



The Regional Municipality of Durham

Health and Social Services Committee Agenda

Thursday, June 6, 2024, 9:30 a.m.

Regional Council Chambers

Regional Headquarters Building

605 Rossland Road East, Whitby

If this information is required in an accessible format, please contact 1-800-372-1102 ext. 2097.

Note: This meeting will be held in a hybrid meeting format with electronic and in-person participation. Committee meetings may be [viewed via live streaming](#).

	Pages
1. Roll Call	
2. Declarations of Pecuniary Interest	
3. Adoption of Minutes	
3.1 Health and Social Services Committee meeting - May 9, 2024	3
4. Statutory Public Meetings	
There are no statutory public meetings	
5. Presentations	
5.1 Jake Svanda, Deputy Chief, Region of Durham Paramedic Services Re: Region of Durham Paramedic Services Update	9
5.2 Sheryl Thorpe, Manager, Long-Term Care and Services for Seniors Division Re: Emotional Model of Care	22
5.3 Sharon Woods, Senior Safety Advisor, and Morgan Denby, Program Specialist, Long-Term Care and Services for Seniors Division Re: Community Supports - Senior Safety, Homemakers Program and Adult Day Program	37
5.4 Sahar Foroutani, Area Manager, Income, Employment and Homelessness Support Division Re: Update on Durham Region's Integrated Homelessness System Action Plan	55

6. Delegations

- 6.1 Eva Reti, Chair, Hospice Whitby - Roger Anderson House (In-Person Attendance)
Re: Update on Hospice Whitby - Roger Anderson House

7. Health

- 7.1 Correspondence
- 7.2 Reports

- a. Report #2024-MOH-3
Command, Emergency Response, and Community Programs
Vehicle Standardization and Upfitting

70

8. Social Services

- 8.1 Correspondence
- 8.2 Reports

- a. Report #2024-SS-6
Authorization to Extend the Existing Agreement with
Medisystem Pharmacy Limited for the Provision of Pharmacy
Services for the Regional Municipality of Durham's Four (4)
Long-Term Care Homes

74

9. Advisory Committee Resolutions

There are no advisory committee resolutions to be considered

10. Confidential Matters

There are no confidential matters to be considered

11. Other Business

12. Date of Next Meeting

Thursday, September 5, 2024 at 9:30 AM

13. Adjournment

Notice regarding collection, use and disclosure of personal information:

Written information (either paper or electronic) that you send to Durham Regional Council or Committees, including home address, phone numbers and email addresses, will become part of the public record. This also includes oral submissions at meetings. If you have any questions about the collection of information, please contact the Regional Clerk/Director of Legislative Services.

If this information is required in an accessible format, please contact 1-800-372-1102 ext. 2097.

The Regional Municipality of Durham

MINUTES

HEALTH & SOCIAL SERVICES COMMITTEE

Thursday, May 9, 2024

A regular meeting of the Health & Social Services Committee was held on Thursday, May 9, 2024 in the Council Chambers, Regional Headquarters Building, 605 Rossland Road East, Whitby, Ontario at 9:30 AM. Electronic participation was offered for this meeting.

1. Roll Call

Present: Councillor Roy, Chair
Councillor Dies, Vice-Chair
Councillor Anderson
Councillor Carter
Councillor Jubb
Regional Chair Henry

Also

Present: Councillor Crawford
Councillor Schummer*
Councillor Woo*

*** denotes Councillors participating electronically**

Absent: Councillor Brenner
Councillor Foster was absent on municipal business

Staff

Present: E. Baxter-Trahair, Chief Administrative Officer
W. Beales, Area Manager, Family Services Division
C. Boyd, Solicitor, Chief Administrative Office – Legal Services
S. Ciani, Committee Clerk, Corporate Services – Legislative Services
S. Danos-Papaconstantinou, Commissioner of Social Services
J. Dixon, Director, Business Affairs and Finance Management, Social Services
J. Gaskin, Director, Children’s Services, Social Services
A. Harras*, Director of Legislative Services/Regional Clerk, Corporate Services – Legislative Services
R. Inacio, Systems Support Specialist, Corporate Services – IT
R.J. Kyle, Commissioner and Medical Officer of Health
L. MacDermaid, Director, Long-Term Care and Services for Seniors, Social Services
L. McIntosh, Director, Income & Employment Support, Social Services
G. Muller, Director, Affordable Housing Development & Renewal
K. Smith, Committee Clerk, Corporate Services – Legislative Services

C. Taylor, Manager, Budgets & Finance, Social Services
N. Taylor*, Commissioner of Finance
K. Thangaraj, Director, Population Health and Chief Nursing Officer, Health
T. Tyner Cavanagh, Manager, Strategic Initiatives and Partnerships
E. Valant, Director, Housing Services
V. Walker, Committee Clerk, Corporate Services – Legislative Services
*** denotes staff participating electronically**

2. Declarations of Pecuniary Interest

There were no declarations of pecuniary interest.

3. Adoption of Minutes

Moved by Councillor Anderson, Seconded by Councillor Dies,
(17) That the minutes of the regular Health & Social Services Committee
meeting held on Thursday, April 4, 2024, be adopted.

CARRIED

4. Statutory Public Meetings

There were no statutory public meetings.

5. Presentations

5.1 Dr. R.J. Kyle, Commissioner and Medical Officer of Health, re: Program Planning, Accountability and Reporting

Dr. R.J. Kyle, Commissioner and Medical Officer of Health, provided a PowerPoint presentation with regards to Program Planning, Accountability and Reporting.

Highlights of the presentation included:

- Purpose
- Public Health Mandate
- Accountability and Reporting
 - Accreditation
 - Annual Health Plan
 - Annual Performance Report
 - Reports to Regional Council
 - Report to the Ministry of Health (MOH)
- Program Planning
- Program Planning and Reporting Cycle

6. Delegations

6.1 Vivian Curl, Executive Director, Durham Community Foundation, re: Durham Community Foundation's Vital Signs Report

Vivian Curl, Executive Director, Durham Communication Foundation, participating virtually, appeared before Committee with regards to Durham Community Foundation's Vital Signs Report.

V. Curl advised that the Vital Signs Report provides stakeholders with information needed based on actual data to ensure the community thrives and guides strategic actions targeting resources for maximum community impact.

V. Curl stated over 18 months have been invested in researching, collaborating and synthesizing data primarily from Statistics Canada and local organizations. It has been found that Durham Region's rate of growth of 7.9% between 2016 and 2021 outpaced Canada and the G7.

V. Curl also stated that the report speaks to what is working and not working, specifically the burden being placed on the 945 registered charities in Durham Region that are experiencing an uptick in demand for their services, and an increase in operational costs and staffing challenges as more than half of the registered charities are reporting a lack of volunteers and a significant reduction in revenue and donations.

V. Curl, on behalf of Durham Community Foundation, is looking for support and recommendation to present the full findings to Regional Council.

Highlights of the presentation included:

- Together We Thrive
- Community Vitality
- Overview of Our Rapidly Changing and Growing Community
 - Progress Report
 - Defining Insights
 - Vital Steps We Can All Take
- Message from the Director of Lakeridge Health

V. Curl responded to questions of the Committee.

Moved by Regional Chair Henry, Seconded by Councillor Carter,
(18) That the delegation from Vivian Curl, Executive Director, Durham Community Foundation, re: Durham Community Foundation's Vital Signs Report, be provided at the May 29, 2024 Regional Council meeting.

CARRIED

7. Health

7.1 Correspondence

There were no communications to consider.

7.2 Reports

There were no Health reports to consider.

8. Social Services

8.1 Correspondence

There were no communications to consider.

8.2 Reports

A) Unbudgeted Provincial Funding from the Ministry of Education for the Canada-wide Early Learning and Child Care System (2024-SS-4)

Report #2024-SS-4 from S. Danos-Papaconstantinou, Commissioner of Social Services, was received.

Moved by Councillor Carter, Seconded by Councillor Anderson,
(19) That we recommend to Council:

That unbudgeted Provincial funding from the Ministry of Education in the amount of \$4,351,437, be expended in accordance with the 2024 Canada-Wide Early Learning and Child Care Guidelines.

CARRIED

B) Unbudgeted One-Time Provincial Funding from the Ministry of Long-Term Care for the Four (4) Regional Municipality of Durham Long Term Care Homes (2024-SS-5)

Report #2024-SS-5 from S. Danos-Papaconstantinou, Commissioner of Social Services, was received.

Moved by Councillor Jubb, Seconded by Councillor Carter,
(20) That we recommend to Council:

A) That the one-time unbudgeted Provincial funding from the Ministry of Long-Term Care in the amount of \$2,153,921, be expended in accordance with the program guidelines; and

- B) That the following unbudgeted capital projects related to the Region's Long-Term Care Homes in the estimated amount of \$2,153,921 be approved and financed from Provincial Subsidy:

Long-Term Care Homes	(\$)
Flooring Replacement – Hillsdale Estates	762,900
Parking Lot Replacement – Hillsdale Terraces	508,600
7 Tub Replacements – Fairview Lodge	220,000
Kitchen Renovations – Fairview Lodge	200,000
Combination Oven Replacement – Fairview Lodge	45,000
21 Laundry Cart Replacements – Fairview Lodge	28,414
Bariatric Stretcher – Fairview Lodge	10,100
Parking Lot Replacement – Lakeview Manor	296,907
Carpet Tile Replacement – Lakeview Manor	50,000
Main Hall Flooring – Lakeview Manor	20,000
Accessible Walkway – Lakeview Manor	12,000
TOTAL	<u>2,153,921</u>

CARRIED

9. Advisory Committee Resolutions

There were no advisory committee resolutions to be considered.

10. Confidential Matters

There were no confidential matters to be considered.

11. Other Business

There was no other business to be considered.

12. Date of Next Meeting

The next regularly scheduled Health & Social Services Committee meeting will be held on Thursday, June 6, 2024 at 9:30 AM in the Council Chambers, Regional Headquarters Building, 605 Rossland Road East, Whitby.

13. Adjournment

Moved by Regional Chair Henry, Seconded by Councillor Carter,
(21) That the meeting be adjourned.

CARRIED

The meeting adjourned at 9:53 AM

Respectfully submitted,

E. Roy, Chair

K. Smith, Committee Clerk



Paramedic Services Update

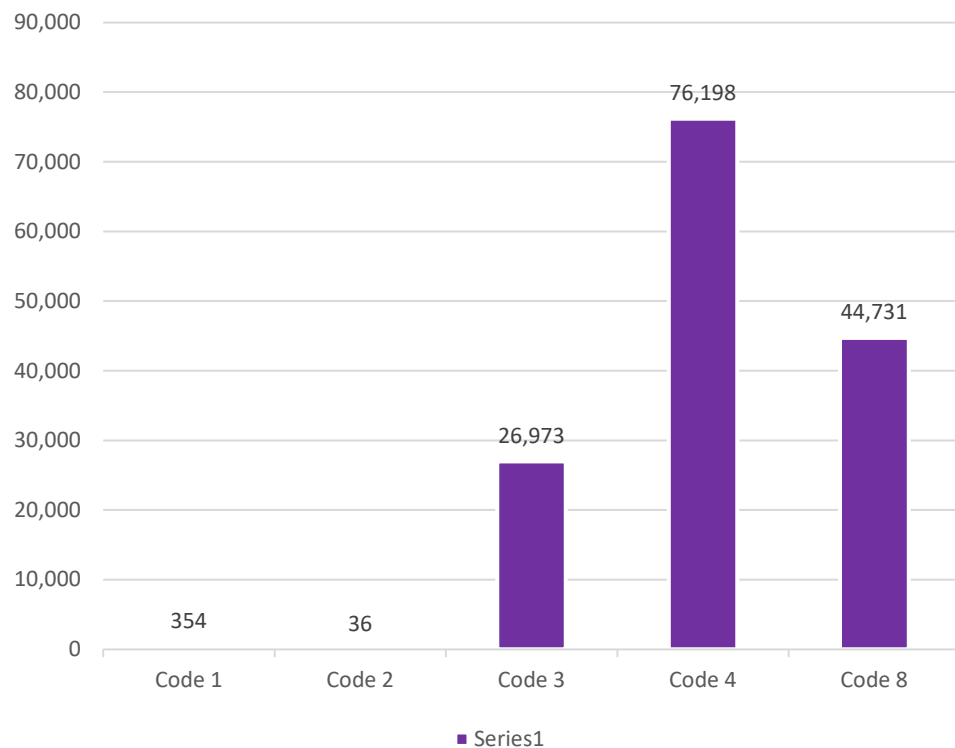
Durham Region Health Department
Health & Social Services Committee
June 6, 2024



Call Volume Jan to Dec 2023

- Code 1 Responses-354
- Code 2 Responses-36
- Code 3 Responses-26,973
- Code 4 Responses-76,198
- Code 8 Responses-44,731

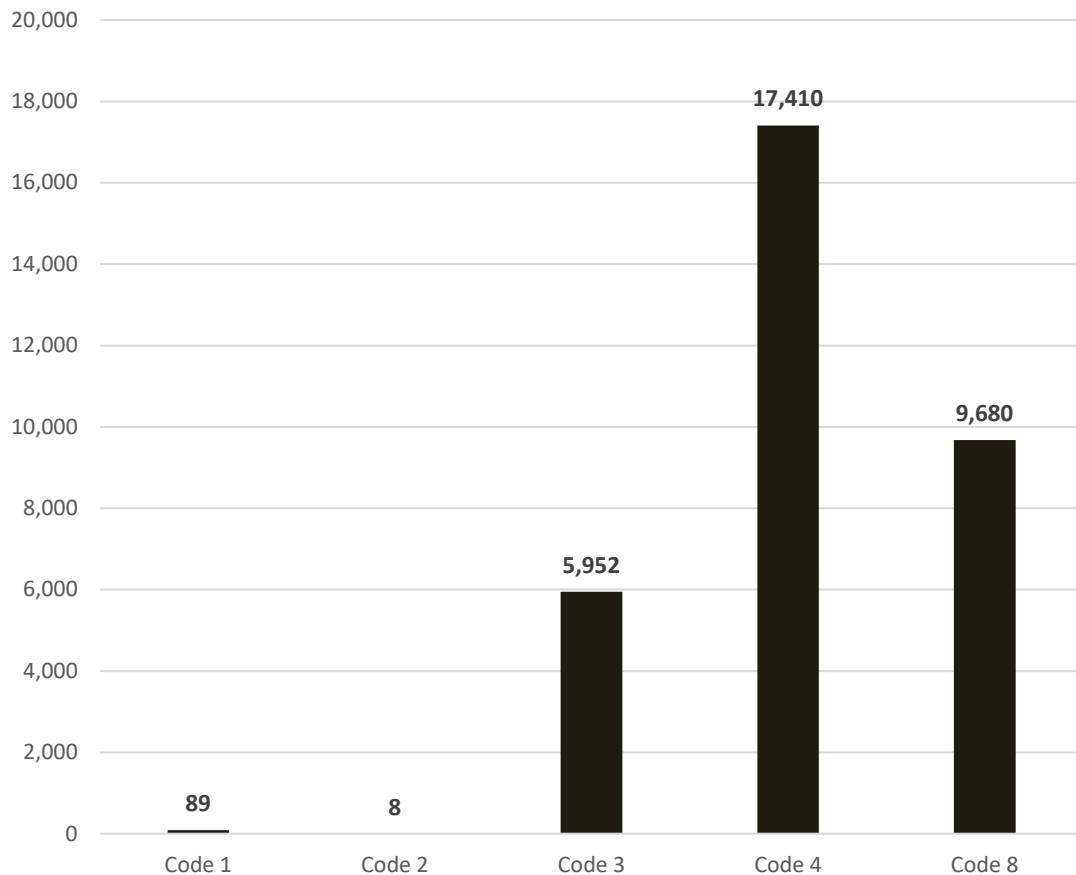
Call Volumes





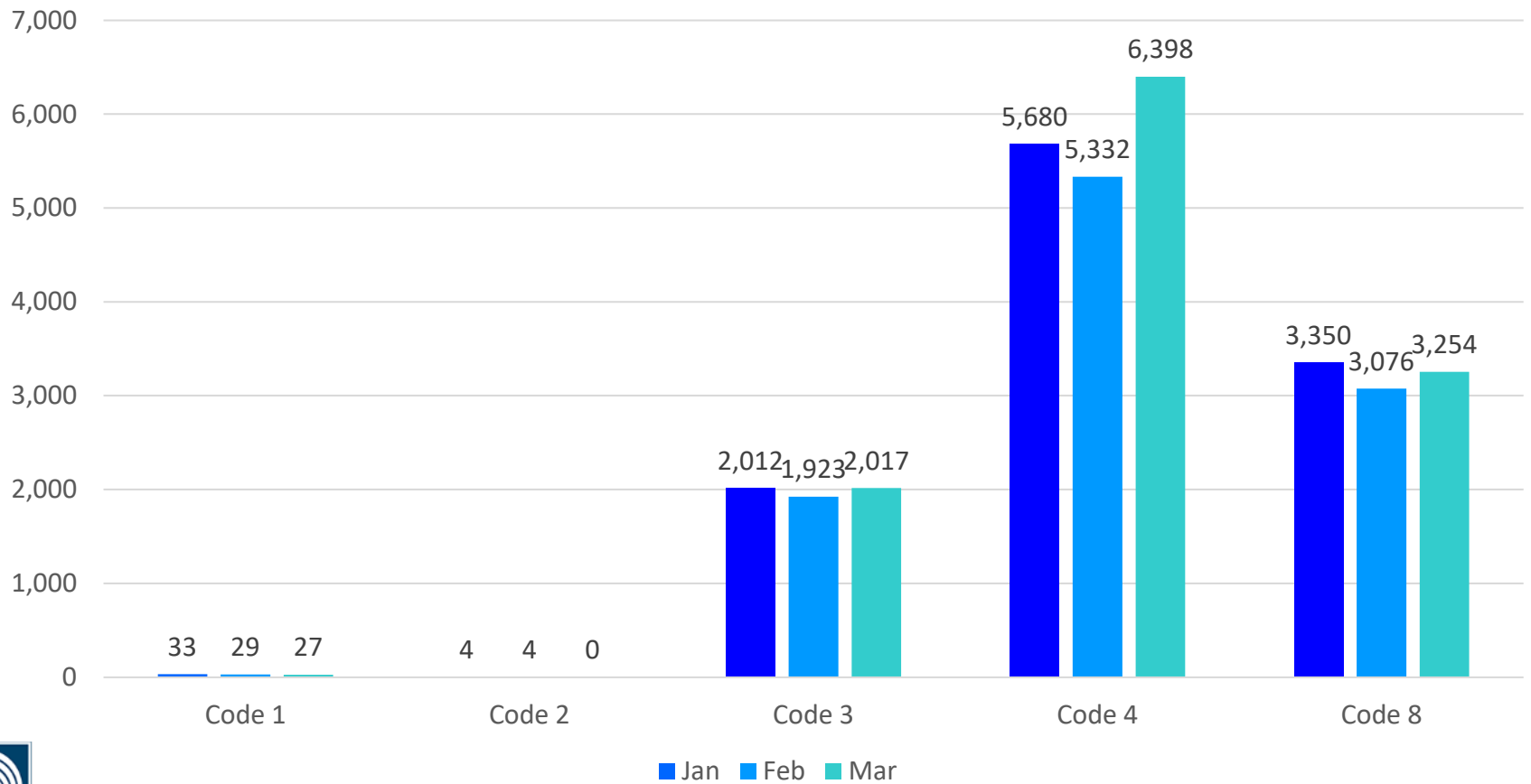
Call Volume Jan to Mar 2024

- Code 1 Responses-89
- Code 2 Responses-8
- Code 3 Responses-5,952
- Code 4 Responses-17,410
- Code 8 Responses-9,680





Jan to Mar 2024 by Month





Offload Delay 2023

Lakeridge Health – Oshawa (LHO)

- Average – 55 minutes, 34 seconds
- Maximum – 10 hours, 42 minutes
- 90th percentile – 2 hours, 1 minute

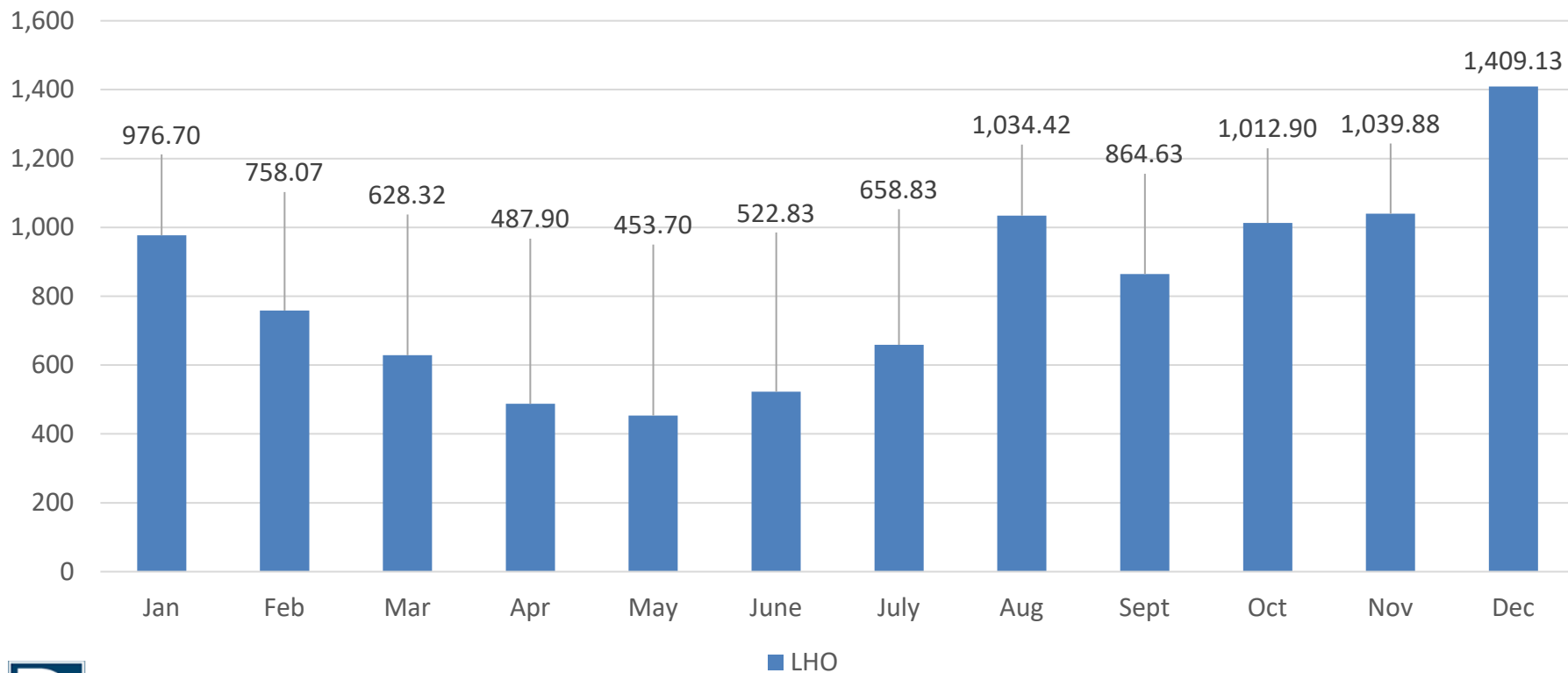
Lakeridge Health – Ajax Pickering

- Average – 44 minutes, 51 seconds
- Maximum – 10 hours, 4 minutes
- 90th percentile – 1 hour, 39 minutes



Offload Delay

LHO Offload >30 minutes





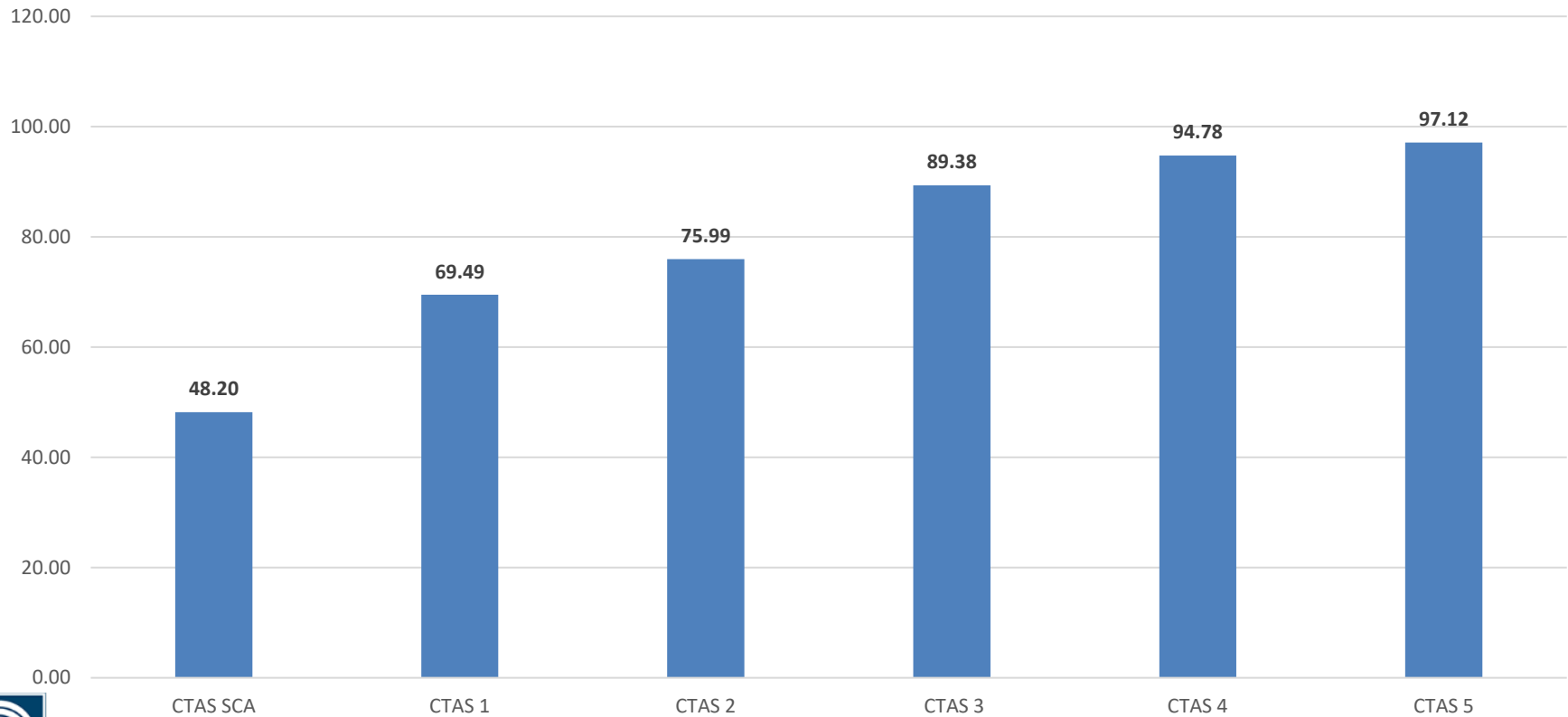
Cost of Offload Delay at LHO 2023

- Total hours: 9,847
- Cost: \$198/hour (special event rate)
- Total cost: **\$1,949,768.70**



CTAS Response Targets 2023

Percentage of CTAS Response Targets Achieved in 2023





Seaton Paramedic Response Station





Primary Care Outreach Program (PCOP) Overview

- Consists of an Advanced Care Paramedic and Social Worker providing outreach and service navigation services to vulnerable priority populations in Oshawa, Ajax and other parts of Durham
- The PCOP team uses a rapid response vehicle to commute to priority neighbourhoods throughout the region
- Two teams provide services Sunday to Saturday, 8 am to 6 pm



PCOP Services Jan to Dec 2023

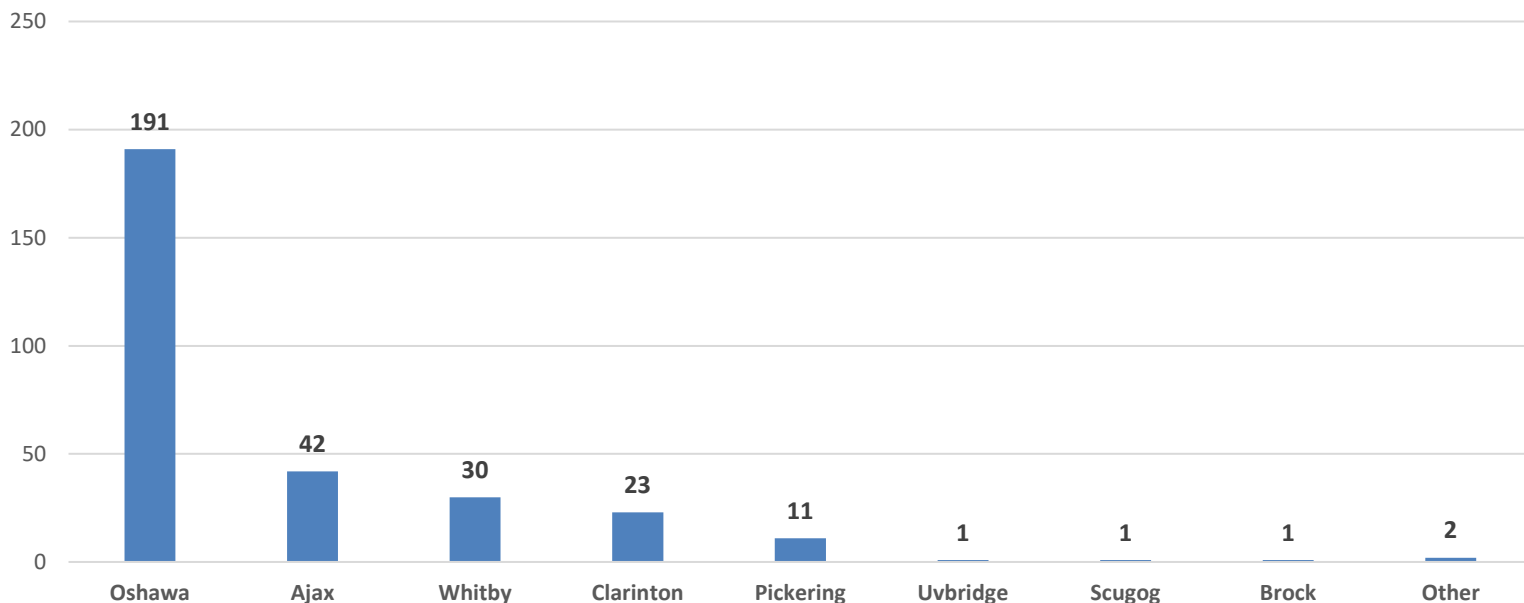
Total PCOP Clients (Since we started tracking in our 3rd party software in 2020):	263	(137 new enrollments this year / 92 of those in the past 6 months / 108.7% increase this year compared to last year). Repeat visit average for active clients during 2023 was 4.8 visits per client.
Field Visits:	673	168% increase in the past 6 months compared to the previous 6 months.
Nurse Practitioner/Physician Consultations:	141	99% increase in past 6 months compared to previous 6 months.
Wound Care:	301	198% increase in past 6 months compared to previous 6 months.
Bactigras Dressings Used:	70	218% increase in past 6 months compared to previous 6 months.
Inadine Non-Adherent Dressings Used:	157	157% increase in past 6 months compared to previous 6 months.
Urine Drug Screens:	60	58% increase in past 6 months compared to previous 6 months.
Pregnancy Tests:	6	100% increase in past 6 months compared to previous 6 months.
Anti-Psychotic Injections (Abilify)	34	278% increase in past 6 months compared to previous 6 months.
Medication Assist Prompts:	143	151% increase in past 6 months compared to previous 6 months.
Males:	176	67% are males.
Females:	82	31% are females.
Unknown:	5	2% are unknown.
Average Age:	42.7 yrs	.7 years lower than previous 6 months.



Opioid Update 2023

- 302 suspected opioid related overdoses

Number of Opioid Overdoses by Community





Questions?



Durham Region
Celebrates **50 Years!**



Emotional Model of Care Pilot Project

Long Term Care and Services for Seniors

Overview

- Background
- Importance
- Literature Review
- The Project
 - Goals and Objectives
 - Governance
 - Partnership
 - Project design
 - Phases & Timelines

Background

- Highly regulated, organized, and task-driven
- Structured framework of daily activities
- One-size-fits all approach
- Focus on policies, procedures and regulations
- Call to Reimagine how care is delivered in the LTC Sector



Significance/Importance

Divisional Survey Results (Residents & Families)

- 83% satisfied with general care and services

Growth Opportunities

- 61% were satisfied with Food & Mealtimes
- 49% were satisfied with social life
 - Connect with other residents
 - Share their life stories with staff
 - Explore new skills and interests
 - Favorite foods
 - Engage in meaningful activities, especially on the weekends.
- 58% felt that staff were caring
 - Highly the importance of empathy and compassion

Literature Review

- Emotional-based approach to care (Culture Change Model)
 - Home-like environment that promotes social interactions, independence, and a sense of purpose for residents (OLTCA, 2023)
- LTCHs across the GTA have implemented an Emotional-based Model of Care
 - City of Toronto – Care TO
 - Peel Region – Butterfly Model
 - Chartwell – Imagine
 - Baycrest – Possibilities
 - The Village of Taunton Mills – Eden Alternative



Literature Review

Innovative Models of Care

Three common models of care have emerged: [Butterfly](#), [Eden Alternative](#), and [Green House Project](#)

Common Elements

1. Person-directed care
2. Meaningful relationships
3. Staff education/training on culture change, empathy and compassion
4. Home-like environment and access to the outdoors
5. Purposeful activities
6. Flexibility in daily schedules

Literature Review

Reported Benefits

- Increase in resident activity levels and social activity
- Improved satisfaction with care and services
- Improved health outcomes
- Improvement in workplace environment
- More time spent with residents



Literature Review

Why our own Model?

- Evidence-based practice
 - Recommendation for customized Care Models in LTCHs
 - The cookie-cutter model of care may not be suitable
 - Elements from various models can better meet the needs of the population served
 - Other LTCHs customized models
- Factors we are considering
 - Demographics and cultural background of residents
 - Level of care required by residents
 - Available resources and staffing levels
 - Physical and environmental factors of the LTCH

The Project

Emotional Model of Care Pilot Project

Project Aim: By December 31, 2025, we aim to create and test a care model that will improve residents' social lives, quality of care, and services.

Expected Outcomes:

1. Improved resident, families and staff satisfaction with care and services.
2. Improved health and social outcomes for residents
3. Identification of barriers and facilitators to implementing the Emotional Model of Care divisional-wide.

The Project

Governance Structure

- The Steering Committee
 - Senior Leaders
- Divisional Advisory Group
 - Residents, families, staff (various disciplines) from each home
- Project Team at Lakeview Manor
 - Project Lead – Claire Doble
 - Interdisciplinary team (15) members
 - Adhoc – Training Team



The Project

LTC Strategic Pillars and Core Principles

Pillar One: Care and Service

- Relationship
- Purpose
- Collaboration
- Engagement

Pillar Two: Embracing Innovation

- Adaptability
- Home-Like Environment

Pillar Three: Workplace Excellence

- Diversity, Equity, and Inclusion
- Empowerment

The Project

Partnerships & Collaboration

- CAO's Office
 - Innovations
 - City Studio - Research
 - Communications
 - Engagement
 - Diversity, Equity, and Inclusion
- Ontario Tech University
 - Research Proposal
 - Stakeholder Engagement



The Project

Project Design

- Participatory Action Approach
 - Bottom-up approach
 - Collaboration and inclusiveness, and empowerment
 - Co-creation of practical, impactful solutions from stakeholders
- Plan-Do-Check-Act (PDCA) Framework
 - Continuous Quality Improvement approach
- Data Collection
 - Focus Group Sessions
 - Interviews
 - Surveys

The Project

Phase 1: Plan (Dec 2023 to Aug 2024)

- Pilot home selection (Lakeview Manor).
- Stakeholder engagement.
- Establishing change ideas and goals.

Phase 2: Feasibility Test (Sept to Dec 2024)

- Feasibility Testing on one Resident Home Area

Phase 3: Evaluation (Jan to Feb 2025)

- Evaluation of Feasibility Test.

Phase 4: Implementation (Mar to Dec 2025)

- Home-wide implementation
- Evaluation & final report



Questions

Sheryl Thorpe

Project Manager

Sheryl.Thorpe@durham.ca

905-668-7711 Ext: 2637

durham.ca

[@RegionofDurham](#)





Community Support Programs for Seniors

- **Seniors' Safety Advisor**
Sharon Woods
- **Homemakers Program**
Morgan Denby
- **Adult Day Program**
Michelle Van Genechten

Seniors' Safety Advisor



The Seniors' Safety Advisor (SSA) is a partnership between the Social Services Department and Durham Regional Police Services (DRPS), Older Adult Support Investigative Services (OASIS) Unit.



Seniors' Safety Advisor

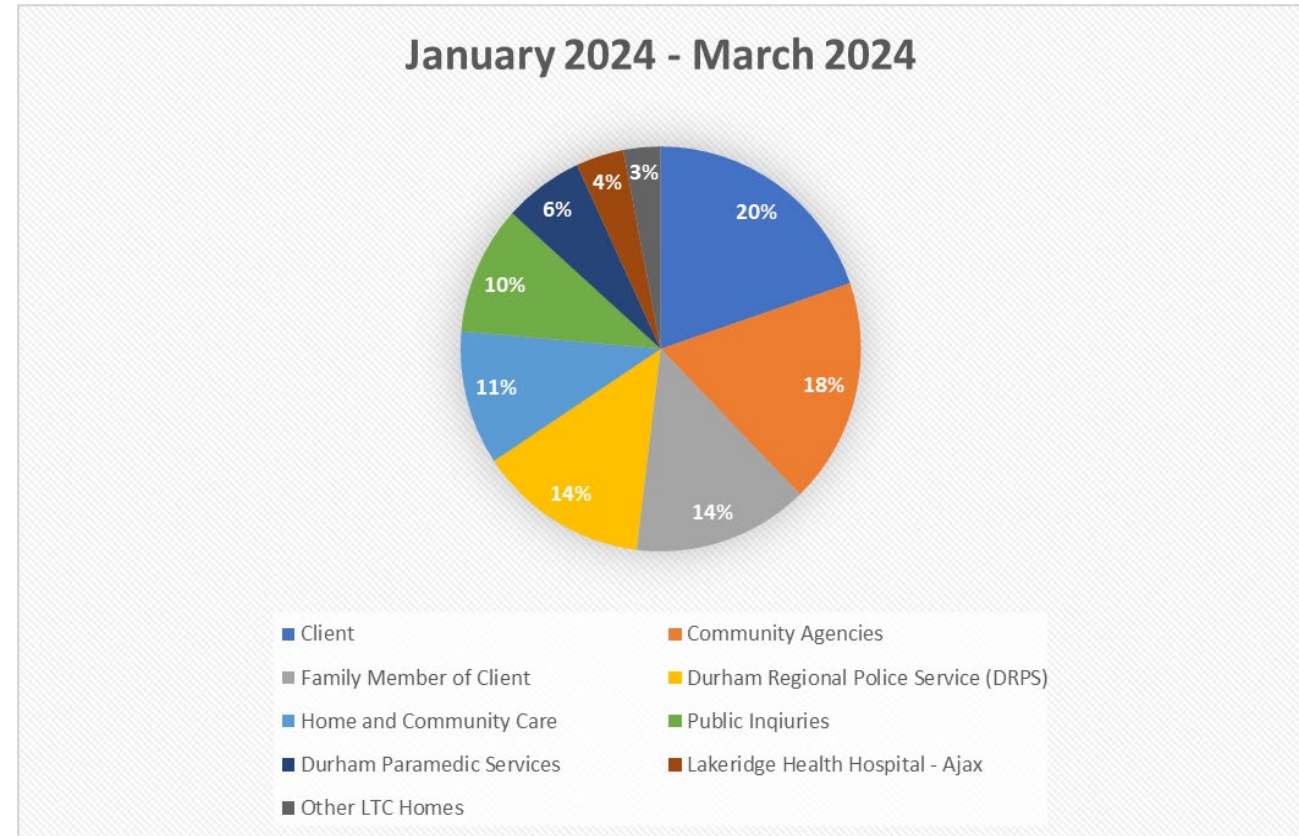


Purpose

- Support the lives of older adults in our community
- Ensure the safety and well-being of older adults by:
 - Promoting awareness of safety issues affecting older adults in the community
 - Providing advocacy for the rights and needs of older adults
 - Responding to inquiries
 - Offering assistance, direction and support on safety related matters

Call Source

- 20% - Clients
- 18% - Community Agencies
- 14% - Family Members
- 14% - Durham Regional Police
- 11% - Home and Community Care
- 10% - Public Inquiries
- 6% - Durham Paramedic Services
- 4% - Lakeridge Health
- 3% - Long Term Care Homes

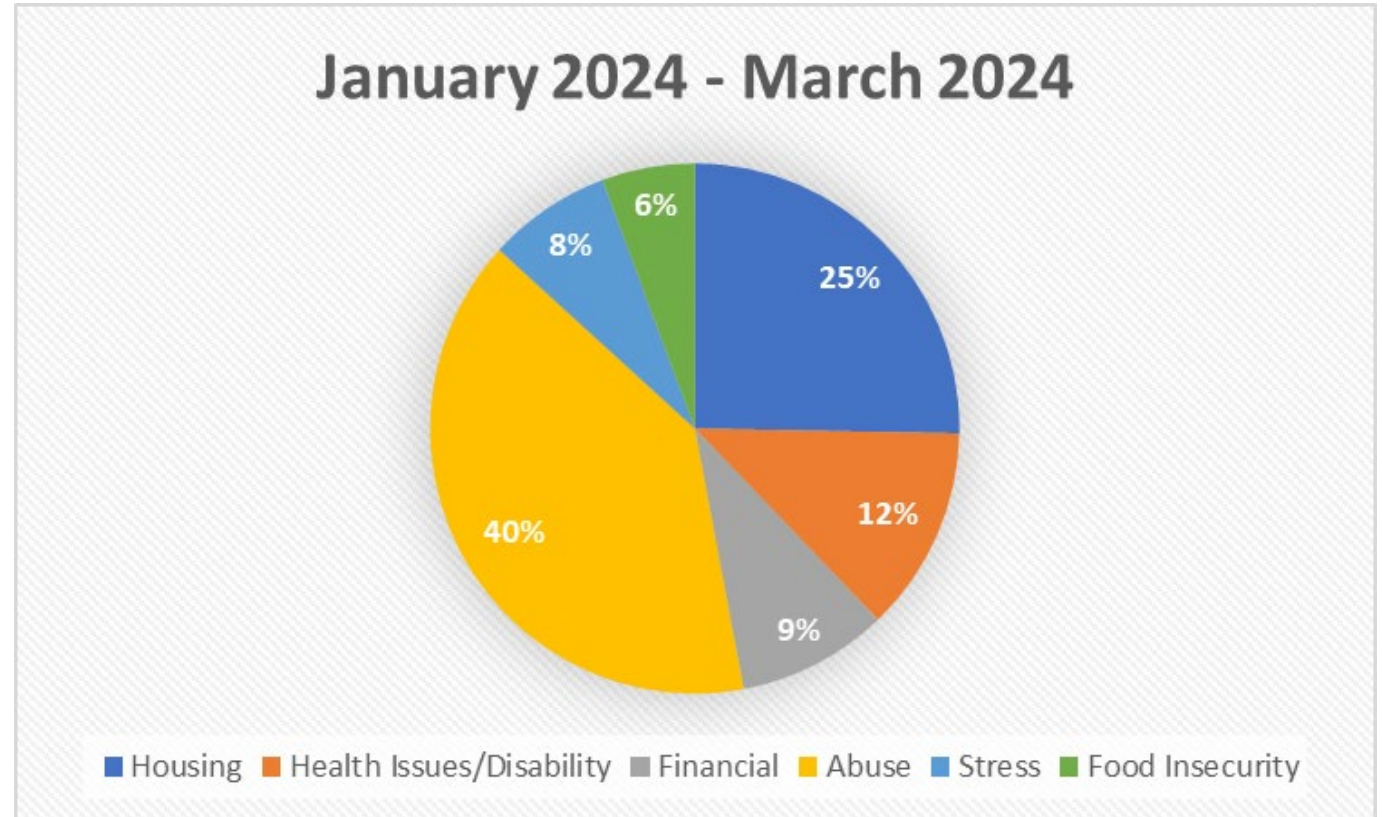


Agency Referral Sources

- Home and Community Care
- Durham Regional Police Services (DRPS)
 - OASIS
- Lakeridge Health
- Long Term Care Homes
- Family Services Durham
- Women's Shelters
- Community Care Durham
- Homemakers Program
- Community Development Council Durham
- Region of Durham Housing Services

Presenting Issues

- 25% - Housing
- 12% - Health Issues/Disability
- 9% - Financial
- 9% - Abuse (undisclosed type)
- 9% - Abuse (Neglect by others)
- 8% - Abuse (Verbal/Emotional)
- 8% - Stress
- 7% - Abuse (Financial)
- 7% - Abuse (neglect by self)
- 6% - Food Insecurity



Data and Statistics

Interactions:

- 2023 TOTAL = **1,106**
- 2023 Q1 (Jan 1, 2023, to Mar 31, 2023)= **247**
- 2024 Q1 (Jan 1, 2024, to Mar 31, 2024) = **452**
- An increase of 205

Workshops, Presentations:

- 2024 Q1 (Jan 1, 2024, to Mar 31, 2024) = **11**

Senior Safety Example

Community Support Specialist

- Partnership with Senior Safety
- Service navigation and resource connection
- Community engagement and education
- Partnership development



Homemakers Program

Background

Goals

Eligibility

Assessment

Funding



Adult Day Programs

Main Goals

- Assist clients in achieving and maintaining their maximum level of functioning within the community
- Individual care plans developed
- Provides supervised social and recreational group programming to adults over 18 years with Alzheimer's and related dementia
- Provides a hot meal and nutritional breaks
- Provides respite and information for caregivers

Hillsdale Estates - Adult Day Program

- Open 5 days a week – target attendance is 18 clients per day
- 36 active clients
- Located on the site of Hillsdale Estates Long-Term Care
- Operates under the category of Specialized Cognitive Program
- Serve diverse, multicultural communities
- Staff and volunteers specially trained in dementia care and therapeutic recreation practices including U-FIRST, PIECES, Gentle Persuasive Approaches, Montessorri Methods, Responsive Behaviours.

Lakeview Manor – Adult Day Programs

Beaverton Site

- Open 3 days/week (Mon, Wed, Fri)
- Accommodating 10 clients per day
- Located on the site of Lakeview Manor Long-Term Care Home
- Operates under the category of integrated Adult Day Program



Lakeview Manor – Adult Day Programs

Port Perry Site

- Open 2 days per week (Tue, Thurs)
- Accommodating 10 clients per day
- Operates under the category of Integrated Adult Day Program serving both physically and cognitively challenged adults.
- Located on site of Lakeridge Health Port Perry
- Provides supervised social and recreational group programming to adults over 18 years with both physical and cognitive challenges
- Provides a hot meal and nutritional breaks
- Provides Caregiver support and information

Adult Day Program Example



DURHAM | FIFTY
REGION | YEARS

Thank you

durham.ca/50years | durham.ca
[@RegionofDurham](#)





DURHAM | FIFTY
REGION | YEARS

Durham Region's Integrated Homelessness System Action Plan Update

Sahar Foroutani
Manager, Homelessness Service System
Income, Employment & Homelessness Supports
Social Services Department

Presented to: Health and Social Services Committee

Date: June 6th , 2024

Integrated Homelessness System Goals and Strategic Priorities

1 Implement System Integration, Planning and Management

- ✓ Conducted over 17 information sessions and presentations on the Regional Street Outreach Team, available tools, resources and established partnerships. Presentations were delivered to various stakeholders (e.g., libraries, post-secondary, municipal by-law)

2 Improve System Capacity and Service Levels

- ✓ Implemented a coordinated access approach for Winter Warming services in 2023-2024 for the unsheltered population across Durham Region. This includes prioritizing transportation and maintaining constant communication regarding available Winter Warming spaces.

Integrated Homelessness System Goals and Strategic Priorities

3 Expand Social and Community Investment

- ✓ Facilitate quarterly meetings with local area municipality by-law teams to discuss best practices and improve approaches towards addressing homelessness and encampments in the community.

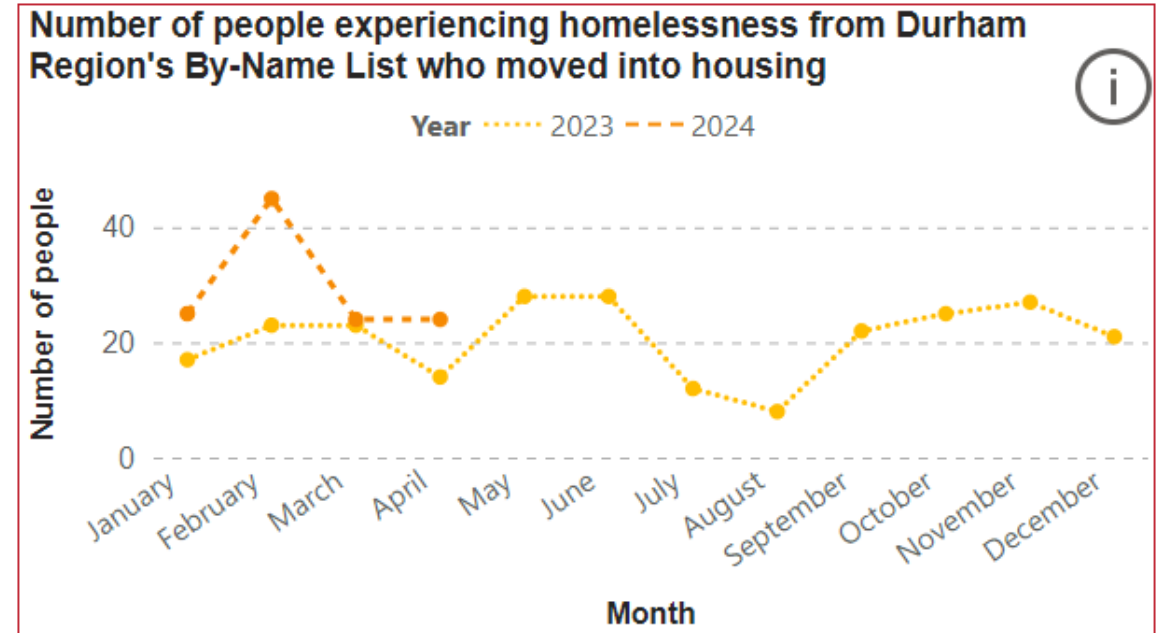
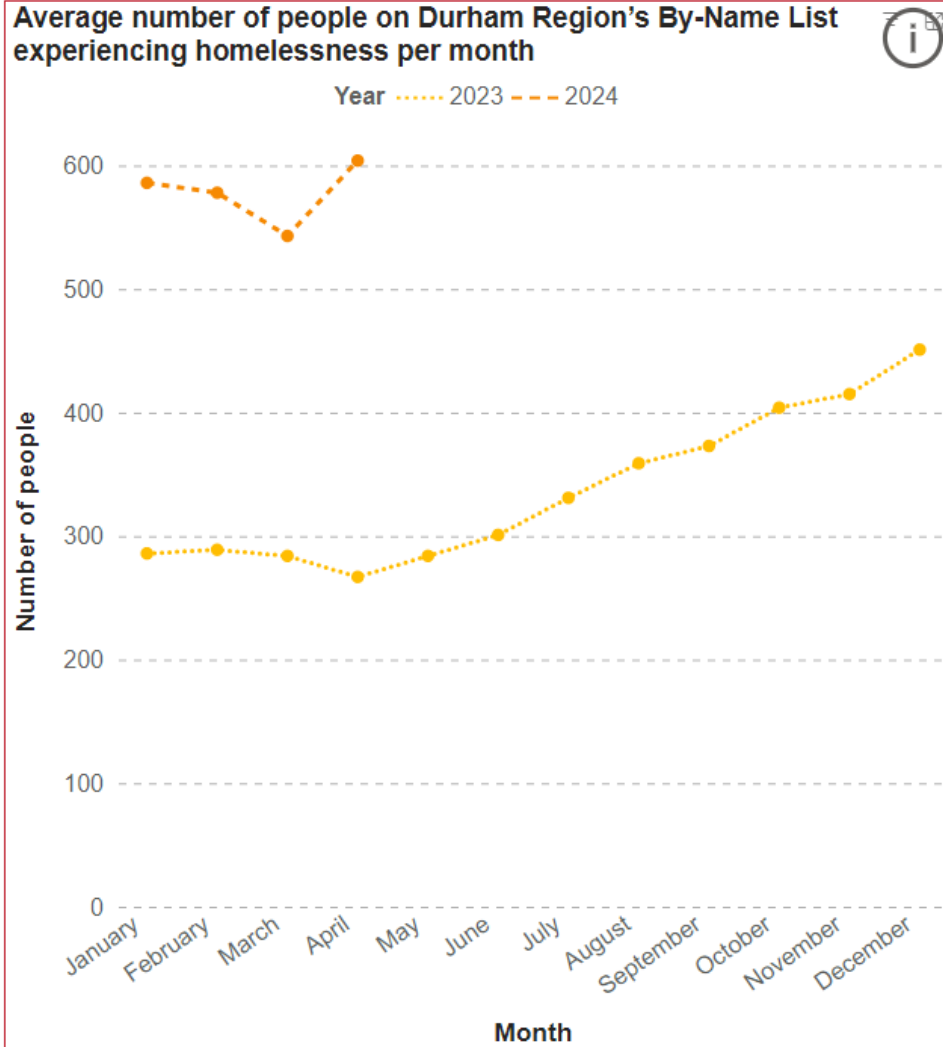
4 Achieve System Excellence

- ✓ Monthly meetings with the Community Liaison Committee (CLC) to strengthen partnerships, share information, communicate neighbourhood concerns, and support mitigation strategies to promote the successful integration and implementation of 1635 Dundas.

5 Boost System Growth of Housing Supply

- ✓ In 2023, 238 individuals moved out of homelessness into housing. Our goal is to support the growth of the Region's housing supply by providing ongoing data and information on the homelessness system.

Homelessness System: At a Glance



At least
451

December 2023

people who are currently experiencing homelessness in Durham.

238

Total move-ins in 2023

(120 of those were chronically homeless move-ins.)

2023 Homelessness Demographics

Gender Identity

37% of people identified as Female

61% of people identified as Male

1% of people identified as Transgender, Other or Unknown

Age

15% of people were youth (aged 16-24)

75% of people were Adults (aged 25-59)

10% of people were Seniors (aged 60+)

Indigenous Status

5% of people identified as First Nations

0.2% of people identified as Inuit

1% of people identified as Métis

4% of people identified as Non-Status

Household Type

87% of people were Single

13% of people were Families

Durham's Shelter System: 2023 Snapshot



Shelters in Durham Region have been at capacity for over 2 years

145



Beds in Durham's Shelter System



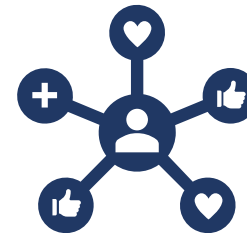
316



Motel admissions/stays

622


Individuals were turned away due to lack of available shelter beds



Once an individual is turned away, shelters always make the appropriate referrals to ensure support is provided

43

individuals were successfully diverted to more appropriate accommodation (family or friends)

Winter Warming Centre

A Winter Warming Centre is a temporary safe space that provides a warm place for individuals experiencing homelessness to seek protection during cold weather conditions. Winter Warming Centres are typically open during the winter months (November – March) when temperatures drop to dangerous levels. Services offered at winter warming centers often include:

- **Shelter:** A warm, safe place to stay, overnight
- **Basic Necessities:** Providing essentials such as hot meals, snacks, beverages, blankets, and warm clothing.
- **Hygiene Facilities:** Access to restrooms and sometimes showers.
- **Support Services:** Information and referrals to social services, mental health and addiction support, and other community resources.



Winter Warming Centre Statistics

Durham Winter Warming Centres 2023/2024	Municipality	Number of spaces	Number of Individuals
Dedicated Advocacy Resource Support (DARS)	Pickering	25	69
Christian Faith Outreach Centre (CFOC)	Whitby	30	398
Do Unto Others (DUO) Out of the Cold Winter Warming	Oshawa	20	204
Back Door Misson (BDM)	Oshawa	15	91
Do Unto Others (DUO)	Clarington	10	51
Community Living Durham North (CLDN) – Motel Program	North Durham	-	6
TOTAL		100	819

*DUO overnight drop-in remained open and accommodated another 50 spaces each night and during weather alerts, shelters make sitting or mat space available too

Winter Warming Highlights

Accessible & Inclusive

- **150 overnight safe spaces** were available 7 days a week in addition to number of spaces in Durham's shelter system including spaces for those with medical needs
- **Pets** welcomed
- **Cots/chairs** for individuals, and couples (with option of attaching cots/chairs for couples). Oversized cots available to accommodate all individuals

Coordinated Access

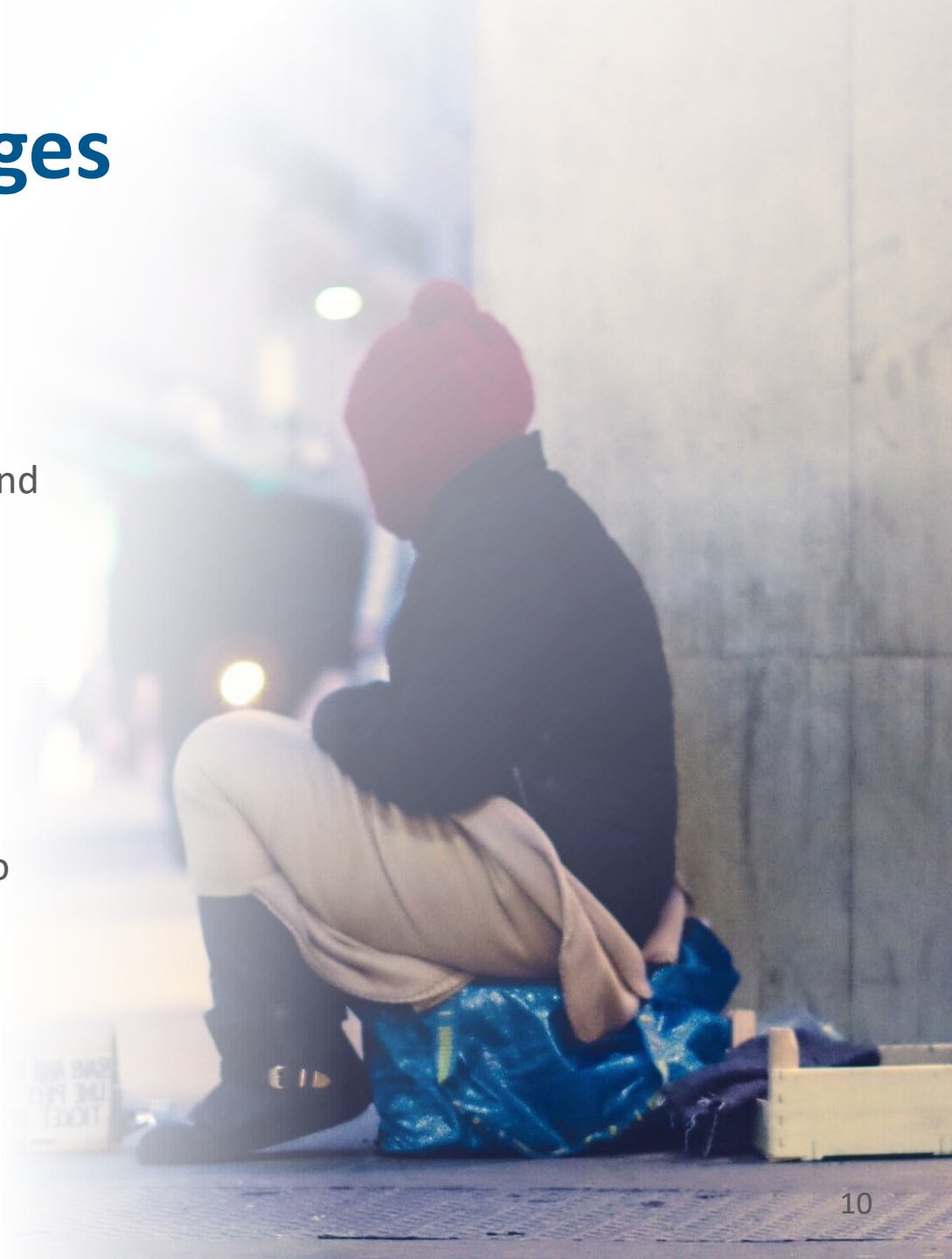
- **Increased access point** for more individuals to be added to the By-Name list
- Individuals who typically would not access supports/shelters were using Winter Warming Centres that allowed for **connection to the homelessness system**
- The coordinated access between agencies helped to **eliminate the need for lineups** before the opening of Winter Warming Centres.

Partnership & Engagement

- Partnerships were **established with local businesses** to support with donations (meals, snacks, winter care packages)
- **Coordinated communication** was created between Winter Warming Centres and the Regional Street Outreach Team.
- The Regional Street Outreach Team **provided transportation** and followed up with individuals to provide **additional support, establish connections, and build rapport.**

Winter Warming Challenges

- Transportation
 - North Durham
 - Accessibility challenges (specifically after 11 pm)
- Motels are not the best option (lack of proper wrap-around supports and lack of food options)
- Staffing challenges
- Improve coordination with Durham Region Police Service and local hospitals to ensure continuum of care for individuals with complex needs.
 - Dropping off intoxicated/heightened individuals who need a place to stay
 - Discharging individuals with no housing/ aftercare supports
- Location with washrooms and access to showers



Winter Warming Lessons Learned

- Accessible space with washrooms and showers within each community
- Staying open 7 days a week regardless of the temperature
- Winter Warming offered in all tiers of the municipality - including North Durham
- Increased access to transportation options between winter warming centres
- More daytime programming in some Durham communities

1635 Dundas- Shelter Update

Admissions

- Opened on March 20th, 2024
- Since March 25th, the shelter has been at at 100% occupancy with 45 shelter patrons.
- Many of the shelter patrons transitioned from the Whitby Winter Warming Centre to the shelter.
- As of May 27:
 - 117 unique clients with a total of 2,935 bed stays
- As of May 15:
 - 1 transitioned to a treatment program,
 - 1 transitioned housed independently,
 - 1 transitioned to supportive living
 - 3 moved in with family/friends



1635 Dundas- Shelter Update

Programming and Services

- Ongoing social events and activities (e.g., game night, karaoke, movie night, hockey night)
- Arts Programming
- Community Gardening (June 2024)
- Lakeridge Health/Pinewood provides onsite mental health and addiction supports and services.
- John Howard Society of Durham provides onsite harm reduction support services, housing, and employment assistance
- Durham Community Health Centre (DCHC) provides medical support including Hepatitis C screening, testing, and treatment
 - The mobile health team is expected to be present on-site (June 2024)



Durham Region Street Outreach Team

From January 4th – May 26th, 2024

4,516



Total Regional Street Outreach Team interactions in Durham Region



688

Group Interactions
(3,129 individuals present)



3,389

Individual Engagements



137

Encampments
(280 individuals)



302

Public/ Business Interactions



1,209

Warm referrals and collaborative service navigation supports

85 

Service requests from Lakeridge Health Hospital



32

Service requests from Durham Region Transit



Questions

Sahar Foroutani

Manager, Homelessness Service System

Income, Employment & Homelessness Supports

Social Services Department

durham.ca/50years | durham.ca

[@RegionofDurham](#)





The Regional Municipality of Durham Report

To: Health & Social Services Committee
From: Commissioner & Medical Officer of Health
Report: #2024-MOH-3
Date: June 6, 2024

Subject:

Command, Emergency Response, and Community Programs Vehicle Standardization and Upfitting

Recommendations:

That the Health & Social Services Committee recommends to Regional Council:

- A) That the Ford Explorer Interceptor be adopted as the standard vehicle for Region of Durham Paramedic Services (RDPS) Command, Emergency Response and Community Programs for a period of five (5) years, effective immediately; and
 - B) That a sole source agreement for the RDPS command and emergency response vehicle custom upfitting package be negotiated and awarded to Rowland Emergency Vehicle Products Inc. for a period of five (5) years, which is the only certified upfitter that meets the current Ontario Provincial Land Ambulance and Emergency Response Vehicle Standard, Version 6.1.
-

Report:

1. Purpose

- 1.1 The purpose of this report is to obtain approval to adopt the Ford Explorer Interceptor as the standard vehicle for RDPS Command, Emergency Response and Community Programs for a period of five (5) years, effective immediately.
- 1.2 Further, this report requests approval to adopt Rowland Emergency Vehicle Products Inc. as the standardized upfitter for RDPS command and emergency response vehicles (CERVs) by negotiating a five (5) year sole source agreement.

2. Background

- 2.1 All CERVs purchased for use by RDPS are upfitted by vendors that are certified by the Ministry of Health (MOH) as approved emergency response vehicle (ERV) upfitters, as required and listed on the MOH's [Ambulance & Emergency Response Vehicle Contractor Certification Listing](#). These approved vendors ensure that the vehicle upfit is compliant with Ontario Provincial Land Ambulance and Emergency Response Vehicle Standard, Version 6.1. Rowland Emergency Vehicle Products Inc. is the only approved ERV upfitter vendor within a reasonable distance from RDPS.
- 2.2 Rowland Emergency Vehicle Products Inc. is an authorized agent for Ford and is involved in making original equipment manufacturer modifications to all Ford Explorer Interceptor vehicles. In addition, Rowland Emergency Vehicle Products Inc. is certified in accordance with the Canada Motor Vehicle Safety Standards to ensure all original equipment manufacturer safety features are maintained during the upfitting process.
- 2.3 The current fleet of RDPS CERVs is comprised of GM Chevrolet Tahoes. Some of these Tahoes were purchased following Regional Council approval of recommendations in report [#2019-MOH-6](#). They were all standardized for the ease of access to lifesaving equipment.
- 2.4 The current model of GM Chevrolet Tahoe does not come with a hybrid option. However, the Ford Explorer Interceptor is available with a hybrid option.
- 2.5 To align with the Region's strategic goal of Environmental Sustainability, RDPS is recommending adopting the Ford Explorer Interceptor as the standard CERV, which does come in a hybrid configuration, combining gasoline engines with a battery.
- 2.6 Mechanical preventative maintenance and repair operations on all CERVs are primarily completed by the Region's Works Department, Maintenance Operations & Fleet Division, or as necessary by authorized local maintenance and repair facilities. RDPS will realize parts and repair services efficiencies and expertise through the deployment of a consistent conversion platform.
- 2.7 All Works Department and local community maintenance and repair facility personnel performing mechanical preventative maintenance and repair operations on RDPS CERVs store parts for vehicles and have been specifically trained to perform maintenance and repair duties on the Ford Explorer Interceptor platform.

3. Previous Reports and Decisions

- 3.1 Report [#2019-MOH-6](#), approved by Regional Council on September 25, 2019, authorized:

- a. That the General Motors (GM) Chevrolet “Tahoe” be adopted as the standard vehicle for RDPS Command and Emergency Response Vehicles (CERVs) for a further period of three (3) years effective January 1, 2020;
- b. That the current RDPS CERVs custom upfitting package provided by Kerr Industries Limited be adopted as the standard for RDPS for a period of three (3) years effective January 1, 2020; and
- c. That authorization be granted to award a three (3) year extension to the existing agreement with Kerr Industries Limited for the purpose of purchasing custom upfitting packages and/or parts, as approved in the annual Paramedic Services Business Plans and Budgets.

4. Financial Implications

- 4.1 Section 7.2 of the Region’s [Purchasing By-law #16-2020](#), permits the acquisition of goods and services through sole source negotiations under specific circumstances outlined in Appendix C of the By-law. Section 1.1 of Appendix “C” permits sole source purchases due to an absence of competition for technical reasons.
- 4.2 New CERVs will be purchased following a competitive bidding process through Ford dealerships in accordance with the Region’s Purchasing By-law.
- 4.3 Financing for the acquisition of CERV purchases and custom upfitting is included in the Paramedic Services Business Plans and Budgets.

5. Relationship to Strategic Plan

- 5.1 This report aligns with/addresses the following strategic goals and priorities in the Durham Region Strategic Plan:
 - a. Goal 1: Environmental Sustainability
 - 1.1 Accelerate the adoption of green technologies and clean energy solutions through strategic partnerships and investment.
 - 1.4 Demonstrate leadership in sustainability and addressing climate change.
 - b. Goal 5: Service Excellence
 - 5.1 Optimize resources and partnerships to deliver exceptional quality services and value.

6. Conclusion

- 6.1 In conclusion, it is recommended that RDPS adopt the Ford Explorer Interceptor as the standard vehicle for RDPS Command, Emergency Response and Community Programs for a period of five (5) years.
- 6.2 Further, it is recommended to adopt Rowland Emergency Vehicle Products Inc. as the standardized upfitter for RDPS CERVs for a period of five (5) years as it is the only certified upfitter that meets the current Ontario Provincial Land Ambulance and Emergency Response Vehicle Standard, Version 6.1.
- 6.3 This report aligns with the goals of Environmental Sustainability and Service Excellence in the Durham Region Strategic Plan.
- 6.4 This report has been reviewed by the Finance Department and the Commissioner of Finance concurs with the recommendations.

Respectfully submitted,

Original signed by

R.J. Kyle, BSc, MD, MHSc, CCFP, FRCPC, FACPM
Commissioner & Medical Officer of Health

Recommended for Presentation to Committee

Original signed by

Elaine C. Baxter-Trahair
Chief Administrative Officer



The Regional Municipality of Durham Report

To: Health and Social Services Committee
From: Commissioner of Social Services
Report: #2024-SS-6
Date: June 6, 2024

Subject:

Authorization to extend the existing agreement with Medisystem Pharmacy Limited for the Provision of Pharmacy Services for the Regional Municipality of Durham's four (4) Long-Term Care Homes

Recommendation:

That the Health and Social Services Committee recommends to Regional Council:

- A) That authorization be granted to award a single source extension to the existing Agreement with Medisystem Pharmacy Limited for the provision of pharmacy services for the Region's four Long-Term Care Homes for a period of one (1) year expiring on August 31, 2025, at no cost to the Region; and
 - B) That the Commissioner of Finance be authorized to execute any necessary agreement.
-

Report:

1. Purpose

- 1.1 The purpose of this report is to provide details and seek approval to extend the existing standing agreement with Medisystem Pharmacy Limited (Medisystem) for a period of one (1) year for the Regional Municipality of Durham's (Region) four (4) Long-Term Care Homes (LTCH).

2. Background

- 2.1 The Region of Durham currently secures medication dispensary pharmacy services for the four LTCH from Medisystem. This Agreement was originally established in 2017 under RFP-536-2017 for a five (5) year term, further extended for one (2) year period in September 2022.

- 2.2 The pharmacy service provider shall provide the services as requested by the Physician or Registered Staff of the Region as defined by the Ontario Public Drug Benefit Program of the Ministry of Health, the Ontario College of Pharmacists and Section 139 of the Drug and Pharmacies Regulation Act.
- 2.3 Prescription drug costs associated with the pharmacy services shall be funded directly to the pharmacy provider by the Ontario government through the Policy for Pharmacy Payments under the Long-Term Care (LTC) Home Capitation Funding Model, 2020. For co-payments, dispensing fees or drugs not covered under this funding model, the pharmacy service provider will bill the resident(s) or designate(s) directly for these costs.
- 2.4 As part of the program of care for the residents, the pharmacy provider is required to take an active role with other professional staff in all matters related to pharmacy, in addition to providing basic pharmacy services. The scope of services provided by the pharmacy provider includes revision and reviews of pharmacy policies and procedures, the provision of specific clinical interventions, and to lead the medication quality audit program. The pharmacy provider must also integrate with and support the Region's resident electronic health record and more specifically, the electronic medication administration record and the electronic treatment administration record. Additionally, the pharmacy provider must supply and maintain related equipment including but not limited to medication and treatment carts, and automated medication dispensing cabinets.
- 2.5 Under the provincial LTC Capitation Funding Model, the pharmacy service providers are paid an annual fee-per-bed for all medication dispensing and professional pharmacy services. The initial fee-per-bed was \$1,500 in 2020 with a schedule for reductions until the annual fee-per-bed reached \$1,200. The scheduled reductions were put on hold due to the COVID-19 pandemic though the province had committed to the first reduction April 1, 2024, to \$1,400 however, this reduction was again put on hold for fiscal 2024-2025. While the repercussion of these reductions have not been realized yet, LTCHs need to consider these in the upcoming Request for Proposal (RFP).
- 2.6 Enhancements through Medication Safety Technology (MST) funding making fulsome use of the PointClickCare electronic health record have been implemented through 2022 and 2023. These include modules for integrated medication management and secured conversations between providers as transitions to allowing future electronic prescribing. These systems represent significant changes in the integration of pharmacy with frontline clinical practice in the LTCHs and the homes need time to review the implications of these changes to our management of the medication system.
- 2.7 Region staff have been working on the development of the RFP. However, a one (1) year extension is required to develop the scope of work and once the RFP is awarded, to allow LTCHs sufficient time to prepare and gather information in the

event of a change in service provider, to commence their services with no interruption to this essential service.

3. Financial Implications

- 3.1 Section 7.2 of the Region's Purchasing By-law 16-2020 permits the acquisition of goods and services through sole source negotiations under specific circumstances outlined in Appendix "C" of the By-law. Section 1.2 of Appendix "C" permits negotiations where additional deliveries by original supplier for goods/services not included in the original procurement if a change of supplier cannot be made due to interchangeability/interoperability with existing goods/services from initial procurement and would cause significant inconvenience or substantial duplication of costs.
- 3.2 Appendix "D" of the Purchasing By-Law #16-2020 requires the approval of Regional Council to award single/sole source procurements in excess of \$100,000. While there is no cost to the Region for the provision of pharmacy services to the LTC Homes, the value of the contract to the service provider for a period of twelve (12) months based on the LTC Home Capitation Funding Model is estimated at \$1,270,500.

4. Relationship to Strategic Plan

- 4.1 This report aligns with/addresses the following strategic goals and priorities in the Durham Region Strategic Plan:
- a. Goal 5: Service Excellence – To provide exceptional value to Durham taxpayers through responsive, effective, fiscally sustainable service delivery.

5. Conclusion

- 5.1 It is recommended that authorization be granted to extend the existing Agreement to Medisystem Pharmacy Limited for the provision of pharmacy services for a period of one (1) year expiring August 31, 2025, for the Regional Municipality of Durham's four (4) Long-Term Care Homes to allow sufficient time to complete a competitive bid process and to transition to a new provider, if required, with no interruption of service to the residents of the homes.
- 5.2 This report has been reviewed by the Finance Department and the Commissioner of Finance concurs with these recommendations.

Respectfully submitted,

Original signed by

Stella Danos-Papaconstantinou
Commissioner of Social Services

Recommended for Presentation to Committee

Original signed by

Elaine C. Baxter-Trahair
Chief Administrative Officer