

MOTION - OBCM RECOMMENDATIONS ON THE HEALTH AND HOMELESSNESS CRISIS - MOTION PASSED FRIDAY FEBRUARY 10, 2023

WHEREAS municipalities do not have the expertise, capacity, or resources to address increasingly complex health care issues that lead to homelessness or extend chronic homelessness; and are diverting municipal funds for other priorities like affordable housing, transit, social programs etc. to manage these complex health care issues we are seeing in our communities:

AND WHEREAS because traditional housing and shelter spaces are not equipped to serve people with severe mental health and addiction challenges, people often live in the rough in encampments in parks, public spaces or on streets.

AND WHEREAS this is an unprecedented health crisis – leading to unsupervised and dangerous substance use, overdoses, strain on the healthcare system, increased volatility and violence, public safety concerns, business, and downtown degradation;

AND WHEREAS OBCM municipalities have responded to this health care crisis with various housing-driven support programs with limited success and some of our municipalities have taken steps to initiate stronger community partnerships, break down care silos to facilitate better access to support with less barriers;

AND WHEREAS there is no coordinated system response and a lack of the wrap-around health care support services people need – the physical health, mental health, and addiction expertise the province is responsible to provide;

THEREFORE IT BE RESOLVED THAT OBCM adopts the strategy created by the City of London and the City of Kingston in consultation with local health partners to address these challenges including five recommendations for the Ontario government to make an immediate impact on the mental health and addictions crisis we are experiencing. These include:

1. Centralized and integrated intake and dispatch process

An intentionally designed and consistent triage, warm transfer, and dispatch process
operating 24 hours a day, 7 days a week year-round by a multidisciplinary, multi agency
team, that is well resourced, low/no barrier, trauma and violence informed, culturally
aware and flexible to meet the needs of individuals across a range of circumstances and
levels of acuity. Inputs to this process could include Community Outreach and Support
Teams (COAST), local service providers, and businesses.

2. More provincial investment in low barrier hubs

• Residents need more options for 24/7 low barrier drop-in services with basic rules and a pathway into stabilization options with experienced staff with mental health and addictions expertise. The Hub model provides 24/7 low barrier and wrap around services to people with high acuity that have not been accessing the traditional shelter services.



The ICH (integrated care hub) can be combined with a Consumption Treatment Services site.

3. More stabilization and treatment beds with experienced staff to support those in their treatment journey

 Communities need a greater variety of options to support high acuity clients on their stabilization pathway. This includes provincial treatment and rehabilitation facilities and additional stabilization, rehab and detox beds.

4. More flexible and predictable funding for supportive housing

 There needs to be a range of supportive housing and options which could include small scale options (i.e., scattered housing), harm reduction housing solutions where municipalities can financially support with the property acquisition/development, but provincial funding is needed to finance ongoing support services as tenants are not capable of living fully independently. This service can prevent evictions and homelessness.

5. More provincial ministry and agency collaboration to reduce red tape and duplication

 Municipalities are increasingly forced to wade into provincial jurisdictions, navigating a siloed system, trying to break down health care silos to best support unhoused individuals suffering with mental health and addictions challenges. However, we need better provincial ministry collaboration to reduce red tape, duplication and financial resources and better coordinate wrap-around support for residents in need.

AND THAT Ontario's Big City Mayors will present this five point plan to the Deputy Premier and Minister of Health Sylvia Jones at the meeting/summit that we have requested to address the homelessness, mental health, safety and addictions crisis impacting our cities.