

Purpose

The purpose of this report is to recommend adoption of the final version of the Dufferin County Age-Friendly Needs Assessment and Strategic Action Plan.

Background and Discussion

According to the Ontario Seniors' Secretariat, age-friendly communities promote healthy active aging by delivering policies, programs, services and spaces that help residents maintain their independence as they age. Similar to many communities across Ontario, the proportion of older adults in Dufferin County has been increasing over the past decade and is expected to continue at a rapid pace, creating increased demand for older adults' programs and services.

Dufferin County's Age-Friendly Community Needs Assessment and Strategic Action Plan was undertaken to ensure that older adults in Dufferin have access to the programs, spaces and services they require to stay active, healthy and engaged in the local community.

The attached plan provides research and future directions that are designed to address the ever-changing needs of Dufferin County residents aged 55 and older.

In the summer of 2018, the County of Dufferin issued a call-out to the community for the formation of an Older Adult Advisory Committee. The Older Adults Advisory committee was formed with ten members from the community, a team of two consultants from urbanMetrics Inc., and one project lead and support from the County of Dufferin. Lori-Jane Del Medico was the lead with support from Corinne Neilsen.

In partnership with urbanMetrics, the County held three community feedback sessions on December 12, 2018, two in Orangeville and one offered in Shelburne. In addition to these sessions, a resident survey was created. The survey was widely circulated from September through December of 2018 via the County website, community partners and stakeholders, and a variety of social media platforms.

On March 6, 2019, a consultation with community stakeholders took place to attain feedback from those who are directly involved in the delivery of services and programs in Dufferin.

A final analysis of the research and consultation results were compiled into the final plan. Objectives were established to improve age-friendliness and 78 corresponding actions have been recommended. The draft report was previously presented to Council before being finalized by the Older Adults Advisory Committee with some minor changes. The overall time frame for the assessment extends until 2024, at which time it is recommended that a review of the current state be established.

Local Municipal Impact

Drawing on the information provided in the plan, the County can work with local municipalities and human service agencies, in order to better inform local planning for senior's services.

Financial, Staffing, Legal, or IT Considerations

While there is no impact at this moment in time, there will be impacts to staff time as coordination of the action items identified in the report are addressed. This will apply to both County staff and staff from local human service agencies and providers. Separate resource needs and capacity assessments will be carried out as work progresses through the plan details.

Recommendation

THAT the report of the Director, Community Services, titled Dufferin County Age-Friendly Needs Assessment and Strategic Action Plan, dated August 22, 2019, be received;

AND THAT Dufferin County Age-Friendly Needs Assessment and Strategic Action Plan be adopted.

Respectfully Submitted By:

Anna McGregor Director, Community Services

Attachments:

Dufferin County Age-Friendly Needs Assessment & Strategic Action Plan
Dufferin County Age-Friendly Survey
Dufferin County Age-Friendly Needs Assessment & Strategic Action Plan Workshops



AGE-FRIENDLY NEEDS ASSESSMENT & STRATEGIC ACTION PLAN

Final Report

Prepared for County of Dufferin

July 31, 2019





This document is available in alternative formats upon request by contacting:



July 31, 2019

Lori-Jane Del Medico Children's Services Manager County of Dufferin 30 Centre Street Orangeville, ON L1V 6K7

Dear Ms. Del Medico:

RE: Age-Friendly Needs Assessment & Strategic Action Plan - Final Report

urbanMetrics inc. is pleased to submit the Dufferin County Age-Friendly Needs Assessment and Strategic Action Plan. This document provides foundational research and future directions that are designed to address the changing needs of Dufferin County residents, particularly those aged 55 and over. The Age-Friendly Needs Assessment and Strategic Action Plan is intended to identify specific programs and services that support the quality of life for Dufferin County residents as they age.

The Plan is a reflection of the insights gathered from local residents, community groups, private businesses and municipal staff. These findings and conclusions represent our assessment and interpretation of the information gathered from key informants, including an online survey completed by approximately 300 Dufferin County residents.

We appreciate the opportunity to conduct this assignment on your behalf and we look forward to discussing the results of our report with you.

Yours truly,

Peter Thoma, RPP, PLE

Partner

pthoma@urbanMetrics.ca

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Executive Summary

The Dufferin County Age-Friendly Needs Assessment and Strategic Action Plan represents the culmination of extensive background research and community consultation that has been used to establish a proactive approach to the delivery of policies, programs and services that help older adult residents maintain their independence as they age. Community engagement undertaken as part of the Age-Friendly Needs Assessment and Strategic Action Plan included input from local residents, private businesses, community organizations and municipal staff. Going forward, collaboration and partnerships will be fundamental to transform Dufferin County into a vibrant and diverse age-friendly community that is flexible and responsive to the needs of the aging population.

The term "older adults" refers to individuals who are 55 years of age, or older. However, it is recognized that older adults are not homogeneous and there is significant diversity within this population segment.

Older adults have represented the fastest growing segment of the local population in Dufferin County during the past decade and are forecast to represent an increasing share of the population in Dufferin County over the next two decades. As of 2016, older adults represented approximately 27.7% of the total population in Dufferin County, and by 2041 older adults are forecast to account for approximately 36.2% of the total population in Dufferin County. Therefore, it is necessary for Dufferin County to implement an innovative and forward-thinking approach to the delivery of policies, programs and services necessary to address the existing and future needs of older adult residents.

There are eight dimension of an age-friendly community according to the World Health Organization ("WHO"):

- 1) Transportation;
- 2) Housing;
- 3) Social Participation;
- 4) Respect & Social Inclusion;
- 5) Civic Participation & Employment;
- 6) Communication & Information;
- 7) Community Support & Health Services; and,
- 8) Outdoor Spaces & Buildings.

These eight community dimensions have been used as the basis for evaluating agefriendliness in Dufferin County. Inclusivity and accessibility in all aspects of community life are fundamental constructs of the WHO age-friendly movement. The age-friendly movement was initiated by the WHO to support an enhanced quality of life for older adults – with the



recognition that all residents – regardless of age – benefit when communities provide the appropriate policies, programs and services for older adults.

Based on extensive background research and community consultation the top priorities to improve age-friendliness in Dufferin County are related to the following community dimensions:

- 1) Transportation;
- 2) Communication & Information;
- 3) Housing; and,
- 4) Community Support & Health Services.

Objectives have been established to improve age-friendliness with respect to each community dimensions and a total of 78 corresponding actions have been recommended. The Age-Friendly Needs Assessment and Strategic Action Plan has been structured to include an overall objective for each of the eight age-friendly community dimensions, and a series of recommended actions to provide a roadmap for how each objective can be achieved in order to help improve age-friendliness in Dufferin County.

The overall timeframe for the Age-Friendly Needs Assessment and Strategic Action Plan extends until 2024, at which point the recommended actions should be revisited and reviewed. Each recommended action has been classified according to the expected timeframe for implementation and required involvement from various stakeholders. The goals and recommended actions outlined in the Age-Friendly Needs Assessment and Strategic Action Plan have drawn on many other local, regional and provincial policies and published reports.



1.0 **Background**



1.1 Introduction

For the first time in Canadian history, older adults now outnumber youth, as communities across Canada experience significant older adult population growth, attributed to the aging Baby Boom generationⁱ. Between the 2011 and 2016 Censuses, Canada experienced the greatest historic increase in the proportion of older adults.

In the County of Dufferin ("Dufferin County"), like many communities across Canada, older adults currently represent the fastest growing segment of the population. This trend is projected to continue over the next decade, with older adults representing an increasing share of the population in the local municipalities that comprise Dufferin County. The growing older adult population has created a need to be proactive to ensure that the appropriate policies, programs, services and spaces are available to meet the diverse and dynamic needs of existing and future residents of Dufferin County.

The term "older adults" refers to individuals who are 55 years of age, or older. However, older adults are not homogeneous and it is recognized that within this population segment there is diversity with respect to needs, physical capacity, mental capacity, interests, expectations, experiences, etc.

In 2002, the World Health Organization ("WHO") released the *Policy Framework on Active Ageing* to support an enhanced quality of life for older adults through the development of a framework to encourage healthy lifestyles and community participation. Building on this framework, the WHO *Global Age-Friendly Cities Project* was launched in 2006, and has been used to help guide communities throughout Canada, and around the world, to make communities more age-friendly.

Age-friendly communities deliver policies, programs and services that help residents maintain their independence as they age. Inclusivity and accessibility in all aspects of community life are fundamental constructs of age-friendly communities. The age-friendly movement was initiated with the recognition that when communities provide the appropriate policies, programs and services for older adults, residents of all ages benefit.

All age-friendly communities support active ageing as followsⁱⁱ:

- Recognizing the wide range of capacities and resources among older adults;
- Anticipating and responding flexibly to aging-related needs and preferences
- Respecting the decisions and lifestyle choices of older adults;
- Protecting older adults who are most vulnerable and,
- Promoting the inclusion and contribution of older adults in all areas of community life.



As part of the WHO *Global Age-Friendly Cities Project* eight dimensions were identified to evaluate age-friendliness, as summarized in Figure 1-1. There is considerable overlap and synergies with respect to these age-friendly community dimensions. For example, transportation influences social participation and access to community support and health services. The Dufferin County Age-Friendly Needs Assessment and Community Action Plan is consistent with the framework outlined in the WHO *Global Age-Friendly Cities: A* Guide.

Figure 1-1: Age-Friendly Community Dimensions



SOURCE: urbanMetrics inc. based on WHO Age-Friendly Cities: A Guide.

Dufferin County is directly responsible for the delivery of a variety of age-friendly programs and services, however, many other programs and services for older adults are delivered by local municipalities, residents, community organizations, private business and government bodies. As such, the Age-Friendly Needs Assessment and Community Action Plan aligns with the *Town of Orangeville Age-Friendly Community Action Plan* and the *Town of Grand Valley Aging in Place Research Report* to reflect that certain programs and services for older adults in Dufferin County are delivered by local municipalities.

Recognizing that Dufferin County is not the exclusive provider of all programs and services for older adults, collaboration and partnerships will be fundamental to the successful implementation of the Age-Friendly Needs Assessment and Community Action Plan. For programs and services that Dufferin County is not directly involved with, there is still an



important advocacy role to address issues impacting older adults throughout Dufferin County and communication about programs and services available for local residents.

1.2 Objectives

The Age-Friendly Needs Assessment and Community Action Plan is intended to serve as a guide for establishing a flexible and responsive approach to policy development, service delivery and community partnerships that will transform Dufferin County into an age-friendly community. The objectives of the Age-Friendly Needs Assessment and Community Action Plan were to:

- 1) Establish guiding principles and a vision;
- 2) Create an age-friendly community profile and inventory;
- 3) Identify goals, priorities and the full scope of issues facing the older adults in Dufferin County;
- 4) Evaluate the needs of the older adult population in Dufferin County; and,
- 5) Establish an action plan to help older adults age in place, lead healthy lifestyles and maintain their independence as they age.





1.3 Dufferin County Older Adults Profile

Based on the most recent Census data, the population of older adults in Dufferin County was 17,105 as of 2016, which represents 30% of the total population. As illustrated in Figure 1-2, there is an estimated population of 20,591 older adults in Dufferin County as of 2019. Going forward, significant population growth is projected to continue for older adults in Dufferin County. By 2024, the population of older adults in Dufferin County is projected to reach approximately 24,442, which represents approximately 33% of the total population. By 2041, the population of older adults in Dufferin County is projected to reach approximately 33,999, which represents approximately 36% of the total population.

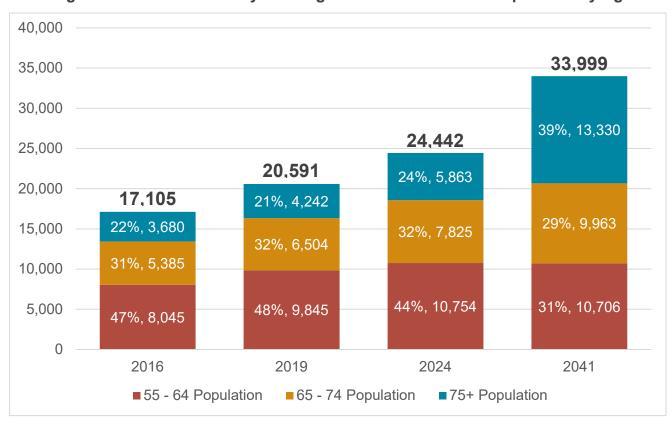


Figure 1-2: Dufferin County Existing & Future Older Adult Population by Age

SOURCE: urbanMetrics inc. 2016 population based on 2016 Statistics Canada Census data. 2024 and 2041 population based on Ontario Ministry of Finance Ontario Population Projections Update, 2017 – 2041.

Figure 1-3 illustrates that the local municipalities that account for the largest populations of older adult residents in Dufferin County include: the Town of Orangeville, the Town of Mono and the Town of Shelburne. The greatest concentrations of older adults in any municipality



comprising Dufferin County are located in Mulmur Township and the Town of Mono, where older adults account for approximately 35% of the respective populations.

The Town of Orangeville accounts for the greatest concentration of residents who are 75 years of age or older. Older adults who are 75 years of age or older represent approximately 25% of the older adult population in the Town of Orangeville. The growing older adult population across Dufferin County is creating increased demand for programs and services.

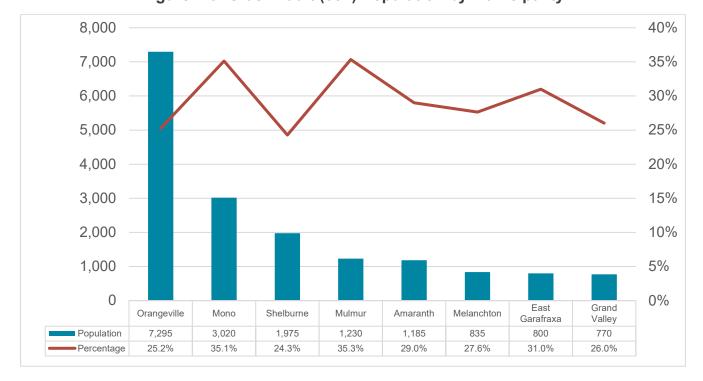


Figure 1-3: Older Adult (55+) Population by Municipality

SOURCE: urbanMetrics inc. based on Statistics Canada 2016 Census data.

In Dufferin County, females account for approximately 52% of the older adult population. Recognizing that women have a higher life expectancy compared men, females represent an increasing share of the older adult population and the gender bias is more pronounced as age increasesⁱⁱⁱ; with females representing 66% of the local older adult population.

Approximately 55% of the population in Dufferin County lives in the urban areas of Orangeville and Shelburne, which collectively account for 1.5% of the total land area. However, the remaining 45% of the population in Dufferin County is dispersed over the remaining 98.5% of the total land area. Therefore, it is important to understand how the unique needs of older adults living in rural areas differ from those living in urban areas, in order to balance the needs of older adults living in urban and rural areas.



Living in a couple, either with a spouse or common-law partner, is the most common living arrangement for the older adult population in Dufferin County, however, many older adults live alone and are more vulnerable to social isolation. The percentage of older adults living alone is particularly high in the Town of Shelburne, the Town of Orangeville and the Town of Grand Valley, recognizing that the only dedicated housing facilities for older adults in Dufferin County are located in these three communities. Nevertheless, older adults living in rural areas have limited access to housing, transportation, social/recreational and community support services compared to those living in the Town of Shelburne, the Town of Orangeville and the Town of Grand Valley, and are subsequently more susceptible to social isolation and poor physical/mental health.

In general, the current generation of older adults has greater wealth than previous generations^{iv}, however, many older adults are dependent on fixed incomes and have precarious financial security. The growing number of older adults using local food banks is a reflection of the financial vulnerability of many older adults. In Dufferin County, the local municipality with the most low-income older adults is the Town of Orangeville. However, the prevalence of low-income older adults is highest in Mulmur Township, the Town of Mono and the Town of Shelburne.

In terms of ethnic origins, Dufferin County has historically had a strong concentration of residents with English-speaking European backgrounds (e.g. English; Irish; Scottish). However, the population is becoming more and more diverse; with the proportion of residents with European backgrounds declining between 2006 and 2016. The changing ethnic origins of Dufferin County residents is reflected in the visible minority population which has grown dramatically during the past decade; increasing by almost 150% between 2006 and 2016. Going forward, an increasing share of Dufferin County's older adult population will be represented by visible minorities, which will have implications with respect to the delivery of programs and services for local residents.



2.0 Methodology



2.1 Overall Approach

From the outset, community engagement and public input has been a fundamental component of the strategic planning process for the Age-Friendly Needs Assessment and Community Action Plan. The findings and recommended actions detailed in this report are the result of extensive community engagement in Dufferin County, which included input from local residents, private businesses, community organizations, municipal staff and elected officials. The five key steps involved in undertaking community-based strategic planning for the Age-Friendly Needs Assessment and Community Action Plan have been outlined below:

Figure 2-1: Methodology Overview

Launch



- Established project team relations and reporting procedures
- Clarified project objectives
- · Identified key stakeholders
- Reviewed primary issues for local older adults
- Identified data gaps and information challenges
- Reviewed parallel studies and policies
- Established communication protocols

Investigate



- Reviewed background materials
- Established demographic profile of older adults
- Development comprehensive inventory of older adult programs and services
- Identified best practices and benchmarks
- Identified existing resources and gaps
- Prepared SWOT analysis for older adult programs and services

Explore



- Conducted in-the-field research, including:
 - Online survey 259 fully completed survey responses
 - Internal and external stakeholder focus group 20 representatives from local agencies, community organizations and/or service providers participated
- Consolidated research findings related to background materials, demographics, inventory, best practices, etc.



Figure 2-1: Methodology Overview

Refine



- Conducted public workshops to validate survey research findings
- Established strategic priorities to address the needs of older
- Identified resources and partnerships required to implement strategic priorities
- Established core elements of Age-Friendly Needs Assessment and Community Action Plan

Report



 Translated input from background research and consultations into Age-Friendly Needs Assessment and Community Action Plan



2.2 Consultation Approach

The consultation strategy for the Age-Friendly Needs Assessment and Community Action Plan involved two primary audiences. The approach used to collect input about age-friendly considerations in Dufferin County involved the following consultation initiatives:

Figure 2-2: Consultation Approach Overview

Local Residents (Public)



Public Survey

Date: October 24, 2018 – December 21, 2018 Format: Online and hard-copy public survey

Participants: 259

Public Workshops

Date: December 12, 2018

Locations & Times: W&M Edelbrock Centre (10:30 -11:30 am); Mel Llyod Centre (2:00 – 3:30 pm); W&M

Edelbrock Centre (6:30 – 8:00 pm) Format: Live audience polling

Participants: 20

Internal & External Stakeholders



Older Adults Advisory Committee Meetings

Dates: September 12, 2018; October 10, 2018

Location: W&M Edelbrock Centre

Format: Face-to-face meetings with members of

older adults advisory meetings

Focus Group Workshops

Date: March 6, 2019

Location & Time: W&M Edelbrock Centre (1:00 -

4:00 pm)

Format: Round-table discussion

Participants: Dufferin County Community Support **Services; County of Dufferin Housing Services; Lord Dufferin Retirement Centre; CMHA Peel Dufferin; Orangeville Public Library; TeleCheck Dufferin; Giving Stories; Dufferin Area Family Health Team; Orangeville and District Seniors**

Centre: Avalon Retirement Lodge



3.0 Research Findings



3.1 Overview of Background Documents

The goals and recommended actions outlined in the Age-Friendly Needs Assessment and Strategic Action Plan have drawn on many other local, regional and provincial policy documents and published reports including, but not limited to, the following:

- WHO Essential Features of Age Friendly Cities
- WHO Global Age-Friendly City: A Guide
- WHO Age-Friendly Cities Project Methodology (Vancouver)
- Dufferin County Official Plan (Office Consolidation July 17, 2017)
- Dufferin County Economic Development Strategic Plan
- Dufferin County 10 Year Housing and Homeless Plan
- Dufferin County Towards Coordinated Rural Transportation: A Resource Guide
- Town of Orangeville Age-Friendly Community Action Plan
- Town of Orangeville Parks Master Plan

- Finding the Right Fit: Age-Friendly Community Planning
- Age-Friendly Rural and Remote Communities: A Guide.
- Dufferin County Multi-Year Access
 Plan 2017 2021
- Dufferin County Corporate Strategic Plan 2015 – 2018
- Dufferin County (DC) Moves Resources
- Dufferin County Planning Review Through A Public Health Lens
- Wellington-Dufferin-Guelph Public Health the Older Adult Health Report 2018
- Town of Grand Valley Aging in Place Research Report
- Town of Shelburne Parks Master Plan

Below we have summarized policies and recommendations pertaining to older adults and/or seniors from some of the key background documents noted above.

Dufferin County Corporate Strategic Plan



The *Dufferin County Corporate Strategic Plan* emphasizes the importance of improving support services and transportation for seniors. Specifically, Strategic Objective 4.2 includes the following actions:

- 1) "Investigate options for transportation for seniors
- 2) Ensure inclusive support services that promote safe and healthy living are available to Dufferin residents
- 3) Engage with community partners to address service provision and access."



Dufferin County Official Plan



The *Dufferin County Official Plan* emphasizes the importance of planning for the human environment, in order to promote quality of life and ensure that housing needs of various population segments are being met, including seniors.

Section 3.7.2 includes a number of specific policies that support the development of housing for low-income seniors and other vulnerable population segments.

Section 3.7.3 emphasizes the importance of partnerships with local agencies and service providers to identify opportunities for the development of more seniors' housing. Specifically, Section 3.7.3(e), (f), and (g) indicate the following:

- e) "The County and local municipalities will encourage the provision of housing for aging-in-place for seniors so that:
 - individuals living in a non-healthcare environment, will have access to municipal services and amenities so that they may carry out their daily life without having to relocate as their circumstances change; and
 - ii) where the above is not suitable due to the physical or mental condition of the individual, independent living, assisted living and skilled nursing is to be encouraged in residences for seniors, such as in a continuing care retirement community.
- f) The County and local municipalities will encourage the development of age-friendly communities through the provision of a diverse range of housing, housing in close proximity to available community services and facilities, and universal design principles which support various levels of need and accessibility.
- g) The County and local municipalities will encourage the provision of long-term care facilities that meet the needs of the community.

Section 3.7.3 also emphasizes the County's commitment to providing a barrier-free environment, consistent with the Accessibility for Ontarians with Disabilities Act.



Dufferin County Economic Development Strategic Plan



The *Dufferin County Economic Development Strategic Plan* indicates that one of Dufferin County's competitive strengths is the untapped resource of seniors, who can offer a wealth of knowledge and experience.

Section 4.2 includes a number of actions that specifically address seniors, including:

- 1) "4.2.1 Investigate options for transportation for seniors
- 2) 4.2.2 Ensure inclusive support services that promote safe and healthy living are available to Dufferin residents
- 3) 4.2.3 Engage with community partners to address service provision and access."

Dufferin County 10-Year Housing and Homelessness Plan



The *Dufferin County 10-Year Housing and Homelessness Plan* indicates that one of the primary housing issues in Dufferin County is the provision of suitable housing from the increasing population of seniors. Another key issue related to the growing seniors' population, is the growing proportion of seniors who live alone, particularly in urban areas throughout Dufferin County, including: Orangeville, Shelburne and Grand Valley. Fewer seniors live alone in Amaranth, Melancthon, Mono and Mulmur, however, those who

do live alone in these rural communities are subject to greater vulnerability and increased risk of social isolation.

Town of Orangeville Economic Development Strategy Update



The *Town of Orangeville Economic Development Strategy Update* discusses post-secondary connections and experiential learning opportunities involving students in the Georgian College Recreation and Leisure Studies Program working directly with seniors. Examples of these programs include, but are not limited to: leisure and fitness activities; staying active in retirement; life enrichment for residents in long-term care facilities; adaptive-therapeutic recreation; and, event planning.



Town of Orangeville Parks and Recreation Strategic Plan 2010 – 2020



The *Town of Orangeville Parks and Recreation Strategic Plan* acknowledges the growing demand for activities for the aging population and the increasing activity levels of seniors as they age, which is further increasing demand. Seniors in Orangeville are looking for programs and services that promote wellness and active living; with daytime activities being preferred. Key considerations include: the affordability of services; the need for a comprehensive inventory of programs and services; and, opportunities for

intergenerational programming with local schools.

The second priority highlighted in the strategic plan is related specifically to seniors:

- 2) "Promote opportunities for seniors to live active and healthy lifestyles.
 - Partner with other organizations that support seniors.
 - Establish active partnerships with senior organizations.
 - Identify physical activity opportunities available through partners.
 - Promote opportunities available.
 - Increase seniors' involvement in community events.
 - Encourage senior volunteers and recognize their efforts
 - Promote senior-focused activities."

Town of Orangeville Age-Friendly Community Action Plan



The *Town of Orangeville Age-Friendly Community Action Plan* is a strategic planning document intended to guide Orangeville in becoming a vibrant, safe community where all residents can age with respect, dignity and purpose. The plan was developed based on the WHO's eight age-friendly community dimensions, similar to the Age-Friendly Needs Assessment and Strategic Action Plan. The five key priorities with respect to improving age-friendliness in Orangeville include:

- 1) Reducing Social Isolation
- 2) Integrated Cross-Departmental Planning
- 3) Strengthening Accessibility with an Age-Friendly Lens
- 4) Building Age-Friendly Awareness & Supports in the Private Sector
- 5) Addressing Ageism Across All Sectors

The *Town of Orangeville Age-Friendly Community Action Plan* includes a series of strategies and associated actions to make improvements in relation to each of the WHO's eight age-friendly dimensions. There are 27 strategies identified to improve age-friendliness. The strategies and actions to improve age-friendliness in Orangeville are categorized according to



the following categories: (1) physical environments; (2) social environments; and, (3) personal well-being.

Town of Shelburne Parks Master Plan



The primary objective of the *Town of Shelburne Parks Master Plan* is to enrich the quality of life for all residents by providing parks, open spaces and trails across a spectrum of opportunities. It highlights the importance of planning for the growing seniors' population, particular with respect to rest areas, shade and washrooms in parks.

The framework for determining investments in parks also considers the specialized needs of seniors, emphasizing accessibility and affordability.

The principles of the plan also help to advance the needs of seniors. For example, fair and equitable access to recreational opportunities for all residents, regardless of ability, culture, income, or geography

Town of Shelburne Economic Development Strategy



The *Town of Shelburne Economic Development Strategy* indicates that although the level of satisfaction with programs and services for seniors in Shelburne is relatively high, the lack of programs, activities and amenities for seniors is a major challenge, which negatively impacts quality of life for local residents. The strategy describes Shelburne as a senior-friendly community with respect to housing, as well as, social and emergency services *"with plentiful supports and services for seniors"*.

Mulmur Community Economic Development Strategic Plan



Community building is one of the fundamental principles of the *Mulmur Community Economic Development Strategic Plan*. It notes the rapidly growing population of the seniors and growing proportion of the total population represented by seniors throughout Dufferin County. Feedback from local residents indicated that more housing options are needed to allow seniors to downsize (e.g. bungalows, rather than townhouses with stairs).

The *Mulmur Community Economic Development Strategic Plan* recognizes the importance of seniors, however, it also identifies major challenges as follows:

"...although the population of Mulmur is aging at a faster rate than that of Dufferin County, the local economy is not reaping the benefit of services that would cater to a large group of seniors. Mulmur does not advertise seniors housing, home delivery services, or low cost taxis. There are some



small self-funding community groups such as the Honeywood Take-A-Break club that sponsors the annual strawberry supper, but the North Dufferin Community Centre has accessibility issues."

Town of Grand Valley Economic Development Committee Strategic Plan Aging In Place Research Report



The primary goal of the *Town of Grand Valley Economic Development Committee Strategic Plan Aging In Place Research Report* was to gain knowledge regarding the feasibility of building new retirement facilities and the type(s) of facilities that are required, as well as potential costs, contractors and operators. The report emphasizes that with foresight and planning, there is potential for the development housing for older adults that would not only benefit nearby older adults, but the Town as a whole.

In recent years there have been new older adult housing facilities opened in Orangeville and Shelburne, but not Grand Valley, therefore investment is required to ensure that there is an equitable distribution of seniors housing throughout Dufferin County (e.g. apartment building consisting of 3 or 4 stories, with approximately 40 units and potential for future expansion).

Key recommendations include:

- Approaching Dufferin County to stress the need for a modern and accessible seniors housing facility in Grand Valley.
- Pursuing partnerships with government bodies, and seniors housing developers to encourage their interest in the development of new senior facilities in Grand Valley.
- Ensuring that local zoning bylaws encourage developers to consider the development seniors housing on a more frequent basis.

3.2 Age-Friendly Inventory

An inventory of existing community resources for older adults has been assembled based on information from the following and supplemented by other data sources:

- Central West Local Health Integration Network (Central West LHIN) database;
- Dufferin Community Support Services: Bringing Care Home Directory;
- Dufferin County Housing Programs and Services;
- Dufferin Board of Trade Business Directory;
- My Dufferin Service Directory;
- Headwaters Communities in Action Listing of Dufferin County's Current Transportation Options; and,
- Town of Orangeville Age Friendly Assets and Resources database.



This inventory has been assembled to confirm the existing range of programs and services available for older adults in Dufferin County and help to identify where the allocation of additional resources would help to improve age-friendliness.

Over **100 existing resources** have been identified for older adults in Dufferin County. Each entry has been categorized according to the age-friendly community dimension(s) that the program or service helps to address. Programs related to Social Participation account for the largest share of the existing services available for older adults in Dufferin County. Programs and services related to Transportation, as well as Communication and Information, represent the most significant gaps in terms of programs and services available to support older adults in Dufferin County.

3.3 Age-Friendly Best Practices

During the past decade, many communities across Canada, and globally, have undertaken age-friendly community planning initiatives. There are currently 80+ other communities in Ontario undertaking initiatives to become more age-friendly^{vi}. Age-friendly initiatives from other communities have been researched to provide examples of potential actions that could be undertaken to improve age-friendliness in Dufferin County. Examples of best practices that have been implemented in communities throughout Ontario have been highlighted for each age-friendly community dimension.

Transportation

Innisfil, ON – An innovative program has been established in Innisfil whereby ride-sharing services are subsidized by the municipality as the primary form of public transit, in order to help eliminate service gaps attributed to the large service area and geographically dispersed population. The service involves a partnership with Uber to provide a \$5 discount for all rides to and from destinations located outside of the Town and flat rates for travel to and from specific destinations within the Town (e.g. Innisfil Recreational Complex).

Housing ()

Barrie, ON – Property Tax Deferral Program allows eligible property owners (e.g. any property owner aged 65 or older and/or any individual who is currently receiving benefits under the Ontario Disability Support Program) to have their property taxes "frozen" at the base level from the year prior to the application, without any interest accrual until the property is sold or otherwise changes ownership.



Social Participation ()

London, ON – Seniors' Hub and Satellite Service Model was established to create neighbourhood social and recreational programs, separate from programs offered at the City's primary facilities for older adults. Programs at satellite facilities help to improve access to opportunities for social participation by delivering social and recreational programs at a neighbourhood level, helping to ensure that older adults remain active and engaged. As part of this program, a Seniors' Satellites Tool Kit has been developed to guide other communities in developing a similar service delivery model.

Respect & Social Inclusion (



Pickering, ON – Age-Friendly Information & Active Living Fair is hosted annually to educate residents about local older adult programs and services. Funding to host this event is provided by the Older Adults Centres' Association of Ontario ("OACAO"). The event incudes guest speakers and presentations about older adult issues (e.g. elder abuse; fall prevention) and interactive information booths (e.g. Central East LHIN, Ministry of Finance, Connect Hearing, Durham Regional Police, Pickering Fire Services, Pickering Public Library, Pickering Animal Services, Pickering Accessibility Advisory Committee, DUCA, Insuranceland, BioPed, Pickering Soccer, Ministry of Transportation, Organize That, Shoppers Home Health).

Civic Participation & Employment (



Peterborough, ON – Best Before Date media campaign launched to combat discrimination based on age and educate the local community about the value of the aging population. This program was intended to demonstrate the valuable knowledge and experience that older adults can offer in the workplace and ensure that older adults are respected for the contributions in the community.

Communication & Information (



Waterloo, ON – In partnership with Waterloo Wellington Healthline, the City of Waterloo's Age Friendly Committee established a central online information resource to help improve coordination of service delivery and access to age-friendly services. This database is comprised of six categories of age-friendly programs including:

- Community Support Services;
- Health Services;
- Housing;
- Transportation;
- Fitness and Recreation; and,
- Local Events.



Community Support & Health Services ()



Ottawa, ON – Household Assistance and Demand Diversion Program was established to connect with individuals on the waiting list for long-term care spaces at the Glebe Centre to understand their current challenges (e.g. managing daily needs) to determine if there are strategies that can be implemented to avoid, or delay the need for placement in a long-term care facility.

Outdoor Space & Buildings (



Chatham, ON – In response to the lack of public washroom facilities, the Municipality of Chatham-Kent created a program to partner with local businesses to identify and promote a network of publicly accessible washrooms that can be accessed by anyone, regardless of whether or not they are customers/patrons. Universal signage was created to clearly identify private businesses that have chosen to participate in the program.



Age-Friendly Needs 4.0 **Assessment & Recommended Actions**



4.1 Structure, Timeframe & Costing

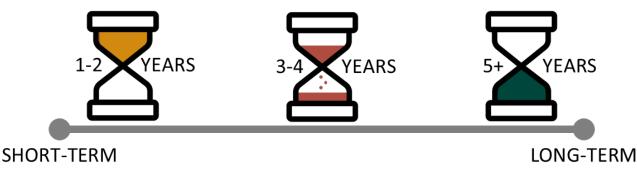
The Age-Friendly Needs Assessment and Strategic Action Plan has been structured as follows:

- Based on input from local residents and stakeholders, an overall **objective** has been established for each of the eight age-friendly community dimensions.
- A series of recommended actions have been identified to provide a roadmap for how each objective can be achieved in order to help improve age-friendliness in Dufferin County.

A total of **78** recommended actions have been included as part of the Age-Friendly Needs Assessment and Strategic Action Plan.

The timeframe for the Age-Friendly Needs Assessment and Strategic Action Plan is intended to extend until **2024** and the recommended actions have been categorized as illustrated in Figure 4-1. The timeframe has been identified for each recommended action as part of the Age-Friendly Needs Assessment and Strategic Action Plan. The key stakeholders involved in the implementation of each recommended action have also been identified.

Figure 4-1: Timeframe for Recommended Actions





4.2 Vision & Guiding Principles

Vision

Dufferin County is a vibrant and diverse community where there is equitable access to policies, programs and services that promote independence, inclusivity and active aging.

Guiding Principles

The intended outcome of the Age-Friendly Needs Assessment and Strategic Action Plan is to foster age-friendly community throughout Dufferin County that exhibits the following guiding principles:

- 1) Respect value the contributions and recognize the perspectives of older adults.
- 2) Accessibility minimize physical and financial barriers for older adults to ensure equitable access to housing, recreation and community connections.
- 3) Awareness direct older adults to information about local programs and services in formats that are accessible and easy to understand.
- 4) Collaboration strengthen community partnerships and encourage knowledge sharing internally and with local municipalities.
- 5) Inclusivity embrace the diversity of local residents to enrich community life and promote greater social capital.
- **6)** Independence ensure that adaptable, affordable and accessible community services are available to support independence and reduce social isolation.
- 7) Advocacy refute ageism and advocate for additional funding for programs and services for older adults.
- 8) Adaptability respond flexibly to the dynamic needs and preferences of older adults

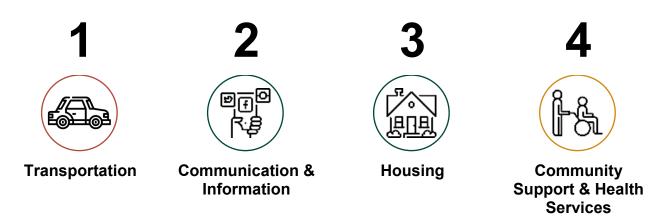


4.3 Findings & Recommendations

Overall, there is a **high satisfaction level amongst older adults** in Dufferin County with respect to the existing policies, programs and services. Some highlights of existing strengths with respect to age-friendliness in Dufferin County include:

- Redevelopment of Dufferin Oaks to modernize and establish a vibrant, innovative and collaborative community hub that is home to over 20 health-focused local agencies that deliver programs and services for older adults.
- Age-friendly planning initiatives already underway in local municipalities (e.g. Orangeville and Grand Valley).
- Engaged network of local community support and health service providers.
- Strong volunteer participation amongst local older adults.
- Expansive open spaces for participating in outdoor recreational activities.

Nevertheless, a variety of actions could be implemented to make Dufferin County more age-friendly. The key issues identified based on the background research and consultation initiatives outlined in Figure 2-1 and Figure 2-2 have been detailed on the following pages and categorized according to the respective WHO Age-Friendly Community Dimensions. These key issues emphasize improvements that are necessary to improve age-friendliness in Dufferin County. The top four priorities to improve make Dufferin County more age-friendly are related to the following community dimensions:







Transportation

This age-friendly dimension refers to the condition and design of transportation-related infrastructure such as signage, traffic lights and sidewalks. Affordability and accessibility of transportation services.

WHAT WE HEARD FROM THE COMMUNITY: KEY ISSUES

- Lack of public transit connect between Shelburne and Orangeville.
- Accessibility and availability of parking spaces is a challenge, regardless of mobility limitations.
- Lack of access to convenient and affordable transportation options in locations outside of Orangeville.
- Information about public transit services is confusing and/or older adults don't know where to look for information about the range transit options available in Dufferin County.
- Accessibility of public transit in Orangeville is a challenge, even for those who live in close proximity to transit stops.
- Existing specialized transit vehicles are not being used at full capacity.
- The maintenance and design of roads and sidewalks creates hazards for older adults.



"Lack of public transportation is limiting for many seniors." Survey Respondent, Melancthon (65-69 years of age)

"There needs to be some kind of accessible transportation from smaller communities to Orangeville." Survey Respondent, Orangeville (55-59 years of age)

"Buses are not always available. Taxis are expensive and unreliable. Therefore, accessibility for older adults is not possible." Survey Respondent, Orangeville (85-89 years of age)



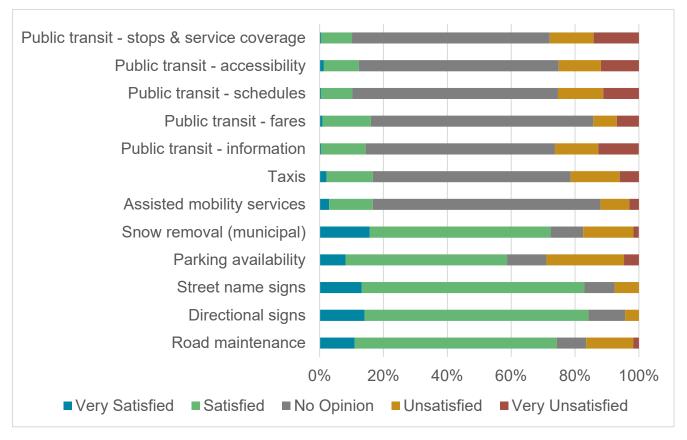


Figure 4-2: Transportation Services Satisfaction



OBJECTIVE: The County of Dufferin will ensure that accessible, safe and convenient multimodal transit alternatives are available throughout the local community.

Actio	on	Timeframe	Stakeholders
1.1	Build on recently launched Dufferin County Carpooling program, which was established as part of the Commute Ontario Program to expand transportation options for older adults. Explore feasibility of piloting other innovative rural transportation models that have been successfully implemented in other predominantly rural municipalities to ensure equity throughout Dufferin County (e.g. ride-share program modeled after Innisfil Transit / Uber partnership).	1-2 YEARS	Dufferin County
1.2	 Re-examine opportunities detailed in <i>Towards Coordinated Rural Transportation: A Resource Document</i>, particularly those relating specifically to Dufferin County, including: Establishing new corridor service between Shelburne and Orangeville; Greater utilization of existing vehicles owned by Dufferin County Community Support Services; and, Leveraging gas tax funding to expand transportation resources in Dufferin County. 	1-2 YEARS	 Dufferin County Orangeville Transit
1.3	Advocate for additional funding to support improvement and expansion of transportation services delivered by Dufferin County Community Support Services.	1-2 YEARS	Provincial Government
1.4	Establish an interactive and integrated mapping of all transit options for older adults throughout Dufferin County and create an information resource that can be accessed as part of a central information hub for programs and services for older adults in Dufferin County (see action 4.2).	1-2 YEARS	Dufferin CountyOrangeville Transit
1.5	Encourage local municipalities to create a courtesy parking designation for older adults, similar to courtesy parking for expectant mothers.	1-2 YEARS	Local Municipalities



1.6	Encourage private businesses to offer shuttle services to/from designated locations in areas with the highest concentrations of older adults (i.e. similar to existing bus service provided by Metro supermarket on Bythia Street). Launch marketing campaign to demonstrate potential benefits of operating this type of service.	1-2 YEARS	Local Community Partners
1.7	Build on the <i>Town of Orangeville Age-Friendly Community Action Plan</i> to support senior road safety through public education program delivered in partnership with local police services (e.g. Orangeville; Shelburne; etc.).	3-4-YEARS	Dufferin CountyLocal Polices Services
1.8	Establish a pilot Road Safety Assessment, modeling the Road Safety Audit launched for the County of Peterborough.	3-4-YEARS	 Dufferin County Local Polices Services Local Residents
1.9	Establish recruitment program for volunteer drivers to help older adults with transportation for medical appointments, groceries, errands, events, etc.	3-4-YEARS	 Dufferin County Local Community Partners Local Residents
1.10	Establish age-friendly requirements for street signage and encourage local municipalities to include age-friendly considerations as part of sign by-laws.	3-4 YEARS	Dufferin County
1.11	Ensure that all planned infrastructure investments (e.g. roads, bus shelters, etc.) promote accessibility and incorporate age-friendly design principles.	5+YEARS	Dufferin CountyLocal Municipalities





Communication & Information

This age-friendly dimension refers to the availability and accessibility of information about community events and services in formats that are appropriate for older adults. Outreach initiatives to vulnerable population segments.

WHAT WE HEARD FROM THE COMMUNITY: KEY ISSUES

- No central information resource currently exists that details older adult programs and services available locally.
- Significant variation exists in terms of the communication preferences of older adults.
- Outreach to older adults who are isolated and/or most vulnerable is challenging.
- There is a lack of coordination with private businesses, community organizations and other community partners.
- The information shared in public communications can be confusing for older adults.

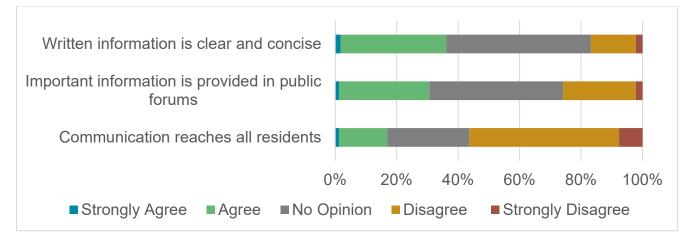


"Not sure that I have seen any promotion for older adult programming. I have always researched it myself."

Survey Respondent, Mono (55 - 59 years of age)

"Communication appears to be a problem. Not everyone is on the Internet. Mail delivery is expensive... How do I get to know about what's happenings in my community?" Survey Respondent, Orangeville (70-74 years of age)







OBJECTIVE: The County of Dufferin will deliver communications in multiple formats to ensure that residents of all ages have access to information about programs and services available locally.

Actio	on	Timeframe	Stakeholders
2.1	Establish a comprehensive, sustainable and user-friendly database of programs and services available for older adults in Dufferin County, which function as the central information hub for all information relating older adults, including a classification system to help identify and categorize programs and services according to the WHO age-friendly dimensions and/or mobility, activity level, etc.	1-2 YEARS	 Dufferin County Local Community Partners
2.2	Ensure that all communications delivered by the County are available in multiple formats (e.g. online and hard copy), meet or exceed AODA compliance standards and indicate the availability of alternate formats, as indicated in the <i>Accessible Customer Service Policy (2-7-1)</i> . Encourage local municipalities to adopt the same communications protocols for older adults.	1-2 YEARS	Dufferin CountyLocal Community Partners
2.3	Leverage public facilities operated by the County and local municipalities to be used as satellite information resource centres for older adults, where all information from older adults' database of programs and services can be accessed. Also consider using housing facilities for older adults as satellite information centres.	1-2 YEARS	 Dufferin County Local Community Partners Older Adult Housing Providers
2.4	Periodically consult with community partners to help identify best practices and successful strategies for communication and outreach with older adult audiences.	1-2 YEARS	Dufferin CountyLocal Community Partners
2.5	Encourage information sharing and cross- promotion between Dufferin County and community partners to increase public awareness and knowledge about the full range of programs and services for older adults. Organize regular meetings to facilitate internal communication and	1-2 YEARS	Dufferin CountyLocal Community Partners



	exchange of knowledge between local community partners.		
2.6	Apply for funding from the OACAO to organize an annual Older Adult Information and Active Living Fair to function as a showcase for information relevant to older adults in Dufferin County.	1-2 YEARS	Dufferin CountyProvincial Government
2.7	Offer one-on-one customer service in partnership with Orangeville Public Library, Shelburne Public Library and Grand Valley Public Library to help direct older adults to various programs and services available in Dufferin County. Ensure customer service protocols for older adults are consistent with the <i>Multi-Year Access Plan 2017-2021</i> and the <i>Accessible Customer Service Policy (2-7-1)</i> .	1-2 YEARS	 Dufferin County Public Libraries (Orangeville, Shelburne, Grand Valley)
2.8	Implement a communication campaign in partnership with Dufferin County Community Support Services and/or local agencies, community organizations, private sector businesses, etc. to educate residents about available programs and services, as well as what it means to be an age-friendly community.	3-4-YEARS	 Dufferin County Local Community Partners Local Municipalities
2.9	Establish new older adult customer service training program to ensure that front line County staff understand and are equipped to deal with the complex needs of older adults.	3-4-YEARS	Dufferin County
2.10	Partner with local municipalities, private businesses and community organization (e.g. Dufferin Seniors Circle Facebook Group) to promote programs and service for older adults throughout Dufferin County.	3-4-YEARS	 Dufferin County Dufferin Seniors Circle Facebook Group
2.11	Establish a Dufferin County Guide to Accessible Documents and encourage all charitable organizations, agencies, religious groups, cultural organizations, private sector businesses, etc. that deliver programs and services for older adults to follow these guidelines.	5+YEARS	Dufferin County





Housing

This age-friendly dimension refers to the availability of appropriate, affordable housing for older adults that incorporates flexibility through adaptive features and a variety of styles and locations.

WHAT WE HEARD FROM THE COMMUNITY: KEY ISSUES

- Supply of accessible housing types that are suitable for older adults and have the greatest demand are scarce (e.g. bungalows; accessible apartments/townhouses).
- Geographic inequality in terms of access to dedicated housing for older adults.
- Limited rental housing alternatives are available for older adults.
- Declining affordability as housing prices, property taxes, maintenance costs and/or rental rates rise.
- Insufficient capacity and long waiting periods for access to long-term care facilities, rent geared to income and supportive housing facilities for older adults.
- Limited programs and services are available to support independence for older adults who choose to age in place.



"Dufferin does not have enough affordable housing, seniors housing, assisted living facilities or long-term care facilities. This is a problem that is only going to get worse. We need creative solutions to facilitate aging gracefully in older adults' desired housing and community with supportive family and friends nearby.

Survey Respondent, Mulmur (65 -69 years of age)



26%

Responded that there are issues with the suitability of the housing stock for older adults in Dufferin County (e.g. more single storey needed)



24%

Responded that there are issues with housing affordability for older adults (e.g. prices; taxes; maintenance)



OBJECTIVE: The County of Dufferin will implement local policies and act as an advocate to higher levels of government to ensure that a variety of accessible and affordable housing options are available for older adults.

Actio	on	Timeframe	Stakeholders
3.1	Develop a specialized older adult housing directory, including independent seniors' housing, supportive housing, retirement residences, long-term care homes and complex continuing care options that can be accessed as part of a central information hub for programs and services for older adults in Dufferin County (see action 4.2). Directory should identify the distinguishing features of each housing type and indicate the type(s) of older adults suited for each housing type.	1-2 YEARS	 Dufferin County Older Adult Housing Providers
3.2	Launch an education and awareness program in tandem with specialized older adult housing directory to clearly illustrate the distinguishing features of each housing type and help guide older adults about the options that would be most suitable for their individual needs.	1-2 YEARS	Dufferin CountyOlder Adult Housing Providers
3.3	Consult with local residential developers to understand existing obstacles that a currently a barrier to the development of more housing for older adults and potential solutions to increase the supply of suitable housing.	1-2 YEARS	Dufferin CountyLocal Developers
3.4	Encourage the development of Community Improvement Plans for Orangeville, Shelburne (currently underway) and Grand Valley that include funding for accessibility retrofits for rental housing.	1-2 YEARS	Dufferin CountyLocal Municipalities
3.5	Advocate to provincial and federal governments for additional funding for rent-geared-to-income, assisted living and long-term care facilities for older adults throughout Dufferin County, including Grand Valley as identified as one of the key recommendations in the Town of Grand Valley Ageing in Place Research Report.	1-2 YEARS	 Dufferin County Local Municipalities Provincial Government
3.6	Evaluate financial implications of implementing a "freeze" on property taxes for older adults,	1-2 YEARS	Dufferin County



Actio	on	Timeframe	Stakeholders
	expanding on the existing tax relief program for low-income seniors and persons with disabilities.		 Local Municipalities
3.7	Include age-friendly considerations as part of Community Design guidelines from the County Official Plan. Encourage local municipalities to establish new age-friendly design standards to supplement existing urban design standards and placemaking guidelines.	3-4-YEARS	Dufferin CountyLocal Municipalities
3.8	Create an education program to provide assistance for older adults to help secure rebates/grants for home renovations, accessibility devices, etc.	3-4-YEARS	Dufferin CountyLocal Community Partners
3.9	Create information/education program about co- housing and the benefits for older adults, in addition to information about financial structure, legal considerations, etc.	3-4-YEARS	Dufferin CountyLocal Community Partners
3.10	Establish new intergenerational program in partnership with local secondary schools, where students provide household assistance for older adults in exchange for fulfillment of mandatory volunteer participation.	3-4-YEARS	Dufferin CountyLocal School Boards
3.11	Explore feasibility of establishing a household assistance program, modeled after the Peterborough Homemaking Services Program.	5+YEARS	Dufferin County
3.12	Explore opportunity to establish a partnership with long-term care facilities (e.g. Dufferin Oaks; Avalon) to launch a diversion program for older adults who are currently on waiting lists for long-term care facilities, to identify and connect older adults with the range of supports required to be able to remain in their existing homes.	5+YEARS	Dufferin OaksLocal Community Partners





Community Support & Health Services

This age-friendly dimension refers to the availability of community-related services delivered by charitable organizations, faith groups, cultural organization, private sector businesses and other community partners that support independence, physical health and mental well-being.

WHAT WE HEARD FROM THE COMMUNITY: KEY ISSUES

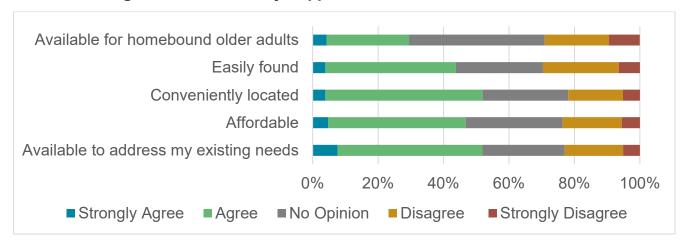
- General lack of awareness about the programs and services available locally and where to information can be accessed.
- Process of navigating the wide range of community support and health services is complex and overwhelming for older adults and caregivers.
- Limited capacity to accept more clients or expand variety of programming for community support and health services for older adults who can't leave their homes.



The perceived health status of older adults in Dufferin County is much lower than other demographic segments and lower than the provincial and national averages – however the perceived mental health status is much higher.

Canadian Community Health Survey







OBJECTIVE: The County of Dufferin will work collaboratively with various community partners to ensure that older adults have convenient access to a complete range of community support and health services.

Actio	on	Timeframe	Stakeholders
4.1	Establish a rating system to recognize local charitable organizations, agencies, religious groups, cultural organizations, private sector businesses, etc. as being certified and accredited age-friendly support organizations.	1-2 YEARS	Dufferin County
4.2	Create a central online database of support and health services available in Dufferin County that are delivered by certified age-friendly organizations. The database should be accessible as part of a central information hub for all older adult programs and services in Dufferin County.	1-2 YEARS	Dufferin CountyLocal Community Partners
4.3	Create testimonial stories about the experiences of local older adults in navigating the system of community support and health services in Dufferin County. Create corresponding spider maps to illustrate how local older adults have navigated the complex system of support and health services to access the care the require.	1-2 YEARS	Dufferin County
4.4	Partner with Ontario Caregiver Coalition to advocate to Provincial and Federal governments to provide funding for a new financial support program for older adults that choose to age in place.	1-2 YEARS	 Dufferin County Federal Government Provincial Government
4.5	Advocate to Provincial government for additional funding for community support and health services to add new programs and expand the capacity of existing programs (e.g. personal support).	1-2 YEARS	Dufferin CountyProvincial Government
4.6	Partner with local foodbanks to undertake research to understand the specific needs of older adults who rely on these services, and to identify potential strategies to improve food security.	1-2 YEARS	Dufferin CountyLocal Food Banks
4.7	Advocate for increased funding and improved referral programs for community support and health services, in partnership with the Dufferin	1-2 YEARS	Dufferin County



4.8	County Community Support Services, the Central West LHIN and various other community partners (e.g. Alzheimer's Society of Dufferin). Building on the recommendations of the Mental Health Commission of Canada, ensure that an Older Adult/Seniors Mental Health Policy Lens is capaidased when planning new policies. programs	1-2 YEARS	 Local Community Partners Provincial Government Dufferin County Health
	considered when planning new policies, programs and services throughout Dufferin County. Also ensure that mental health is embedded in all policies, programs and services targeted at older adults.		Commission of Canada
4.9	Establish older adult knowledge exchange with local community partners including, charitable organizations, agencies, religious groups, cultural organizations, private sector businesses, etc. to share resources, encourage cross-promotion, avoid duplication and minimize service gaps.	3-4-YEARS	Dufferin CountyLocal Community Partners
4.10	Establish partnership with Georgian College and/or Humber College to provide services for older adults as part of educational programs for students (e.g. PSW, nursing, pre-health sciences, recreation and leisure studies), building on the recommendations of the <i>Town of Orangeville Parks and Recreation Strategic Plan</i> . Potential programs could include: Leisure and fitness activities; Staying active in retirement; Life enrichment for residents in long-term care facilities; Adaptive-therapeutic recreation; and Event planning. 	3-4-YEARS	 Dufferin County Georgian College
4.11	Explore feasibility of launching program with local doctors to identify vulnerable older adults and connect them with support and health services deliver by local agencies, community organizations, private sector businesses, etc.	3-4-YEARS	Dufferin CountyLocal Community Partners
4.12	In partnership with Headwaters Health Care Centre, support improvements to, and expansion of, coordinated hospital discharge care programs	5+YEARS	Dufferin County



	and supports, including transportation and home care.		Headwaters Health Care Centre
4.13	Advocate for the creation of a primary care physician position and/or a case coordinator position to serve vulnerable populations with barriers to navigating the community support and health care system.	5+ YEARS	Dufferin CountyProvincial Government





Social Participation

This age-friendly dimension refers to opportunities for regular interaction with family and friends to support mental health and community awareness.

WHAT WE HEARD FROM THE COMMUNITY: **KEY ISSUES**

- Infrequent communications and incomplete or inaccurate information about programs and services negatively impact social participation.
- Variety of events (by target age and type) does not cater to the wide spectrum of ages, abilities, interests, needs and expectations amongst older adults.
- There is significant variation in the ability of older adults to pay for programs and the need for financial assistance.
- Scheduling for recreation and leisure activities is not flexible, particularly for older adults who are employed.



"Lots of programs in Dufferin County are not affordable for older adults. Especially when you add on the cost of transportation."

Survey Respondent, Shelburne (65-69 years of age)

"Not all older people are available during weekdays. Need more on weekends." Survey Respondent, Shelburne (55-59 years of age)



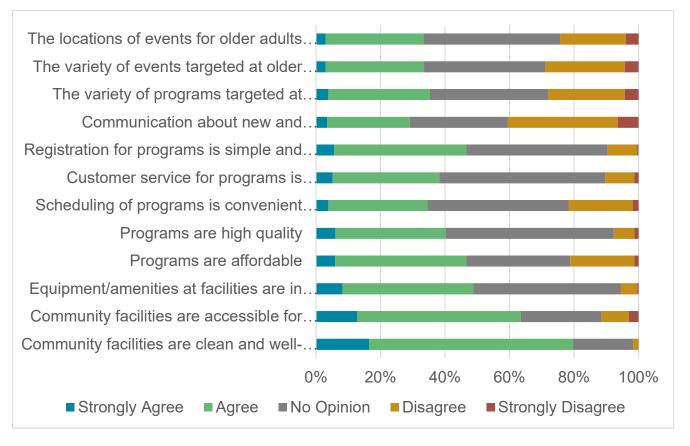


Figure 4-5: Social Participation Satisfaction



OBJECTIVE: The County of Dufferin will provide a diverse range of opportunities for participation in leisure, recreational, educational, and cultural activities to help older adults avoid isolation and strengthen connections to the local community.

Actio	Action		Stakeholders
5.1	Establish a buddy system and/or designate older adult ambassadors to help encourage and prolong participation in social and recreational activities for older adults.	1-2 YEARS	Dufferin CountyLocal Municipalities
5.2	Encourage local municipalities to consult directly older adults with respect to activities, schedules, communications, etc. when new recreation and library programs are established, to ensure that the changing interests and perspectives of the older adults are considered.	1-2 YEARS	Local MunicipalitiesLibraries
5.3	Encourage local municipalities to enhance flexibility of scheduling and support the creation of innovative new recreational programs for older adults.	1-2 YEARS	Local Municipalities
5.4	Encourage local municipalities to introducing more inclusive programming to appeal to specific cultural, ethnic and religious groups based on guidance and input from local cultural organizations.	1-2-YEARS	Local MunicipalitiesLocal Community Partners
5.5	Leverage private facilities (e.g. places of worship; schools; private recreation facilities) throughout Dufferin County to supplement recreation facilities and programs operated by local municipalities by adding new satellite programs to fill gaps in terms of access to recreational programs and services.	1-2 YEARS	 Local Municipalities Places of Worship Schools Private Recreation Facilities
5.6	Support the development of a coordinated older adult continuing education initiative in partnership with local libraries and/or post-secondary institutions.	3-4-YEARS	 Dufferin County Local Municipalities Libraries Georgian College



5.7	Evaluate the feasibility of establishing a staff position to function as an advocate or champion to support the overall delivery of programs and services for older adults and to ensure that programs and services are strategically aligned with the Age-Friendly Needs Assessment and Community Action Plan.	5+YEARS	 Humber College Dufferin County Local Municipalities
5.8	Establish Community Connect Program modelled after the program launched by Ottawa Public Health, which promotes awareness and identification of vulnerable older adults and provides information and non-traditional referral services. Establish a vulnerability index as part of this program.	5+YEARS	 Dufferin County Local Community Partners





Respect & Social Inclusion

This age-friendly dimension refers to community attitudes, such as a general feeling of respect, refuting ageism and recognizing the important role that older adults play in society.

WHAT WE HEARD FROM THE COMMUNITY: KEY ISSUES

- There are limited opportunities for older adults to provide input on public issues.
- Older adults often feel overlooked in terms of representation on boards and committees.
- Customer service does not always meet the needs of older adults, whom are becoming increasingly diverse.
- Older adults are not always valued or appropriately recognized for their contributions in Dufferin County.
- Lack of consideration and respect for older adults would like from some youth and local businesses.



The sense of community belonging of older adults in Dufferin County is much lower than other demographic segments and lower than the provincial and national averages – less than 75% of older adults indicated that their sense of community belonging was either, somewhat strong or very strong.

Canadian Community Health Survey



Older adults receive quality customer service in a way that meets their needs Contributions by older adults are recognized and valued in the community Older adults are adequately represented on councils, boards and committees Older adults are regularly invited to provide input for public issues Community events are offered that appeal to all ages and backgrounds Community events are offered that appeal to older adults Respect, kindness and courtesy is shown to older adults 0% 20% 40% 60% 80% 100% Strongly Agree Agree ■ No Opinion Disagree ■ Strongly Disagree

Figure 4-6: Respect & Social Inclusion Satisfaction



OBJECTIVE: The County of Dufferin will advocate for respect and social inclusion by celebrating inclusivity and diversity.

Actio	on	Timeframe	Stakeholders
6.1	Recognize the contributions of older adults through the creation of a Dufferin County Older Adult of the Year Award.	1-2 YEARS	Dufferin County
6.2	Establish an older adults' "spotlight series" to celebrate the accomplishments (past and present) and share the stories of local older adults.	1-2 YEARS	Dufferin County
6.3	Building on existing programs (e.g. GrandPals; OrangeThreads; etc.), collaborate with local municipalities to add new interactive intergenerational programs in local schools and childcare centres. Programs should be targeted at a variety of ages to promote familiarity, understanding and respect between generations.	1-2 YEARS	 Dufferin County Schools Child Care Centres Public Libraries
6.4	Establish an external joint planning committee on age-friendly communities in partnership with local municipalities in Dufferin County.	1-2 YEARS	Dufferin CountyLocal Municipalities
6.5	Establish age-friendly checklist for private businesses and develop a program to recognize businesses that have implemented age-friendly practices and features.	1-2 YEARS	Dufferin County
6.6	Create an award to recognize local businesses that have helped to make Dufferin County an age-friendly community.	3-4-YEARS	Dufferin County
6.7	Establish new customer service training program to educate municipal staff, community organizations, and private business about the diverse customer service needs of older adults. Encourage private business to implement agefriendly customer service training to foster a welcoming and inclusive environment for older adults, regardless of cultural background, religion, gender, etc.	3-4-YEARS	Dufferin County



6.8 Ensure that older adults are considered in future updates to the County's *Official Plan*, including increased emphasis on accessibility.



• Dufferin County





Civic Participation & Employment

This age-friendly dimension refers to opportunities to be involved in aspects of community life that extend beyond typical day-to-day activities. Employment opportunities for older adults and recognition of valuable experience that older adult employees can bring to the workplace.

WHAT WE HEARD FROM THE COMMUNITY: KEY ISSUES

- Older adults do not have equal access to employment.
- There is a lack of awareness about volunteer opportunities available in Dufferin County and where to find information about how to get involved.
- There are misconceptions about the skills and capabilities of older adults in the workforce and older adults are subsequently overlooked.
- Limited transportation options outside of Orangeville act as a barrier to employment and volunteering
- There is a lack of volunteer training available for older adults.

44%

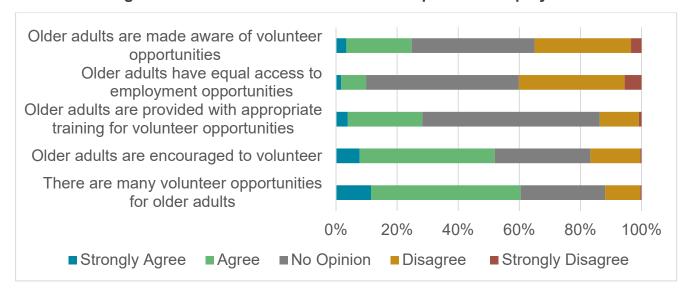
Responded that they currently volunteer.

1 - 5

hours per week

Represents the typical time spent volunteering.

Figure 4-7: Satisfaction With Civic Participation & Employment





OBJECTIVE: The County of Dufferin will demonstrate leadership with respect to employment and volunteerism by identifying meaningful opportunities for older adults to work with the County, local municipalities and/or community partners.

Action		Timeframe	Stakeholders
7.1	Promote diverse, multi-generational representation on all County planning boards, council committees, and other decision-making bodies, and encourage all local municipalities throughout the County to do the same.	1-2 YEARS	Dufferin CountyLocal Municipalities
7.2	In partnership with Volunteer Dufferin, assemble a roster of volunteer agencies, service organizations, etc. specifically focused on volunteer opportunities for older adults.	1-2 YEARS	Dufferin CountyVolunteer Dufferin
7.3	Support the development of new volunteer opportunities for older adults at facilities and/or events operated by Dufferin County and local municipalities (e.g. serving as greeters at community facilities and/or events; engaging individuals with barriers to employment in downtown street-cleaning and beautification).	1-2 YEARS	Dufferin CountyLocal Municipalities
7.4	Establish partnership with seniors' clubs and housing facilities for older adults to launch a recruitment program that connects older adults with volunteer opportunities with the County and elsewhere in Dufferin County (e.g. local municipalities; community partners).	1-2 YEARS	 Dufferin County Local Seniors' Clubs Housing Facilities
7.5	In partnership with local employment agencies and/or chamber of commerce, promote skills training and support programs for older adults considering re-entry into the workforce.	1-2 YEARS	 Dufferin County Greater Dufferin Area Chamber of Commerce Dufferin Board of Trade
7.6	Develop guidelines and tools for private businesses, outlining age-friendly employment practices, in addition to education about the benefits of hiring older workers.	1-2 YEARS	Dufferin County



7.7	Establish an annual award to recognize age- friendly employers and workplaces.	3-4 YEARS	Dufferin County
7.8	Launch marketing campaign to fight ageism and counteract stigma and highlight the benefits of working with older adults for employment and volunteer positions.	3-4-YEARS	Dufferin County
7.9	Explore feasibility of establishing a Dufferin County older adults' peer support network, expanding on the existing Orangeville Seniors-Assisting-Seniors Program.	3-4-YEARS	Dufferin CountyTown of Orangeville





Outdoor Spaces & Buildings

This age-friendly dimension refers to condition, design and accessibility of public spaces such as parks, community centres, municipal offices, etc.

WHAT WE HEARD FROM THE COMMUNITY: **KEY ISSUES**

- There is a lack of coverage for public washrooms, particularly outdoors.
- The availability of seating and rest areas is limited throughout the County.
- Regardless of personal mobility considerations, many older adults struggle with parking accessibility.
- No existing age-friendly design standards are available to guide existing and future development.
- Maintenance and design of some sidewalks in Orangeville, Shelburne and Grand Valley are a barrier accessibility



"Access is very poor if you use a walker or wheelchair, you are too tired to participate." Survey Respondent, Orangeville (70-74 years of age)



The County's trails and pathways were the # 1 location for older adults to participate in recreational activities.



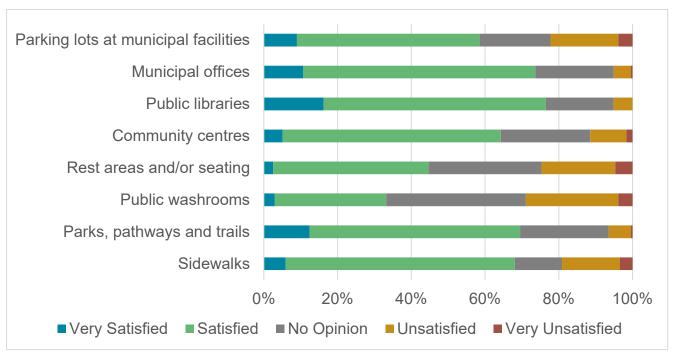
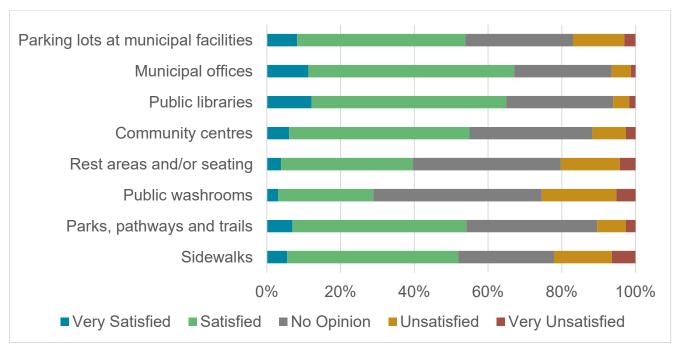


Figure 4-8: Satisfaction With Quality of Outdoor Spaces







OBJECTIVE: The County of Dufferin will employ sustainable community planning and infrastructure management to ensure that outdoor spaces and public buildings are accessible for all residents.

Action		Timeframe	Stakeholders
8.1	Establish County-wide Snow Angel Program modelled after existing volunteer snow removal program in Orangeville.	1-2 YEARS	Dufferin CountySchools
8.2	Building on the recommendations of the <i>Dufferin County My Access Plan 2017-2021</i> , engage the general public, and accessibility advisory committees in local municipalities to provide suggestions to remove accessibility barriers.	1-2 YEARS	 Dufferin County Local Municipalities Local Residents
8.3	Establish a program to formally identify private businesses that permit public use of washrooms (e.g. sticker or sign in window) and support the development of GIS-mapping of all accessible washrooms throughout Dufferin County.	1-2 YEARS	Dufferin CountyPrivate Businesses
8.4	Establish County-wide policy for frequency of sidewalk inspections, as indicated in the <i>Dufferin County My Access Plan 2017-2021.</i>	1-2 YEARS	Dufferin CountyLocal Municipalities
8.5	Partner with local municipalities to develop a County-wide trails/pathways safety and awareness campaign, building on the <i>Town of Orangeville Age-Friendly Community Action Plan</i> .	3-4-YEARS	Dufferin CountyLocal Municipalities
8.6	Partner with local municipalities to conduct spatial analysis to identify existing gaps with respect to the supply of seating and rest areas throughout Dufferin County. Establish County-wide guidelines for the installation of new seating and rest areas, including¹: • Shade • Seating with armrests and backrests • Appropriate seating height (i.e. 45 – 50 cm) • Clear floor area for mobility aids, service animals, strollers, etc.	3-4-YEARS	 Dufferin County Local Municipalities

¹ Based on information from the Global Alliance on Accessible Technologies & Environments (GAATES) in the Illustrated Technical Guide to the Accessibility Standard for the Design of Public Spaces.



5.0 Conclusions



The significant population growth forecast amongst older adults in Dufferin County will have major implications with respect to the demand for programs and services. Recognizing the ongoing demographic shift that is already underway, the Age-Friendly Needs Assessment and Strategic Action Plan is essential in order to establish a coordinated and proactive strategy for addressing the needs of older adults in Dufferin County, both now, and in future years.

The Age-Friendly Needs Assessment and Strategic Action Plan provides a roadmap for how Dufferin County will respond to the needs of the growing older adult population, by ensuring that the necessary policies, programs, services and infrastructure are available to support older adults. The Age-Friendly Needs Assessment and Strategic Action Plan is intended to enhance the County's capacity to design, plan, facilitate and deliver age-friendly policies, programs, services and infrastructure.

Going forward, it will be important to continually monitor demographics, preferences and prevailing trends amongst older adults to ensure that the programs and services available in the local community accurately reflect the dynamic needs of Dufferin County residents. As part of the Age-Friendly Needs Assessment and Strategic Action Plan, it will also be important to monitor future progress to ensure that Dufferin County remains committed to promoting age-friendliness.

Effective communication will be crucial to the successful implementation of the Age-Friendly Needs Assessment and Strategic Action Plan. Communication must be delivered in formats that promote inclusion and equitable access to programs and services throughout, recognizing the increasingly diverse nature of the local population.

Collaboration will be essential to ensure successful implementation of the Age-Friendly Needs Assessment and Strategic Action Plan, recognizing that many core services for older adults in Dufferin County are administered by the local municipalities, private businesses and community organizations, which thereby have a major influence on the County's ability to deliver innovative programs and services that meet the needs of local older adults.

This report summarizes the key community engagement findings and recommended actions to transform Dufferin County into an age-friendly community. The next step is implementation. The implementation stage will be used to confirm available resources and to confirm timelines for the execution of recommended actions over the next 5+ years. Going forward, the Age-Friendly Needs Assessment and Strategic Action Plan will serve as a vital tool to assist the County with advocacy, outreach and the establishment of new partnerships to deliver programs and services that are responsive to the needs of older adult residents throughout Dufferin County.

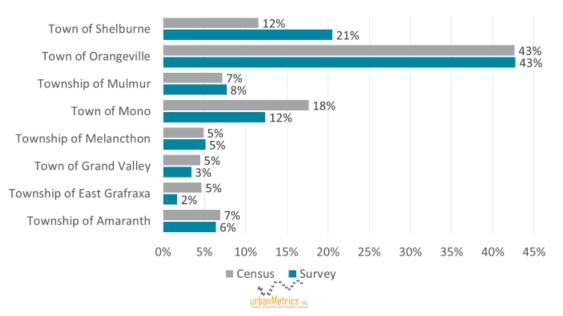


Appendix A Survey Results Overview



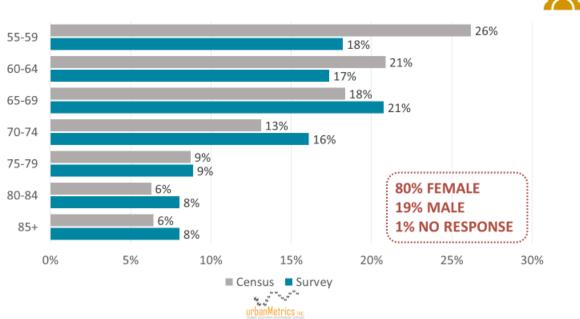
GEOGRAPHIC DISTRIBUTION



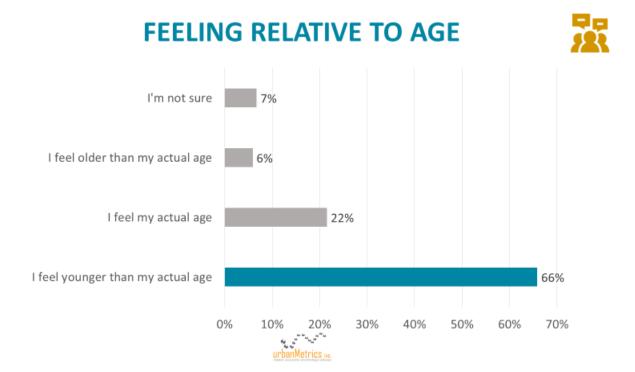


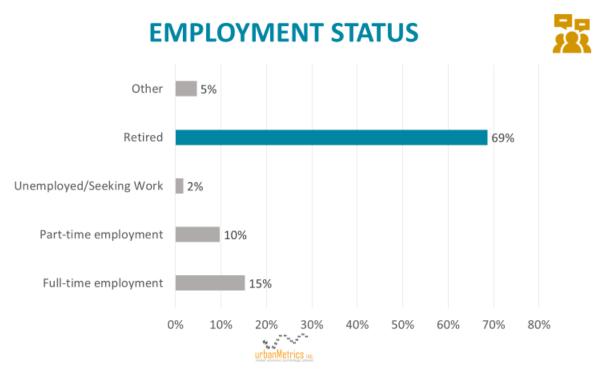








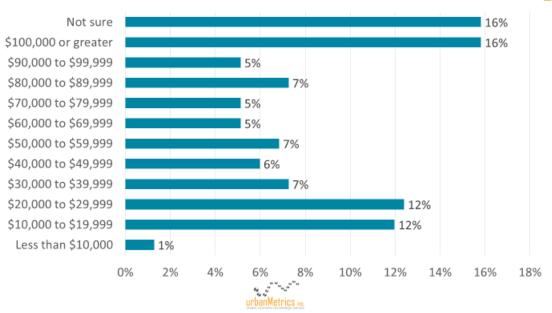






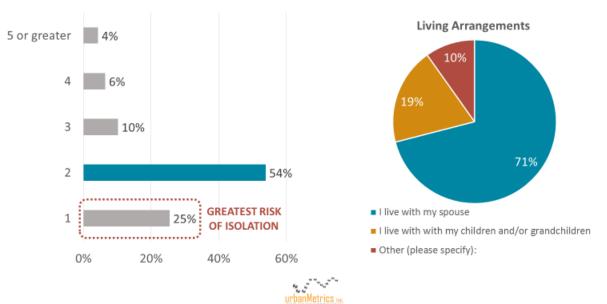






HOUSEHOLD SIZE & LIVING ARRANGEMENTS



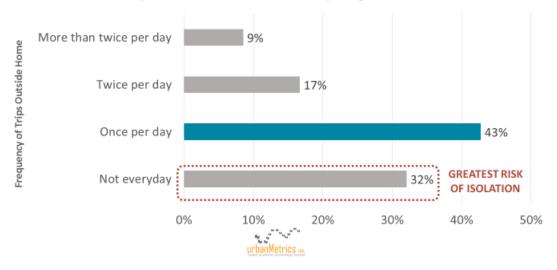




PRIMARY MODE OF TRANSPORTATION



 Private vehicles are the primary mode of transportation (94%) – car dependence is extremely high



PARTICIPATION TIMES & ACTIVITY LEVELS



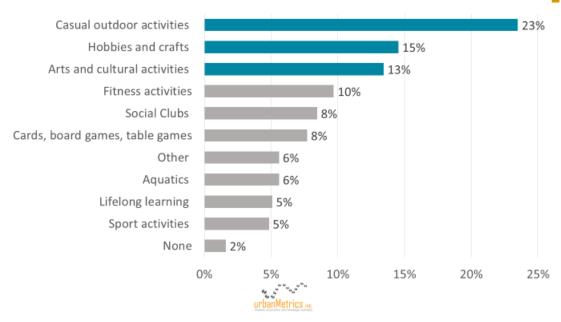
- The most popular times to participate in social, leisure and/or recreational activities include:
 - 1) Weekday mornings
 - 2) Weekday afternoons
 - 3) Weekday evenings
- Over 30% of survey respondents indicated they spend less than 5 hours weekly participating in social, leisure and/or recreational activities
- The majority expect their activity level to remain constant



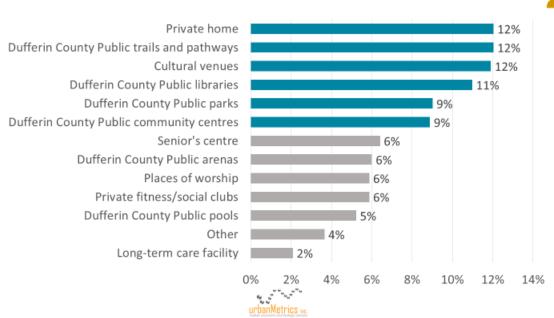


MOST POPULAR RECREATIONAL ACTIVITIES 📆





MOST POPULAR LOCATIONS FOR ACTIVITIES



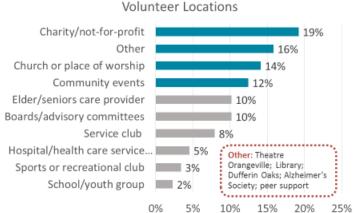


VOLUNTEER PARTICIPATION



• 44% of respondents currently volunteer

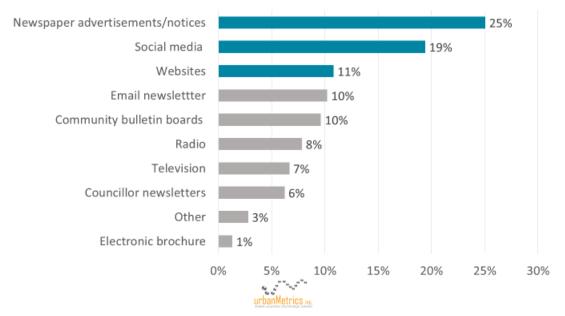






CURRENT INFORMATION SOURCES



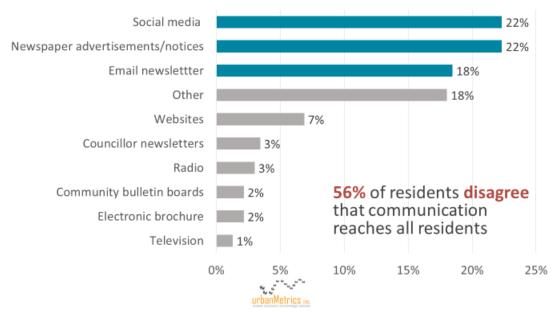






PREFERRED COMMUNICATION METHODS

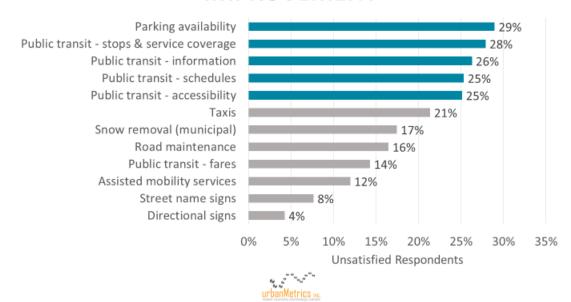






TRANSPORTATION: KEY AREAS FOR IMPROVEMENT





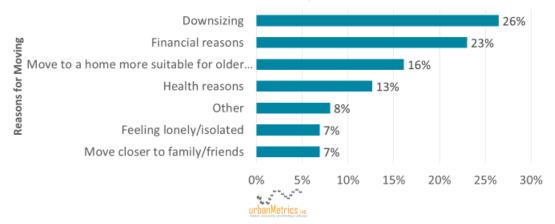




HOUSING: LIKELIHOOD & REASONS FOR **MOVING**



- 22% anticipate moving within the next 3-5 years
- 21% of those who anticipate moving indicated it is unlikely their new home will be in Dufferin County



HOUSING: KEY AREAS FOR IMPROVEMENT 🎇



- The most common housing-related suggestions for how to improve quality of life for older adults in Dufferin County included:
 - Greater variety of housing, including smaller and accessible housing formats (e.g. bungalows; accessible condos; accessible townhouses)
 - More affordable housing options
 - More rental housing options
 - More long-term care and assisted living facilities
 - Reduced property taxes

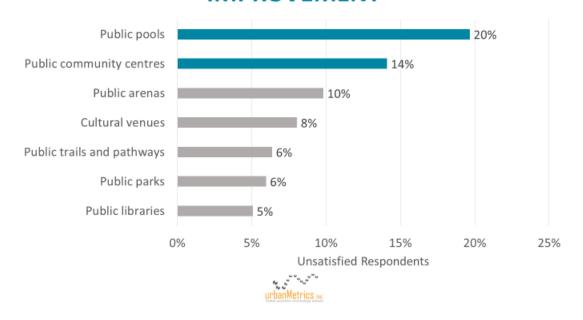






SOCIAL PARTICIPATION: KEY AREAS FOR IMPROVEMENT

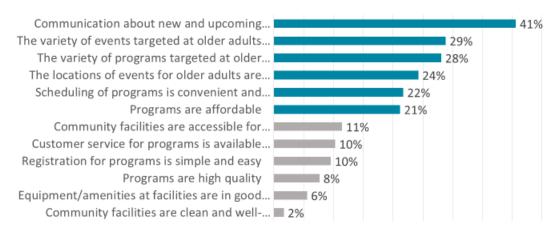






SOCIAL PARTICIPATION: KEY AREAS FOR IMPROVEMENT





0% 5% 10% 15% 20% 25% 30% 35% 40% 45% Unsatisfied Respondents







RESPECT & SOCIAL INCLUSION: KEY AREAS FOR IMPROVEMENT



37%

don't feel that their opinions are valued **55%**

don't feel that the contributions of older adults are appropriately recognized 61%

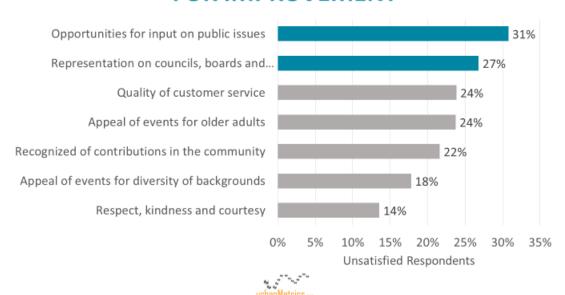
don't feel that the needs of older adults are well understood





RESPECT & SOCIAL INCLUSION: KEY AREAS FOR IMPROVEMENT



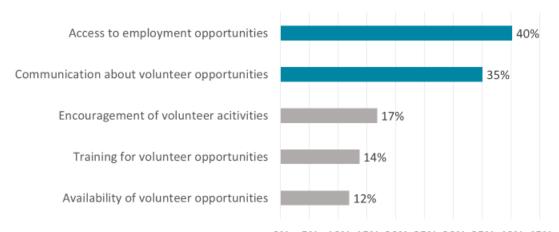






CIVIC PARTICIPATION & EMPLOYMENT: KEY AREAS FOR IMPROVEMENT





0% 5% 10% 15% 20% 25% 30% 35% 40% 45% Unsatisfied Respondents





COMMUNITY SUPPORT & HEALTH SERVICES: KEY AREAS FOR IMPROVEMENT



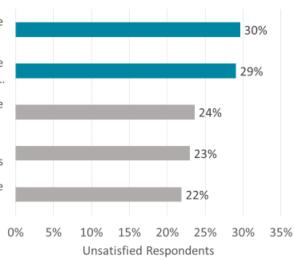
Community support and health services are easily found

Community support and health services are available for older adults who can't leave...

Community support and health services are affordable

Community support and health services are readily available to address my existing needs

Community support and health services are conveniently located



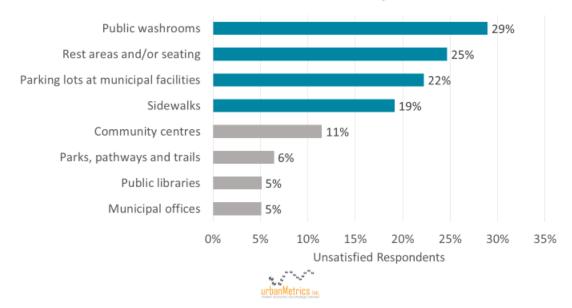






OUTDOOR SPACES & BUILDINGS: KEY AREAS FOR IMPROVEMENT – QUALITY







OUTDOOR SPACES & BUILDINGS: KEY AREAS FOR IMPROVEMENT – ACCESSIBILITY







Appendix B References





¹ Statistics Canada. (2017). Age and sex, and type of dwelling data: Key results from the 2016 Census. Statistics Canada Catalogue no. 11-001-X. Retrieved from https://www150.statcan.gc.ca/n1/daily-quotidien/170503/dq170503a-eng.htm.

World Health Organization. 2010. Ageing and life-course: Global Age Friendly Cities Project. Retrieved from https://www.who.int/ageing/projects/age_friendly_cities/en/.

iii Statistics Canada. (2017). Age and sex, and type of dwelling data: Key results from the 2016 Census. Statistics Canada Catalogue no. 11-001-X. Retrieved from https://www150.statcan.gc.ca/n1/daily-quotidien/170503/dg170503a-eng.htm.

iv Sarlo, Christopher A. (2017). Understanding Wealth Inequality in Canada. Fraser Institute. Retrieved from https://www.fraserinstitute.org/sites/default/files/understanding-wealthinequality-in-canada.pdf.

^v Orangeville Food Bank. (2018). *Homepage: Orangeville Food Bank*. Retrieved from https://orangevillefoodbank.weebly.com/.

vi Centre for Studies in Aging and Health. (2018). Snapshot of Age Friendly Progress in Ontario [PowerPoint Slides]. Seniors Health Knowledge Network. Retrieved from https://shrtn.on.ca/sites/default/files/dav/sites/default/Outreach%20Program%20Snapshot%2 0Published.pdf.



Welcome to **Dufferin County's Age Friendly Community Needs Assessment and Strategic Action Plan.** If you are 55 years of age or older, we would appreciate your insight on aging gracefully in Dufferin County.

The following survey will take approximately **15-20 minutes** to complete. All of your responses will be anonymous and remain confidential. The survey results will only be used as input to Dufferin County's Age Friendly Community Needs Assessment and Strategic Action Plan.

We kindly request that you complete the survey on an individual basis, in order to reflect your personal insights and feedback. Your participation and input are key to understanding the preferences and demands of local residents and/or visitors.

Thank you in advance for taking the time to help improve the lives of Dufferin County residents. Please spread the word and encourage your family, friends, colleagues, etc. to also complete the survey.

Background

Dufferin County, working in collaboration with urbanMetrics inc., is implementing an innovative, flexible and proactive approach to planning for the dynamic needs of the growing population of local older adults (55+ years of age) and their caregivers. The County is committed to becoming an age-friendly community that is supportive and inviting for citizens of all ages, abilities and backgrounds. The purpose of this Age-Friendly Community Needs Assessment and Strategic Action Plan is to identify and incorporate age-friendly community policies, practices, features, programs, and initiatives required to meet the existing and future needs of older adults in Dufferin County.

Similar to many communities across Ontario, the proportion of older adults in Dufferin County has been increasing significantly over the past decade and is expected to continue at a rapid pace over the next decade, creating increased demand for older adults' programs and services. Dufferin County's Age Friendly Community Needs Assessment and Strategic Action Plan is being undertaken to ensure that older adults in Dufferin County are appropriately recognized and have access to the programs and services they require to stay active, healthy, and engaged in the local community.

Dufferin County's Age Friendly Community Needs Assessment and Strategic Action Plan is intended to align with the eight dimensions of an age-friendly community, as defined by the World Health Organization. These eight age-friendly dimensions include:



The questions included in the following survey are intended to address each of these eight age-friendly dimensions.



Demographics: About You

1. Are you a resident of Dufferin County? Yes No
2. In which municipality of Dufferin County do you live? Township of Amaranth Township of East Garafraxa Town of Grand Valley Township of Melancthon Town of Mono Township of Mulmur Town of Orangeville Town of Shelburne
3. What is your 6-digit postal code? (Your postal code will help us understand where you live and where services are needed most throughout Dufferin County.)
4. What is your age? Under 55 55-59 60-64 65-69 70-74 75-79 80-84 85-89 90+
5. Do you "feel your age"?
Please select the response that best reflects how you feel compared to your age. I feel younger than my actual age I feel my actual age I feel older than my actual age I'm not sure



Demographics: About You

	Male Female Non-binary Prefer not to respond
	Full-time employment Part-time employment Unemployed/Seeking Work Retired Other
(house	hold income includes wages, salary, commissions, pension, RSP, CPP, OAS, rental income, nent income, etc.)
	Less than \$10,000 \$10,000 to \$19,999 \$20,000 to \$29,999 \$30,000 to \$39,999 \$40,000 to \$49,999 \$50,000 to \$59,999 \$60,000 to \$69,999 \$70,000 to \$79,999 \$80,000 to \$89,999 \$90,000 to \$99,999 \$100,000 or greater Not sure
9. Wha	at is the highest level of education that you have attained?
	Secondary (high) school diploma or equivalency certificate Apprenticeship or trades certificate or diploma College, CEGEP or other non-university certificate or diploma University certificate or diploma below bachelor level University certificate, diploma or degree at bachelor level or above None



Transportation

The questions in this section are related to your transportation and mobility preferences.

10. Ho	ow many times per day do you typically leave your home to travel somewhere else?
	Not everyday Once per day Twice per day More than twice per day
11. W	nat is your primary mode of transportation within Dufferin County?
	Car, truck or van as a driver Car, truck or van as a passenger Public transportation Community transportation service Taxi Ride-hailing (uber, lyft, etc.) Bicycle Walk Other (please specify):



Transportation

12. Please rate your satisfaction with the following transportation and mobility considerations in Dufferin County (please check)

	Very satisfied	Satisfied	No Opinion	Unsatisfied	Very Unsatisfied
Road maintenance					
Directional signs					
Street name signs					
Parking availability					
Snow removal (municipal)					
Assisted mobility services					
Taxis					
Public transit - information					
Public transit - fares					
Public transit - schedules					
Public transit - accessibility					
Public transit – stops & service coverage					

•	pecific transpo der adults living	• •	at you would sugg	est to help improve



Housing

The questions in this section are related to your housing needs and preferences.

14. Wha	at type of dwelling do you live in?						
	Private house (e.g. single, semi, townhouse) Private apartment (e.g. rental building, condominium) Supported residence (e.g. McKelvie Burnside Village Apartments; private retirement communities) Long-term care facility (e.g. Dufferin Oaks) Other (please specify)						
15. Incl	uding yourself, how many people live in your household?						
	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 or greater						
If you responded "1", please skip directly to question 17							
16. Who	o do you currently live with?						
Please	select all responses that apply.						
	I live with my spouse I live with my children and/or grandchildren Other (please specify):						

6



Housing

17. D	o you anticipate moving from your existing home within the next 3 - 5 years?
0	Yes
0	No Don't know
lf vou	ı responded "No" or "Don't know" please skip directly to question 20
,	
18. W	hy do you anticipate moving within the next 3 - 5 years?
Pleas	e select all responses that apply.
	Health reasons Move closer to family/friends Move to a home more suitable for older adults Feeling lonely/isolated Downsizing
19. W	/ill your next home be in Dufferin County?
	Preferably Not Sure Unlikely
	re there any specific housing suggestions that you would make to help improve the quality of life der adults living in Dufferin County?

7



Social Participation

The questions in this section are related to your social, leisure & recreational preferences.

21. During the past year, what types of activities have you participated in within Dufferin County?
Please select all responses that apply.
Casual outdoor activities (walking, gardening, nature watching, bocce, frisbee, catch, etc.) Fitness activities (jogging, cycling, weight training, yoga, aerobics, etc.) Aquatics (swimming, water fitness classes, lap swimming, etc.) Sport activities (tennis, badminton, golf, bowling, hockey, curling, lawn bowling, etc.) Cards, board games, table games (billiards, bridge, chess, table tennis, etc.) Hobbies & crafts (reading, painting, sculpting, cooking, sewing, collecting, boating, etc.) Arts & cultural activities (film, music, dance, theatre, museums, etc.) Lifelong learning (classes, demonstrations, discussion groups, etc.) Social clubs (book clubs, stitch nights, service clubs, Legion etc.) None
Other (please specify):
Only respond to question 22 if you responded "None" above 22. Why have you not participated in social, leisure and/or recreational activities in Dufferin Count over the past year?
Please select all responses that apply.
 □ Price of programs □ Programs do not appeal to me □ Distance or accessibility □ No time □ Scheduling conflicts □ Health issues □ I don't know what programs are offered □ I don't have anyone to go with
Other (please specify):

If you have responded to question 22. Please skip to question 26.



Social Participation

23. Where have you participated in social, leisure and/or recreational activities in Dufferin County during the past year?
Please select all responses that apply.
Dufferin County Public libraries Dufferin County Public pools Dufferin County Public parks Dufferin County Public trails and pathways Dufferin County Public arenas Cultural venues (e.g. museum; theatre) Private fitness/social clubs Places of worship Private home Senior's centre Long-term care facility Other (please specify):
24. What are the most convenient times for you to participate in social, leisure and recreational activities?
Please order these six choices from 1 = most convenient to 6 = least convenient.
Example
Weekday mornings
Weekday afternoons
2 Weekday evenings
3 Weekend mornings

5 ____ Weekend afternoons

6 ____ Weekend evenings



Social Participation

activities?							
Less than 5 hours per week 5 - 9 hours per week 10 - 20 hours per week Greater than 20 hours per week							
26. During the next 3-5 years,	how do you e	expect your le	eisure activ	ity to change?			
☐ Increase ☐ Remain Constant ☐ Decrease ☐ Not sure							
27. Please describe your satisfaction with the following types of social, leisure and/or recreational facilities in Dufferin County:							
	Very Satisfied	Satisfied	No Opinion	Unsatisfied	Very Unsatisfied		
Public community centres							
Public libraries							
Public pools							
Public parks							
Public trails and pathways							
Public arenas							
Cultural venues (e.g. museum; theatre)							

25. How many hours per week do you typically spend participating in social, leisure and/or recreational



Social Participation

28. Do you agree or disagree with the following statements about social, leisure and recreational programs and facilities in Dufferin County?

	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
Community facilities are clean and well- maintained					
Community facilities are accessible for residents of all ages/abilities					
Equipment/amenities at facilities are in good condition					
Programs are affordable					
Programs are high quality					
Scheduling of programs is convenient and flexible					
Customer service for programs is available for all residents					
Registration for programs is simple and easy					
Communication about new and upcoming programs reaches all residents					
The variety of programs targeted at older adults is good					
The variety of events targeted at older adults is good					
The locations of events for older adults are accessible to all					



Social Participation

29. Do you have any specific suggestions to improve participation in social, leisure and recreational activities for older adults in Dufferin County?	al



Respect & Social Inclusion

The questions in this section are related to your sense of respect & inclusion within your Community.

30. H	ow would you describe your sense of community belonging? Very Strong Strong Fair Weak Very Weak
31. D	o you feel that your opinions are valued in Dufferin County? Yes No
	o you feel that the diverse needs of older adults are well understood by municipal staff and ed officials in Dufferin County? Yes No
	o you feel that the contributions of older adults in the community are appropriately recognized by cipal staff and elected officials in Dufferin County? Yes No



Respect & Inclusion

34. Do you agree or disagree with the following statements regarding respect and social inclusion for older adults in Dufferin County?

	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
Respect, kindness and courtesy is shown to older adults					
Community events are offered that appeal to older adults					
Community events are offered that appeal to all ages and backgrounds					
Older adults are regularly invited to provide input for public issues					
Older adults are adequately represented on councils, boards and committees					
Contributions by older adults are recognized and valued in the community					
Older adults receive quality customer service in a way that meets their needs					



Civic Participation & Employment

The questions in this section are related to your opportunities to make meaningful and ongoing contributions to your local community through civic participation and employment.

35. Do you currently volunteer anywhere in Dufferin County? Yes No
If you responded "No" please skip to question 38
36. How many hours per week do you dedicate to volunteer activities? Less than 1 hour per week 1-2 hours per week 3-5 hours per week Greater than 5 hours per week
37. Where do you volunteer?
Please select all responses that apply.
Church or place of worship Charity/not-for-profit Boards/advisory committees Service club (Rotary; Lions; Kinsmen; etc.) Sports or recreational club School/youth group Hospital/health care service provider Elder/seniors care provider Community events Other (please specify):



Civic Participation & Employment

38. Do you agree or disagree with following statements regarding civic participation and employment opportunities for older adults in Dufferin County?

	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
There are many volunteer opportunities for older adults					
Older adults are encouraged to volunteer					
Older adults are provided with appropriate training for volunteer opportunities					
Older adults have equal access to employment opportunities					
Older adults are made aware of volunteer opportunities					



Communication & Information

The questions in this section are related to your preferences for receiving communication & information from the County of Dufferin

39. WI	hat is your current method of staying informed about programs and services in Dufferin County?
Please	e select all responses that apply.
	Newspaper advertisements/notices Social media (Facebook; Twitter; etc.) Email newsletter Electronic brochure Councillor newsletters Websites Community bulletin boards (libraries; communities centres; etc.) Radio Television Other (please specify):
Duffer Please	hat is your preferred method of staying informed about programs and services for older adults in in County? e select only one response. Newspaper advertisements/notices Social media (Facebook; Twitter; etc.) Email newsletter Electronic brochure Councillor newsletters Websites Community bulletin boards (libraries; communities centres; etc.) Radio Television Other (please specify):
	Circi (picase specify).



Communication & Information

41. Do you agree or disagree with following statements regarding communication and information about programs and services for older adults in Dufferin County?

	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
Communication reaches all residents					
Important information is provided in public forums					
Written information is clear and concise					



Community Support & Health Services

42. In general, how would you describe your physical health?

The questions in this section are related to your ability to access Community Support & Health Services.

☐ Very Good ☐ Good ☐ Fair ☐ Poor ☐ Very Poor					
43. In general, how would you	describe your	mental health	and person	al well-being	?
 □ Very Good □ Good □ Fair □ Poor □ Very □ Poor 					
14. Do you act as a caregiver Yes No No 15. Do you agree or disagree vervices for older adults in Duf	with the followin				·
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
Community support and health services are readily available to address my existing needs					
Community support and health services are affordable			0		
Community support and health services are conveniently located			0		
Community support and health services are easily found					
Community support and health services are available for older adults who can't leave their homes					



Outdoor Spaces & Buildings

The questions in this section are related to your ability to access and move around the County of Dufferin, including: parks, paths, and public buildings.

46. Please rate your satisfaction with the **quality** of the following Dufferin County amenities:

	Very Satisfied	Satisfied	No Opinion	Unsatisfied	Very Unsatisfied
Sidewalks					
Parks, pathways and trails					
Public washrooms					
Rest areas and/or seating					
Community centres					
Public libraries					
Municipal offices					
Parking lots at municipal facilities					

47. Please rate your satisfaction with the accessibility of the following County amenities:

Accessibility refers to the design of spaces to remove barriers for older adults and people with disabilities.

	Very Satisfied	Satisfied	No Opinion	Unsatisfied	Very Unsatisfied
Sidewalks					
Parks, pathways and trails					
Public washrooms					
Rest areas and/or seating					
Community centres					
Public libraries					
Municipal offices					
Parking lots at municipal facilities					



That's it! You're Done!

Thank you for your participation!

Your insights will be very helpful in shaping our plan.

If you would like to stay connected with the Dufferin County Age Friendly Community Needs Assessment and Strategic Action Plan planning process, please provide your email or mailing address so that we can keep you informed of future events and the release of the Plan which is scheduled for early-2019.

Email:		
-or-		
Mailing Address:		

How to return the survey



Mail

or

Corinne Nielsen
Office Coordinator
County of Dufferin
Community Services
30 Centre Street,
Orangeville, ON L9W 2X1

For enquiries: 519-941-6991 ext. 2402



Drop-Off

- W & M Edelbrock Centre 30 Centre Street, Orangeville, ON
- Shelburne Employment Resource Centre 167 Centre Street, Entrance E, Shelburne, ON
- Orangeville & District Senior Citizens Centre 26 Bythia Street, Orangeville, ON



AGENDA

- 1 Background
- 2 Current & Future Context
- 3 Public Survey: Key Findings
- 4 Validation: Live Audience-Polling
- 5 Next Steps



BACKGROUND

• Eight dimensions of an age-friendly community according to the World Health Organization:



Framework for evaluating age-friendliness in Dufferin



BACKGROUND

What is an age-friendly community?

 Age-friendly communities deliver POLICIES, PROGRAMS, SERVICES and SPACES that help residents maintain their independence as they age





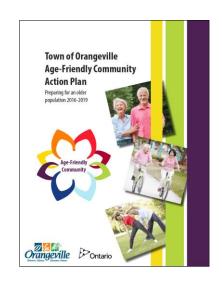
BACKGROUND

Who is considered an older adult?

 Most communities that have undertaken age-friendly studies have adopted the following definition of an older adult:

55+ YEARS OF AGE

 Consistent with definition from the Town of Orangeville Age-Friendly Community Action Plan



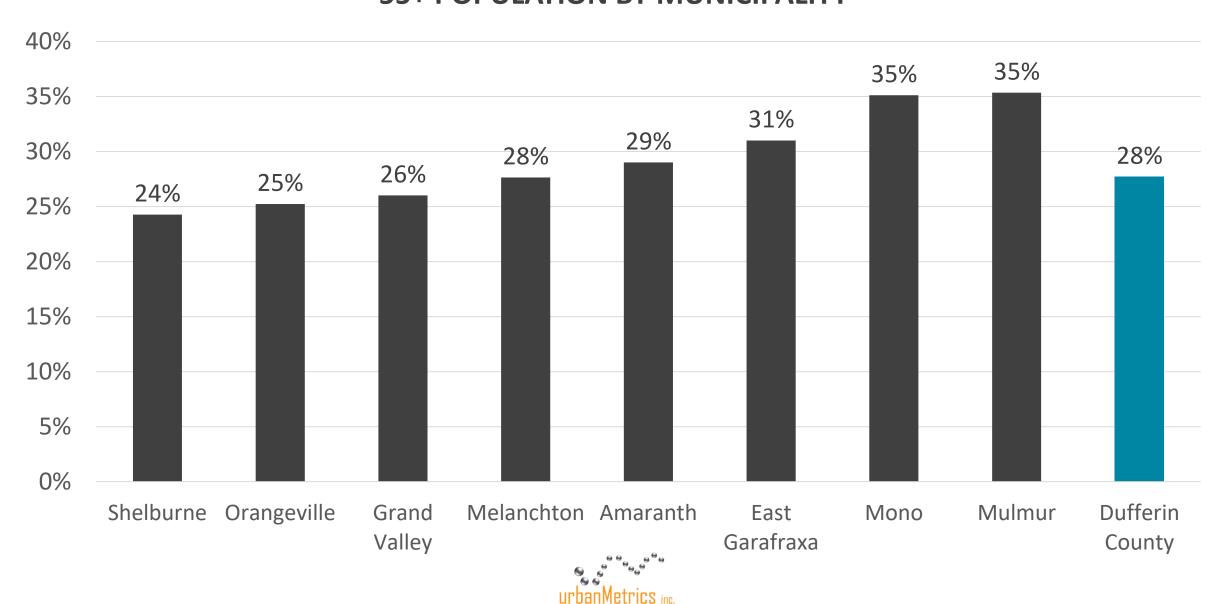


BACKGROUND

- Key project objectives include:
 - 1. Establish guiding principles and vision
 - 2. Create an age-friendly community profile and inventory of programs and services for older adults
 - 3. Identify goals, priorities and issues for older adults
 - 4. Undertake a needs assessment based on age-friendly planning resources (e.g. WHO)
 - 5. Establish a Strategic Action Plan that will enhance the ability of older adults to maintain their independence as they age

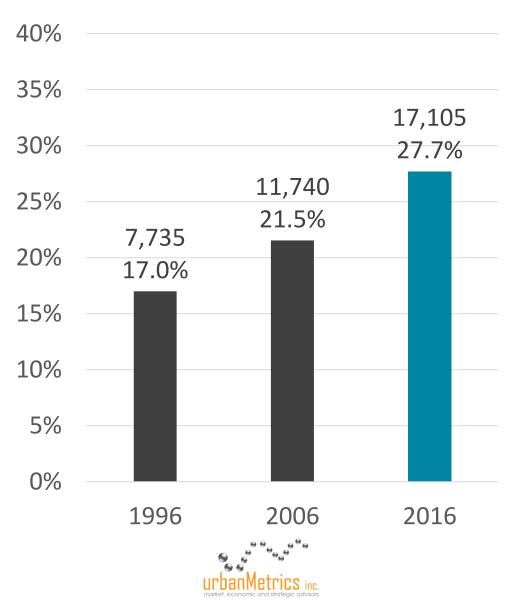


CURRENT CONTEXT 55+ POPULATION BY MUNICIPALITY



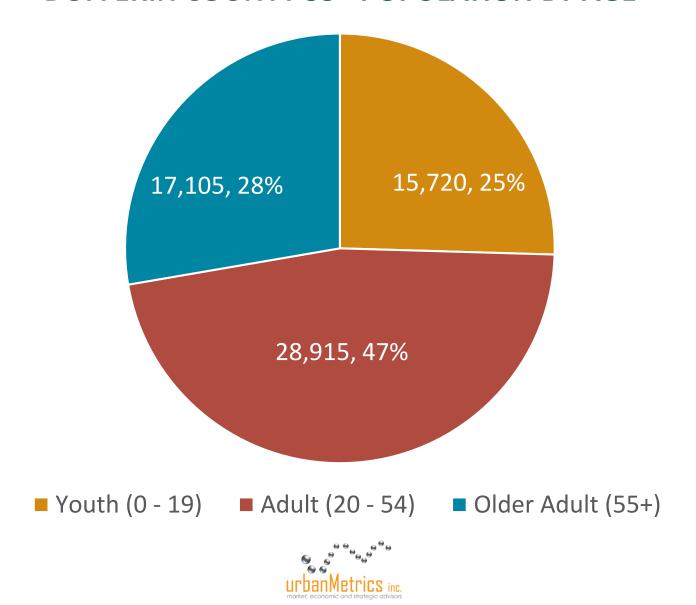
CURRENT CONTEXT

DUFFERIN COUNTY 55+ HISTORICAL POPULATION GROWTH



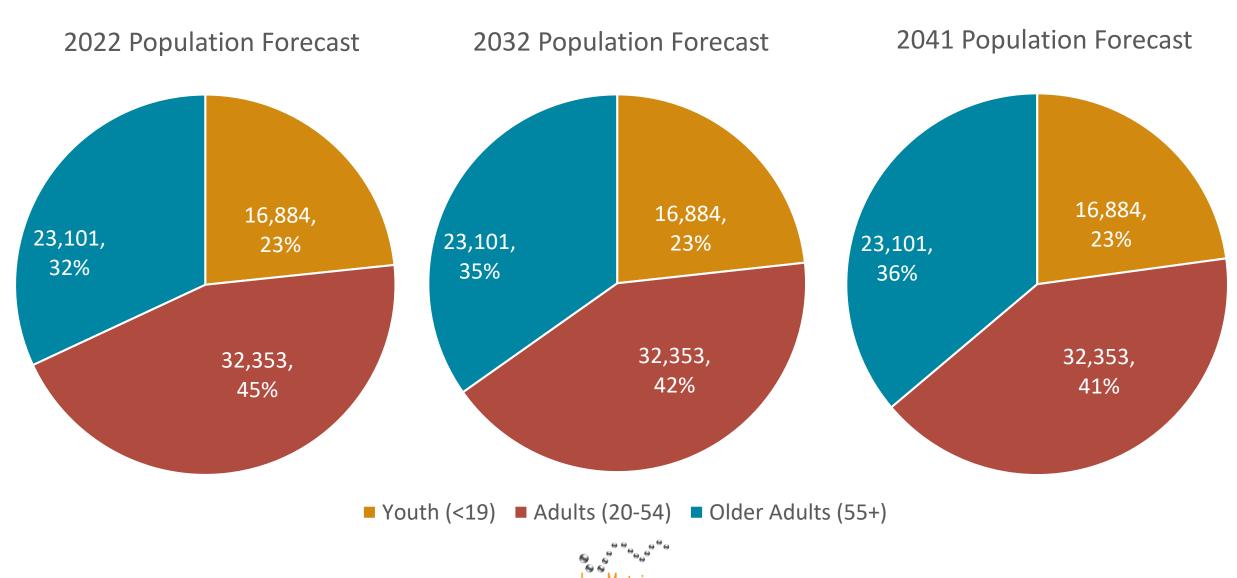
CURRENT CONTEXT

DUFFERIN COUNTY 55+ POPULATION BY AGE



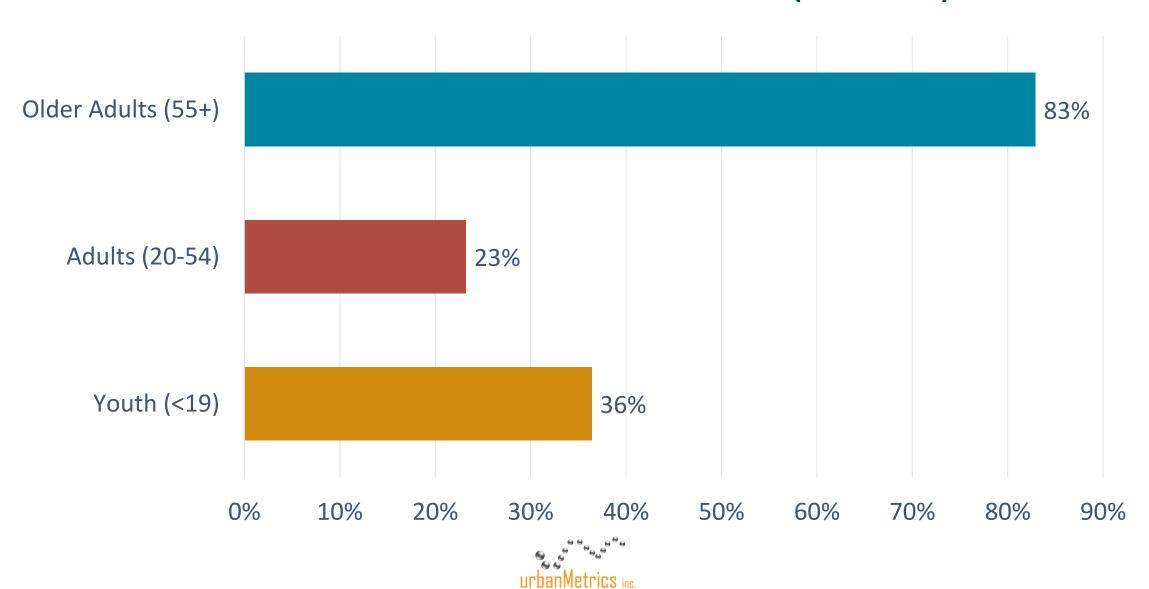
FUTURE CONTEXT

DUFFERIN COUNTY 55+ POPULATION FORECAST BY AGE



FUTURE CONTEXT

PROJECTED POPULATION GROWTH BY AGE (2017-2041)



- The survey was intended to provide insight regarding:
 - 1) Age-friendly programs and services in Dufferin
 - 2) Barriers to age-friendliness and existing service gaps
 - 3) Suggestions to address barriers, gaps and other age-friendly challenges
- Survey included questions relating to each age-friendly dimension



Age-Friendly Community Needs Assessment & Strategic Action Plan Resident Survey



Welcome to **Dufferin County's Age Friendly Community Needs Assessment and Strategic Action Plan.** If you are 55 years of age or older, we would appreciate your insight on aging gracefully in Dufferin County.

The following survey will take approximately **15-20 minutes** to complete. All of your responses will be anonymous and remain confidential. The survey results will only be used as input to Dufferin County's Age Friendly Community Needs Assessment and Strategic Action Plan.

We kindly request that you complete the survey on an individual basis, in order to reflect your personal insights and feedback. Your participation and input are key to understanding the preferences and demands of local residents and/or visitors.

Thank you in advance for taking the time to help improve the lives of Dufferin County residents. Please spread the word and encourage your family, friends, colleagues, etc. to also complete the survey.

Background

Dufferin County, working in collaboration with urbanMetrics inc., is implementing an innovative, flexible and proactive approach to planning for the dynamic needs of the growing population of local older adults (55+ years of age) and their caregivers. The County is committed to becoming an age-friendly community that is supportive and inviting for citizens of all ages, abilities and backgrounds. The purpose of this Age-Friendly Community Needs Assessment and Strategic Action Plan is to identify and incorporate age-friendly community policies, practices, features, programs, and initiatives required to meet the existing and future needs of older adults in Dufferin County.

Similar to many communities across Ontario, the proportion of older adults in Dufferin County has been increasing significantly over the past decade and is expected to continue at a rapid pace over the next decade, creating increased demand for older adults' programs and services. Dufferin County's Age Friendly Community Needs Assessment and Strategic Action Plan is being undertaken to ensure that older adults in Dufferin County are appropriately recognized and have access to the programs and services they require to stay active, healthy, and engaged in the local community.

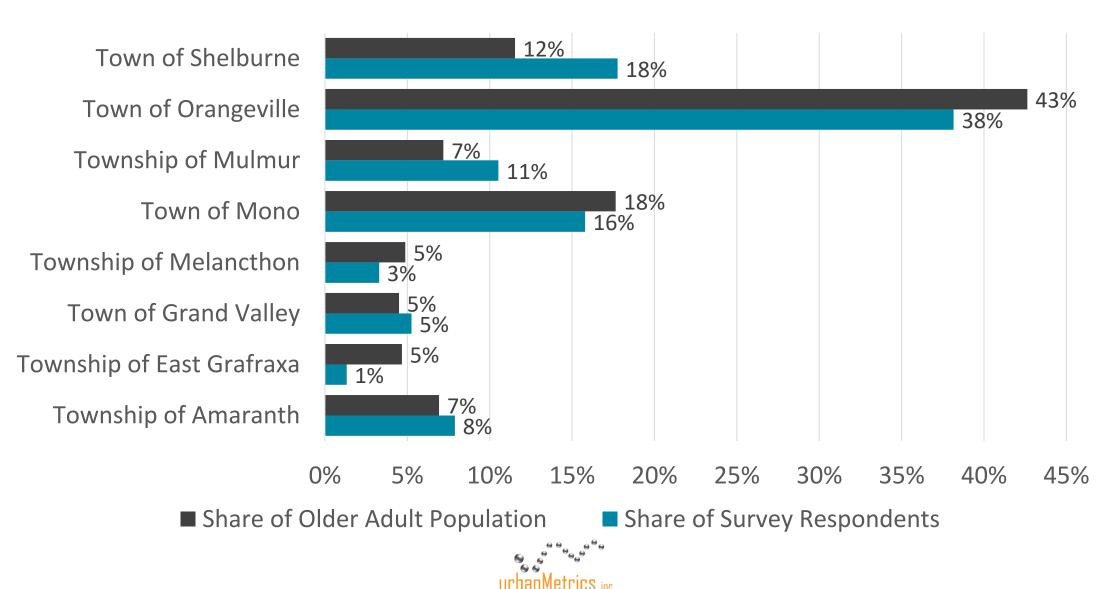
Dufferin County's Age Friendly Community Needs Assessment and Strategic Action Plan is intended to align with the eight dimensions of an age-friendly community, as defined by the World Health Organization. These eight age-friendly dimensions include:



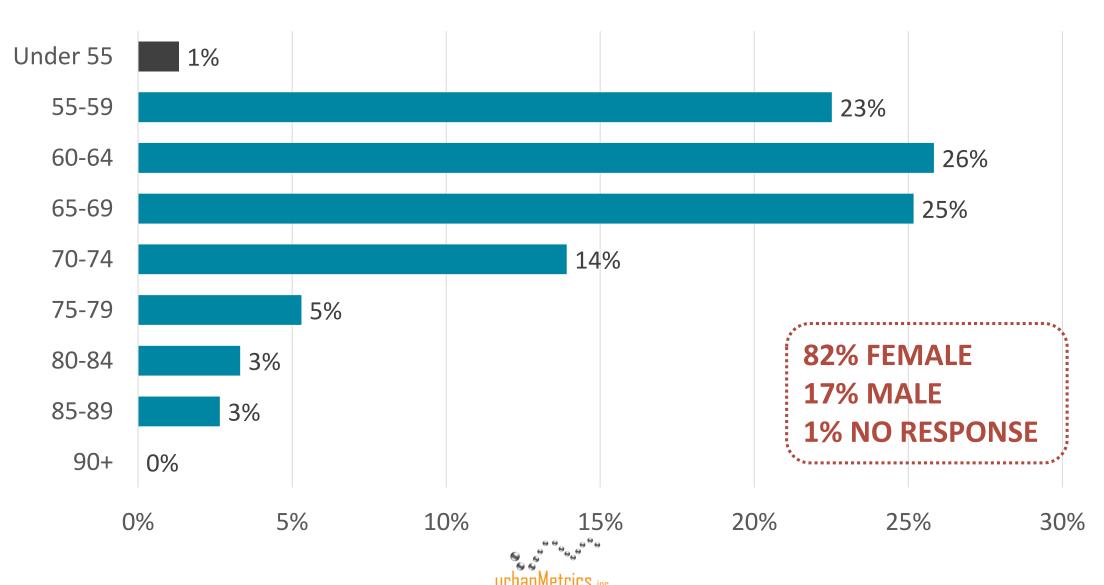
The questions included in the following survey are intended to address each of these eight age-friendly dimensions.

urbanMetrics inc.

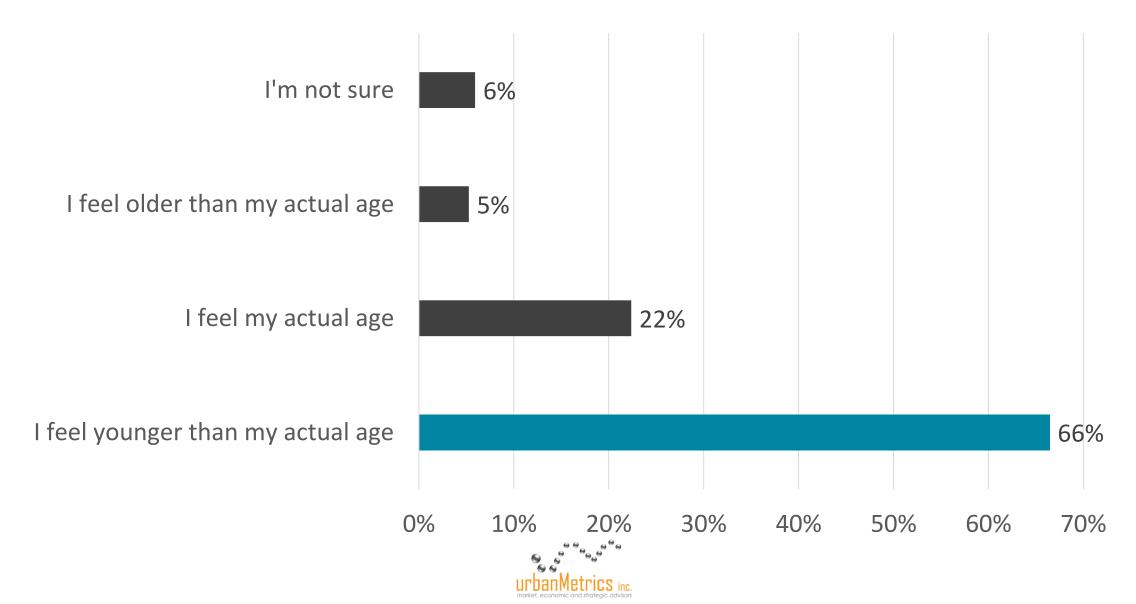
RESPONDENT DISTRIBUTION



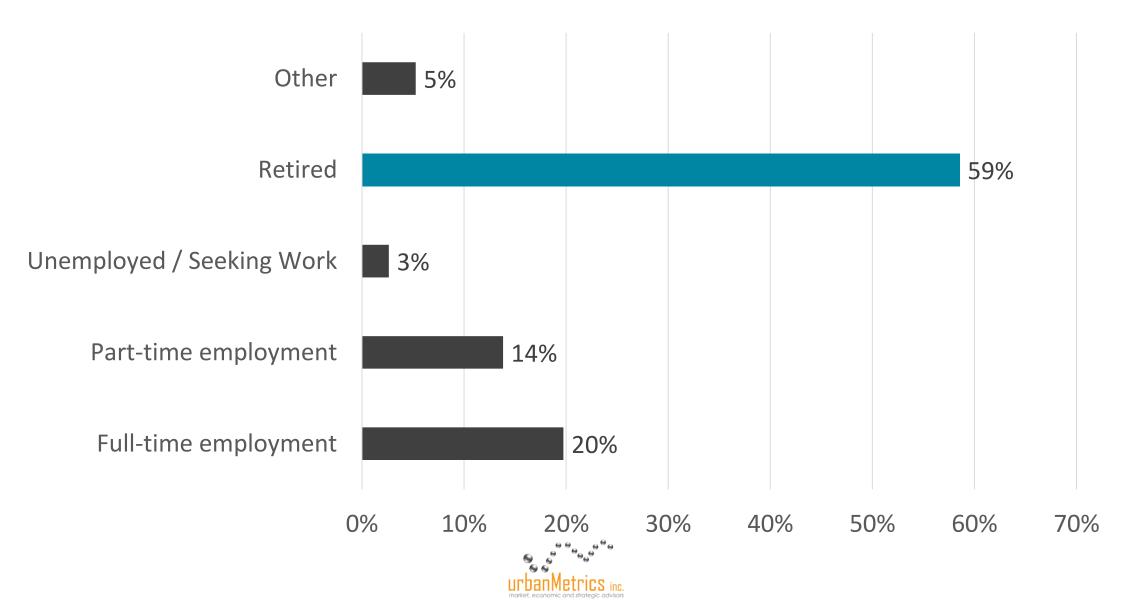
RESPONDENT PROFILE: AGE



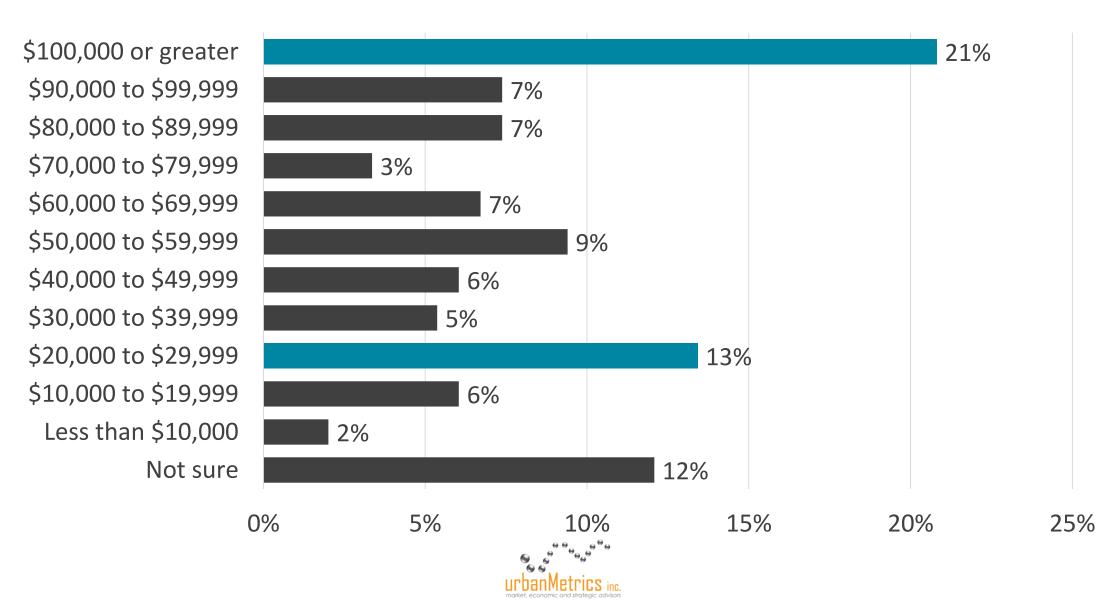
RESPONDENT PROFILE: FEELING RELATIVE TO AGE



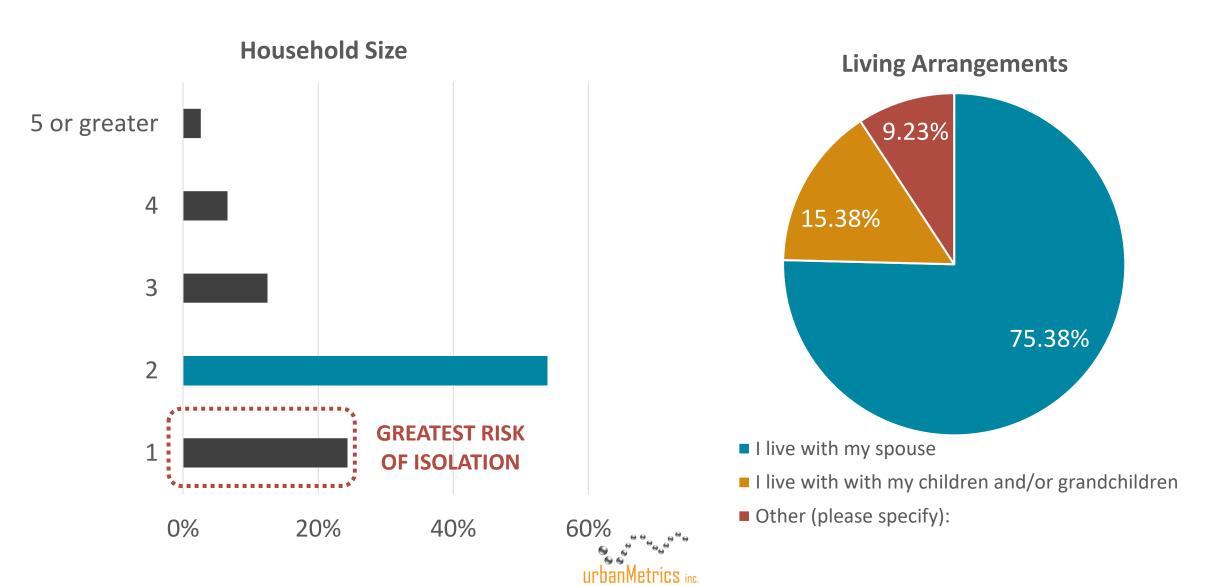
RESPONDENT PROFILE: EMPLOYMENT STATUS



RESPONDENT PROFILE: HOUSEHOLD INCOME

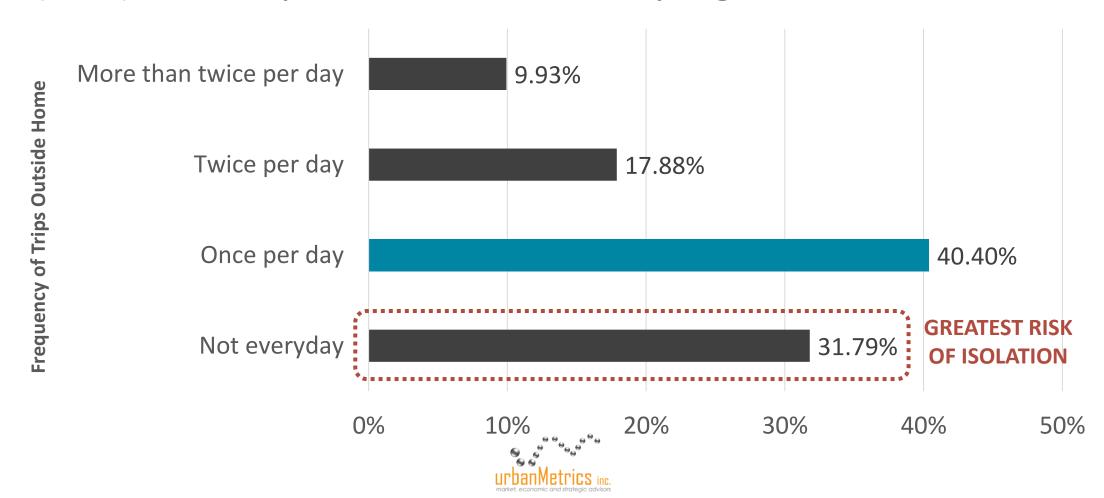


RESPONDENT PROFILE: HOUSEHOLD SIZE & LIVING ARRANGEMENTS



RESPONDENT PROFILE: TRANSPORTATION

 Private vehicles are the primary mode of transportation (94%) – car dependence is extremely high

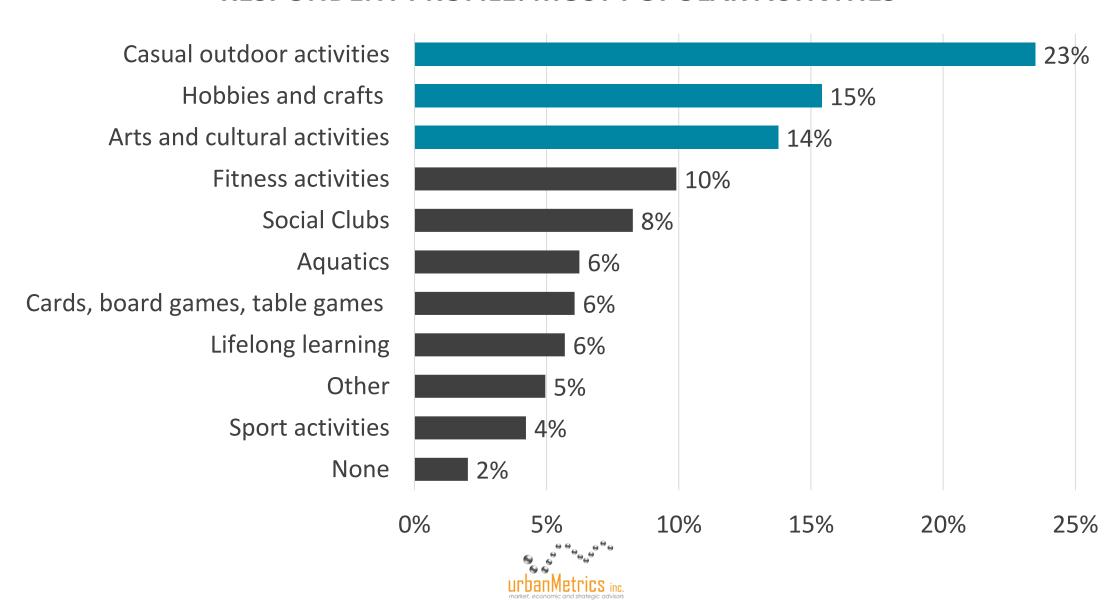


RESPONDENT PROFILE: SOCIAL PARTICIPATION

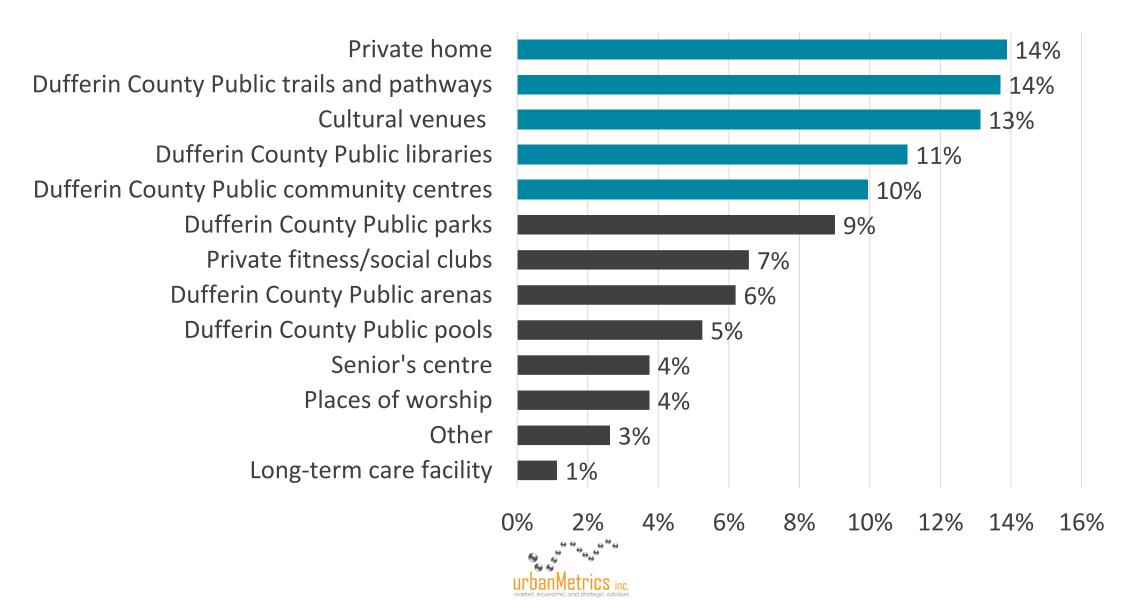
- The most popular times to participate in social, leisure and/or recreational activities include:
 - 1) Weekday mornings
 - 2) Weekday afternoons
 - 3) Weekday evenings
- Over 35% of survey respondents indicated they spend less than 5 hours weekly participating in social, leisure and/or recreational activities
- The majority expect their activity level to remain constant



RESPONDENT PROFILE: MOST POPULAR ACTIVITIES

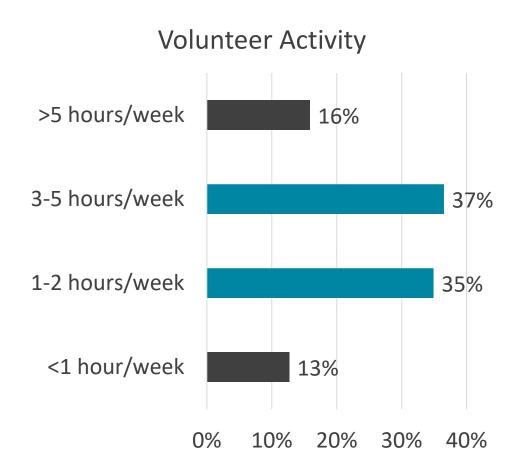


RESPONDENT PROFILE: MOST POPULAR LOCATIONS FOR ACTIVITIES



RESPONDENT PROFILE: VOLUNTEER PARTICIPATION

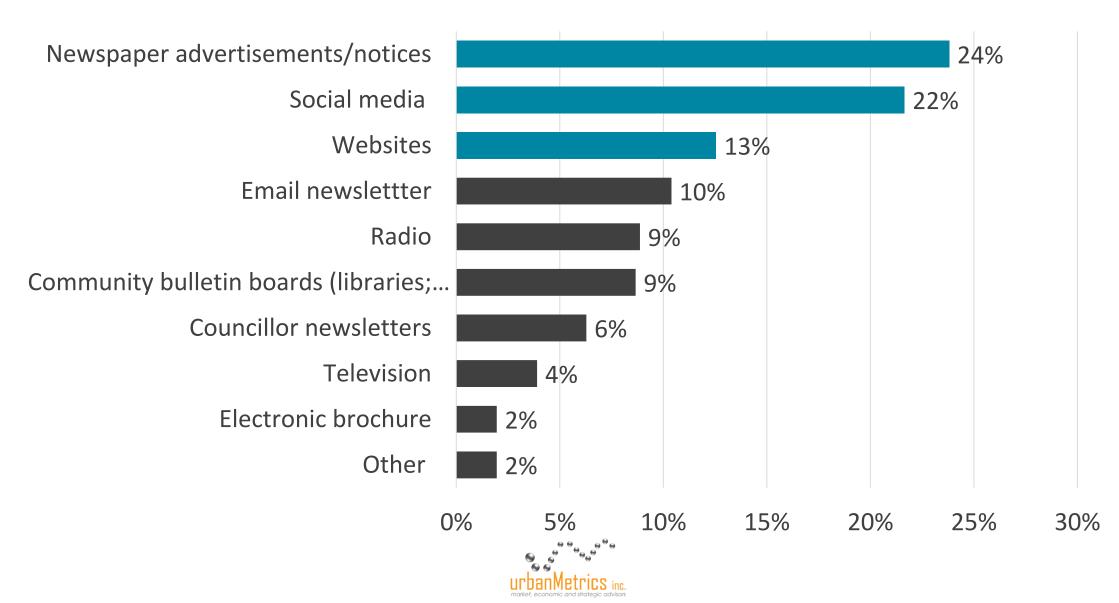
• 41% of respondents currently volunteer



Volunteer Locations Charity/not-for-profit 22% Community events 16% Other 15% Boards/advisory committees 12% Church or place of worship 10% Elder/seniors care provider Service club 7% Hospital/health care service... 4% Other: Theatre Orangeville; Library; Sports or recreational club 4% Dufferin Oaks; Alzheimer's Society; peer support School/youth group 0% 10% 20% 30%



RESPONDENT PROFILE: CURRENT INFORMATION SOURCES



QUANTIFIED ENGAGEMENT: Live Audience Polling

- INTERACTIVE participation from everyone
- TRANSPARENT results are tabulated on the spot
- INSTANTANEOUS

 enables "quick diagnostic" discussions
- EMPOWERING no voice left behind



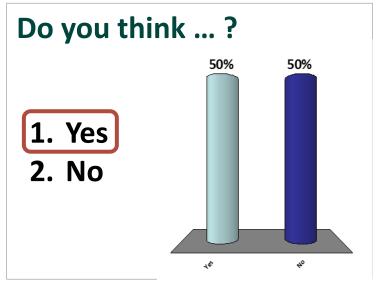


QUANTIFIED ENGAGEMENT: Live Audience Polling



- To answer, press the corresponding button
- **EXAMPLE:** to vote "**Yes**", press "**1**" on the clicker
- For questions that require multiple responses (i.e. rank top 3) enter in order of preference
- The system only records your last entries
 - If a mistake is made, simply re-enter you answer(s)

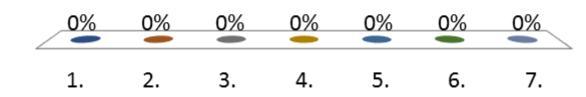




How did you <u>first</u> learn about this public engagement session?



- 1. Email
- 2. Newspaper advertisement
- 3. Municipal website
- 4. Community bulletin board
- 5. Social media
- 6. Word-of-mouth
- 7. Other



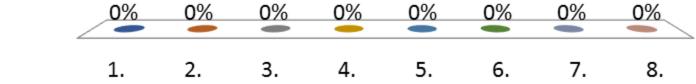


What is your age?



1.
$$55 - 59$$

- 2.60-64
- 3.65 69
- 4. 70 74
- 5. 75 79
- 6. 80 84
- 7. 85 89
- 8. 90+





How do you identify yourself?



- 1. Male
- 2. Female
- 3. Non-binary
- 4. Prefer not to respond

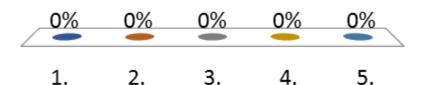
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1.	2.	3.	4.



What is your current employment status?

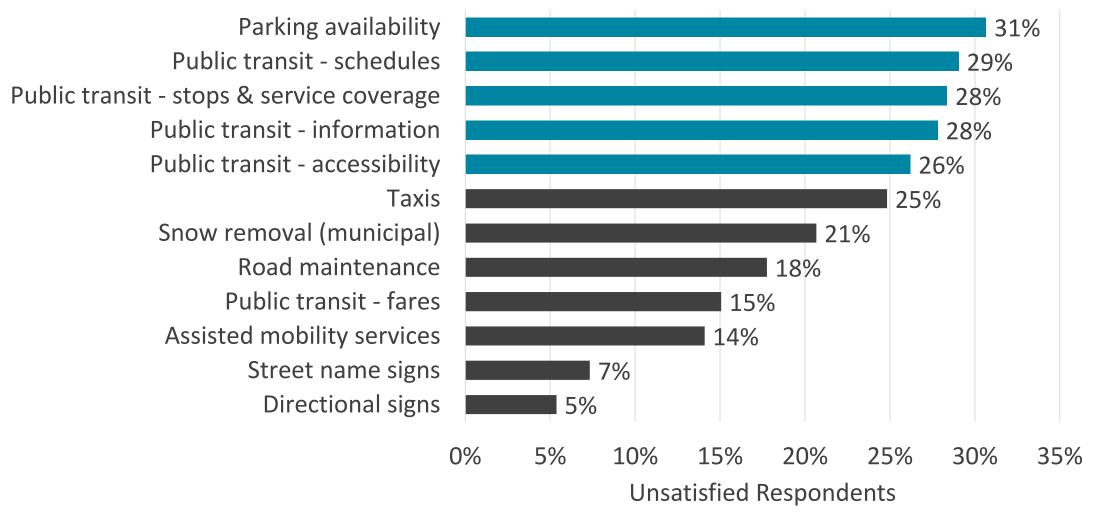


- 1. Full-time
- 2. Part-time
- 3. Unemployed/Seeking Work
- 4. Retired
- 5. Other





TRANSPORTATION: KEY AREAS FOR IMPROVEMENT

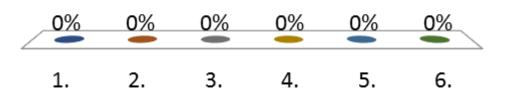




What is the best way to improve public transit services for older adults?



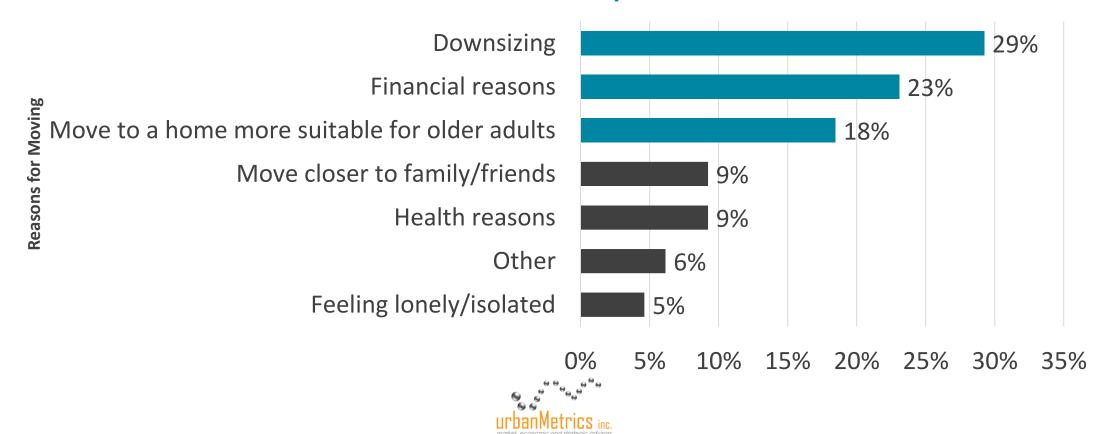
- 1. Increased capacity on existing routes
- 2. Enhanced service connections to regional transit in Orangeville
- 3. Partnerships with community organizations to use underutilized vehicles
- 4. Increased funding (e.g. federal; provincial)
- 5. On-demand transit services (e.g. ride-hailing partnership)
- 6. Other





HOUSING: LIKELIHOOD & REASONS FOR MOVING

- 23% anticipate moving within the next 3-5 years
- 23% of those who anticipate moving indicated it is unlikely their new home will be in Dufferin County



HOUSING: KEY AREAS FOR IMPROVEMENT

- The most common housing-related suggestions for how to improve quality of life for older adults in Dufferin County included:
 - Greater variety of housing, including smaller and accessible housing formats (e.g. bungalows; accessible condos; accessible townhouses)
 - More affordable housing options
 - More rental housing options
 - More long-term care and assisted living facilities
 - Reduced property taxes



What type of housing improvement would have the greatest impact on your ability to age in place?

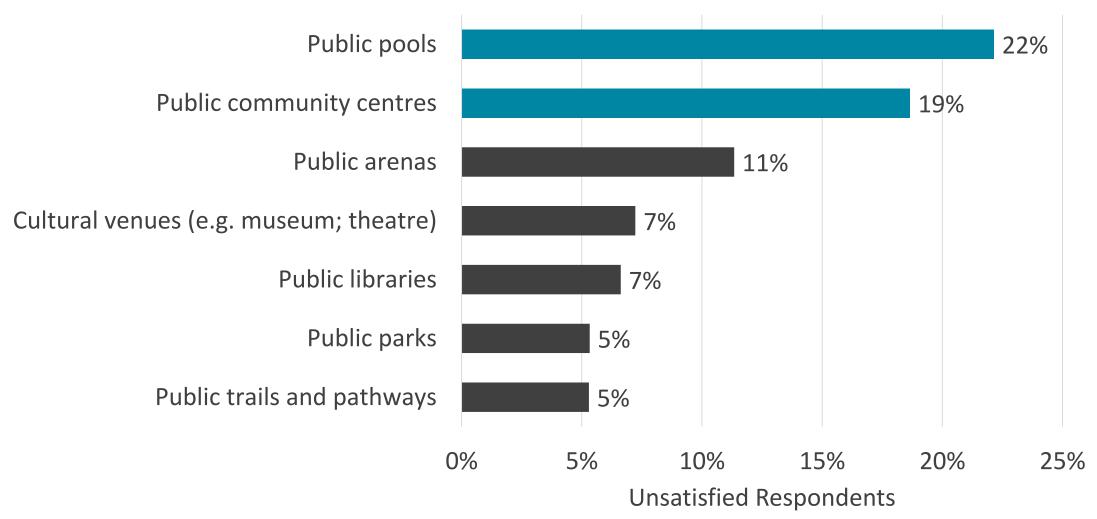


- 1. Smaller and accessible housing options
- 2. More affordable housing options
- 3. More rental housing options
- 4. More long-term care and assisted living facilities
- 5. Reduced property taxes
- 6. Other

0%	0%	0%	0%	0%	0%
1.	2.	3.	4.	5.	6.

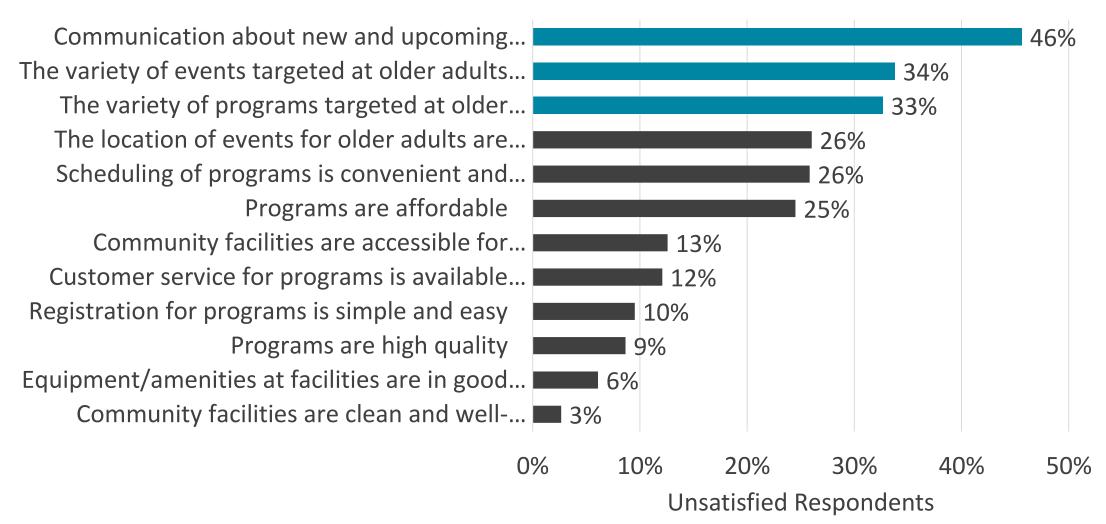


SOCIAL PARTICIPATION: KEY AREAS FOR IMPROVEMENT





SOCIAL PARTICIPATION: KEY AREAS FOR IMPROVEMENT

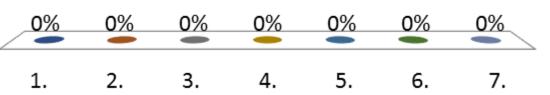




What is the primary barrier to participation in recreational programs and activities?



- 1. Communication
- 2. Variety of events
- 3. Variety of programs
- 4. Location of events
- 5. Scheduling flexibility
- 6. Affordability of programs
- 7. Other

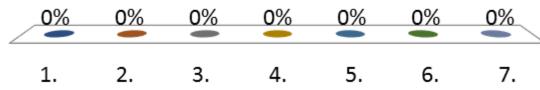




What is the best way to improve social participation for older adults?



- 1. Improved communication about programs and events
- 2. Greater variety of programs
- 3. Greater variety of special events
- Improved transportation to/from programs and special events
- 5. Greater scheduling flexibility
- 6. Improved affordability of programs and events
- 7. Other



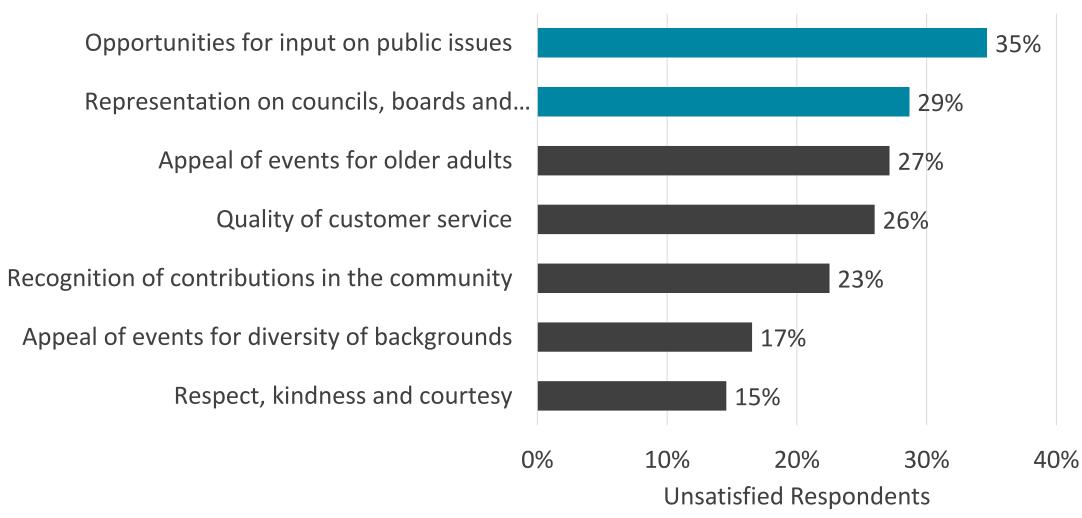


RESPECT & SOCIAL INCLUSION: KEY AREAS FOR IMPROVEMENT

- 41% don't feel that their opinions are valued
- 68% don't feel that the needs of older adults are well understood
- 61% don't feel that the contributions of older adults are appropriately recognized



RESPECT & SOCIAL INCLUSION: KEY AREAS FOR IMPROVEMENT

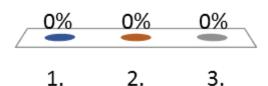




Do older adults have sufficient opportunities to provide input on public issues?



- 1. Yes
- 2. No
- 3. Unsure





What is the best the best way for older adults to provide input on public issues?



- 1. Online Survey
- 2. Hard-Copy Survey
- 3. Public Meeting
- 4. Older Adult Advisory Committee
- 5. Other

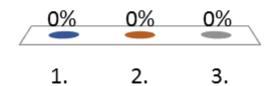
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1.	2.	3.	4.	5.



Are older adults appropriately represented on local boards and committees?



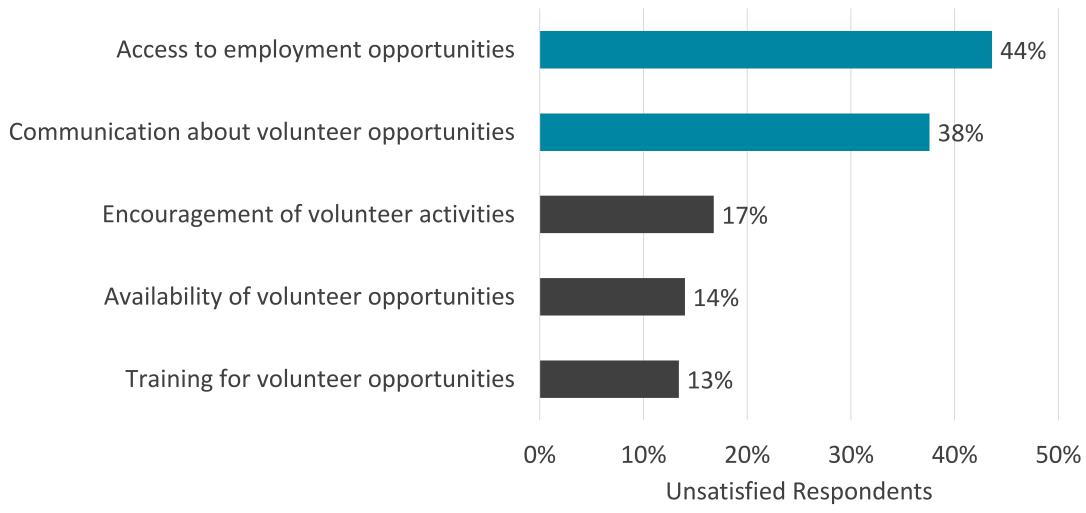
- 1. Yes
- 2. No
- 3. Unsure





PUBLIC SURVEY

CIVIC PARTICIPATION & EMPLOYMENT: KEY AREAS FOR IMPROVEMENT

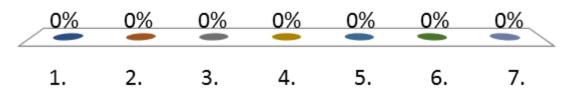




What is the biggest challenge in terms of access to employment for older adults?



- Misconceptions about older adults (i.e. ageism)
- 2. Corporate policies on employment
- 3. Lack of job training
- Lack of opportunity for career development/advancement
- Lack of employment opportunities (regardless of age)
- 6. All of the above
- 7. Other

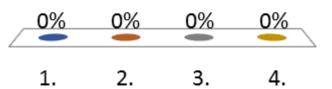




How can communication about volunteer opportunities for older adults be improved?



- Maintaining a central information resource for older adults
- 2. Offering one-on-one assistance
- Greater coordination between the City and local support service agencies
- 4. Other

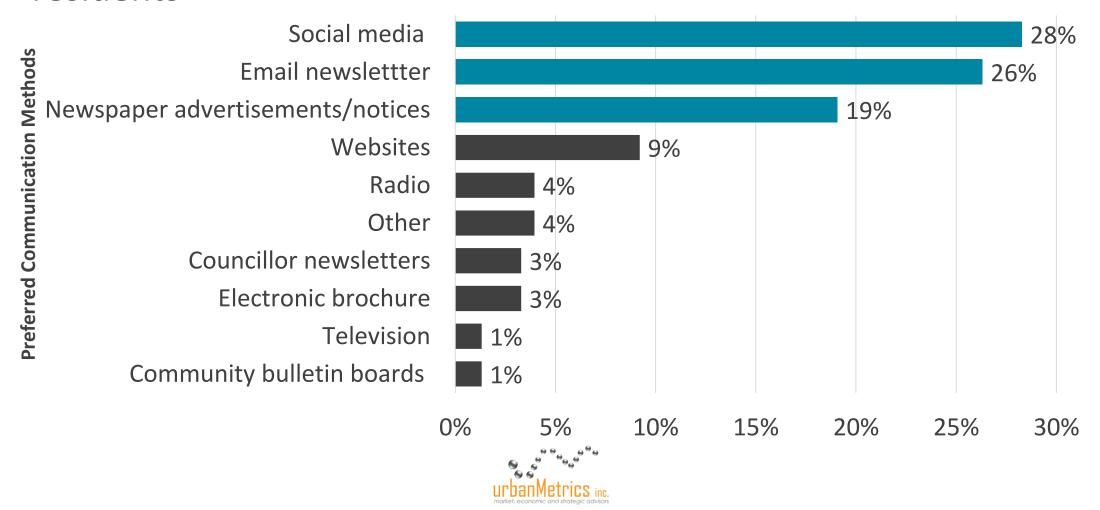




PUBLIC SURVEY

COMMUNICATION & INFORMATION: PREFERRED COMMUNICATION METHODS

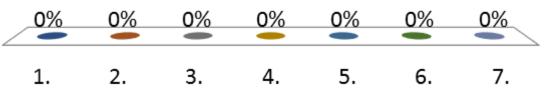
61% of residents disagree that communication reaches all residents



What is the best way for you to receive communications about programs and services?



- 1. Social media
- 2. Email newsletter
- 3. Newspaper advertisements/notices
- 4. Websites
- 5. Radio
- 6. Word-of-mouth
- 7. Other



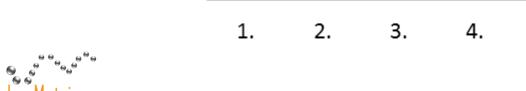


What is the greatest challenge impacting communication with older adults?



- Circulation Information doesn't reach all residents
- Awareness lack of awareness about where to find information
- 3. Quality communications do not have information needed
- 4. Technology some older adults have limited familiarity and/or access





0%

PUBLIC SURVEY

COMMUNITY SUPPORT & HEALTH SERVICES: KEY AREAS FOR IMPROVEMENT

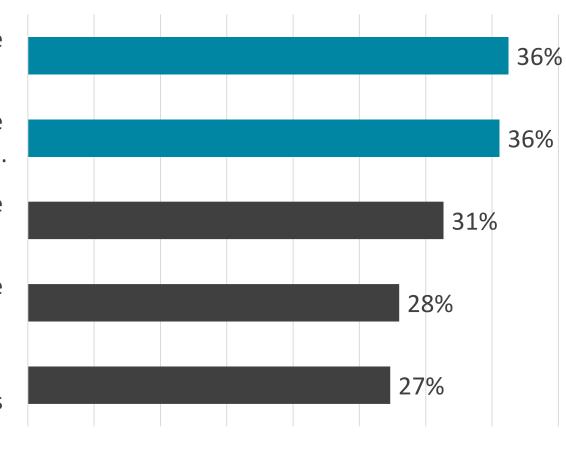
Community support and health services are easily found

Community support and health services are available for older adults who can't leave...

Community support and health services are affordable

Community support and health services are conveniently located

Community support and health services are readily available to address my existing needs



0% 5% 10% 15% 20% 25% 30% 35% 40% Unsatisfied Respondents



How could finding community health and support services be simplified?



- Maintaining a central information resource for older adult programs and services
- 2. Offering one-on-one assistance
- 3. Greater coordination between the City and local support service agencies
- 4. Other

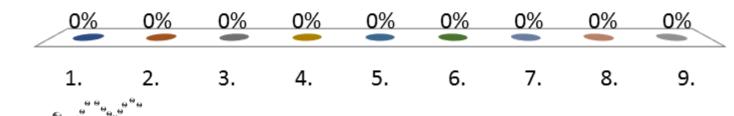
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1		2.	3.	4.



What types of in-home support services do you require?

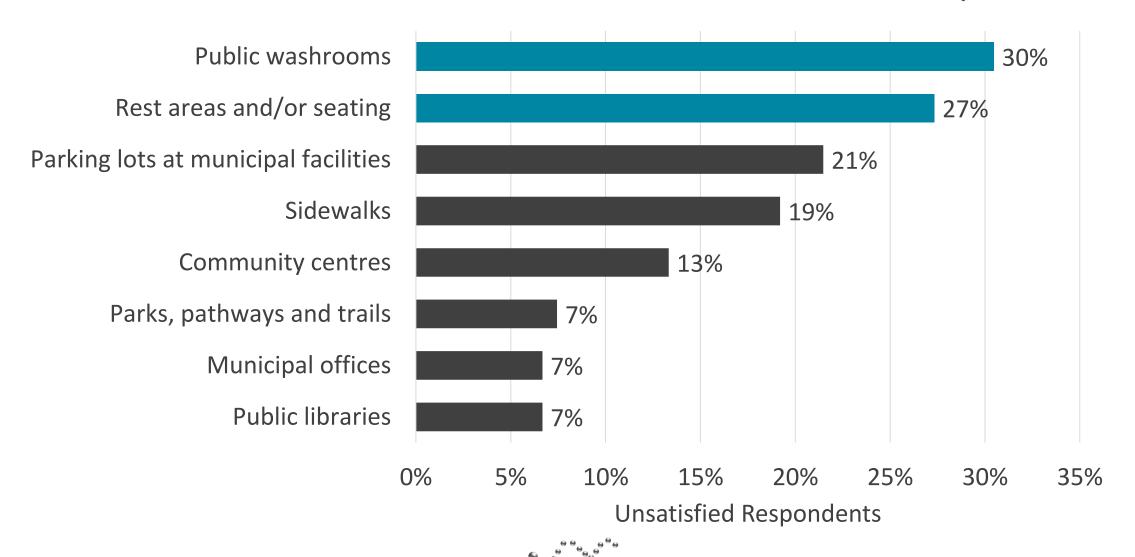


- 1. Indoor household chores
- 2. Outdoor household chores
- 3. Companionship
- 4. Meal preparation
- 5. Personal care
- 6. Health care
- 7. Respite / caregiver assistance
- 8. Transportation
- 9. Other



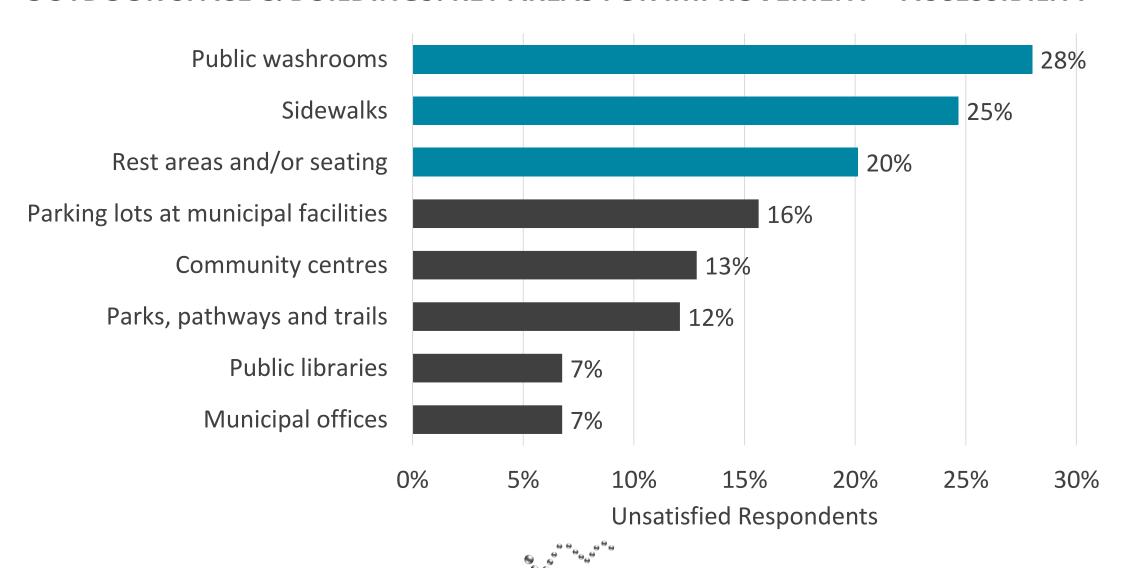
PUBLIC SURVEY

OUTDOOR SPACE & BUILDINGS: KEY AREAS FOR IMPROVEMENT – QUALITY



PUBLIC SURVEY

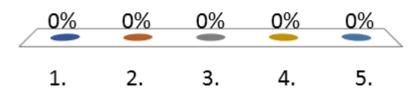
OUTDOOR SPACE & BUILDINGS: KEY AREAS FOR IMPROVEMENT – ACCESSIBILITY



What is the top priority to improve rest areas?



- 1. Ensuring rest areas are in convenient locations
- 2. Adding more rest areas throughout the County (i.e. improving coverage)
- 3. Improving accessibility of rest areas
- 4. Ensuring rest areas are available year-round
- 5. Other

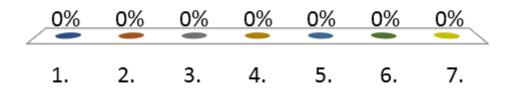




What is the top priority to improve public washrooms?



- Ensuring washrooms are in convenient locations
- 2. Adding more public washrooms throughout the County (i.e. coverage)
- 3. Implementing accessibility features (e.g. ramps, grab bars, etc.)
- 4. Improving cleanliness and maintenance
- Adding indoor public washrooms at City facilities
- 6. Adding outdoor public washrooms
- 7. Other

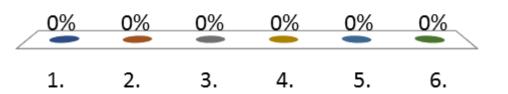




What is the top priority to improve sidewalks?



- 1. Enhancing coverage through the County
- 2. Implementing accessibility features
- Improving general maintenance
- 4. Improving winter maintenance
- 5. Implementing safety features
- 6. Other

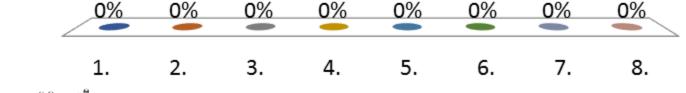




What are the greatest priorities with respect to the 8 Age Friendly Community Dimensions? RANK TOP 3



- 1. Housing
- 2. Communication and information
- 3. Community support and health services
- 4. Transportation and mobility
- 5. Social participation
- Civic participation and employment
- 7. Outdoor space and buildings
- 8. Respect and social inclusion







Community Services

	2018 ACTUAL	JULY 2019 ACTUAL	2019 BUDGET	DOLLAR CHANGE	%AGE CHANGE
Revenues					
User Fees	-\$342	-\$188	-\$348	-\$160	54.11%
Rent Revenue	-\$1,988	-\$1,267	-\$2,209	-\$941	57.38%
Government Transfers	-\$16,465	-\$8,828	-\$15,043	-\$6,215	58.69%
Other Revenue	-\$3,581	-\$245	-\$464	-\$219	52.80%
Total Revenues	-\$22,376	-\$10,529	-\$18,064	-\$7,535	58.29%
Expenditures					
Salaries and Benefits	\$4,473	\$2,573	\$4,737	\$2,164	54.33%
Administrative and Office	\$282	\$297	\$526	\$229	56.52%
Debt Repayment	\$1,060	\$464	\$858	\$394	54.07%
Service Delivery	\$15,370	\$8,862	\$14,904	\$6,042	59.46%
IT and Communications	\$89	\$58	\$91	\$32	64.12%
Facilities	\$2,383	\$1,277	\$2,350	\$1,073	54.33%
Vehicles and Equipment	\$18	\$9	\$19	\$10	49.22%
Internal Services Used	\$935	\$598	\$995	\$397	60.13%
Internal Services Recovered	-\$390	-\$222	-\$398	-\$176	55.74%
Capital Contribution	\$5,447	\$533	\$914	\$381	58.33%
Total Expenditures	\$29,668	\$14,451	\$24,996	\$10,545	57.81%
Transfers					
Transfers from Reserves	-\$196	\$0	-\$50	-\$50	0.00%
DC Contribution	-\$1,263	-\$183	-\$355	-\$172	51.54%
Transfers to Reserves	\$181	\$12	\$20	\$8	58.35%
Total Transfers	-\$1,279	-\$171	-\$385	-\$214	44.50%
Total Community Services	\$6,013	\$3,751	\$6,547	\$2,796	57.29%

Community Services - Month over Month Changes

June 30 year to date		3,312,343
Revenues		
User Fees		(25,521)
Rent Revenue		(190,300)
Government Transfers		(1,510,584)
Other Revenue		(53,766)
Total Change in Revenues		(1,780,171)
Expenditures		
Salaries and Benefits		563,968
Administrative and Office ¹		44,301
Debt Repayment		66,301
Service Delivery ²		1,278,400
IT and Communications		2,498
Facilities ³		128,806
Vehicles and Equipment		1,285
Internal Services Used		117,004
Internal Services Recovered		(35,419)
Capital Contribution		76,163
Reserve Transfers		
Transfers from Reserves/Trust	-	
DC Contributions	(26,150)	
Transfers to Reserves	1,667	(24,483)
Total Change in Expenditures		2,218,824
Net Change		438,653
July 31 year to date		\$ 3,750,995

Notes:

- 1. Includes debenture payments on original social housing properties (\$21,800), liability insurance, training and conferences and professional associations.
- 2. Includes payments to OW clients (\$500,000), child care providers (\$505,000), housing providers (\$115,600), various housing programs (\$156,400)

3. Includes utilities (gas, hydro and water \$47,800), property insurance (\$8,100), unit painting (\$7,800), annual floor cleaning (\$13,000), pest control (\$6,800), grounds maintenance, facility supplies and general repairs

Ontario Works & Employment

	2018 ACTUAL	JULY 2019 ACTUAL	2019 BUDGET	DOLLAR CHANGE	%AGE CHANGE
Revenues					
Rent Revenue	-\$134	-\$80	-\$144	-\$64	55.70%
Government Transfers	-\$6,895	-\$4,215	-\$6,831	-\$2,615	61.71%
Other Revenue	-\$176	-\$100	-\$118	-\$17	85.36%
Total Revenues	-\$7,204	-\$4,396	-\$7,093	-\$2,696	61.98%
Expenditures					
Salaries and Benefits	\$1,530	\$826	\$1,552	\$726	53.24%
Administrative and Office	\$181	\$96	\$163	\$68	58.59%
Debt Repayment	\$299	\$171	\$292	\$122	58.33%
Service Delivery	\$6,059	\$3,705	\$5,933	\$2,228	62.45%
IT and Communications	\$26	\$10	\$23	\$12	44.82%
Facilities	\$346	\$213	\$376	\$163	56.65%
Internal Services Used	\$293	\$166	\$338	\$172	49.15%
Internal Services Recovered	-\$390	-\$222	-\$398	-\$176	55.74%
Capital Contribution	\$61	\$49	\$83	\$35	58.33%
Total Expenditures	\$8,404	\$5,014	\$8,363	\$3,349	59.95%
Transfers					
DC Contribution	-\$28	-\$26	-\$44	-\$18	58.33%
Transfers to Reserves	\$20	\$12	\$20	\$8	58.35%
Total Transfers	-\$8	-\$14	-\$24	-\$10	58.32%
Total Ont. Works, Emp't Resources	\$1,192	\$604	\$1,247	\$643	48.43%

Child Care

	2018 ACTUAL	JULY 2019 ACTUAL	2019 BUDGET	DOLLAR CHANGE	%AGE CHANGE
Revenues					
User Fees	-\$324	-\$177	-\$330	-\$153	53.62%
Government Transfers	-\$6,335	-\$3,506	-\$6,178	-\$2,672	56.76%
Other Revenue	-\$318	-\$66	-\$238	-\$172	27.86%
Total Revenues	-\$6,977	-\$3,750	-\$6,746	-\$2,996	55.58%
Expenditures					
Salaries and Benefits	\$1,922	\$1,182	\$2,131	\$949	55.46%
Administrative and Office	\$38	\$26	\$46	\$20	56.21%
Service Delivery	\$5,639	\$3,270	\$5,422	\$2,152	60.31%
IT and Communications	\$11	\$6	\$11	\$5	54.47%
Facilities	\$163	\$86	\$162	\$76	53.25%
Vehicles and Equipment	\$4	\$2	\$7	\$5	33.61%
Internal Services Used	\$59	\$33	\$60	\$26	55.74%
Capital Contribution	\$64	\$65	\$111	\$46	58.33%
Total Expenditures	\$7,900	\$4,670	\$7,949	\$3,279	58.75%
Transfers					
Transfers from Reserves	-\$60	\$0	-\$50	-\$50	0.00%
Total Transfers	-\$60	\$0	-\$50	-\$50	0.00%
Total Child Care	\$863	\$920	\$1,153	\$232	79.84%

Housing

	2018 ACTUAL	JULY 2019 ACTUAL	2019 BUDGET	DOLLAR CHANGE	%AGE CHANGE
Revenues					
User Fees	-\$19	-\$11	-\$18	-\$7	63.05%
Rent Revenue	-\$1,854	-\$1,187	-\$2,064	-\$877	57.50%
Government Transfers	-\$3,235	-\$1,106	-\$2,034	-\$928	54.38%
Other Revenue	-\$3,088	-\$78	-\$109	-\$30	72.14%
Total Revenues	-\$8,195	-\$2,383	-\$4,225	-\$1,842	56.40%
Expenditures					
Salaries and Benefits	\$1,021	\$565	\$1,054	\$489	53.63%
Administrative and Office	\$63	\$176	\$317	\$141	55.50%
Debt Repayment	\$762	\$294	\$566	\$272	51.87%
Service Delivery	\$3,672	\$1,887	\$3,549	\$1,662	53.17%
IT and Communications	\$53	\$42	\$57	\$15	73.64%
Facilities	\$1,874	\$978	\$1,813	\$835	53.94%
Vehicles and Equipment	\$14	\$7	\$12	\$5	58.25%
Internal Services Used	\$584	\$399	\$597	\$198	66.79%
Capital Contribution	\$5,322	\$420	\$720	\$300	58.33%
Total Expenditures	\$13,364	\$4,767	\$8,684	\$3,917	54.89%
Transfers					
Transfers from Reserves	-\$136	\$0	\$0	\$0	0.00%
DC Contribution	-\$1,235	-\$158	-\$311	-\$154	50.59%
Transfers to Reserves	\$161	\$0	\$0	\$0	0.00%
Total Transfers	-\$1,210	-\$158	-\$311	-\$154	50.59%
Total Housing	\$3,958	\$2,227	\$4,148	\$1,921	53.69%

Community Services - Capital Asset Fund

	2018 ACTUAL	2019 ACTUAL	2019 BUDGET
Opening Balance	\$2,005	-\$718	-\$718
Contributions			
Government Transfers	-\$1,107	-\$64	-\$110
Capital Levy	-\$553	-\$428	-\$734
Other Revenue	-\$2,670	\$0	-\$20
Transfers from Reserves	-\$142	\$0	-\$50
DC Contribution	-\$975	\$0	\$0
Total Contributions	-\$5,447	-\$492	-\$914
Capital Work			
Land Improvements	\$0	\$0	\$180
Buildings	\$2,675	\$120	\$672
Equipment & Machinery	\$49	\$39	\$200
Total Capital Work	\$2,724	\$159	\$1,052
Ending Capital Asset Fund Balance	-\$718	-\$1,051	-\$581

	2018 ACTUAL	2019 ACTUAL	2019 BUDGET
Expenditures			
Land			
Asphalt Paving	\$0	\$0	\$115
Exterior Walkways	\$0	\$0	\$15
Landscaping	\$0	\$0	\$50
Land Improvements	\$0	\$0	\$180
Electrical	\$0	\$0	\$10
Exterior Walls	\$0	\$3	\$30
Roof Replacement	\$0	\$2	\$150
Kitchen Retrofits	\$35	\$3	\$125
Structural (balconies, etc.)	\$0	\$0	\$120
Flooring	\$91	\$52	\$68
HVAC	\$7	\$0	\$4
Building Automation	\$0	\$0	\$60
Bathrooms	\$33	\$32	\$105
Lawrence Avenue Development	\$2,509	\$29	\$0
Buildings	\$2,675	\$120	\$672

Small Equipment	\$20	\$7	\$0	
Appliance Replacement	\$29	\$32	\$50	
Elevator Replacement	\$0	\$0	\$150	
Equipment & Machinery	\$49	\$39	\$200	
	\$2,724	\$159	\$1,052	

Edelbrock Centre - Capital Asset Fund

	2018	2019	2019
	ACTUAL	ACTUAL	BUDGET
Opening Balance	-\$54	-\$115	-\$115
Contributions			
Capital Levy	-\$61	-\$49	-\$83
Total Contributions	-\$61	-\$49	-\$83
Capital Work			
Buildings	\$0	\$0	\$0
Total Capital Work	\$0	\$0	\$0
Ending Capital Asset Fund Balance	-\$115	-\$164	-\$199

(in 000s)	2018 ACTUAL*	2019 ACTUAL	2019 BUDGET
Expenditures			
Security	\$0	\$0	\$0
Buildings	\$0	\$0	\$0
Total Work Plan Summary	\$0	\$0	\$0

Jean Hamlyn - Capital Asset Fund

	2018 ACTUAL	2019 ACTUAL	2019 BUDGET
Opening Balance	-\$36	-\$101	-\$101
Contributions			
Capital Levy	-\$34	-\$24	-\$41
Other Revenue	\$0	\$0	-\$20
Transfers from Reserves	-\$30	\$0	-\$50
Total Contributions	-\$64	-\$24	-\$111
Capital Work			
Land Improvements	\$0	\$0	\$50
Buildings	\$0	\$0	\$98
Equipment & Machinery	\$0	\$1	\$1
Total Capital Work	\$0	\$1	\$149
Ending Capital Asset Fund Balance	-\$101	-\$123	-\$63

(in 000s)	2018 ACTUAL	2019 ACTUAL	2019 BUDGET
Expenditures			
Natural Playscapes	\$0	\$0	\$50
Land Improvements	\$0	\$0	\$50
Electrical	\$0	\$0	\$10
Exterior Walls	\$0	\$0	\$0
Kitchen	\$0	\$0	\$20
Flooring	\$0	\$0	\$8
Roof	\$0	\$0	\$60
Buildings	\$0	\$0	\$98
Appliances	\$0	\$1	\$1
Equipment & Machinery	\$0	\$1	\$1
Total Work Plan Summary	\$0	\$1	\$149

Social Housing - Capital Asset Fund

	2018	2019	2019
	ACTUAL	ACTUAL	BUDGET
Opening Balance	\$2,095	-\$503	-\$503
Contributions			
Government Transfers	-\$1,107	-\$64	-\$110
Capital Levy	-\$458	-\$356	-\$610
Other Revenue	-\$2,670	\$0	\$0
Transfers from Reserves	-\$112	\$0	\$0
DC Contribution	-\$975	\$0	\$0
Total Contributions	-\$5,322	-\$420	-\$720
Capital Work			
Land Improvements	\$0	\$0	\$130
Buildings	\$2,675	\$120	\$574
Equipment & Machinery	\$49	\$38	\$199
Total Capital Work	\$2,724	\$158	\$903
Ending Capital Asset Fund Balance	-\$503	-\$765	-\$319

(in 000s)	2018 ACTUAL	2019 ACTUAL	2019 BUDGET
Expenditures			
Land			
Asphalt Paving	\$0	\$0	\$115
Exterior Walkways	\$0	\$0	\$15
Fencing	\$0	\$0	\$0
Land Improvements	\$0	\$0	\$130
Exterior Walls	\$0	\$3	\$30
Roof Replacement	\$0	\$2	\$90
Kitchen Retrofits	\$35	\$3	\$105
Structural (balconies, etc.)	\$0	\$0	\$120
Flooring	\$91	\$52	\$60
HVAC	\$7	\$0	\$4
Building Automation	\$0	\$0	\$60
Bathrooms	\$33	\$32	\$105
Lawrence Avenue Development	\$2,509	\$29	\$0
Buildings	\$2,675	\$120	\$574

Small Equipment	\$20	\$7	\$0
Appliance Replacement	\$29	\$30	\$49
Elevator Replacement	\$0	\$0	\$150
Equipment & Machinery	\$49	\$38	\$199
	\$2,724	\$158	\$903

Dufferin Oaks

	2018 ACTUAL	JULY 2019 ACTUAL	2019 BUDGET	DOLLAR CHANGE	%AGE CHANGE
Revenues					
User Fees	-\$3,828	-\$2,248	-\$4,011	-\$1,762	56.06%
Rent Revenue	-\$515	-\$292	-\$533	-\$241	54.81%
Government Transfers	-\$10,112	-\$5,891	-\$10,386	-\$4,495	56.72%
Other Revenue	-\$561	-\$289	-\$540	-\$250	53.58%
Total Revenues	-\$15,017	-\$8,721	-\$15,470	-\$6,749	56.37%
Expenditures					
Salaries and Benefits	\$12,200	\$6,647	\$12,462	\$5,815	53.34%
Administrative and Office	\$473	\$255	\$490	\$235	52.00%
Debt Repayment	\$1,531	\$798	\$1,368	\$570	58.33%
Service Delivery	\$2,494	\$1,109	\$2,714	\$1,605	40.87%
IT and Communications	\$114	\$77	\$149	\$72	51.46%
Facilities	\$1,122	\$607	\$1,235	\$628	49.17%
Vehicles and Equipment	\$158	\$89	\$169	\$80	52.39%
Internal Services Used	\$0	\$46	\$114	\$68	40.37%
Capital Contribution	\$922	\$437	\$749	\$312	58.33%
Total Expenditures	\$19,014	\$10,066	\$19,451	\$9,386	51.75%
Transfers					
Transfers from Reserves	-\$371	-\$88	-\$148	-\$60	59.26%
Total Transfers	-\$371	-\$88	-\$148	-\$60	59.26%
Total Dufferin Oaks	\$3,627	\$1,257	\$3,834	\$2,576	32.79%

Dufferin Oaks - Month over Month Changes

June 30 year to date		1,144,086
Revenues		
User Fees		(331,797)
Rent Revenue		(40,941)
Government Transfers		(977,731)
Other Revenue		(31,642)
Total Change in Revenues		(1,382,111)
Expenditures		
Salaries and Benefits		1,034,000
Administrative and Office		33,280
Debt Repayment		114,017
Service Delivery ¹		132,795
IT and Communications		6,256
Facilities ²		91,139
Vehicles and Equipment ³		32,849
Internal Services Used		-
Internal Services Recovered		-
Capital Contribution		62,456
Reserve Transfers		
Transfers from Reserves/Trust	(11,573)	
Transfers to Reserves	-	(11,573)
Total Change in Expenditures		1,495,219
Net Change		113,108
July 31 year to date		\$ 1,257,194

Notes:

- 1. Service delivery includes food (\$34,000), hygiene products (\$9,000), medical supplies, physiotherapy and social work for residents (\$39,400), service contracts for assisted living and bridging your home community support service programs (\$30,000)
- 2. Includes utilities (gas, hydro and water \$42,200), property insurance, facility supplies and general repairs
- 3. Includes annual service plans for lifts (\$24,000)

Dufferin Oaks Long Term Care

	2018 ACTUAL	JULY 2019 ACTUAL	2019 BUDGET	DOLLAR CHANGE	%AGE CHANGE
Revenues					
User Fees	-\$3,655	-\$2,155	-\$3,834	-\$1,679	56.20%
Government Transfers	-\$8,495	-\$5,053	-\$8,799	-\$3,746	57.43%
Other Revenue	-\$506	-\$259	-\$486	-\$227	53.21%
Total Revenues	-\$12,656	-\$7,466	-\$13,119	-\$5,652	56.91%
Expenditures					
Salaries and Benefits	\$11,603	\$6,299	\$11,807	\$5,508	53.35%
Administrative and Office	\$397	\$224	\$418	\$194	53.50%
Debt Repayment	\$1,531	\$798	\$1,368	\$570	58.33%
Service Delivery	\$1,398	\$704	\$1,616	\$912	43.57%
IT and Communications	\$98	\$66	\$130	\$64	50.93%
Facilities	\$612	\$318	\$680	\$363	46.67%
Vehicles and Equipment	\$118	\$65	\$128	\$63	50.79%
Internal Services Used	\$0	\$46	\$114	\$68	40.37%
Capital Contribution	\$922	\$296	\$508	\$212	58.33%
Total Expenditures	\$16,678	\$8,817	\$16,771	\$7,954	52.57%
Transfers					
Transfers from Reserves	-\$335	-\$77	-\$148	-\$71	52.23%
Total Transfers	-\$335	-\$77	-\$148	-\$71	52.23%
Total Dufferin Oaks Long Term Care	\$3,687	\$1,273	\$3,504	\$2,231	36.33%

Mel Lloyd Centre

Corporate Finance	2018 ACTUAL	JULY 2019 ACTUAL	2019 BUDGET	DOLLAR CHANGE	%AGE CHANGE
Revenues					
Rent Revenue	-\$299	-\$169	-\$319	-\$150	52.87%
Other Revenue	-\$50	-\$28	-\$51	-\$23	55.00%
Total Revenues	-\$350	-\$197	-\$370	-\$173	53.17%
Expenditures					
Administrative and Office	\$7	\$0	\$0	\$0	0.00%
IT and Communications	\$2	\$1	\$2	\$1	43.35%
Facilities	\$334	\$186	\$354	\$168	52.57%
Capital Contribution	\$0	\$132	\$227	\$95	58.33%
Total Expenditures	\$342	\$319	\$583	\$264	54.78%
Transfers					
Total Transfers	\$0	\$0	\$0	\$0	0.00%
Total Mel Lloyd Centre	-\$8	\$122	\$213	\$90	57.60%

Community Support Services

	2018	JULY 2019	2019	DOLLAR	%AGE
	ACTUAL	ACTUAL	BUDGET	CHANGE	CHANGE
Revenues					
User Fees	-\$170	-\$92	-\$172	-\$79	53.65%
Government Transfers	-\$1,617	-\$838	-\$1,587	-\$750	52.78%
Other Revenue	-\$5	-\$2	-\$2	\$0	108.20%
Total Revenues	-\$1,792	-\$932	-\$1,761	-\$829	52.93%
Expenditures					
Salaries and Benefits	\$589	\$342	\$644	\$302	53.12%
Administrative and Office	\$66	\$31	\$72	\$41	43.33%
Service Delivery	\$1,096	\$405	\$1,098	\$693	36.91%
IT and Communications	\$11	\$7	\$13	\$6	54.87%
Facilities	\$48	\$29	\$50	\$21	57.86%
Vehicles and Equipment	\$40	\$23	\$41	\$17	57.42%
Capital Contribution	\$0	\$8	\$14	\$6	58.33%
Total Expenditures	\$1,851	\$846	\$1,932	\$1,086	43.80%
Transfers					
Transfers from Reserves	-\$36	-\$10	\$0	\$10	100.00%
Total Transfers	-\$36	-\$10	\$0	\$10	100.00%
Total Community Support Services	\$23	-\$96	\$171	\$267	-56.18%

McKelvie Supportive Housing

	2018 ACTUAL	JULY 2019 ACTUAL	2019 BUDGET	DOLLAR CHANGE	%AGE CHANGE
Revenues					
User Fees	-\$4	-\$2	-\$6	-\$4	31.55%
Rent Revenue	-\$215	-\$124	-\$214	-\$91	57.70%
Other Revenue	\$0	\$0	\$0	\$0	#DIV/0!
Total Revenues	-\$219	-\$125	-\$220	-\$94	57.05%
Expenditures					
Salaries and Benefits	\$9	\$6	\$11	\$5	56.25%
Administrative and Office	\$3	\$0	\$0	\$0	0.00%
IT and Communications	\$3	\$2	\$3	\$1	62.65%
Facilities	\$128	\$75	\$151	\$76	49.59%
Total Expenditures	\$143	\$83	\$166	\$82	50.31%
Transfers					
Total Transfers	\$0	\$0	\$0	\$0	0.00%
Total McKelvie Supportive Hsg	-\$75	-\$42	-\$54	-\$12	77.63%

Dufferin Oaks - Capital Asset Fund

	2018 ACTUAL	2019 ACTUAL	2019 BUDGET
Opening Balance	-\$1,723	-\$2,306	-\$2,306
Contributions			
Government Transfers	\$0	\$0	-\$14
Capital Levy	-\$638	-\$429	-\$735
Other Revenue	-\$76	\$0	\$0
Transfers from Reserves	-\$208	\$0	\$0
Total Contributions	-\$922	-\$429	-\$749
Capital Work			
Land Improvements	\$33	\$4	\$423
Buildings	\$94	\$308	\$407
Equipment & Machinery	\$162	\$11	\$362
Vehicles	\$50	\$0	\$0
Other	\$0	\$1	\$40
Total Capital Work	\$339	\$324	\$1,231
Ending Capital Asset Fund Balance	-\$2,306	-\$2,410	-\$1,824

(in 000s)	2018 ACTUAL	2019 ACTUAL	2019 BUDGET
Expenditures			
Parking Lot and Curbing	\$2	\$1	\$278
Exterior Patio/Walkways	\$30	\$3	\$60
Landscaping	\$0	\$0	\$85
Land Improvements	\$33	\$4	\$423
VAC - I	Φ0	Φ0	Φ0
Windows	\$2	\$0	\$0 ************************************
HVAC	\$20	\$281	\$24
Exterior Walls	\$0 \$0	\$0 \$0	\$0 ************************************
Security	\$0	\$3	\$68
Electrical	\$0	\$0	\$4
Lighting	\$1	\$0	\$0
Flooring	\$34	\$12	\$69
Exterior Doors	\$0	\$0	\$10
Overhead Door and Lift	\$0	\$0	\$ 0
Roof Replacement	\$0	\$0	\$ 0
Bathrooms	\$5	\$6	\$6
Painting	\$32	\$0	\$0
MBV Kitchen	\$0	\$6	\$6
MLC Interior Upgrades	\$0	\$0	\$20
Sprinklers	\$0	\$0	\$200
Buildings	\$94	\$308	\$407
Elevators	\$0	\$0	\$0
Appliance Replacement	\$0	\$0	\$9
Kitchen Equipment	\$0	\$0	\$63
Beds and Bedroom Furniture	\$24	\$0	\$48
Lifts	\$14	\$0	\$15
Tub Replacement/Resident Bathing	\$103	\$0	\$140
Resident Lounge Furniture	\$0	\$11	\$40
Laundry Equipment	\$0	\$0	\$47
Housekeeping Equipment Replacement	\$18	\$0	\$0
Blinds and Draperies	\$3	\$0	\$0
Equipment & Machinery	\$162	\$11	\$362
DCCSS Vehicles	\$50	\$0	\$0
Vehicles	\$50	\$0	\$0
Nurse Call System/Point of Care	\$0	¢ 1	\$40
Other	\$0 \$0	\$1 \$1	\$40
Total Work Plan Summary	\$339	\$324	\$1,231
<u> </u>			

Planning, Economic Development & Culture

	2018 ACTUAL	JULY 2019 ACTUAL	2019 BUDGET	DOLLAR CHANGE	%AGE CHANGE
Revenues					
User Fees	-\$47	-\$14	-\$70	-\$56	19.97%
Government Transfers	-\$205	\$0	-\$55	-\$55	0.00%
Other Revenue	-\$145	-\$17	-\$92	-\$75	18.96%
Total Revenues	-\$397	-\$31	-\$217	-\$186	14.44%
Expenditures					
Salaries and Benefits	\$966	\$589	\$1,061	\$473	55.48%
Administrative and Office	\$224	\$149	\$583	\$434	25.59%
Service Delivery	\$461	\$201	\$444	\$243	45.29%
IT and Communications	\$50	\$20	\$51	\$31	38.78%
Facilities	\$141	\$82	\$143	\$61	57.16%
Vehicles and Equipment	\$12	\$5	\$11	\$6	46.65%
Capital Contribution	\$382	\$77	\$133	\$55	58.33%
Total Expenditures	\$2,237	\$1,123	\$2,426	\$1,303	46.30%
Transfers					
Transfers from Reserves	-\$150	\$0	-\$80	-\$80	0.00%
Transfers from Trust	-\$8	-\$5	-\$8	-\$3	58.36%
DC Contribution	\$0	\$0	-\$375	-\$375	0.00%
Total Transfers	-\$158	-\$5	-\$463	-\$458	1.01%
Total PEC	\$1,682	\$1,087	\$1,746	\$659	62.26%

Planning, Economic Development and Culture - Month over Month Changes

June 30 year to date		802,120
Revenues		
User Fees		(2,150)
Government Transfers		-
Other Revenue		(417)
Total Change in Revenues		(2,567)
Expenditures		
Salaries and Benefits		124,910
Administrative and Office		24,110
Service Delivery ¹		110,054
IT and Communications		1,025
Facilities		16,046
Vehicles and Equipment		1,188
Capital Contribution		11,066
Reserve Transfers		
Transfers from Reserves/Trust	(667)	
DC Contributions	-	(667)
Total Change in Expenditures		287,732
Net Change		285,165
July 31 year to date		\$ 1,087,285

Notes:

1. Includes final payment to Swift (\$107,173)

Museum of Dufferin

	2018 ACTUAL	JULY 2019 ACTUAL	2019 BUDGET	DOLLAR CHANGE	%AGE CHANGE
Revenues					
User Fees	-\$22	-\$12	-\$40	-\$28	30.32%
Government Transfers	-\$205	\$0	-\$55	-\$55	0.00%
Other Revenue	-\$145	-\$17	-\$92	-\$75	18.96%
Total Revenues	-\$372	-\$29	-\$187	-\$158	15.74%
Expenditures					
Salaries and Benefits	\$800	\$462	\$797	\$335	57.94%
Administrative and Office	\$73	\$48	\$82	\$34	58.52%
Service Delivery	\$95	\$19	\$79	\$60	23.68%
IT and Communications	\$25	\$19	\$27	\$8	69.73%
Facilities	\$141	\$82	\$143	\$61	57.16%
Vehicles and Equipment	\$12	\$5	\$11	\$6	46.65%
Capital Contribution	\$382	\$77	\$133	\$55	58.33%
Total Expenditures	\$1,528	\$712	\$1,272	\$561	55.94%
Transfers					
Transfers from Reserves	-\$50	\$0	\$0	-\$8	0.00%
Transfers from Trust	-\$8	-\$5	-\$8	\$5	58.36%
Total Transfers	-\$58	-\$5	-\$8	\$1,082	58.36%
Total Museum and Archives	\$1,098	\$678	\$1,077	\$399	62.91%

Planning

	2018 ACTUAL	JULY 2019 ACTUAL	2019 BUDGET	DOLLAR CHANGE	%AGE CHANGE
Revenues					
User Fees	-\$25	-\$2	-\$30	-\$28	6.33%
Total Revenues	-\$25	-\$2	-\$30	-\$28	6.33%
Expenditures					
Salaries and Benefits	\$53	\$54	\$124	\$70	43.28%
Administrative and Office	\$118	\$73	\$465	\$392	15.69%
IT and Communications	\$21	\$0	\$22	\$22	2.18%
Total Expenditures	\$192	\$127	\$611	\$484	20.80%
Transfers					
Transfers from Reserves	-\$20	\$0	\$0	\$0	0.00%
DC Contribution	\$0	\$0	-\$375	-\$375	0.00%
Total Transfers	-\$20	\$0	-\$375	-\$375	0.00%
Total Planning	\$147	\$125	\$206	\$81	60.67%

Economic Development

	2018 ACTUAL	JULY 2019 ACTUAL	2019 BUDGET	DOLLAR CHANGE	%AGE CHANGE
Revenues					
Total Revenues	\$0	\$0	\$0	\$0	0.00%
Expenditures					
Salaries and Benefits	\$114	\$73	\$140	\$67	52.29%
Administrative and Office	\$33	\$28	\$36	\$8	78.60%
Service Delivery	\$366	\$182	\$364	\$182	49.99%
IT and Communications	\$4	\$1	\$2	\$2	32.49%
Total Expenditures	\$517	\$284	\$543	\$258	52.40%
Transfers					
Transfers from Reserves	-\$80	\$0	-\$80	-\$80	0.00%
Total Transfers	-\$80	\$0	-\$80	-\$80	0.00%
Total Economic Development	\$437	\$284	\$463	\$178	61.46%

Museum - Capital Asset Fund

	2018 ACTUAL	2019 ACTUAL	2019 BUDGET
Opening Balance	-\$401	\$40	\$40
Contributions			
Government Transfers	-\$147	\$0	\$0
Capital Levy	-\$149	-\$77	-\$133
Other Revenue	-\$35	\$0	\$0
Transfers from Reserves	-\$50	\$0	\$0
Transfers from Trust	\$0	\$0	\$0
Total Contributions	-\$382	-\$77	-\$133
Capital Work			
Land Improvements	\$44	\$0	\$0
Buildings	\$741	\$3	\$50
Equipment & Machinery	\$39	\$0	\$0
Vehicles	\$0	\$35	\$35
Total Capital Work	\$823	\$39	\$85
Ending Capital Asset Fund Balance	\$40	\$1	-\$8

	2018	2019	2019
	ACTUAL	ACTUAL	BUDGET
Expenditures			
Asphalt Paving	\$21	\$0	\$0
Exterior Walkways	\$23	\$0	\$0
Land Improvements	\$44	\$0	\$0
HVAC	\$29	\$0	\$5
Security	\$0	\$0	\$15
Electrical	\$141	\$0	\$0
Exterior Walls	\$0	\$0	\$5
Kitchen Retrofits	\$3	\$0	\$0
Flooring	\$0	\$3	\$25
Corn Flower Project	\$568	\$0	\$0
Buildings	\$741	\$3	\$50
Small Equipment	\$39	\$0	\$0
Equipment & Machinery	\$39	\$0	\$0
Museum Vehicle	\$0	\$35	\$35
Vehicles	\$0	\$35	\$35

\$823 \$39 \$85