

REPORT TITLE:	Improving Health Care Services for the Homeless in Peel
FROM:	Sean Baird, Commissioner of Human Services

RECOMMENDATION

That the Region of Peel's Housing Services Division work with Health Services and other health care organizations in Peel to develop a permanent, integrated model of care to provide health care services to Peel's homeless population;

And further, that until such time as the program is finalized and implemented, that the Director of Housing Services be granted authority to directly negotiate, in accordance with the Region's Procurement By-law 30-2018, as amended, with Homeless Health Peel and The Governing Council of the Salvation Army, each for a contract term of up to 19 months, to deliver health care and social services to people with complex care needs who are experiencing homelessness, at the Region's homeless shelter at 1767 Dundas Street East, Mississauga;

And further, that the implementation of this solution for up to 19 months, at the total cost estimate of \$6,590,300, be funded to a maximum of \$5,200,000 from the Home in Peel deferred revenue account and \$1,390,300 from the Housing Services base operating funding, with no net impact;

And further, that the allocation of funding of \$2,790,300 for Homeless Health Peel, \$2,394,000 for The Governing Council of the Salvation Army and \$1,406,000 for operating cost be approved;

And further, that once final costs are established, that authority to award these contracts and other associated contracts, including maintenance, security and cleaning services at 1767 Dundas Street East, be delegated to the Chief Financial Officer and Commissioner of Corporate Services and/or the Peel Housing Corporation Treasurer, as applicable;

And further, that the Commissioner of Human Services be granted authority to enter into and execute the service agreements, as negotiated, and any necessary ancillary documents, with the successful proponents, on business terms satisfactory to the Commissioner of Human Services and on legal terms satisfactory to the Regional Solicitor;

And further, that the Regional Chair, on behalf of Regional Council, write to the Minister of Health to advocate for permanent, sustainable funding to provide health care services for people experiencing homelessness.

REPORT HIGHLIGHTS

- The Region of Peel's COVID response for the homeless provided an opportunity to deliver health care services to the homeless in new ways, allowing for improved integration of health, housing, and other social supports.
- The temporary emergency COVID funding from the federal and provincial governments used to fund the Region of Peel's COVID response for the homeless is coming to an end.
- In order to maintain access to health care services for the homeless in the shelter system, staff recommend transitioning the services currently provided at the isolation site to the previous shelter located at 1767 Dundas Street East, Mississauga, for a period of up to 19 months.
- The cost to operate the Dundas Street site and to provide nursing supports in all regional shelters and other community locations for up to 19 months is \$6.59 million.
- Staff is seeking approval to use funding to a maximum of \$5.2M from the Home in Peel deferred revenue account and \$1.39M from the Housing Services base operating funding with no net impact.
- Staff is also seeking approval to enter into service agreements for a period of up to 19 months, from June 2022 to December 2023, through direct negotiation, with the providers who currently operate the COVID isolation site for the homeless.
- Direct negotiation is recommended to ensure a seamless transition of services, but also because the providers of the isolation site provide a unique and specialized blend of health and social supports appropriate to the homeless population. The direct negotiation is in accordance with section 5.2.5 of the Procurement By-law 30-2018, as amended, which permits a direct negotiation where the required services are to be supplied by a particular vendor with specialized knowledge, skills, expertise or experience.
- Over the next 6 to 12 months, Housing Services staff, together with Peel Health Services staff and other key stakeholders, will work to evolve the current model into a permanent, integrated system of care. Staff will return to Council with recommendations in advance of the 2024 budget process.
- As funding for health care services to the homeless is primarily a provincial responsibility, it is recommended that advocacy for permanent funding from the Ontario Ministry of Health continue.

DISCUSSION

1. Background

As Service Manager for the affordable housing system in Peel, the Region of Peel funds, oversees, coordinates and/or delivers several programs for people who are experiencing homelessness.

It is well documented that personal health status and access to health care impact the ability of the homeless to become and/or remain stably housed, particularly for the chronically homeless. As such, improving access to health care for the homeless is a priority in Peel's 10-year Housing and Homelessness Plan.

When the COVID-19 pandemic began in March 2020, several temporary measures were put in place to protect and care for the homeless throughout the pandemic. One of these measures was an isolation site, which was funded using temporary emergency funds from the federal and provincial governments. The isolation site provided an opportunity to deliver health care services to the homeless in new ways, allowing for improved integration of health, housing and other social supports.

Internal modeling showed that between March 2020-April 2021, an estimated 182 cases, 112 hospitalizations, 176 ICU admissions, and 31 deaths were prevented at the isolation site.

Given the positive results achieved at the isolation centre and because temporary COVID emergency funding from the federal and provincial government is coming to an end, this report seeks Council approval to transition the services provided at the isolation centre to the site of the previous family shelter at 1767 Dundas Street East in Mississauga, for a period up to 19 months, while work to design a permanent model continues.

2. Maintaining Access to Health Care Services in the Shelter System Post-Pandemic

As previously and regularly reported to Council, the Region of Peel's COVID-19 response for the homeless has been primarily funded through temporary emergency funding from the federal and provincial governments. Peel's response involved flowing temporary funding to 122 community agencies, adapting outreach and shelter operations, providing additional drop-in and out-of-the-cold programs, and operating isolation and recovery sites.

The isolation site created an opportunity to improve access to health care for the homeless. Under the direction of a physician, nurses provide on-site care, which not only helps vulnerable clients cope with COVID, but also stabilizes their overall health, while improving housing outcomes as well.

Temporary emergency COVID funding from the federal and provincial governments is coming to an end. As such, and in order to maintain access to health care services for the homeless in the shelter system, staff recommend transitioning services provided at the isolation site to the previous shelter site at 1767 Dundas Street East, Mississauga, to provide health-focused care in the shelter system, for a period of up to 19 months. Staff recommends that this facility be used to provide care for the homeless who have complex health needs, while also serving as an isolation site for the homeless due to COVID-19. It is further proposed that on-site social, and housing supports continue to be provided at this new location.

The services provided at this site will address complex health needs of the homeless who cannot stay in the regular shelter system, and/or people who have been discharged from hospital with complex care needs and who do not have a home. The Dundas Street site has 60 rooms available, and staff estimate there will be at least 30 patients requiring complex care on any given day.

Through this report, staff is seeking \$5.2 million of one-time funding and approval from Council to operate the Dundas site for a period up to 19 months, while also continuing to provide mobile nursing supports in all Region of Peel shelters and other community locations.

Staff is also seeking approval to enter into service agreements for a period of up to 19 months, from June 2022 - December 2023, through direct negotiation, with the providers who currently operate the COVID isolation site for the homeless. The emergency procurement process, which was used to establish the isolation site, was never intended for prolonged use. Direct negotiations with current providers will ensure a seamless transition of services from the isolation site to the Dundas Street site. Homeless Health Peel and Salvation Army gained essential knowledge, skills, and experience through their work at the isolation site, which is a unique program within Peel. The ability to continue to work with these organizations over the next 19 months will ensure that the services and trusting relationships that have already been established with complex care clients who are homeless will be maintained. The direct negotiation is in accordance with section 5.2.5 of the Procurement By-law 30-2018, as amended, which permits a direct negotiation where the required services are to be supplied by a particular vendor with specialized knowledge, skills, expertise or experience.

The award of these contracts would be subject to the approval of the Chief Financial Officer and Commissioner of Corporate Services.

Budget details can be found in the table below.

Item	Annual Cost Estimate (\$M)	Total Cost for 19 months (\$M)
Health care staffing, supplies, expenses	\$1.76	\$2.79
Shelter support staffing, supplies, expenses	\$1.51	\$2.39
Building maintenance, repairs, security, cleaning	\$0.89	\$1.41
Total Cost	\$4.16	\$6.59

Table 1. Budget Overview, 1767 Dundas Street East, Mississauga

3. Designing a Permanent, Integrated Model of Care

The experience during the pandemic, combined with information gathered through expert interviews, a jurisdictional scan, and a preliminary review of the literature (see Appendix I) reveal that our long-term, permanent solution must go beyond the current model to achieve desired housing outcomes. As such, over the next 6 to 12 months, Housing Services staff, together with Peel Health Services staff and other key stakeholders, will work to evolve the current model into a more complete, integrated system of care. The model envisions that health care services would include, but would not necessarily be limited to:

- Primary care (initial screenings, acute/chronic conditions management, diagnostic tests)
- Addictions, withdrawal management
- Harm reduction
- Vaccination supports
- Mental health
- Pharmacy services, follow-ups, referrals
- Health system navigation

A conceptual model, depicting how health care services could be accessed by the homeless and precariously housed is available in Appendix II.

Prior to the end of the 19-month transition period, and in advance of the 2024 budget process, staff will report back to Council with recommendations and next steps, including a plan to competitively procure complete, integrated wrap-around health services for the homeless in Peel.

RISK CONSIDERATIONS

There were significant gains made through the Region's COVID response for the homeless. These gains will be lost if the services provided through the isolation centre cannot be maintained at the Dundas Street site. Staff recommend working with the existing service providers from the isolation site, to mitigate the risks associated with transitioning sites, to allow for a more seamless transition of care, and to maintain trusting relationships that have formed with stakeholders and clients.

Providing funding to continue these services for up to 19 months retains existing services, while providing staff with the time to work with key partners to design a permanent, integrated model of care.

However, the provision of health services to the homeless is primarily a provincial responsibility through the Ministry of Health. When the Region of Peel steps in to address community needs without a guarantee of long-term provincial funding, there is a risk that the province will continue to underinvest in Peel. Advocacy at both the political and staff levels must continue, in order to secure appropriate levels of permanent funding from the province.

FINANCIAL IMPLICATIONS

The cost to operate the Dundas Street site and to provide nursing supports in all regional shelters and other community locations for up to19 months is \$6.59 million. Staff is seeking approval to use funding to a maximum of \$5.2M from the Home in Peel deferred revenue account and \$1.39M from the Housing Services base operating funding with no net impact.

Previously, staff received approval from Regional Council to supplement base funding for the My Home Second Units Renovation Assistance Program with funds from the Home in Peel deferred revenue account, if required. To date, funds from the Home in Peel deferred revenue account have not been required, as available base funding is meeting program demand.

Moreover, staff expects an announcement shortly from the provincial government about a final tranche of Social Services Relief Funds (SSRF). When this occurs, a portion of SSRF will be used to fund the Dundas Street site.

Should Council choose to continue the program beyond 19 months, it will require additional funding and if the program is made permanent, another funding source will have to be identified through the 2024 budget process. This could result in an incremental increase to the net levy and be brought to Council for consideration.

CONCLUSION

When the COVID-19 pandemic began in March 2020, several critical, temporary measures were put in place to protect and care for Peel's homeless. One of these measures was an isolation centre, which provided an opportunity to deliver health care services to this community in new ways, allowing for improved integration of heath, housing, and other social supports.

Given the positive results achieved at the isolation centre and because temporary COVID emergency funding from the federal and provincial government is coming to an end, this report seeks Council approval to transition the services provided at the isolation centre to the site of the previous family shelter at 1767 Dundas Street East in Mississauga, for a period up to 19 months.

Work to design a permanent model continues, as does advocacy to the Ontario Ministry of Health.

APPENDICES

Appendix I – Key Findings Appendix II – Conceptual model of permanent integrated pathway

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