

Community Plan To Address Homelessness and Housing Issues in Kingston



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Related Documents Available Under Separate Cover (<http://spckingston.ca>):

Report Card on Homelessness (2001)
Shelter Voices (2001)

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**Human Resources
Development Canada**

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ressources humaines Canada**

Thanks to all participants and others in the community for your invaluable assistance in the formulation of this Community Plan. Although we could not have done it without you, and are grateful for your assistance. The Social Planning Council is solely responsible for any errors and/or omissions found in this document.

Executive Summary

1. Objectives

The stated objectives of this *Community Plan to Address Homelessness and Housing Issues* (hereafter referred to as the *Community Plan*) are:

- To support efforts that increase the supply of and sustain current occupancies in transitional, secondary, not-for-profit, affordable and supported housing and shelters.
- To bolster endeavours that meet the diverse needs and improve the well-being of people who are at risk of becoming or who are homeless. Ideally, this will help them to leave long-term homelessness behind, and ensure everyone has stable alternatives to living on the street.
- To build on and harness professional expertise in the community; create partnerships with the arts, education and business.
- To raise public awareness and understanding about homelessness.
- To enhance homelessness prevention and support systems that build on community-based and public services resulting in more and better partnerships to address homelessness.
- To generate funding models that define clear priorities, complement other funding sources, and offer sustained benefit beyond the three years of Supporting Communities Partnership Initiative (SCPI) funding.

2. Geographic Area

The geographic area covered by the Community Plan is the City of Kingston (See Map on pg. 2).

3. Community Plan Development Process

The Community Plan was developed under a shared-delivery model and is owned by the community at large that makes up the City of Kingston. It included the following activities, among others:

- Formation of a Community Planning Committee and a Homelessness and Housing Advisory Board
- Research of existing literature by Social Planning Council Staff
- Monthly (at least) community meetings, and three Community Forums
- Development of a homelessness profile, the *Report Card on Homelessness*
- Ongoing communications with the larger community
- Administration of a questionnaire survey to shelter providers and users

4. Assets and Gaps

A wide range of existing assets to assist the homeless and gaps in services were identified in the preparation of the Community Plan. These are contained in Appendix C and summarized in Section Four. Identified gaps include:

- A) Short-Term Accommodation and Housing**
- B) Transitional and Supportive Accommodation and Housing**
- C) Long-Term, Affordable Accommodation and Housing**
- D) Access to Housing**
- E) Outreach**
- F) Advocacy**
- G) Coordination of Discharge Planning**
- H) Data Collection**
- I) Other Activities which Help to Form a Continuum of Supports**

5. Priorities

Beginning in September 2000, the Homelessness and Housing Advisory Board prioritized the gaps in service in the Kingston community. This was a difficult process, which was only possible after considerable consultation—with input from the Community Planning Committee, the community forums, and the results of the questionnaires. They also based their decisions on the inventory in Appendix C and their own considerable collective expertise on the needs of Kingston.

While acknowledged to be intrinsically interconnected, the gaps were broken down into 20 specific elements of a continuum of services. Table 2: *Priorities and Proposed Initiatives* (page 19), contains a description of each item, along with estimated costs of proposed initiatives that could address these gaps. The 20 gaps include:

1. Homelessness Prevention Worker
2. 24/7 Overflow Shelter
3. Extend Psychiatric Services to Shelters
4. Secure Existing Bedding at Shelters
5. Coordination of Discharge Planning—Supports in the Shelters
6. Creation of more Affordable Housing
7. Transitional Housing
8. Street Outreach Worker
9. Supportive Housing—Mental Health Issues
10. Youth Housing
11. Coordination of Discharge Planning—Communication in the Community
12. Second Stage Housing
13. Health Care—Outreach
14. Storage for Personal items of the Homeless
15. Storage for Donations—furniture, appliances, etc.
16. Health Care—Access to Doctors
17. Supportive Housing—Developmentally Challenged
18. Data Collection
19. Supportive Housing—Seniors
20. Animal Care

6. Sustainability

Initiatives that will create funding needs beyond March 31, 2003 (the end of SCPI) are being addressed by the following means:

- continued contributions by community partners providing time and resources,
- identifying all possible funding sources currently available and announced in the period from April 1, 2001 onward,
- increasing public support through effective communications strategies,
- effectively using volunteers,
- forming new partnerships with businesses and organizations within the City,
- undertaking fundraising initiatives, and
- soliciting support from all levels of government.

7. Evaluation

An evaluation of the SCPI process will be taken in order to assess its contribution in helping to achieve the objectives of this *Community Plan*. The Advisory Board will oversee the evaluation, and determine methods to be used to produce the evaluation.

8. Communications Strategy

The Community Plan will be shared with the public through the following means:

- holding a press conference prior to release of the document;
- posting the Community Plan on the Social Planning Council's website (<http://spckingston.ca>);
- making the document available at municipal offices and libraries throughout the City;
- providing a copy at the KFL&A Health Unit and local MCSS offices; and
- providing copies to all services agencies across Kingston.

All proposals received for SCPI funding will be evaluated by the Homelessness and Housing Advisory Board and recommended to the appropriate funding body. The annual progress reports as well as the evaluation of the *Community Plan* will be made available to the community through the following processes:

- highlighting any changes to funding priorities made as a result of the review process;
- posting the reports on the Social Planning Council website;
- providing copies of the report to all levels of government, including all local MP's, MPP's, City Councillors and Municipal offices; and
- providing copies for review to community members for their input.

9. Community's Contribution

Funding for homelessness initiatives has many different sources. These include government funding such as federal and provincial programs, municipal funding, donations from individuals, faith groups and corporations, social service agencies, etc. Government sources of funding received in Kingston are outlined in a table in Section Nine.

Funding for initiatives under the SCPI program were provided by HRDC up to a limit of approximately \$168,000 and slightly over \$28,000 for youth initiatives per year for three years, provided these funds were matched by the community. Thus far in the process, there has been no difficulty ensuring the required community contribution was met.

Addendum: Aboriginal Community Plan

The Aboriginal Community Plan is an intrinsic part of the larger community plan, but because the SCPI funding stream was separate, it is also a stand-alone document. SCPI funding set aside for Aboriginal needs in Kingston was approximately \$80,000 per year. All approved projects are ongoing as of spring 2002.

The objectives of the Aboriginal Community Plan are:

- To address Aboriginal Homelessness in the City of Kingston,
- To identify what services are currently available to or needed for Aboriginal people, and
- To address long term methods of Homelessness Prevention and Awareness of these issues.

The priorities set by the Aboriginal planning group are:

- Priority 1 - Housing Services
- Priority 2 - Basic Necessities
- Priority 3 - Counselling Services
- Priority 4 - Supportive Services

For more details, see the *Aboriginal Community Plan*.

“Is it not everyone’s daily right to have food and shelter? If this is true, why do I see on a daily basis people living on the streets and going for two and three days without food in this city?”

Shelter Provider Questionnaire Participant

Introduction

SCPI (“skippy”) stands for Supporting Communities Partnership Initiative. It is federal seed money, 80% of which is to go to larger centers in Canada (e.g. Ottawa, Hamilton and Toronto). Kingston was chosen as one of several smaller communities designated to receive part of the remaining 20%.

Since September 2000, the Social Planning Council of Kingston and Area (SPC) has been facilitating meetings of local shelter and housing providers, and service agencies who work with homeless people or those in danger of becoming homeless. In addition to the direct service agencies, the local Human Resources Development Canada (HRDC) office, United Way and the City of Kingston’s Social Housing Division have participated in this process. Through these community consultations and local research efforts, a *Community Plan to Address Homelessness and Housing Issues* has been drafted together with two related documents, *Shelter Voices* and the *Report Card on Homelessness*. Together, these documents qualitatively and quantitatively assess the growing problems of the rising cost of housing and homelessness in Kingston. The overall purpose of the *Community Plan* is to provide a long-term, comprehensive approach to homelessness in Kingston to deal with the full range of people who are homeless or are at risk of becoming homeless, regardless of funding sources.

Funding for initiatives under the SCPI program were provided by HRDC up to a limit of approximately \$168,000 and slightly over \$28,000 for youth initiatives per year for three years. In the last two fiscal years, Kingston received SCPI funds to spend on “urgent need” projects and slightly over \$28,000 specifically for youth initiatives. There was also an Urban Aboriginal component to SCPI, with designated monies for Kingston of \$80,000 per year. Funding available for all projects in 2002/2003 is \$192,761.00, plus \$63,950.00 specifically for youth homelessness initiatives.

There were two community groups designated with the responsibility of creating and implementing the *Community Plan*, in collaboration with SPC staff. These were the **Homelessness and Housing Advisory Board** and the **Community Planning Committee**. The Advisory Board has operated as the more formal group, with Guidelines for Governance (see Appendix A). It was charged with the responsibility of reviewing all proposals submitted by community organizations for SCPI funds. A list of the members of both groups is in Appendix B. The accomplishments and next steps of these groups may be found in Section Three of this document, titled the Community Plan Development Process.

The planning process for SCPI is intended to be ongoing. The *Community Plan* should be handled as a “living document”, which is constantly subject to change in order to reflect the evolving needs and response of the Kingston community. In order to meet its overall mandate in the *Community Plan*, it is anticipated that the Advisory Board will continue to meet when SCPI officially comes to an end in March 2003, possibly in the capacity of a Homelessness and Housing Task Force.

The Social Planning Council welcomes all comments and/or concerns community members may have with regards to this document. If community members were unable to attend the focus groups or would prefer to communicate their comments to the SPC in another format they may contact our staff:

Telephone: (613) 384-4295
Facsimile: (613) 384-4318
Email: spc@spckingston.ca

“It is a bad plan that admits of no modification.”
Pubilius Syrus, *Maxims*

The co-documents to the *Community Plan*, the *Report Card on Homelessness*, and *Shelter Voices*, can be found on the SPC website: <http://spckingston.ca>. The *Report Card* provides a summary of the state of homelessness in Kingston and Area employing a range of indicators to highlight the situation. Indicators focused on include: people living on the streets, the use of emergency shelters, food banks, drop-in health/service centers, meal programs and the housing situation in Kingston. *Shelter Voices* is a report on the survey done by residents of local shelters.

We look forward to public participation in the community consultation process on an ongoing basis. Your input is important to the long-term health of our community.

Expected Benefits

A number of benefits will be gained from the effective use of the Community Plan:

Providing a Continuum of Supports Approach

The *Community Plan* is designed to provide a continuum of supports approach to providing services, rather than a fragmented approach. The discussion with service providers indicated that a continuum approach is a demonstrated need at present. While efforts are currently in progress to smooth out service provision, a common situation faced by individuals is that there is often no access to transitional housing after completing the length of time receiving emergency shelter for which they are eligible.

“[Provide] access to free TRUCK STOP style services: showers, washing machines, clothing suitable for a job interview, telephone answering service for job application...”

Shelter Questionnaire Participant

Providing a Framework for Decision Making

The creation of the *Community Plan* will provide a detailed framework to assess proposals submitted for funding to ensure the projects selected best meet the needs identified. This *Community Plan* will also help avoid potential duplication of services or providing services which are not as high a priority as other identified service areas. Monitoring and updating priorities identified will need to be done on an ongoing basis.

“[To stop homelessness, provide] counselors, shelters (staff with experience and education), more supportive housing.”

Shelter Questionnaire Participant

Increasing Community Awareness

The *Community Plan* has clearly identified gaps in services which agencies and other community members can review to determine how they can be filled. The planning process has brought together and will continue to bring together individuals from various backgrounds including those not involved directly in providing services. This has increased the degree of co-operation between community groups, as well as creating opportunities for partnerships to be formed.

Communication with the general public regarding the needs of the homeless will be enhanced with the implementation of the *Community Plan*. Sharing this plan with the general public, various levels of government and groups not directly involved with the provision of services to the homeless will provide much needed information and promote understanding of the issues.

“[Homelessness is] not enough funds to live on... to run away from all sorts of abuse... [It's] not by choice. I don't like living this way all my life... being hungry, nowhere to sleep, not enough budget...”

Shelter Questionnaire Participant

COMMUNITY PLAN TO ADDRESS HOMELESSNESS AND HOUSING ISSUES

Initiated by the Supporting Communities Partnership Initiative (SCPI)

1. Objectives

The ongoing objectives of this *Community Plan* are:

- To support efforts that increase the supply of and sustain current occupancies in transitional, secondary, not-for-profit, affordable and supported housing and shelters.
- To bolster endeavours that meet the diverse needs and improve the well-being of people who are at risk of becoming, or who are, homeless. Ideally, this will help them to leave long-term homelessness behind, and ensure everyone has stable alternatives to living on the street.
- To build on and harness professional expertise in the community; create partnerships with the arts, education and business.
- To raise public awareness and understanding about homelessness.
- To enhance homelessness prevention and support systems, and homelessness service planning already underway, that build on community-based and public services resulting in more and better partnerships to address homelessness.
- To generate funding models that define clear priorities, complement other funding sources, and offer sustained benefit beyond the three years of Supportive Communities Partnership Initiative funding.

“I think that it is really hard on a person that is homeless. Living on the street day by day is really a tough life for anyone to go through wondering what the next day may bring. You are out there living on the street hoping that you can find a good steady job in order to support yourself so that you don’t have to live on the street no longer. Being homeless is no ball game.”

Shelter Questionnaire Participant

2. Geographic Area

This plan covers the city of Kingston, outlined on the following map. SCPI funds were only designated to the city of Kingston. However, community partners who have contact with the rural community have identified a need for programming and planning to address homelessness and housing in the surrounding areas of Kingston.

It has been recommended by the Advisory Board that a similar initiative to SCPI be undertaken in the rural area surrounding Kingston, specifically in the counties of South, Central and North Frontenac, Lennox & Addington, Leeds & Grenville, and the Islands. This is one possible next step in the planning process.

Figure 1: Map of New City of Kingston, 2000



3. Community Plan Development Process

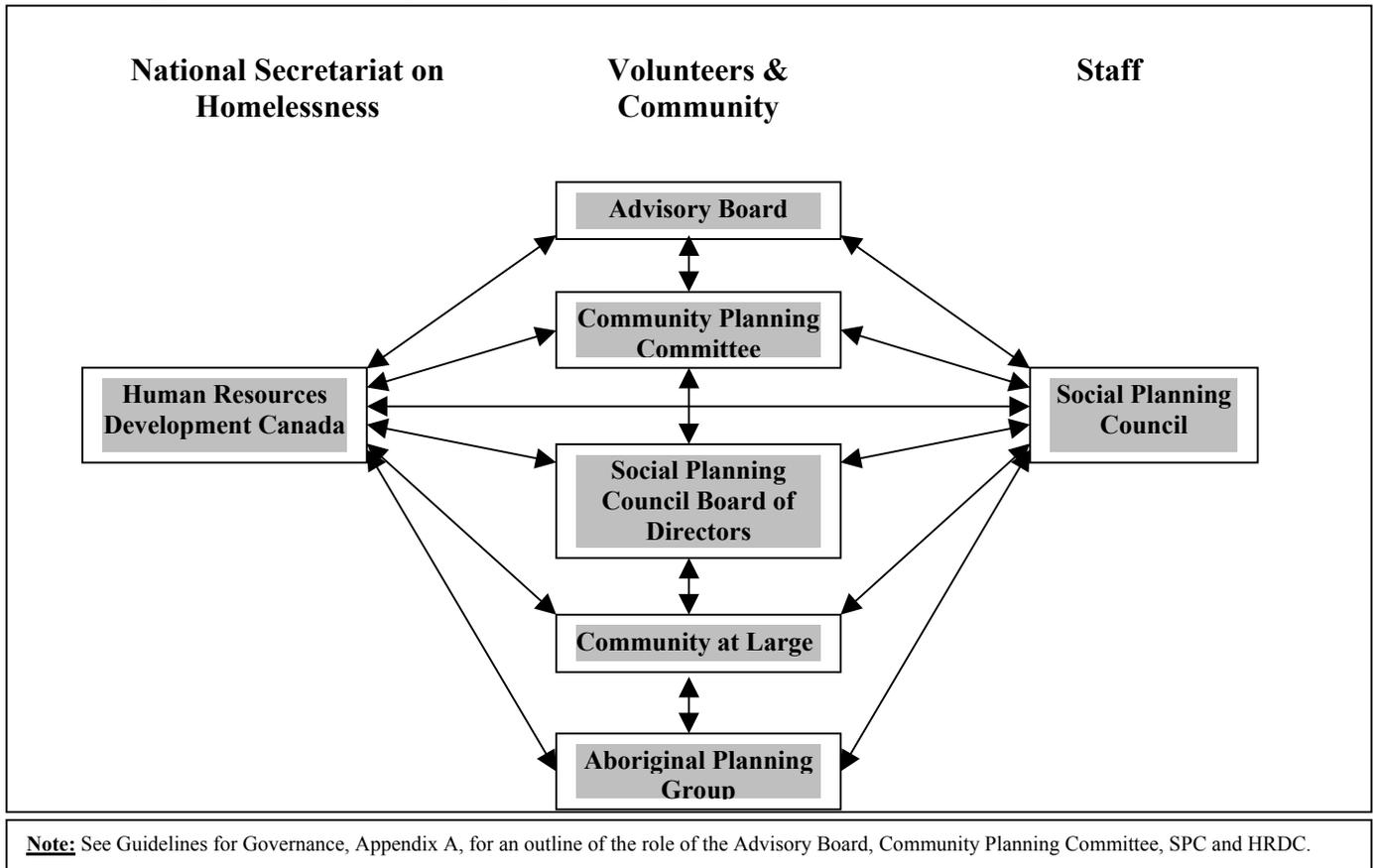
The Homelessness and Housing Advisory Board is comprised of members of the community that have an interest in housing, shelter and other issues surrounding the causes of and solutions for homelessness in Kingston. The role of the Advisory Board has been to advise the Social Planning Council on the creation of a community plan to reduce and prevent homelessness. It was also charged with the responsibility of reviewing all proposals submitted by community groups or agencies for SCPI funds. The board helped create a flexible community plan, to ensure present and future needs are met. Although all proposals for SCPI funding have been assessed with respect to the *Community Plan*, it will not be limited to supports from SCPI.

The members of the board will continue to provide input into:

- the *Community Plan*
- potential areas of collaboration among concerned agencies and service providers
- community projects which can address the needs identified in the *Community Plan*
- issues such as education and employment, which affect and/or are affected by homelessness
- sustainability of the *Community Plan* beyond SCPI timelines and funding
- proposals as set out by the Community Planning Committee or other community groups
- the development of a Communication Strategy, and the processes and protocols around the delivery of same.

3.1 The *Community Plan* was developed through a Shared Delivery Model:

Figure 2: Shared Delivery in Kingston



3.2 Accomplishments:

- From September 2000 to the present, weekly and monthly community meetings were held to discuss issues, define priorities, and formulate urgent need proposals for Kingston. An Advisory Board and a Community Planning Committee were formed.
- Invitations were issued to shelters for men, women and children, emergency food and clothing providers, not-for-profit housing providers, youth and youth workers, health service agencies, business organizations, community funding agencies, builders' associations, Aboriginal groups, the legal community, mental health service providers, seniors' associations, the educational sector, addictions support services, elected officials, tenant support groups, citizens' coalitions, the faith community and groups who work with the developmentally disabled. (A list of participating organizations is included in Appendix B).
- Most of the above-mentioned groups participated directly in meetings of either the Advisory Board or the Community Planning Committee, while some were informed of current activities by email or fax, and phone.
- On its website, the Social Planning Council posted parts of the *Community Plan* as they become available, links to related websites of interest, as well as a list of web and print resources.
- The Social Planning Council has developed a homelessness profile for the city of Kingston, entitled *A Report Card on Homelessness in Kingston*, which tells us about the extent of homelessness and its causes, as well as proposing solutions. This can be viewed on the SPC's website: <http://spckingston.ca>.
- Three community forums were held to invite public feedback on the draft of the *Community Plan*. They were scheduled two in the afternoon and one in the evening, and were locally advertised, to ensure all had an opportunity to participate.
- Aboriginal groups participated directly and indirectly in the planning process through membership on and participation in the Advisory Board and the Community Planning Committee, and through regular communication by email and fax. The Aboriginal community in Kingston also engaged in its own planning process. The resulting plan is included as an integral part of this plan in the Addendum.
- Key informant interviews with people using services and service providers have been completed. SPC researchers have analyzed the results, which are published under separate cover, and entitled *Shelter Voices: Key Informant Questionnaire Survey Findings*. This document can also be viewed on the SPC's website: <http://spckingston.ca>.
- Recommendations of the Community Planning Committee and the Advisory Board were prioritized and developed with input from the stakeholder interviews and the community forums.
- Under the auspices of SCPI, the Government of Canada provided funding to Kingston and other municipalities across Canada to address homelessness and housing issues. A Request for Urgent Needs Proposals from community organizations was advertised in 2000 and 2001, to address the four "urgent needs" that are identified in Section 5.3. Another Request for Proposals was issued more recently in March and May of 2002 to address, more broadly, the "gaps" identified in Section 5 of this *Community Plan*.

"It can happen to anyone. It will continue to increase. It is all of our responsibility to stop it and will take the community as a whole to do so."

Shelter Provider Questionnaire Participant

"Few people, if any, choose to become homeless. When they do, they find ways to survive. It is my opinion that we need to recognize the strength these people demonstrate."

Shelter Provider Questionnaire Participant

4. Assets and Gaps

4.1 Continuum of Supports:

The Kingston community intends to follow a “continuum of supports” approach to service provision. This is a holistic approach to addressing the needs of homeless individuals and families as well as those who are at risk of becoming homeless. It includes all supports and services that would be needed to assist a homeless person or someone at risk of becoming homeless to become self-sufficient, where possible, as well as a commitment to providing those supports and services in as smooth and seamless a fashion as possible.

The elements that have been included by Kingston service providers as necessary components of such a continuum of services in the area of housing and homelessness are:

- Emergency Shelters
- Transitional Housing
- Second Stage Housing
- Supportive Short- and Medium-Term Housing
- Supportive Long-Term Housing
- Not-for-Profit Housing
- Co-operative Housing
- Access to Housing Services
- Drop-In Centres
- Food Banks
- Meal Programs
- Nutrition Programs
- Furniture Banks and Sources
- Appliance Banks and Sources
- Storage for donations
- Storage for personal items
- Outreach Services
- Health Services
- Educational Services
- Employment and Pre-employment Services
- Life-Skills Programs
- Cultural Services
- Moving costs
- Child Care Supports
- Animal Health Care
- Eviction Prevention
- Discharge Planning
- Other Services in the continuum of supports

4.2 An Inventory of Community Capacity:

In order to think about what services may be missing from the continuum of supports in Kingston (the gaps), an inventory of what services already exist (the assets) was done (see Appendix C; p. 51). This inventory is an indicator of this community's ability to address the needs of its citizens, and provides a more positive approach to planning than a development perspective, which looks only at the needs and deficiencies of Kingston. The challenges that we face as a community can be more effectively addressed by building on existing capacity than by dwelling on our deficits. Every community has something it must work on but every community also has something it can build on. In other words, is the glass half empty or half full?

4.3 Method of Compiling the Assets and Gaps:

Several strategies were employed in defining Kingston's capacity to address the needs of homeless people, and of those people at risk of homelessness. Community meetings were held with the Advisory Board and Community Planning Committee assembled for this initiative, as well as with the Kingston Not-for-Profit Housing Association (KNPHA) and the City of Kingston Social Housing Division. A great deal of support and information came from these groups. Much of the information in the Inventory section of the table in Appendix C came from Kingston District Community Information Centre's *Where to Turn*, as well as from the KNPHA website and database. Numerous individual interviews were conducted with service providers who provided information about the demand for services in the community as well as the gaps in service. In July and August, the Social Planning Council hosted three community forums, which helped to capture still more detail, in addition to assisting in the process of prioritization.

4.4 Main Assets:

“I use these places, and thank God they are here for me and others...”
Shelter Questionnaire Participant

Each item in the inventory (Appendix C; p. 51) represents an asset for Kingston. We have much to be thankful for; our glass is most definitely half full. There are emergency shelters that provide excellently for the needs of many men, women, children and families. Although in high demand, supportive, transitional and affordable housing does exist, along with programs that facilitate access to it. Daily drop-in centres offer services, information and referrals as well as a place to relax, socialize, or simply belong. Food banks, meal and nutrition programs supply much needed sustenance to growing numbers. Clothing and furniture can be found for free or at low cost. We are beginning to have more outreach services, and although health care is often difficult to access, the quality of health services is extremely high due to links with higher education. Adult education, employment and pre-employment skills training opportunities exist, and Kingston has a rich cultural life. Several volunteer and salaried groups are working to improve the lives of all children and families in this community, not just those surviving on modest incomes. As is written in the Kingston Community Strategic Plan (adopted by City Council October 24, 2000):

“Kingston is a gem of a city... People love the ambiance, the natural setting, the countryside, the waterfront, the history, the heritage buildings and much more. There is a strong sense of community. We are proud of our residents, our volunteers, our community organizations and our neighbourhoods. Our people are knowledgeable, experienced and brimming with interesting and innovative ideas. The challenge is to make good use of this valuable resource.”

4.5 Main Gaps:

“[To stop homelessness, provide] more affordable housing and more help for the poor. The cutbacks in social services left it basically impossible for the poor to get an apartment.”
“Kingston needs more jobs so that homeless people can go to work that WANT to work.”
“We need more than 5 days at a shot and many more beds!!!”
Shelter Questionnaire Participants

The gaps identified by the service providers are categorized under the headings listed below as they appeared prior to the Community Forums, and are in **no order of priority**. Each heading has explanatory notes, as does each bullet point under the headings. Proposed initiatives around these gaps, as modified after the Community Forums, are suggested in Section 5, Priorities.

- A) Short-Term Accommodation and Housing**
- B) Transitional and Supportive Accommodation and Housing**
- C) Long-Term, Affordable Accommodation and Housing**
- D) Access to Housing**
- E) Outreach**
- F) Advocacy**
- G) Coordination of Discharge Planning**
- H) Data Collection**
- I) Other Activities which Help to Form a Continuum of Supports**

4.5.1 Short-Term Accommodation and Housing

Shelters and hostels provide emergency, or short-term, housing, for duration of time denoted by their own mandate. This can vary from 1-5 days up to six (6) weeks, or even up to six (6) months in some cases.

❖ Secure existing beds

Notes: Core funding for operational costs, especially for staffing, needs to be in place and secure as occupancy rates in existing shelters increase. Sometimes, the shelters cannot operate at full capacity because they cannot afford the staffing to allow for it. Without sustained funding for operational costs, the very existence of the shelters is jeopardised.

Another situation that can occur when the shelter is not full is that a person needing a space may have reached his or her maximum limit of stay in that shelter and therefore cannot continue to be accommodated. Shelter stay limits are brief, and do not always afford clients enough time to fulfil their needs, despite their best efforts and those of the shelter staff.

❖ Warm Room / Inn from the Cold

Notes: A warm room such as Inn from the Cold can accommodate shelter 'overflow'. It is a destination for those who have reached their maximum stay at shelters, or who have been asked to leave the shelters, for various reasons. Ideally, all people would be housed in transitional, supportive, or long-term independent housing. Realistically, this community must plan for the projected increase in the need for emergency shelters.

There is debate about whether this service should be provided year-round or just for the winter months. The Community Planning Committee has stated that the former is the case, and that those who are not being housed need not only a place all year, but also the support of staff with specific expertise.

Some people are hard to house, even within the emergency shelters, such as those who are dealing with severe mental illness, or those who are violent. There are inherent stresses to be faced - when living in close quarters with virtual strangers - which would be difficult for just about anyone to overcome.

4.5.2 Transitional and Supportive Accommodation and Housing

Transitional housing is a combination of housing and services intended to facilitate self-reliance and self-sufficiency. This housing is available to clients for up to three (3) years. There is often a requirement that residents be actively searching for long-term housing during their stay.

Supportive housing is public or not-for-profit owned housing with some form of care component, intended for people who cannot live independently. The tenure may be long-term.

Supportive and transitional housing keep at risk people housed. They reduce dependence on shelters, hospitals and other social services. They can provide pre-employment and life skills training. Secure housing helps in the preservation of dignity.

❖ Transitional housing

Notes: Even if the existing limits on shelter stays are extended, there is still a need for affordable housing beyond emergency shelter but before permanent independent living. A portion of the homeless and at risk population requires extra support to get back to a sustainable lifestyle. Everything from employment and life skills training and supervision of medication use, to simply an address to help secure social assistance can be offered in transitional housing. In order to avoid displacing currently housed community members, new, empty or converted buildings are needed. The Canada Mortgage and Housing Corporation (CMHC) presently estimate the vacancy rate in Kingston to be 1.8, so development of transitional housing in existing residential buildings is not feasible, as this would require the eviction of current tenants.

❖ **Supportive housing for people with mental health issues**

Notes: It is noteworthy that shelter providers have recently been included at the table with KFL&A Mental Health Coalition. There are great risks for emergency shelter staff not specifically trained to cope with people who have mental illnesses. The general view of service providers is that the proper caregivers, namely, trained mental health professionals, must address this issue.

❖ **Supportive housing for people with developmental challenges**

Notes: Often, it is preferable to house developmentally challenged people in family homes, as compared to group homes. Agencies frequently need to lobby the community for appropriate volunteer family situations for individuals whose own families are not able to support them. For those who cannot find a family placement, spaces in group homes are in relatively short supply.

Supports for those families that are able to keep their children at home are in high demand but short supply. There are aging parents currently caring for their children at home, who will not be able to do so for much longer since their physical ability to cope with their children's needs diminishes as they and their children grow older. Respite is needed for all families that support individuals with developmental challenges.

❖ **Supportive housing for seniors**

Notes: There is frequent coverage in the media of our aging society. Demographers predict that demand for seniors' services will increase in years to come, as the proportion of people over 65 increases due to a decreasing birth rate and improvements in health care. Not the least of these required services, even today, is supportive housing. It can be most beneficial to those who need help to carry out activities of daily living, who are frail or have physical disabilities and those who are living alone. It also benefits those who prefer to live with their peers in an environment where they can enjoy companionship and the freedom to pursue individual interests and lifestyles.

❖ **Youth Housing - supportive, affordable, transitional**

Notes: There is a great need for different types of housing for youth aged 16-24 in Kingston. The Kingston Youth Shelter Project remains busy, in the shelter, the drop-in, and in its employment program. Youth Net reports very slow turnover in their housing and related supports programs, causing varying wait lists as they struggle to meet the need. Rural areas have been identified as needing more supports, as more and more youth have to travel to Kingston for housing, educational, health and employment services they require. There is often public misperception about the position of homeless youth and what can be done to assist them. More public education on homeless youth issues is required.

❖ **Second Stage Housing**

Notes: Second stage housing is a subset of supportive with a lesser degree of support than emergency shelters, but more support than a conventional apartment. The length of stay in second-stage housing is up to one year. In recent years, second stage housing has given way to supportive permanent housing. A shift in policy has made this type of housing no longer available.

4.5.3 Long-Term, Affordable Accommodation and Housing

According to the SCPI glossary of terms, "Affordable Housing" is "a generic term for housing that is generally accessible to a wide segment of lower income wage earners. The cost of housing does not exceed 30% of post-tax [i.e. **net**] income." We know from Statistics Canada that in 1995, just over half of all Kingston tenants were paying more than 30% of their **gross** income on housing. The same year, just over one-quarter of all tenants were paying more than 50% of their gross income on housing. (*See Kingston's Report Card on Homelessness* [p.10], for a table outlining these statistics and comparing Kingston to other Ontario communities.

The Canada Mortgage and Housing Corporation (CMHC) currently estimates Kingston's vacancy rate to be 1.8%, which means that market rate housing is difficult to secure, and quite often not affordable.

Kingston's largest not-for-profit housing provider, Kingston Frontenac Housing Corporation, had a wait list of 1,220 households in April of 2001. The same month, their homeless list had 133 households on it, of which 89 wanted one-bedroom apartments. There is particular need for singles accommodation, which mirrors the general need in the Kingston community.

This community has identified a need for immediate action on the part of all levels of government if current housing is to be sustained and new affordable housing is to be constructed in Kingston.

❖ **National Housing Policy**

Notes: A priority need has been identified for comprehensive federal and provincial housing policies toward a consistent national effort to end homelessness. It is the belief of the Advisory Board and the Community Planning Committee that not-for-profit housing cannot be built without multi-level government support. Evidence is provided by the lack of not-for-profit housing starts in Kingston since first the federal and then the provincial governments withdrew funding for new not-for-profit housing (see the accompanying document, *Kingston's Report Card on Homelessness*, for more discussion of this matter).

❖ **Affordable housing (especially one-bedroom apartments)**

Notes: As outlined above, there is a dearth of affordable housing in Kingston; indeed, it has been commented that 'affordable' housing is no longer affordable. Certainly the cost of utilities, which is considered part of housing costs, is on the rise as a result of increasing fuel costs. Large proportions of Kingston tenants are paying well in excess of the government's definition of affordable housing.

❖ **Establish status of existing affordable housing (physical condition, wait lists, empty units)**

Notes: This task is partly finished in the form of this Community Plan, but should be ongoing because of changes in the marketplace. There are empty market rent units only in not-for-profit housing. Physical condition could be established in a future study.

4.5.4 Access to housing

Many homeless and at risk people find it difficult to access affordable, appropriate housing. Some examples of programs and activities that enhance access to housing are rent banks and housing registries. Access is improved if services are co-located, and if the criteria are consistent between similar programs offering assistance in the area.

❖ **Improve access to existing subsidized housing:**

Notes: Households that are eligible for subsidized housing often find it difficult to access. They frequently require help with the costs of repairs, appliances, and deposits for utilities hook-up, as well as debt reduction.

❖ **Tenant Assist/Rent & Utilities Bank: Funding and Alternatives**

Notes: Those who are already housed, as was noted above, still experience affordability problems, and can be at risk of eviction for arrears of rent. Sustainability is a problem for rent & utilities banks, as clients are sometimes not able, or not willing, to repay their loans. The criteria for such programs are numerous and stringent, making them difficult for people to access (see Appendix C; 51). Nevertheless the Tenant Assist Fund in Kingston has had numerous 'customers'. There is currently a moratorium on the program as the funds have been expended but not yet repaid.

❖ **New program 'Door Ways Fund' from private individuals and corporation.**

Notes: This program, to be administered by the Housing Help Centre, is now available to people who are currently homeless. It provides loans to a maximum of \$700 to help secure permanent accommodation.

4.5.5 Outreach

Outreach services are brought to the consumer, rather than the consumer coming to a site where service is provided. This approach is considered vital in helping marginalized people to improve their life circumstances. Outreach workers can do business in many different locations, and provide a variety of assistance. Different types of outreach are being supplied by numerous community agencies in Kingston (see Appendix C).

❖ **Youth Transition Worker**

Notes: A youth transition worker currently does outreach specifically with people aged 16 to 24 for the purpose of improving their quality of life. For example, s/he might help to secure new or lost identification, advocate with a landlord, or provide transportation to community appointments. This person is working out of numerous community sites.

❖ **Outreach for adults and youth would not or cannot come to shelters for various reasons**

Notes: Resources and support are needed for those who live on the street. Some individuals choose not to employ the services of the shelters. Others have exhausted their welcome due to violent or otherwise unsafe behaviour. Still others have simply reached the limit of time they can stay. A report has been written of 30 interviews done with street affected people, and is available from Kingston's Home Base Housing.

On the street services proposed will cost \$46,150 per year. HRDC, Provincial Homelessness Initiative Funds (PHIF), the Downtown Business Improvement Area and the City of Kingston support a street outreach worker and a youth transition worker currently in place, but this is just for one year. *To continue, the program needs sustainable funding.* Outreach is also being extended by the Street Health Centre and Kingston Employment for Youth Services.

❖ **Extend psychiatric services to shelters**

Notes: A qualified and highly trained outreach worker is needed to assist persons with mental health problems who are staying in shelters.

❖ **Regular and specialized health practice for homeless people**

Notes: Health services in Kingston are difficult to access, and there is a shortage of general practitioners. Medical care is particularly difficult to access for homeless people, who must go to Emergency at one of the hospitals, or to one of the three after hours clinics, of which two are in Kingston West. Homeless people need to be able to access medical facilities where they feel comfortable, such as the Street Health Clinic downtown. There are a nurse practitioner and doctors currently working out of that clinic, but the practitioner especially is working at capacity, and might not be able to visit other sites, such as the shelters. Currently, one optical business assists some shelter clients, but there is a need for a specialist in eye care. There is also need in the areas of foot care for diabetics, seniors and people living on the street. Designated programming for youth is especially urgent. Dental care is also a gap.

4.5.6 Advocacy

Not all, but many, homeless and at risk people find it hard to advocate on their own behalf, for various reasons. Poverty, literacy level, and feeling isolated, hopeless or disenfranchised can all make self-promotion extremely difficult. When advocacy supports are required, they should be well coordinated, widely advertised, and accessible.

❖ **Utilities - warning system on cut-off/advocacy**

Notes: More utilities support is needed to reduce evictions in Kingston. The criteria for the Share the Warmth program are necessarily stringent due to funding limitations – it is only available to seniors, families, and persons with disabilities. Single adults are not eligible, except in very rare cases. Also, the program can offer no help with arrears. Early intervention would be better to prevent utilities related evictions.

❖ **Third party organization to monitor landlords**

Notes: Tenants have avenues of redress when disputes arise, such as the tribunal, the City's complaints unit, the Board of Directors of their housing provider or City Councillor, but these are restrictive in some respects. Not everyone is eligible for Legal Aid supports. The tribunal will only address issues under the Tenant Protection Act. City Councillors may not feel this is their mandate, and the City complaints unit is restricted to providers under its authority. People may not have the literacy skills necessary to put complaints in writing to their Board, and if they have already gone that route, that could likely be the end of the appeals process.

❖ **Neutral Ombudsman for people who are accessing emergency services**

Notes: There is a need for an independent advocate associated with a private agency and privately funded, especially for youth, seniors and persons with mental health issues. A third party would provide direction, focus and resources to individuals who may not have the means to do so for themselves.

❖ **Tenant support worker and eviction prevention**

Notes: A service is needed to facilitate landlord-tenant interactions, in particular the legal aspects around rights, responsibilities and evictions. Such a service would benefit tenants, housing providers and landlords, by educating all concerned and increasing the sensitivity of the latter, to mental health issues, cultural diversity and discrimination. This is especially important for youth, aboriginal people, people on fixed income, and people with mental illness. Such a service would also benefit the community at large.

4.5.7 Coordination of discharge planning

There are a large number of hospitals and correctional institutions in Kingston. Many people are effectively homeless upon discharge, and thus require supports both before and after their release into the community. Coordination of discharge planning and related services has been identified by the Advisory Board and the Community Planning Committee as an area of need in Kingston.

❖ **Coordination of discharge planning (hospitals, correctional facilities, etc.)**

Notes: Studies on homelessness tell us that one of the major pathways into homelessness is via institutional discharges, prior to appropriate housing and social assistance options being put in place. A possible solution, therefore, will be to co-ordinate with Kingston's correctional and psychiatric institutions in order to plan with front line service providers to ensure that discharged individuals do not end up on the streets.

4.5.8 Data collection

There is disagreement in the research community about how to define 'who is homeless'. However, there is no argument that once defined, this part of our society is difficult to count. Good data is of paramount importance when soliciting funding and other supports, but this must be measured against maintaining the fundamental dignity and privacy of the individuals and families in question.

❖ **Estimate the number of homeless & at risk people**

Notes: There is difficulty in providing services to people, and supporting arguments for further funding or social change, when it is hard to collect accurate data on this population (see Appendix D and the accompanying document to this Plan, *Kingston's Report Card on Homelessness*, pp. 1-4, for further discussion on this matter).

❖ **Data collection is not consistent between shelters**

Notes: Agencies and service providers involved with homeless people need to standardize the collection of information. It is proposed that this endeavour be facilitated by the implementation of CMHC's Homeless Individuals and Families Information Systems (HIFIS) software, which allows the tracking of people with little or no infringement on privacy. It is intended to help provide a basic understanding of Canada's homeless population by identifying: the unique characteristics of the shelter population; the types of services homeless people most frequently use; the types of situations that most frequently lead to homelessness and; the types of support and services required to remove people from a possible homelessness situation.

4.5.9 Other activities which help to form a continuum of supports

To reiterate, a continuum of supports is the holistic approach to addressing the needs of homeless individuals used within this community plan. Such a continuum includes all supports and services that would be needed to assist a homeless person, or someone at risk of becoming homeless, to become self-sufficient where possible.

❖ **Municipal share of National Child Benefit to be distributed directly to individuals/families.**

Notes: The federal government provides a National Child Tax Benefit to low income families in Canada. In Ontario, all low income families receive their cheques from the federal government in the mail. However, social assistance payments to families relying on Ontario Works and the Ontario Disability Support Program are reduced by an amount equivalent to the National Child Tax benefit supplement. The Province retains 80% of that money to spend on programming for children and families, and redistributes 20% of it to municipalities. Up to now the City of Kingston provided these 'reinvestment funds' to agencies for specialized programs that meet the objectives of reducing the depth of poverty and increasing attachment to the workforce. A need was identified in this community to redistribute that 20% to the intended recipients, the families, in a more direct manner than through agency programs. .

❖ **Transportation**

Notes: Different levels of transportation service are supplied by different school boards, depending on the location of the shelter and age of the child temporarily living there. This is a major issue for the rural parts of the City of Kingston, as well as the surrounding rural communities. .

❖ **Animal care**

Notes: The costs of animal health care are increasing; one family pet with an illness can put an at risk household closer to homelessness. Homeless people often have pets, too. Animals provide companionship to socially isolated people, and in some cases, dogs can protect street dwellers from potential harm. These animals cannot be accommodated in shelters, for health reasons.

❖ **Storage for donations of clothing, furniture and appliances**

Notes: This is currently being done on an *ad hoc* basis by the Low Income Needs Coalition, Housing Help Centre, St. Vincent de Paul, and other agencies. Permanent or stable storage is needed, as well as a lead organization willing to accept the liability of such storage.

❖ **Storage and moving costs for personal items of homeless people, both long- and short-term**

Notes: This would allow temporarily non-housed people to keep their belongings, thereby saving them some money when they do not have to replace these items upon securing housing. No free long-term storage of personal effects currently exists in Kingston.

There is very little short-term storage available to homeless people in Kingston.

5. Priorities: Strategic Directions for the Present and Future

“It’s a frustrating cycle that seems very hard to escape, however my circumstances aren’t as bad as others. I’ve got a step-by-step plan to elevate [myself] off street level.”

Shelter Questionnaire Participant

5.1 Prioritization Process

The Advisory Board prioritized the significant gaps in service after considerable consultation, which began in September 2000, with input from the Community Planning Committee, the community forums, and the preliminary results of the questionnaires. They also based their decision on the inventory, and their own considerable collective expertise on the needs of Kingston.

5.2 Results of the Community Forums, as a part of the Prioritization Process

Process and Rationale: The Social Planning Council hosted three community forums in late July and early August of 2001. They were widely advertised in several local newspapers, including free community publications. Posters were put up in local agencies, on community bulletin boards, and the two main library locations. A radio piece on the project also mentioned the dates, times and locations of the forums.

Inviting the community to participate in planning is a key part of the planning process. A forum promotes resident participation in activities relating to the issues, and cohesion among previously isolated individuals. The process further empowers residents, and sometimes neighbourhood associations, to plan and organize in the community. It can augment co-operation and communication between residents, service providers, politicians and municipal, provincial and federal staff, etc. It may identify community civic leaders, and promote resident ownership of programs, activities and outcomes of projects.

The results from these forums were used to inform the process of prioritization of the identified gaps. It should be reiterated that the Advisory Board based its decisions not only on the community forums, but also on advice from the Community Planning Committee and on their own good judgement as a panel of experts in housing and homelessness issues in Kingston.

A Special Note on National Housing Policy: This issue was removed from the main body of the table because the participants at each community forum acknowledged it (in conjunction with calls to lobby government) as an umbrella point which touches on all of the other issues in one way or another. **Consequently, it was declared the top priority at each of the forums.** Many people emphasized the importance of such a policy. This is why it has been included at the top of the table. For more on this issue, please see page 16, below.

Summaries: For a summary of the discussion from each forum, please see Appendix F.

Table 1: Results from the three Community Forums--July 16, July 31 & August 1, 2001								
Issue	Forum #1 (38 Voters)		Forum #2 (22 Voters)		Forum #3 (13 Voters)		Total Votes	Ranking
	Actual Votes received	Votes as % of # of voters	Actual Votes received	Votes as % of # of voters	Actual Votes received	Votes as % of # of voters	Based on the three forums	Ranking
National Housing Policy/Lobbying Government	9	23.7	7	31.8	2	15.4	18	Top Priority
Supportive Housing - Mental Health Issues	19	50	8	36.4	10	76.9	37	1
Secure Existing Beds	18	47.4	8	36.4	6	46.2	32	2
Affordable Housing (esp. One bedroom units)	5	13.2	19	86.4	6	46.2	30	3
Transitional Housing	21	55.3	3	13.6	4	31	28	4
Youth Housing	14	36.8	5	22.7	7	53.8	26	5
Warm Room/Inn from the Cold	8	21.1	7	31.8	7	53.8	22	6
Tenant Support Worker & Eviction Prevention	7	18.4	10	45.5	2	15.4	19	7
Tenant Assist/Rent Bank	9	23.7	5	22.7	2	15.4	16	8
Access to existing subsidized housing	11	28.9	2	9.1	2	15.4	15	9
Extend psychiatric services to shelters	8	21.1	7	31.8	0	0	15	9
Regular and specialized health care	8	21.1	2	9.1	4	31	14	10
Supportive Housing – Seniors	12	31.1	2	9.1	0	0	14	10
Data Collection	8	21.1	4	18.2	1	7.7	13	11

Utilities advocacy	3	7.9	8	36.4	2	15.4	13	11
Coordination of Discharge Planning	11	28.9	0	0	0	0	11	12
Status of existing affordable housing	2	5.2	4	18.2	1	7.7	7	13
Outreach for adults and youth	3	7.9	0	0	3	23.1	6	14
Second-Stage Housing	5	13.2	0	0	1	7.7	6	14
Youth Transition Worker	3	7.9	3	13.6	0	0	6	14
Supportive Housing - Developmental Challenges	1	2.6	4	18.2	0	0	5	15
Storage for donations - furniture, appliances, etc.	1	2.6	0	0	1	7.7	2	16
Door ways Fund	0	0	1	4.5	0	0	1	17
Estimate Number of Homeless	0	0	0	0	1	7.7	1	17
Neutral Ombudsman	1	2.6	0	0	0	0	1	17
Storage for personal items of the homeless	0	0	0	0	1	7.7	1	17
Third-party organization to monitor landlords	1	2.6	0	0	0	0	1	17
Animal Care	0	0	0	0	0	0	0	18
Transportation for Children	0	0	0	0	0	0	0	18

*Doorways Fund is already in existence, and should have been part of the category "Tenant Assist/Rent Bank".

5.3 Urgent needs

“People need to hit rock bottom to get the help they need to help themselves...”
Shelter Questionnaire Participant

The Advisory Board voted separately on four urgent needs for the year 2001-2002. They are:

- a homelessness prevention worker
- a 24-hour, 7-days-a-week overflow shelter
- a street outreach worker, and
- the extension of psychiatric services to Kingston’s shelters.

These items are included in Table 2, *Priorities and Proposed Initiatives* (p. 19) because they are both urgent and ongoing needs in Kingston, and must therefore be planned for, funded and evaluated in the long-term.

5.4 Further prioritization

While acknowledging each one to be intrinsically interconnected, the Advisory Board further used its judgement to refine the gaps from the community forums. The result is the list of twenty specific elements in the continuum of services found in *Table 2: Priorities and Proposed Initiatives* (p. 19). A description of each item follows in the table, along with estimated costs of to address these gaps.

The twenty gaps were voted on using a scale of one to twenty, where one is the most important and twenty is the least important. The votes were added up, and the gap with the lowest total became the top priority, the second lowest became priority two and so on, until the one with the largest total became the lowest priority.

Table 2 follows on page 19, but first follows a discussion of selected issues that were discussed.

5.4.1 National Housing Policy:

“Government should get more housing and not have such a long waiting list for low income housing.”
Shelter Questionnaire Participant

The impact of the lack of a National Housing Policy in Canada cannot be measured or stressed too much. We know that homelessness is increasing across the nation, with children and families being the fastest growing subsection. Present and past municipal, provincial and federal governments are to be commended for their efforts to address homelessness. However, much more needs to be done. The federal government discontinued new funding for social housing in 1993, as did the Province of Ontario in 1995. It is the consensus of the Advisory Board that affordable housing cannot be created by the removal of governments from the housing equation. This community has identified a need for immediate action on the part of all levels of government if current housing is to be sustained and new affordable housing is to be constructed in Kingston.

At the community forums, a National Housing Policy was identified as the number one priority, an ‘umbrella’ issue which covers all other matters on homelessness and housing across the nation.

Obviously the creation of a National Housing Policy is beyond the scope of this Advisory Board. However, the Advisory Board will be taking steps to unite with other communities and organizations such as the Ontario Non-Profit Housing Association, the Canadian Housing Renewal Association, the Co-operative Housing Federation of Canada, the Federation of Canadian Municipalities and others, in calling for such legislation at the national and provincial level. For example, as a part of the implementation of the

Community Plan, SPC Kingston will contact all SCPI communities across the nation, with the idea of working together toward developing long-term solutions. This way, any proposals put forth will reflect the needs of the diverse yet united communities. Of course, community members are encouraged to advocate on their own through letters, to the editor of local newspapers and other periodicals, to Members of Parliament and Members of Provincial Parliament, and to other government officials.

5.4.2 Status of existing affordable housing:

“Municipal, Provincial and Federal governments must build affordable housing. Kingston lacks housing. Housing that is available is expensive and usually below standards.”
Shelter Provider Questionnaire Participant

Although identified as being important, this item was removed from the prioritization process. It was considered to be beyond the means and responsibility of the Advisory Board to track the upkeep and maintenance of housing across Kingston, especially when publicly assigned providers are already legally responsible for this, as are private housing suppliers. It is thought that the homelessness prevention worker recommended as a top priority would help in tenant advocacy around these matters, as necessary. Also, the item ‘affordable housing’ in *Table 2: Priorities and Proposed Initiatives* (p. 19) addresses issues of understanding and analyzing the need for housing *vis-à-vis* homelessness, and suggests a planning approach to ensure availability.

5.4.3 Transportation:

Although formal studies have not been done, it is theorised that many rural people use Kingston’s services as they relate to homelessness and housing. As seen on the map on page 2 of this Plan, the new City of Kingston’s city limits extend far north of Highway 401 past such communities as Elginburg and Glenvale. The city reaches far east of both Joyceville Institution up Highway 15 and Canadian Forces Base up Highway 2, and almost as far west as Amherstview. In fact, for the purposes of the Provincial government’s Early Years Challenge Fund, Kingston has been designated as a rural community. There are issues of transportation to their own schools for children staying in area shelters; different school boards, depending on location of the shelter and age of the child living there, supply different levels of transportation service. Shelters can work with school boards on flexibility of policies. The City of Kingston is currently working on its Transportation Master Plan, including the needs of rural and urban users, as a part of the long range planning for the Kingston Community Strategic Plan being implemented between 2000 and 2010.

Transportation is frequently an isolating factor for rural citizens, both within and without Kingston city limits, as was reported to the city by Central Frontenac Community Services (CFCS) in their report on homelessness, which focussed on the needs of youth and women single parents. According to the report, populations especially at risk resulting from isolation due to lack of transportation are seniors, disabled persons, youth, and battered women and their children. Other planning groups, such as the newly formed Children’s Service Steering Committee, have recognised this gap and are looking at ways to address it, as are CFCS and their northern counterpart, North Frontenac Community Services (NFCS). CFCS and NFCS both run transportation assistance programs currently with unsustainable funding.

Transportation is, for the most part, a rural issue, and the Social Planning Council is currently seeking funding for a study and pilot project, modelled on the Supporting Communities Partnership Initiative, to add a rural component to this community plan in future. The communities surrounding Kingston are separate, but intrinsically intertwined with Kingston life, not only by accessing its services, but also by adding in countless ways to the vibrancy of this city.

5.4.4 Municipal share of National Child Benefit (NCB) to be distributed directly to individuals/families:

This issue, identified at the beginning of the planning process and described on pages 12 & 13, has since been addressed by the City of Kingston. There was considerable community advocacy with the City to

address this need in Kingston to redistribute the NCB to the intended recipients, the families, in a more direct manner than through agency programs.

As a result, City Council recently voted to support a new program, to be known as the Kingston Entitlement Access Program (KEAP), which put out a Request for Proposals (RFP) on June 18th, 2001 for a third party agency to administer the NCB funds as charitable donations. North Kingston Community Health Centre, which provided organizational support to the Child Tax Action Coalition that advocated for such a program, has since been chosen as the provider agency. People will be able to access all of their allotted funds at one time, or in several instalments until they reach their limit of the 20% amount available. Monies will be distributed in the form of gift certificates, direct cheques or third party cheques that will go towards, for example, rent or utility bills; so that people can access the money in multiple ways which meet their needs.

Additionally, programs which have previously benefited from the child tax reinvestment will continue to be supported by the City for at least one more year so that organizations have time to access alternative funding. The funding was originally allotted for two years, and the City is honouring that commitment.

5.4.5 Third-party organization to monitor landlords and Neutral Ombudsman for people who are accessing emergency services:

Community members did not vote for these items as priorities at the community forums. The decision of the Advisory Board was that tenants have places they can turn to when disputes arise, such as the Ontario Rental Housing Tribunal, the City's complaints unit, the Board of Directors of their housing provider or City Councillor, although these are restrictive in some respects. An assessment of the ability of existing entities to deal with these issues should be done before creating new entities. A homelessness prevention worker as outlined in *Table 2: Priorities and Proposed Initiatives* (p. 19) could more appropriately provide advocacy, education, direction, focus and resources to individuals who may not have the means to do so for themselves.

“...People need more addiction counsellors as well as counsellors to help with housing help. More money is needed for those on social services and more affordable housing is needed.”

Shelters Questionnaire Participant

Table 2: Priorities and Proposed Initiatives (N.B. Rough estimates of initiative costs may change)

Priorities and Proposed Initiatives	Estimated Cost Year 2001/2002	Estimated Cost Year 2002/2003
Identified Priority Gap #1: Homeless Prevention Worker		
<i>Description of need:</i> A tenant support worker is needed to preserve existing tenancies in Kingston, especially in social housing units. Such a person would fulfill many objectives. The first is facilitation of landlord-tenant interactions, in particular the legal aspects around rights, responsibilities and evictions. This would benefit tenants, housing providers and landlords, by educating all concerned and increasing the sensitivity of the latter, to mental health issues, cultural diversity and discrimination. This is especially important for youth, seniors, aboriginal people, people on fixed income, and people with mental illness. Such a service would benefit the community at large, as well. The worker could help tenants to access rent and utilities banks, energy Co-operatives and other tenant supports as possible and necessary, and advocate with organizations supplying these services for the client. This person could facilitate the development of new and existing services as required in the community, and make referrals to local agencies.		
<i>Proposed Initiative:</i> An individual to work with tenants, services providers and agencies towards the prevention of homelessness for tenants through: <ul style="list-style-type: none"> • advocacy & referral, • the development of adequate support systems including life skills training, family support, credit and debt counseling, crisis intervention and prevention, • work with tenancy rights and responsibilities with tenants, landlords, tenant related services and early intervention and eviction risk processes, • Coordination of services and activities that strengthen tenancy within the community. 	\$66,000	\$51,060
<i>Proposed Initiative:</i> Advocate on behalf of tenants that the cost of utilities be included in the cost of rent. Also advocate for funding so that The Salvation Army's Share the Warmth program could extend criteria to include single adults. City of Kingston, Ontario Works and Utilities Kingston already have an internal review process for arrears in utilities. Consult with team members to look at the warning system for cut-off of utilities.	<i>Awaiting policy statement from the Service Manager. A directive will come from the City of Kingston Department of Community Services Social Housing Division after consulting with KNPHA Advisory group, Ontario Works and the Ministry of Housing regarding the interpretations of the Housing Act, specifically the regulations on arrears.</i>	
Identified Priority Gap #2: Overflow Shelter		
<i>Description of need:</i> This type of facility can accommodate shelter 'overflow'. It is a destination for those who have reached their maximum stay at shelters, or who have been asked to leave the shelters, for various reasons. Ideally, all people would be housed in transitional, supportive, or long-term independent housing. Realistically, this community must plan for the projected increase in the need for emergency shelters. There is debate about whether this service should be provided year-round or just for the winter months. The Community Planning Committee has stated that the former is the case, and that those who are not being housed need not only a place all year, but also the support of staff with specific expertise. Some people are hard to house, even within the emergency shelters, such as those who are dealing with severe mental illness, or those who are violent. There are inherent stresses to be faced - when living in close quarters with virtual strangers - which would be difficult for just about anyone to overcome. Funders need to work together with shelters, the community and institutional mental health providers to address the needs of individuals with issues that prevent shelter stay.		

<p>Proposed Initiative: This facility should provide or ensure:</p> <ul style="list-style-type: none"> • a functionally organized and gender sensitive space for drop-in or overnight stays only, • a secure facility for personal belongings, wash up, laundry, small meals preparation, etc. • separate rooms for crisis intervention, <p>1. professional staff are trained and adequate staff-to-client ratios are ensured.</p>	<p>November 2001-March 2002 (5 months) \$80,000 (assumes donated space, i.e. costs of mortgage and repairs excluded)</p>	<p>\$192,000 (12 months) (assumes donated space, i.e. costs of mortgage and repairs excluded)</p>
<p>Proposed Initiative: For the future, examine possible sites for creation of new shelters or supportive housing for people who are hard to house and develop a plan for sheltering homeless people that identifies buildings that could accommodate overflow demand (particularly during cold weather months). Use unused public buildings as first priority sites to develop not-for-profit emergency housing based on "emergency public use exceptions" to zoning. Explore feasibility of providing a position paper to the Planning Board which will identify what buildings or lands are available, define density, location, cost analysis, and provide strong reasoning for any proposed changes in municipal zoning bylaws.</p>	<p><i>Unable to find co-sponsors at this time.</i></p> <p><i>Cost of staff time of concerned parties is unknown.</i></p>	
<p>Proposed Initiative: Shelters and other service providers should meet to explore creative staffing possibilities to provide shelters with the expertise required to cope with populations who present specialized difficulties.</p>	<p><i>Cost of staff time of concerned parties is unknown.</i></p>	
<p>Proposed Initiative: Enhance communication between rural and urban Kingston. Most services are in the urban area, and are difficult to access for rural residents, requiring them to come to the urban areas.</p>	<p><i>Cost of staff time of concerned parties is unknown.</i></p>	
<p>Identified Priority Gap #3: Extend Psychiatric Services to Shelters</p>		
<p>Description of need: Provision of mental health and addictions services, in the form of a qualified and highly trained outreach worker, is needed to assist persons with mental illnesses, and/or addictions, who are staying in the shelters. Shelter staff have also asked for training in this field to help them cope, but the shelters are not funded to provide this education. Shelters and local mental health service providers have begun to consult.</p>		
<p>Proposed Initiative: Skilled individual(s) will provide outreach and support to local shelters, with a focus on mental health and addictions issues. Psychiatric Nurse(s), Psychiatric Social Worker(s), Community Mental Health Worker(s) are needed, or a person connected with existing agencies, with proven expertise in the areas of:</p> <ul style="list-style-type: none"> • psychiatric, agency and institutional referrals • addictions and mental health issues • crisis intervention and on-call services • discharge planning and case management • coordinating of services (between shelters, social service agencies, outreach workers) 	<p><i>Cost of staff time of concerned parties is unknown.</i></p>	<p><i>Cost of staff time of concerned parties is unknown.</i></p>
<p>Proposed Initiative: Train shelter staff in the area of mental health and addictions services.</p>	<p><i>Costs for workshops vary with expertise of presenters and are unknown at this time. To replace and pay 3 staff from each of six shelters twice a year would total approximately \$1,500.</i></p>	<p><i>\$1,500 + cost of presenters.</i></p>

Identified Priority Gap #4: Secure Existing Beds	
<i>Description of need:</i> Shelters and hostels provide emergency, or short-term, housing, for duration of time denoted by their own mandate. This can vary from 1-5 days up to six (6) weeks, or even up to six (6) months in some cases. Core funding for operational costs, especially for staffing, needs to be in place and secure as occupancy rates in existing shelters increase. Sometimes, the shelters cannot operate at full capacity because they cannot afford the staffing to allow for it. Without sustained funding for operational costs, the very existence of the shelters is jeopardized. Another situation that can occur when the shelter is not full is that a person needing a space may have reached his or her maximum limit of stay in that shelter and therefore cannot continue to be accommodated. Shelter stay limits are brief, and do not always afford clients enough time to fulfill their needs, despite their best efforts and those of the shelter staff. Recently, Kingston City Council voted to increase shelter stays to 15 days at shelters where the limit was previously five (5) days. This is certainly a step in the right direction, but core funding continues to be at risk. This extension may increase the need for overflow space at a overflow shelter. For example, one shelter finds it cannot extend stays for the moment due to high numbers of clientele who would be turned away if others could stay for 15 days.	
<i>Proposed Initiative:</i> The City of Kingston Department of Community Services Social Housing Division has identified core funding as an issue already, and will invite the shelters to identify four to six key business functions common to each of them. The shelters, as a part of this exercise, will review existing funding levels and other funding sources, identify shortfalls in common core funding, and determine what funding levels are required to fill the gap and allow them to operate at capacity.	<i>Cost of staff time of concerned parties is unknown.</i>
Identified Priority Gap #5 Coordination of Discharge Planning – supports in shelters	
<i>Description of need:</i> Studies on homelessness tell us that one of the major pathways into homelessness is via institutional discharges, prior to appropriate housing and social assistance options being put in place.	
<i>Proposed Initiative:</i> Coordinate with Kingston’s correctional and psychiatric institutions in order to plan with front-line service providers to ensure that discharged individuals do not end up on the streets.	<i>Cost of these aspects of implementation of the Plan is unknown.</i>
Identified Priority Gap #6 Affordable housing, especially accommodation for one- and two-person households:	
<i>Description of need:</i> According to the SCPI glossary of terms, "Affordable Housing" is "a generic term for housing that is generally accessible to a wide segment of lower income wage earners. The cost of housing does not exceed 30% of post tax [i.e. net] income." We know from Statistics Canada that in 1995, just over half of all Kingston tenants were paying more than 30% of their gross income on housing. The same year, just over one-quarter of all tenants were paying more than 50% of their gross income on housing. (See Kingston's Report Card on Homelessness [p.10], co-document to this Plan, for a table outlining these statistics and comparing Kingston to other Ontario communities). The Canada Mortgage and Housing Corporation (CMHC) estimates Kingston's vacancy rate to be 1.8%, which means that market rate housing is difficult to secure, and quite often not affordable. Kingston's largest not-for-profit housing provider, Kingston Frontenac Housing Corporation, had a wait list of 1,220 households in April of 2001. The same month, their homeless list had 133 households on it, of which 89 wanted one-bedroom apartments. There is particular demand for one-bedroom accommodation, which mirrors the general need in the Kingston community. As outlined above, affordable housing in Kingston is scarce; indeed, it has been commented that 'affordable' housing is no longer affordable. Certainly the cost of utilities, which is considered part of housing costs, is on the rise as a result of increasing fuel costs. Large proportions of Kingston tenants are paying well in excess of the definition of affordable housing, according to government guidelines.	
<i>Proposed Initiative:</i> Contact the Greater Kingston Community Foundation regarding the creation of a community based housing investment trust fund to collect and manage resources for the development of innovative low cost housing and special needs housing projects.	

<p>Proposed Initiative: For the future, as a part of a Smart Growth planning initiative, consult with the Planning Department of the City of Kingston to examine possible sites for the creation of new affordable housing. Explore the feasibility of providing a position paper to the Planning Board which will identify what buildings or lands are available, define density, location, cost analysis, and provide strong reasoning for any proposed changes in municipal zoning bylaws or development incentives as suggested in the next two boxes. Use unused public buildings as first priority sites to develop low cost housing. If unsuccessful, request that developers of this site or others donate money to a fund for social housing/affordable housing projects as outlined below. Ensure sufficient housing is planned for aboriginal and youth groups as a part of any initiative.</p> <p>The Ontario Government’s website states that “Making Smart Growth work will require co-operation from all levels of government to integrate decisions on issues such as transportation, infrastructure, <i>land use, housing and public investment</i>, and to make sure these decisions are balanced with elements vital to Ontario's quality of life,” <i>[our italics]</i>.</p> <p>Lobby the City of Kingston to create a Community Development Committee and revisit development programs that have been successful in the past, such as the provincial Convert to Rent loans program, or the Stirling Tavern housing development in Ottawa. Also contact Queen’s University Planning Department regarding possible collaboration with their students and faculty for assistance with this issue.</p>	<p><i>Unable to find co-sponsors at this time.</i></p> <p><i>Cost of staff time of concerned parties is unknown.</i></p>
<p>Proposed Initiative: Review the existing plan, and consult the City of Kingston and Queen’s University Planning Departments for their opinions on feasibility with regards to the following suggestions that touch on land use/zoning/bylaw modifications.</p> <ul style="list-style-type: none"> • Request that the City include a requirement in its plan that a certain percentage of any new housing developments be affordable, with cash-in-lieu payments required if the dedication is not fulfilled. • Request that the City reduce compliance standards for affordable housing on, for example, set backs, heights, parking requirements, especially for duplex or triplex conversions • Request that the City implement specific neighbourhood zoning bylaw provisions to facilitate commercial-to-residential conversion, or utilize empty hospitals and renovate closed schools to provide low cost housing. • Request that the City change municipal land use bylaws to incorporate low cost housing. • Request that the City re-examine infrastructure requirements for land development to identify and implement changes that would reduce land development and housing costs, while maintaining safety and aesthetic standards. 	<p><i>See above.</i></p>
<p>Proposed Initiative: Regarding incentives, review the existing Plan, and</p> <ul style="list-style-type: none"> • Request that the City, through the Planning Act, provide incentives to builders to encourage them to construct affordable housing. • Request that the City implement a density bonus system for the provision of specialized and/or affordable housing in specific land use districts (i.e. rezone and provide incentives for increased population density). • Lobby for reinstatement of Federal tax rollover of capital gains and income taxes on building sales proceeds for reinvestment in residential rental properties. • Stimulate joint ventures with developers, foundations, housing groups and other levels of government by having The City of Kingston take a leadership role in exploring: <ul style="list-style-type: none"> ↔ Property tax reductions for multi-residential complexes ↔ GST credits for multi-residential complexes. ↔ Mixed model approaches to credit subsidized units ↔ Interest subsidies to reduce mortgage costs ↔ Capital sharing programs ↔ Land grants ↔ A land trust ↔ Funding models and incentives used in other jurisdictions to develop low cost rental housing projects 	<p><i>See above.</i></p>

<p>Proposed Initiative: For the following provincial and federal initiative ideas, await the position paper of the Federation of Canadian Municipalities and the National Housing Policy Options Team, which is expected at the end of 2001. The paper is expected to be endorsed by the Association of Municipalities of Ontario and the Ontario Non-Profit Housing Association. It will support and suggest strategy at the local level around the following points:</p> <ul style="list-style-type: none"> • Look to federal initiatives for funds and contact possible potential sustainable funders/banks. (e.g. Local Credit Union; Banks – re: Sustainable Mortgages). Province of Ontario or Government of Canada to develop a sustainability fund for non-profit housing projects that could be accessed by soundly managed projects during difficult market conditions. • Enlist Ontario government and Canada Mortgage and Housing Corporation (CMHC) to jointly undertake an impact analysis of the loss of new funding on subsidized housing and institute new funding as required. • Request that Ontario government and CMHC develop a funding program for pilot projects designed to identify new approaches, financing, designs, target populations and/or corollary resources to deliver affordable or specialized housing and acquiring new job skills. Adapt ideas from Toronto’s Eva’s Phoenix multi-faceted program, as well as from Belleville’s Youth Habilitation Quinte Inc., also known as Youth Hab. • Province of Ontario or Government of Canada to offer 100% financing to mixed model multi-residential projects as well as projects developed for specific populations where there is proof of financial sustainability. 	<p><i>Cost unknown.</i></p>
<p>Identified Priority Gap #7 Transitional Housing</p>	
<p>Description of need: Transitional housing is a combination of housing and services intended to facilitate self-reliance and self-sufficiency. This housing is available to clients for up to three (3) years. There is often a requirement that residents be actively searching for long-term housing during their stay. Even if the existing limits on shelter stays are extended, there is still a need for affordable housing beyond emergency shelter but before permanent independent living. A portion of the homeless and at risk population requires extra support to get back to a sustainable lifestyle. Everything from employment and life skills training and supervision of medication use, to simply an address to help secure social assistance can be offered in transitional housing. In order to avoid displacing currently housed community members, new, empty or converted buildings are needed. The Canada Mortgage and Housing Corporation (CMHC) presently estimates the vacancy rate in Kingston to be 1.8, so development of transitional housing in existing buildings is not feasible.</p>	
<p>Proposed Initiative: Similar initiatives to those outlined under Gap #6 Affordable Housing (above) would assist in the creation of more transitional housing in Kingston.</p>	<p><i>Unable to find co-sponsors at this time. Cost of staff time of concerned parties is unknown.</i></p>

Identified Priority Gap #8 Street Outreach Worker		
Description of need: Outreach services are brought to the consumer, rather than the consumer coming to a site where service is provided. This flexibility of hours and locations is considered to be vital in helping marginalized people to improve their life circumstances. For example, s/he might help to secure new or lost identification, advocate with a landlord, or provide transportation to community appointments. Outreach workers can do business in many sites, and provide a variety of assistance for the purpose of improving quality of life. Different types of outreach are being supplied by a few community agencies in Kingston, however there is a need for more services, and for sustained funding of existing services, which are largely provided by temporary contract staff, volunteers, and students on work placement. A report has been written of 30 interviews done with people living on the street, and is available from Home Base Housing. Some individuals choose not to employ the services of the shelters. Others have exhausted their welcome due to violent or otherwise unsafe behaviour. Still others have simply reached the limit of time they can stay. Outreach workers can also assist many homeless and at risk people of all ages, who would not or cannot come to shelters for various reasons, to access affordable, appropriate housing. Examples of programs and activities that enhance access to housing are rent or utilities banks and housing registries. Access is improved if services are co-located, and if the criteria are consistent between similar programs offering assistance in the area. Households that are eligible for subsidized housing often find it difficult to access. They frequently require help with the costs of repairs, appliances, and deposits for utilities hook-up, as well as debt reduction.		
Proposed Initiative: A person to work with individuals living on the street in Kingston, who will provide: <ul style="list-style-type: none"> flexible hours of street- and shelter-based intervention for the homeless community, coordinated services and assistance with discharge planning, addiction and mental health counselling, agency referrals, family support and crisis intervention, case management functions, advocacy and community development. 	<i>1 FTE 5 months \$19,500</i>	<i>1 FTE 12 months \$46,150</i>
Proposed Initiative: Increase public education and awareness of existing programs that improve access to housing by continuing with the communications strategy outlined in the Community Plan.	<i>Cost of this aspect of implementation of the Plan is unknown, but would likely be about the same for each year.</i>	
Identified Priority Gap #9 Supportive Housing – Mental Health Issues		
Description of need: It is noteworthy that shelter providers have recently been included at the table with KFL&A Mental Health Coalition. There are great risks for emergency shelter staff not specifically trained to cope with people who have mental illnesses. The general view of service providers is that this issue must be addressed by the proper caregivers, namely, trained mental health professionals.		
Proposed Initiative: Similar initiatives to those outlined under Gap #6 Affordable Housing (above) would assist in the creation of more supportive housing in Kingston.	<i>Unable to find co-sponsors at this time. Cost of staff time of concerned parties is unknown.</i>	
Proposed Initiative: Recommend to Ministry of Health that increases in funding be provided for agencies that supply housing to those with a mental illness, to be used as the community deems appropriate to address the need.	<i>Consult with Frontenac Community Mental Health Services and Providence Continuing Care Centre Mental Health Services.</i>	
Proposed Initiative: Pursue more funding for respite housing for organizations providing care to the mentally ill.	<i>Cost of this aspect of implementation of the Plan is unknown.</i>	
Identified Priority Gap #10 Youth Housing		
Description of need: There is a great need for supportive, affordable, and transitional housing for youth aged 16-24 in Kingston. The Kingston Youth Shelter Project remains busy, in the shelter, the drop-in, and in its employment program. Youth Net reports very slow turnover in their housing and related supports programs, causing varying wait lists as they struggle to meet the need. Rural areas have been identified as needing more supports, as more and more youth have to travel to Kingston for housing, educational, health and employment services they require. There is often public misperception about the position of homeless youth and what can be done to assist them. More public education on homeless youth issues is required.		
Proposed Initiative: To increase the supply of housing, seek funding to buy a new	<i>Property \$150,000</i>	<i>Staffing</i>

building.	Staffing 4 FTE \$140,000 + 25% benefits and administration.	\$140,000 + 25% benefits and administration.
Proposed Initiative: Service providers to link with media and educators to discuss methods of increasing public awareness of the realities and myths surrounding youth homelessness, such as Public Service Announcements and Myths and Realities posters.	\$3,000+ in-kind time of participants.	\$3,000+ in-kind time of participants.
Proposed Initiative: Coordinate with rural service providers to assess the needs of youth and devise programming. Social Planning Council is sending proposals to potential funders for a rural homelessness project based on the SCPI model.	Project costs for 6 months are \$38,500.	Sustainability for pilot project in following year: unknown.
Identified Priority Gap #11		
Coordination of Discharge Planning – communication in community		
Description of need: There are a large number of hospitals and correctional institutions in Kingston. Many people are effectively homeless upon discharge, and thus require supports both before and after their release into the community. Coordination of discharge planning and related services has been identified by the Advisory Board and the Community Planning Committee as an area of need in Kingston.		
Proposed Initiative: Identify appropriate discharge protocols according to the major facilities. Publicize them for the purposes of education of service providers and the larger community.	<i>Cost of these aspects of implementation of the Plan is unknown. Consult Harbour Light, Migizi Wiigwaam and John Howard Society, as well as local mental health providers, penal institutions and hospitals.</i>	
Proposed Initiative: Examine current discharge policies, suggest modifications as seem necessary to increase coordination and collaboration between service agencies in the community and the discharging institutions.		
Identified Priority Gap #12		
Second Stage Housing		
Description of need: Second stage housing is a subset of supportive with a lesser degree of support than emergency shelters, but more support than a conventional apartment. The length of stay in second-stage housing is up to one year. In recent years, second stage housing has given way to supportive permanent housing. A shift in policy has made this type of housing no longer available.		
Proposed Initiative: This Advisory Board strongly advises the Ontario Provincial Government to reinstate funding for new second stage housing.		
Identified Priority Gap #13		
Health Care – Outreach		
Description of need: Homeless people need to be able to access medical facilities in which they feel comfortable, such as the Street Health Clinic. There are a nurse practitioner and doctors currently working out of that clinic, but the practitioner especially is presently working at capacity, and might not be able to visit other sites, such as the shelters, as needed. Currently Lens Crafters assists Dawn House's and The Salvation Army's clients, but there is a need for a specialist in eye care. There is also need in the areas of foot care for diabetics, seniors and people living on the street. Designated programming for youth is an especially urgent necessity. Dental care is also a gap.		
Proposed Initiative: Communicate with local medical associations and medical schools (e.g. Queen's Medical Outreach) to inform them of the need for specialized health practices for the homeless and solicit voluntary assistance.	<i>Cost of this aspect of implementation of the Plan is unknown.</i>	
Proposed Initiative: Improve Coordination and communication between mental health, medical service and housing providers and the Ministry of Health.	<i>Cost of this aspect of implementation of the Plan is unknown.</i>	
Identified Priority Gap #14		
Storage for personal items of the homeless		
Description of need: There is very little short-term storage available to homeless people, and no free longer term storage of personal effects currently exists in Kingston. Storage would allow temporarily 'un-housed' people to keep their belongings, thereby saving them some money when they do not have to replace these items upon securing housing.		

<p>Proposed Initiative: Shelter providers to discuss this issue further at shelters meeting. For personal item storage, a centralized, insured facility is needed that all shelters can use, of which they can share cost and management and/or storage may be built on shelter properties where space allows.</p>	<p><i>Consult with local shelters to project one-time or ongoing costs.</i></p>	
<p>Proposed Initiative: The Advisory Board has an <i>ad hoc</i> committee dedicated to the resolution of the storage problem in a cost-effective and efficient manner.</p>	<p><i>In-kind time of Advisory Board participants is unknown at this time.</i></p>	
<p>Identified Priority Gap #15 Storage for donations – furniture, appliances, etc.</p>		
<p>Description of need: This is currently being done on an <i>ad hoc</i> basis by the Low Income Needs Coalition, Housing Help Centre, St. Vincent de Paul, and other agencies. Permanent or stable storage is needed, as well as a lead organization willing to accept the liability.</p>		
<p>Proposed Initiative: Shelter providers to discuss this issue further at next shelters meeting. Encourage collaboration between agencies to improve Coordination of supply, pick-up and delivery to reduce the need for storage.</p>	<p><i>Consult with local shelters to project one-time or ongoing costs.</i></p>	
<p>Identified Priority Gap #16 Health Care – Access to Doctors</p>		
<p>Description of need: Health services in Kingston are difficult to access, and as in many other communities across Canada, there is a shortage of general practitioners. Medical care is particularly difficult to access for homeless people, who must go to Emergency at one of the hospitals, or to one of the three after-hours clinics, of which two are in Kingston West. Homeless people need to be able to access medical facilities in which they feel comfortable, such as the Street Health Clinic.</p>		
<p>Proposed Initiative: Raise the issue with the South Eastern Ontario District Health Council and solicit their assistance with planning.</p>	<p><i>In-kind time of participants is unknown at this time.</i></p>	
<p>Identified Priority Gap #17 Supportive Housing – Developmentally Challenged</p>		
<p>Description of need: Often, it is preferable to house developmentally challenged people in family homes, as compared to group homes. Agencies frequently need to lobby the community for appropriate volunteer family situations for individuals whose own families are not able to support them. For those who cannot find a family placement, spaces in group homes are in relatively short supply. Supports for those families that are able to keep their children at home are in high demand but short supply. There are aging parents, currently caring for their children at home, who will not be able to do so for much longer; their physical ability to cope with their children’s needs diminishes as they and their children grow older. Respite is needed for all families that support individuals with developmental challenges.</p>		
<p>Proposed Initiative: Recommend that funding be provided for more respite beds in the community, as well as for more paid workers in this field.</p>	<p><i>In-kind time of Advisory Board participants is unknown at this time</i></p>	
<p>Proposed Initiative: Raise public awareness of the need for ongoing and respite care in local families’ homes to elicit more volunteers to provide this much-needed relief and support.</p>	<p>\$3,000+ in-kind time of participants.</p>	<p>\$3,000+ in-kind time of participants.</p>
<p>Identified Priority Gap #18 Data Collection</p>		
<p>Description of need: There is disagreement in the research community about how to define ‘who is homeless’. However, there is no argument that once defined, this part of our society is difficult to count. Good data is of paramount importance when soliciting funding and other supports, but this must be measured against maintaining the fundamental dignity and privacy of the individuals and families in question. There is difficulty in providing services to people, and supporting arguments for further funding or social change, when collecting accurate data on this population is so complex (see Appendix D and the accompanying document to this Plan, <i>Kingston’s Report Card on Homelessness, pp. 1-4</i>, for further discussion on this matter). Estimating the number of homeless and at risk people is the only plausible or cost-effective option. Also, although they will always collect some differing information based on the populations they serve, agencies and service providers involved with homeless people need to standardize the collection of information, as it is not consistent between the shelters.</p>		

<p>Proposed Initiative: It is proposed that this endeavour can be facilitated by the implementation of CMHC's Homeless Individuals and Families Information Systems (HIFIS) software, which allows the tracking of people with little or no infringement on privacy. It is intended to help provide a basic understanding of Canada's homeless population by identifying: the unique characteristics of the shelter population; the types of services homeless people most frequently use; the types of situations that most frequently lead to homelessness and; the types of support and services required to remove people from a possible homelessness situation. Shelter providers wish to discuss privacy issues further. Funding and donations will be sought for the required computers if the shelters decide to go ahead. Discussion is also ongoing as to what organization will take on the volunteer Coordination of HIFIS.</p>	<p>The software is free, however the shelters will require Pentium 1 computers to run it. (Although Pentium 3s are preferable.) <i>Contact potential providers of computers.</i> <i>Cost of ongoing Coordination of HIFIS is unknown</i></p>	
<p>Proposed Initiative: Use a model of factors affecting homelessness, developed by SPC staff member, to track patterns in the population of homeless people in a non-discriminatory, anonymous way, on a yearly basis.</p>	<p>Project costs for 6 months are \$38,500.</p>	<p>Project costs for 1 month are \$ 6,500</p>
<p>Identified Priority Gap #19 Supportive Housing – Seniors</p>		
<p>Description of need: There is frequent coverage in the media of our aging society. Demographers predict that demand for seniors' services will increase in years to come, as the proportion of people over 65 increases due to a decreasing birth rate and improvements in health care. Not the least of these required services, even today, is supportive housing. It can be most beneficial to those who need help to carry out activities of daily living, who are frail or have physical disabilities and those who are living alone. It also benefits those who prefer to live with their peers in an environment where they can enjoy companionship and the freedom to pursue individual interests and lifestyles.</p>		
<p>Proposed Initiative: Pursue funding for, and increase awareness of, community initiatives that are trying to raise funding for supportive seniors' housing in Kingston.</p>	<p><i>Contact local coordinators of services for seniors' supportive housing.</i></p>	
<p>Identified Priority Gap #20 Animal Care</p>		
<p>Description of need: The costs of animal health care are increasing; one family pet with an illness can put an at risk household closer to homelessness. Homeless people often have pets, too. Animals provide companionship to socially isolated people, and in some cases, dogs can protect street dwellers from potential harm. These animals cannot be accommodated in shelters, for health reasons. Community needs to explore options for care.</p>		
<p>Proposed Initiative: Initiate a volunteer foster care program for animals of individuals staying in shelters.</p>	<p><i>Contact the Humane Society to explore ideas.</i></p>	
<p>Proposed Initiative: Form a partnership with local vets and St. Lawrence College Animal Care Technology program to provide low cost or free animal health care.</p>	<p><i>Contact St. Lawrence College and local veterinarians' groups, if any.</i></p>	

N.B. FTE = Full Time Equivalent

6. Sustainability

Research undertaken for this Community Plan has revealed the fact that there are desperate needs in the community that are being met by unsustainable and generally inadequate resources. While the funding supplied by the SCPI program has gone a long way to address the needs in Kingston, it is not intended to provide ongoing financial support past the March 31, 2003 ending date. Therefore, it is expected that SCPI funded initiatives should be sustainable beyond the program end period.

The Advisory Board and Community Planning Committee have a sustainability strategy in place. They will continue to follow a continuum of supports approach in order to ensure that present and future community needs are consistently met. The Advisory Board will work closely with service providers to address sustainability issues.

The Community Plan provides a detailed framework to assess proposals submitted for funding to ensure that the projects selected meet the needs identified. Each project will identify whether the sources of future funding are secured or projected and provide appropriate documentation. Project proposals will be required to have viable multi-year budgetary plans before approval. In addition, each project will have a strong business plan to attract the support of private business and community members. Consideration will only be given to proposals that include a plan to deal with sustainability. On-going project evaluations will also help to inform decisions concerning continuing support for projects.

Sustainability is also being ensured through: (1) continued communication and negotiation between the various social service providers in Kingston and Area; (2) continued support of community partners; (3) efforts to increase public support through effective communication strategies; (4) the effective use of volunteers; and (5) the formation of new partnerships with businesses and organizations within the City.

The Advisory Board and the Community Planning Committee have identified a number of potential sources of sustainable funding and other ideas to address the needs of the community. These include, but are not limited to:

Federal

- Supporting Communities Partnership Initiative (SCPI)
- Canada Mortgage and Housing Corporation (CMHC): Residential Rehabilitation Assistance Program, Shelter Enhancement Initiative, Mortgage Insurance Fund
- Public Works and Government Services
- Correctional Services Canada
- Youth Employment Strategy (YES)
- Job Creation Partnership
- National Child Tax Benefit

Provincial & Municipal

- Provincial Homelessness Initiatives Fund (PHIF)
- Off the Street and Into Shelter (OSIS)
- Ontario Works Enhancement Funds
- Emergency Hostel Redirection Funding
- Ministry of Health
- Ministry of Municipal Affairs and Housing
- Social Assistance Discretionary Benefits
- City of Kingston

Other Solutions

- Private donations
- Fundraising (United Way, Trillium Foundation, Kingston Community Foundation, etc.)
- Collaborate with local businesses, non-profit organizations, faith community, service providers, and individuals.

7. Evaluation

It is necessary to employ the skills and objectivity of a professional evaluator to measure successes annually. Some possible measures, outcomes and methods follow. However, these three parts of the evaluation will be determined in more detail with a professional evaluator and members of the Advisory Board and the Community Planning Committee. The purpose of the evaluation is to determine if the Community Plan has met the objectives.

7.1 Reporting Measures:

- Social Planning Council has sent monthly activity reports and will send a final summary regarding the coordination and facilitation of the project to Human Resources Development Canada.
- Procedures for reporting to the community are included in the Communications Strategy (Section 8 below). The Advisory Board has responsibility to produce an annual report in October of each year of the Supporting Communities Partnership Initiative.

7.2 Measurable Outcomes:

- decrease in evictions
- decrease in use of shelters
- decrease in use of food banks and meal programs
- increase in the numbers of people housed by various groups
- decrease in numbers on housing wait list(s)
- increase in supply of transitional, secondary, not-for-profit, affordable and supported housing
- increase in community partnerships
- increase in community awareness
- increase in endeavours that meet the diverse needs and improve the well-being of people who are at risk of becoming, or who are, homeless
- increase in sustained funding for new and existing programs

7.3 Methods:

- Each approved proposal must submit an individual evaluation plan as part of SCPI guidelines--the Advisory Board will also require this from proposals that are not to be funded by SCPI.
- gathering of data
- comparison to 2001 Report Card and 2001 Community Plan (collecting data at end)
- key informant interviews to determine if homeless people are more satisfied with existing services
- key informant interviews with service providers to see if they are happier with the situation, or if they feel that SCPI helped them start good programs.

8. Communication Strategy

The intent of the Communications Strategy is to:

- Educate Kingston constituents as to the present state of homelessness (Report Card on Homelessness) in this community and the development of a Community Plan, in consultation with a cross section of service providers, business leaders and the City of Kingston's Strategic Plan for 2001 - 2010, to address issues of homelessness in Kingston
- Inform the community about the Federal Government's "Supporting Communities Partnerships Initiatives" (SCPI) funding available to combat homelessness over a 3 year period (2000 – 2002) in collaboration with the local community
- Encourage the promotion and enhancement of creative public/private partnership ventures to address issues of homelessness beyond the parameters and duration of the federal initiative.

It is recommended that the Communications Strategy consist of a multi-media approach aimed at disseminating key messages through a variety of the following means:

- 8.1 Design a one-page fact sheet on the Report Card on Homelessness in Kingston.
- 8.2 Design a brief synopsis of the SCPI program, including proposal criteria, the proposal process and any restrictions.
- 8.3 Publish the Report Card on Homelessness and the Community Plan.
- 8.4 Design and disseminate a briefing kit for municipal, provincial and federal politicians and senior city managers comprised of the Report Card, the Community Plan and initiatives that have been funded and proposed, acknowledging community partners.
- 8.5 Establish a computer link on the Social Planning Council's website to the completed Community Plan document, the Report on Homelessness and details about the SCPI application process and appropriate application forms.
- 8.6 Prepare an announcement for proposal calls and disseminate it by means of broadcast fax through the Community Information Centre and by e-mail and print media to all service providers, builders, service clubs and potential interested parties, indicating how applicants may access SCPI applications.
- 8.7 Develop a PowerPoint presentation of no more than 15 min. in length describing the homelessness situation in Kingston, the Community Plan and the types of SCPI projects that have received funding, the SCPI proposal process and examples of creative public/private partnerships that have been successful in other communities.
- 8.8 Design a press kit and hold a press conference to brief the local media (radio, TV and print) on the findings of the Kingston Report Card on Homelessness, the Community Plan to address homelessness and the funding that the federal government has provided and is prepared to contribute.
- 8.9 Prepare a series of articles to be published in the daily, weekly papers about the issues related to homelessness, the Community Plan and SCPI projects.

- 8.10** Contact Cogeco about TV coverage on one of their community forum programs for a panel discussion promoting joint ventures on homelessness and the community initiatives being undertaken to combat it. Attempt to encourage the Home Builders' Association, other members of the business and banking community to participate in discussion about additional creative solutions.
- 8.11** Seek speaking engagements with key community service/business clubs to acquaint them with the Community Plan and challenge them to design/support creative solutions.
- 8.12** Prepare presentation notes to enable Advisory Board member to present the PowerPoint presentation.
- 8.13** Provide the media with updates as the Community Plan evolves.
- 8.14** Compile and disseminate project evaluations as they become available.
- 8.15** Ensure that all forms of communication are in plain language and translated into languages sensitive to the ethnic population mix in Kingston.

It is recommended that a sub committee of the Advisory Board be struck to review all communication tools prepared and to make recommendations to the Advisory Board for approval of appropriate promotional literature and other audio visual aids.

Ideally, it is recommended that a spokesperson be designated to design the communication tools, to coordinate their dissemination and to provide Advisory Board members with key messages to make presentations to community groups.

It is recommended that appropriate funding partners be acknowledged in all printed and electronic literature.

Q: What does Kingston need to make things better for homeless people right now?

- “
- 1. Increase length of stay at area shelters.
 - 2. Increase shelter beds.
 - 3. Increased support for services helping homeless people (shelters, food banks)
 - 4. Awareness – Public knowledge of this issue needs to be addressed.”

Shelter Provider Questionnaire Participant

9. Community's Contribution

The community met the requirement for matching funds with government expenditures alone. The chart below outlines how much funding was available for homelessness and housing issues over the three years indicated.

Table 3: Government Funding in Kingston

Program	Funder	April – Dec. 1999	Jan. – Dec. 2000	Jan. – Mar. 2001
Supports to Daily Living	100% Provincial	\$746,672.22	\$995,563.00	\$248,890.74
Community Partners Program	100% Provincial	\$47,196.72	\$62,929.00	\$15,732.24
Provincial Homelessness Initiative	100% Provincial	\$67,500.00	\$68,500.00	\$22,950.00
Hostel Per Diems	80% Provincial 20% Municipal	\$106,727.63	\$149,400.00	\$50,766.43
Sub-totals		\$968,096.57	\$1,276,392.00	\$338,339.41
Grand Total		\$2,582,827.98		

9.1 Projections:

It is anticipated that annual expenditures for the fiscal years 2001-2002 and 2002-2003 would roughly equal those of the calendar year January to December 2000, or \$1,276,392.

This project has been generously supported by the Government of Canada.

Canada



Human Resources
Development Canada

Développement des
ressources humaines Canada

Addendum

Aboriginal Community Plan

Kingston Aboriginal Community Plan for Addressing Homelessness

To be eligible for funding under the Supporting Communities Partnership Initiative (SCPI) all communities must clearly articulate the eight required SCPI elements: Geographic Area, Objectives, Community Plan Development Process, Assets and Gaps, Priorities, Sustainability, Evaluation and Communication Strategy.

1. Geographic Area

This plan covers the city of Kingston

2. Objectives

The objectives that Kingston Community will achieve by March 31, 2002, through the implementation of its community plan are as follows:

1. ***To address Aboriginal Homelessness in the City of Kingston.***
 - a. To secure funding for adequate and appropriate housing to ensure that there are no homeless Aboriginal people in the city of Kingston.
 - b. To develop new facilities to house Aboriginal people in the city of Kingston.
2. ***To identify what services are currently available to Aboriginal people and what services are needed***
 - a. Provide outreach services that will better connect the Aboriginal community organizations, as well as mainstream organizations.
 - b. Develop needs assessments which adequately reflect the needs of the Aboriginal homeless people in the Kingston community.
 - c. Develop a process in which to bring the community together to support both service providers and Aboriginal homeless people in the City of Kingston.
3. ***To address long term methods of Homelessness Prevention and Awareness of these issues***
 - a. To provide cultural awareness and sensitivity to the community and service providers.
 - b. To develop programs which will provide homeless people the necessary tools to enhance and take control of their lives.

3. Community Plan Development Process

The process to develop the community plan included the following:

1. Community Consultation was held on **December 14, 2000** and hosted by **Laurel Claus Johnson**. The total number of participants was 29 including 29 organizations. Participating organizations included: Four Directions Student Centre(Queen's), South Eastern District Health Council, Ryandale Shelter, Resurrection Church, Kingston Youth Shelter Project, Housing Help Centre, Kingston Interval House, Martha's Table, Kingston Police, Bridge House, Home Base Housing, Métis Nation Council, Social Planning Council, Migizi Wiigwaam, Katarokwi Native Friendship Centre, Soup Truck, Tipi Moza. Regrets were sent from Aboriginal HIV/AIDS worker, Kagita Mikam Employment Counsellor, The Root Cellar at St. Lawrence College, and The Salvation Army.
2. Working groups were set up on the following issues: housing, health, employment, basic necessities, and support staff. Each group gave an overview of all of these issues
3. The results of the following reports served as a resource to the plan:
 - a. Individual organizations statistics and needs assessments
 - b. Poverty in the Kingston Community
4. The following groups will continue to be involved in the process, through ongoing decision-making associated with implementing the plan:
 - a. Kagita Mikam
 - b. Tipi Moza
 - c. Migizi Wiigwaam.

4. Assets and Gaps

Summary table of assets and gaps for a continuum of supports approach.

Shelter/Service/Support	Inventory	Demand	Gap
Emergency Shelters	1) Ryandale 10 beds (used as 2 beds or full depending on season) 2) Home Base Housing (Winter only full) 3) Salvation Army 6 beds full	mostly beds are needed by males, from the Provincial Federal system	3 beds per week
Transitional Housing	1) Home Base Housing services youth	Approx. 20 youth 20 - 30 Adult males	20 yearly 20 - 30 yearly
Supportive Housing	There is currently no supportive housing in the Kingston area services Aboriginal clients, services are at capacity	Approx. 25 individuals per month in need of supportive housing	25 per year
Access to housing Services	1) Housing Help Centre	25 calls per month	25 per month
Drop-in Centres	1) Friendship Centre some mainstream (inconsistent use)	Approx. 30 clients per day access this service	30 per day
Food Banks	Approx. 7 Food Banks Only one use per month, with restrictions	Approx. 50 individuals and families need more than one use per month at a food bank	50 per month

Meal Programs	Approx. 10 in City in various locations. Katarokwi Native Friendship Centre (Friday m	very well used	needs being met
Clothing/Furniture Banks	Approx. 2 Free & 10 used st	40 individuals and families this service per month	40
Eviction & Legal Services	3 in Kingston (very underuse	15 households per month	15
Outreach Services	3 in Kingston	Approx 30 people use this s per month	30
Health Services	many services in Kingston	difficult to get stats	assuming a great need however detail is needed.
Employment Services	1) Kagita Mikam many mainstream	very high number of Aborig people accessing the service	needs are being met
Life Skills Programs	very few mainstream (Migizi Wiigwaams program program ended)	15 week	15 week
Cultural Services	Migizi Wiigwaam, Katarokw Friendship Centre	30 week	30 week
Men's and Women's Abuse Program	The Salvation Army, Shelter	(not attending mainstream programs and lack of fundi Aboriginal Programs)	50 month
Addiction Services	The Salvation Army Resider Program, Detox Centre Resi Program, Migizi Wiigwaam (weekly circles)	under use by Aboriginal pe Aboriginal Programs are underfunded	40

5. Priorities

After reviewing the services that are available in *Kingston Community*, the following priorities was established by the *Aboriginal Community Group*. As outlined in the summary table of assets and gaps, all priorities must attach an appropriate quantifiable.

Priority 1: Housing Services

- **Transitional Housing**

There is no transitional housing in Kingston which would adequately address the needs of the Aboriginal Homeless. Due to the high population of adult homeless Aboriginal males in this community it is imperative that this need be addressed. Many of these men are released and reintegrated into the Kingston Community where there is no housing available to their unique needs. A transitional house will provide the opportunity for individuals to address the many issues they face with reintegration as well as those men who are relocating to a new community.

- **Supportive Housing**

There is an overwhelming waiting list for people to access supportive housing in the Kingston community. Many men and women who require this housing structure have fallen through the cracks. Ignorance and lack of understanding the specific needs of Aboriginal people plays a role in this. The lack of understanding in the areas of residential schools, abuse issues, fetal alcohol syndrome etc. make service providers ill-equipped to address specific needs.

- **Access to Housing**

Although there is an excellent support program available in the City, Aboriginal service providers estimate it is underused by the Aboriginal community. A process of assisting Aboriginal community members to access this service needs to be established or the Aboriginal community service providers need to establish this service.

Priority 2: Basic Necessities

- **Food Bank**

Kingston offers many food banks but there is still a greater need. There are many restrictions to accessing these food banks some of these being, limit of one use per month, having to have an address, etc. Very often families and individuals require more than one use per month or have no formal address.

- **Clothing and Furniture**

Clothing and furniture resources are very limited in the Kingston community. There are few free resources and very expensive second hand stores in the area. There is a great need for free clothing for Aboriginal families and individuals in the area.

Priority 3: Counseling Services

- **Addictions issues**

Programs are needed to address Aboriginal specific issues related to drug and alcohol abuse. Secured funding, Aboriginal counselors, and Aboriginal programs are required to address this high need in the city of Kingston.

- **Abuse issues**

Aboriginal programs and workers are needed to address these areas. Clients must have a safe, supportive, culturally appropriate environment in which they can trust and work effectively toward changing their environment and learning to lead healthy lifestyles for themselves and their families.

- **Cultural Services**

In our community many people are learning of their native ancestry or have lived in communities in which their culture has been lost or not seen as a need. Many people young and old are reclaiming their heritage. People can often go to any length to learn their lost culture. It is imperative in this city that people have access to credible healthy traditional people, Elders, and programs to give them the appropriate guidance that they are searching for.

- **Life Skills**

Due to the large population of Aboriginal offenders and those who have lived in isolation the areas of healthy living and basic life skills are a great need which is under addressed in this community. These programs will enhance daily and long term healthy living by providing individuals and families with the necessary tools that are needed to take control of their own lives.

Priority 4: Supportive Services

- **Outreach services**

Often community members live in isolation not seeking their needs or learning resources that are available in the community. Outreach services need to extend to individuals who lack transportation, and the confidence to find services which will enhance their lives. Outreach services will have the opportunity to determine the real needs in the community and bring forth information to address the gaps in services.

- **Legal and Eviction Services**

Although there are some legal services in the community it is reported that approx. 15 Aboriginal people and families face eviction, hydro and or phone disconnection each month. There is also no court support program in the community which would benefit. Aboriginal people in a greater understanding of their rights and the court process.

- **Health Services**

Currently there are some support services in the community but they are often under used and not understood by the Aboriginal people living in Kingston. Areas such as pensions, disability, preventative health care are not accessed. Coordination of programs and materials is needed to better provide Aboriginal people with information.

6. Sustainability

In many communities, the development of this community plan will help facilitate planning past the current SCPI process. If programming is seen to beyond March 31, 2002, the end of the current SCPI process, they will be sustained by the following measures:

Funding will be applied for again through this initiative. Other funding sources will be HRDC, CMHC, Kagita Mikam, and other Aboriginal Initiatives. There is an expectation that some of the projects can be self-sustaining.

7. Communication Strategy

The Aboriginal Homeless Community Group has worked closely with the community SCPI group and will be have information shared with their community resources. Aboriginal organizations in Kingston have various means to communicate their information through newsletters, brochures, Internet, bulletin boards, resource meetings with various groups and organizations.

The Aboriginal Plan was supported by the Government of Canada, and local and regional Aboriginal services, agencies and cultural groups.



Glossary of Terms

Glossary of Terms from the National Housing Secretariat (NSH):

Absolute Homelessness: refers to those living on the street, in temporary shelters or in locations not meant for human habitation.

Affordable Housing: a generic term for housing that is generally accessible to a wide segment of lower income wage earners. While Affordable Housing should form part of the community's Continuum of Supports Plan, it cannot be funded through the SCPI. (*Logement à prix abordable*)

Assets: are all elements currently used to support the community plan. They include but are not limited to: services, human resources, equipment, buildings and land. (*Actifs*)

City Facilitator: is the federal employee at the community level who will assist in building or strengthening partnerships among stakeholders and other levels of government. The City Facilitator will act in a catalyst role to assist in the development of community based approaches to homelessness and represent the government of Canada and the Federal Coordinator on Homelessness. (Facilitateur local)

Community Advisory Board: ideally comprises community service providers, funders and academics. At a minimum, the Board comprises community funders. This Board provides recommendations to the Community Entity or HRDC (whichever is applicable) on which projects to approve for funding. (Conseil consultatif communautaire)

Community Entity: is an incorporated organization that will receive SCPI funding. It will take on the task of ensuring that community planning is undertaken, decision making mechanisms and administrative practices based on transparency and financial probity are in place for the calling for project proposals, evaluating proposals and flowing SCPI funding to projects. (Entité communautaire)

Community Plan: is the plan that uses the continuum of supports approach to identify all of the supports and services currently available within a community as well as those that are missing or needed. It will also have a clear statement of objectives, identify the geographic area of the community, description of the process used to develop the plan, statement of priority issues, a description of how the community will address the need for future funding for services once SCPI funding ends, a strategy for evaluating progress in implementing the plan and a communications strategy. It must address the specific needs of homeless urban Aboriginal people and youth within the community. A financial plan must be attached to each Community Plan. (Plan communautaire)

Community Planning Group: is comprised of representatives from the various sectors (stakeholders) interested in homelessness. All reasonable effort must be taken to include representatives from the Youth and Aboriginal sectors. (Groupe de planification communautaire)

Continuum of Supports: is a holistic approach to addressing the needs of homeless individuals within a community plan. It includes all supports and services that would be needed to assist a homeless person or someone at risk of becoming homeless to become self-sufficient, where possible. (*Continuum de services*)

Contribution agreement: is the legal mechanism that will stipulate what is required to ensure that the terms and conditions of SCPI and Treasury Board guidelines are respected and that program specific financial and performance terms are adhered to. (*Accord de contribution*)

Demonstrated need (with reference to 20% communities): refers to a community's requirement to present evidence of a problem with absolute homelessness in their community. Provincial/territorial and GOC agreement

must be reached before a community will be declared as an 'eligible community'. (*Besoin démontrable [s'agissent des collectivités auxquelles iront 20% des fonds]*)

Exceptional Situations: refer to situations that are beyond the control of the community and are not reasonably expected. This does not include changes in government (provincial, municipal or federal) policy. An example is the unplanned destruction of a shelter. (*Situations exceptionnelles*)

Financial Plan: is a financial annex to the community plan that identifies all the funding that a community uses to deliver their programs and services. Sources of each contribution (fundraising, municipal, provincial etc) should be identified. Each funding source will be noted as 'confirmed' or 'unconfirmed'. Funding will be considered 'confirmed' when there is a commitment in writing for a specific amount. The financial plan will not include any funds received directly from the federal government. In-kind contributions must be confirmed by the supplier. (*Plan financier*)

In-kind contributions: are all non-financial contributions used in the implementation of the community plan. This may include, for example, volunteer hours, donated supplies and facilities and professional services (accounting, legal, other). (*Contributions en nature*)

Involuntary Homeless: although one of the five broad objectives of SCPI refers to "...individuals that are involuntarily on the street...", for SCPI funding purposes, there is no need to distinguish between 'voluntary' and 'involuntary' homeless. (*Sans-abri involontaire*)

Most affected communities: are those communities identified through bilateral negotiations between the GOC and provinces or territories as having a significant problem with absolute homelessness. These communities will have access to 80% of SCPI funding. They are currently identified as Vancouver, Calgary, Edmonton, Winnipeg, Toronto, Ottawa, Hamilton, Montreal, Quebec City and Halifax. (*Collectivités le plus durement touchées*)

Non-commercial activities: refers to activities where the sponsoring/delivering organization does not plan to make a profit, or where all profits realized would be immediately re-invested in homelessness initiatives/activities. (*Activités non commerciales*)

Other affected communities: are those communities identified through bilateral negotiations between the GOC and provinces or territories that will have access to 20% of the SCPI funding. (*Autres collectivités touchées*)

Regional facilitator: is the HRDC employee who coordinates the homelessness initiative at a regional level. The Regional facilitator will provide administrative support to City Facilitators and will act as a liaison point between regions and NSH. (*Facilitateur régional*)

Service Providers: are those agencies and organizations that deliver programs and services to individuals that are or may become homeless, regardless of their point on the continuum of supports. (*Fournisseurs de services*)

Shelters: housing intended for very short tenures of a few days up to six months, usually available on an emergency basis. (*Refuge*)

Social Housing: public or non-profit owned housing receiving long-term federal subsidies (3+ years). (*Logement social*)

Stakeholders: are those individuals, agencies, organizations and funders that are interested in making a contribution to reducing or preventing homelessness. This also includes the private sector, churches and homeless individuals. (*Intervenants*)

Supportive Housing: public, private or non-profit owned housing with some form of support component, intended for people who cannot live independently in the community, where providers receive funding for support services. The tenure may be long-term. (*Logement supervisé*)

Sustainability: refers to the concept of the future state of a project receiving SCPI funding. Each project proposal must include either a plan for continued resourcing of a project beyond April 1,2003, (when SCPI funding ends) or an impact statement for all projects that will end April 1,2003, as a result of the termination of the SCPI. (*Viabilité*)

Time sensitive (to qualify for urgent need): refers to the immediate requirement to start work on a project. A case would have to be made that demonstrates how waiting for a community plan to be finalized would jeopardize the success of an activity or project. (*Urgence d'agir (critère détermination d'un besoin urgent)*)

Transitional Housing: a combination of housing and services intended to facilitate self-reliance and self-sufficiency. This housing is available to clients for up to three years. (*Logement de transition*)

Urgent Need: refers to work (projects/activities) that must be undertaken before a community plan is in place (plan written, priorities identified and agreement among planning group reached) due to time sensitive issues. In order for a project to qualify as an 'urgent need', the community would have to show that homeless people would suffer from extreme hardship if the project did not commence immediately. (*Besoin urgent*)

Glossary of Terms from ONPHA

The purpose of this glossary is to assist those who may not be familiar with the jargon that has grown up around social housing. The aim of the glossary is to explain how the terms are used, not necessarily to give precise legal definitions.

Association of Municipalities of Ontario (AMO): The organization which represents all municipalities in Ontario. It has been consulted by the Province as the voice of the municipal stakeholders in the discussions about reform and devolution.

Benchmarking: This is a management tool which allows the deliverer of a product or service to compare its performance with like providers. Note: the term is often misused to mean setting a narrow range of acceptable operating costs for social housing providers.

Best Practices: This refers to a set of operational practices generally accepted by an industry as leading to increased operational efficiency and thus worthy of being shared and copied among like service providers where applicable.

Canada Mortgage and Housing Corporation (CMHC): The agency responsible for carrying out the current responsibilities of the federal government with regard to social housing.

Community Sponsored Housing Program (CSHP): This is a generic name for the pre-1979 social housing programs, including Sec. 26 and 27 of the National Housing Act, under which private and municipal non-profit projects were developed. In these programs, the CMHC holds the mortgage owed by the provider and rent supplement is administered by MMAH. Under the proposed new devolution legislation, the CMSM will administer the rent supplement but must do so according to the original terms and conditions of the agreements. Any changes to provincially administered social housing would not apply to these programs unless the provider and the CMSM both agree to adopt those changes.

Consolidated Municipal Service Manager (CMSM): A municipal government responsible for carrying out the funding and administrative responsibilities given it by the provincial government under proposed legislation. A CMSM could be a regional government, a county or a separated city, depending on the local circumstances. The CMSM is also responsible for administering other social service programs such as Ontario Works and childcare.

Co-operative Housing Federation of Canada - Ontario Division (CHF -

Ontario): The organization which represents non-profit Co-operative housing in Ontario. It has been consulted by the Province as the voice of the Co-operative housing stakeholders in the discussions about reform and devolution.

Coordinated Access: A provincially mandated system whereby social housing providers co-operate at a local level to provide consistent information about eligibility criteria for access to social housing and use a common application form. The purpose of the system is to provide "one-stop shopping" so that an applicant only needs to apply once for all of the local social housing. If the legislation is passed as proposed, the definition will be altered to include the development and use, under the direction of the CMSM but run according to Provincial standards, of a common waiting list (but retaining the use of provider sub-lists) within the boundaries of a CMSM of applicants to all social housing except providers with mandates to house the homeless / hard-to-house and federal providers not covered by Provincial RGI standards.

Devolution: In the context of this discussion, devolution means the handing over by the Province to the CMSMs its responsibility for the funding and administration of social housing (with the exception of providers transferred to MOHLTC or MCSS). It may also refer to the handing over of federal responsibilities to the Province. The funding was transferred in 1998. Legislation introduced in October 2000 will permit the devolution of administration.

District Social Service Administration Board (DSSAB): In the north, a special agency created by the Province and given the funding and administrative responsibilities of a CMSM where there is no existing municipal government with the legal jurisdiction to act as a CMSM.

F/P Program: The social housing program (1986 - '92) under which the Province of Ontario took the lead role in funding and administering social housing in Ontario, with a percentage of its costs being offset by CMHC.

Federal Unilateral Project: A non-profit housing provider whose mortgage is held or whose subsidy is administered by CMHC under Section 26, 27 or 95 of the National Housing Act. The mortgages of and the operating subsidies paid to these providers are not affected by the proposed legislation. (Note: Provincial Standards will apply to units with rent supplement funded under OCHAP.)

Financial Testing: A provincially mandated and regulated system for testing the eligibility of a social housing resident for RGI assistance, for establishing the amount of this assistance and conditions attached that would limit the assistance (i.e. assets owned by the applicant). If the legislation passes, CMSMs will have the responsibility to ensure financial testing takes place according to provincial standards, and to determine how and by whom the testing is carried out.

Local Housing Authority (LHA): an agency of the provincial government which manages public housing owned by the province of Ontario and carries on some other administrative responsibilities such as the rent supplement program for private-sector landlords. If the government's proposed legislation is passed, LHAs will cease to exist as of January 1, 2001.

Local Housing Corporation (LHC): A new corporation, created by the legislation and controlled by the CMSM, to take over the ownership and other responsibilities of Local Housing Authorities (LHAs).

MCSS: The Ministry of Community and Social Services. This ministry has the responsibility to fund and administer non-profit housing for people with developmental handicaps.

MMAH: The Ministry of Municipal Affairs and Housing. This ministry has the lead role in designing and implementing the devolution legislation.

MOHLTC: The Ministry of Health and Long-Term Care. This ministry has the responsibility to fund and administer housing for people with high needs, such as the mentally ill, those with acquired brain injury, people with substance abuse problems, and the frail elderly in need of long-term care

Municipal Non-profit Housing Corporation (MNP): This is a non-profit housing corporation that was established at the initiative of a municipality. The relationship to the municipality varies widely, ranging from total independence with no municipal appointees on the board of directors, to municipal councillors being the only board members.

Municipal Non-Profit Housing Program (Sec. 95): Under this program, affecting only municipal non-profit housing projects developed between 1979 and 1985, operating subsidy is provided by CMHC, but additional RGI subsidy by the Province. MMAH also has administrative responsibility for the program. Under the proposed legislation, the CMSM would be responsible for the Provincial share of the subsidy and would administer the program according to the current operating agreement, unless both the provider and the CMSM agreed to changes.

Ontario Community Housing Assistance Program (OCHAP): This is a provincially administered rent supplement program that provides RGI assistance to allow PNPs funded under the federal Sec. 95 program to house additional low-income tenants to the number that could be subsidized by relying on federal assistance alone. If the devolution legislation passes, this program will be administered by the CMSMs, and continued receipt of these funds will require providers to participate in the local coordinated access system and to follow any other CMSM directives applicable to rent supplements.

Ontario Housing Corporation (OHC): This agency of the provincial government has responsibility for provincially owned housing and for the direction of LHAs. Under the proposed legislation, its mandate would be reduced significantly.

Ontario Non-Profit Housing Association (ONPHA): The organization which represents private and municipal non-profit housing providers in Ontario. It has been consulted by the Province as the voice of the non-profit housing stakeholders in the discussions about reform and devolution.

Operating Agreement: A contract signed between a government agency and a social housing provider that sets out funding, operating and other responsibilities of the parties. Should the proposed legislation pass, providers with federal unilateral funding and providers administered by either the Ministry of Health-Long-Term Care or the Ministry of Community and Social Services would retain their operating agreements. The operating agreements for all other providers would be replaced by the new legislation and regulations.

Operating Subsidy: The subsidy paid to a social housing provider that reduces the effective cost of a social housing unit to a level equal to the local market rent.

Private Non-profit Housing Corporation (PNP): This is a non-profit housing provider which was initiated by a local organization such as a church, ethno-cultural group, service club, labour union or other community group. It is a non-share corporation incorporated under the Corporations Act.

Provincial Standards: The set of rules which establishes provincially mandated outcomes for various aspects of the social housing system, including RGI subsidies, coordinated access to social housing and financial testing of prospective tenants and tenants paying rent geared to income.

Rent Geared to Income (RGI) Subsidy: The subsidy paid to a social housing provider that equals the difference between the market rent of a unit and the actual rent paid by a low-income tenant. The allocation and amount of this subsidy is subject to various policies of the provincial government.

Service Manager: (see CMSM/DSSAB) The term used in the text of the proposed legislation for a CMSM or DSSAB.

Social Housing Agreement (SHA): This agreement, signed in November 1999 between CMHC and the Province, set out the terms and conditions by which the Province would take over the administrative responsibility for most federally assisted housing in Ontario. It also gave the Province the necessary legal authority to devolve the administration of the F/P program.

Social Housing Advisory Council (SHAC) and Social Housing Committee

(SHC): Two bodies established by the Minister of Municipal Affairs and Housing to make recommendations about reforms to the funding of social housing in the context of municipal devolution. They reported in 1997 and 1998 respectively.

ONPHA acted as a non-voting advisor to both groups.

Social Housing Services Corporation (SHSC): If the proposed legislation is passed, this new agency, controlled by the municipal sector but with representation from the social housing sector, would have the responsibility for ensuring that some services would be carried out province-wide. Such services would include property and liability insurance, the pooling of capital reserves and the maintenance of a benchmarking/best practices system.

Supportive Housing: This is housing for people who need support to live independently. Support-service funding is provided by MCSS or MOHLTC.

Some devolved non-profits also provide housing for the homeless/hard-to-house, which does not receive additional funding from Provincial Ministries. Note: The Province does not define housing for the homeless/hard-to-house as "supportive", since it does not receive funding from MCSS or MOHLTC.

Tenant Protection Act (TPA): The provincial legislation that governs the relationship between landlords and tenants in Ontario. Social housing is exempt from a few of its provisions (including the guideline for rental increases) but not others (including the processes for notification of rent increases and for evictions.)

Transferred Provider: A non-profit housing provider, formerly administered by the MMAH, whose target population meets a provincial definition of supportive housing and who receives support funding from either MOHLTC or MCSS. The province has retained the funding responsibility for such providers and transferred the administrative responsibility to either MCSS or MOHLTC as appropriate.

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Appendix A

Homelessness and Housing Advisory Board

Guidelines for Governance

Revised: May 2002

Terms of Reference

Background:

In December 2000 it was decided that this community group should be divided in two—the Advisory Board and the Community Planning Committee were thus formed. The Advisory Board will be the more formal group, with guidelines for governance as follow. It will vet all proposals as set out by the Community Planning Committee, or by any other community group or agency which submits a proposal for consideration.

Role:

The Advisory Board will be representative of the Kingston community with interest in housing and shelter issues. The role of the board will be to advise the Social Planning Council on a community plan to reduce and prevent homelessness. The board will also vet proposals for SCPI funding as developed by the Community Planning Committee. This board will help create a community plan that will be a flexible blueprint to ensure present and future community needs are met. Although all future proposals for SCPI funding will be assessed with respect to the plan, it will not be limited to supports from SCPI.

Responsibilities:

The members of the board will provide input into:

- ◆ the *Community Plan*
- ◆ potential areas of collaboration among concerned agencies and service providers
- ◆ community projects which can address the needs identified in the *Community Plan*
- ◆ issues such as education and employment which affect and/or are affected by homelessness
- ◆ sustainability of the *Community Plan* beyond SCPI timelines and funding
- ◆ proposals as set out by the Community Planning Committee
- ◆ the development of a Communication Strategy, and the processes and protocols around the delivery of same.

Meetings:

The board will meet bi-weekly in initial development stages. Dates, times and locations of meetings will be determined by the Board at a regular meeting. A draft community plan will be available to the community within four months of the date of this document.

Membership:

The Advisory Board should be representative of the greater community, just as the community homelessness plan needs to be put into context of the greater community. The Advisory Board shall consist of 8-12 people; representation is invited from across a mix of sectors in the community. Term of Membership shall be two (2) years, with the possibility of extension(s). In the event of a vacancy on the Board, the member from the missing sector may recommend an alternate.

Sector	Organization	Representative
Aboriginal Housing	Tipi Moza	Dave Jackson

Aboriginal Supports	Migizi Wiigwaam	Lianne Zomer
Municipal Government	City of Kingston	Greg Grange
Funder	United Way	Bhavana Varma
Youth Sector	Home Base Youth Net	Carol Chafe
Municipal Housing	Town Homes Kingston	Dave Mitchell
Non Government Org.	Low Income Needs Coalition	Evelyn King
Municipal Housing	King. & Front. Housing Corp.	Francyne Givogue
Aboriginal Employment	Kagita Mikam	Linda Bedore
Health Services	North Kingston C. Health Cent.	Linda Stevens
Private Non-Profit/Shelter	Ryandale Shelter for the Homeless	Terri Fleming
Faith Community	Sisters of Providence	Sister Pauline Lally

Education *Membership was sought from these sectors,
but was unavailable at the time.*
Legal Community
Residential Housing
Business
Seniors

Staff:

Gov't. of Canada	Human Resources Devel. Can.	Carol MacIntyre
Not-for-profit Planning	Social Planning Council	Janet Comis
Not-for-profit Planning	Social Planning Council	Liana Finucan
Not-for-profit Planning	Social Planning Council	Kobena Hanson
Not-for-profit Planning	Social Planning Council	Saskia Tait

Chairperson:

The Chair will serve a term of up to six months and will be elected by the membership. His or her responsibilities include:

- to arrange for the meeting space
- to coordinate the agenda
- to lead the meeting in an effective and efficient manner
- to guide the decision-making process

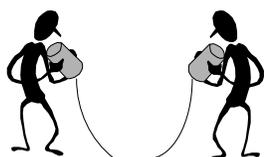
Reporting:

The Recorder will be elected by the membership. Minutes will include both majority and minority views expressed at the meetings, and will be sent, upon approval, to all Advisory Board members as well as Community Planning Committee members or any community member who requests them.

Guiding Principles:

The Advisory Board believes that:

- members working collaboratively will ensure the success of our community initiatives.
- all members should have the opportunity to speak and be heard.
- shared values, skills, and resources will contribute to our success.
- active involvement of those impacted will ensure long-term success.



Conflict of Interest Guidelines

Both real and perceived conflict of interest should be talked about openly. It is as important to challenge or declare perceived conflict of interest in order to maintain trust within the group.

How to Know When Conflict of Interest Exists:

It is crucial that material conflict of interest be declared openly and that agreed-upon guidelines exist to prevent material conflict from influencing decisions to be made on the basis of interest in the larger population.



Material conflict of interest exists in situations in which a voting or participating non-voting member, or their spouse or partner, or people living in the same household, or their organization, could stand to gain financially, or in other tangible ways, from the decision arising from the discussion.

Conflict of Interest Procedures:

1. Disclosure:

The member in conflict of interest has the responsibility to disclose their interest at the meeting during which the proposed issue is *first* considered, or at the first meeting when the member becomes interested in the proposed issue.

Members are expected to disclose conflict of interest, but there may be situations in which members do not recognize their own possible conflict. Any member is responsible to make a query when they have concern about conflict of interest on the part of any other member. (For example, "Could you clarify for us your organization's intent regarding applying for funds that may become available in this envelope.")

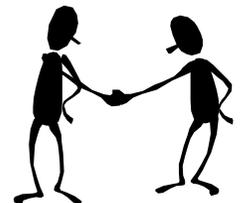
The chairperson of the group has the responsibility to remind members of potential conflict of interest and request that members examine their position regarding conflict of interest. (For example, "Before we enter into this discussion, I wish to remind members that we are developing guidelines for prioritizing expenditure. Anyone connected with any organization that is planning to apply for funds should declare their conflict of interest to the committee. If you are unsure of your organization's intent, I would request that you declare possible conflict.")

2. Requirements:

The person who is in conflict of interest is required to declare that conflict at the earliest possible opportunity and to abstain from voting on the matter. Once a conflict has been declared, the person in conflict should not be present during any discussion, particularly where information is discussed that might be considered confidential in relation to the matter.

Voting and Decision-Making Policy

The business of the Advisory Board shall be conducted by a simple majority of those in attendance at a duly constituted meeting of the Advisory Board and voting in response to a motion properly moved and seconded.



Proxy voting will not be allowed. In the case of a vote around the simple business of the Board, a quorum will be sufficient, but votes on proposals or programs would be solicited from Board members by phone or email, with all due consideration for expediency. A quorum shall be equal to or greater than 50% of the membership of the Advisory Board.

Members shall vote based on their best judgement taking into consideration the goals and objectives of the *Community Plan*. While striving for and valuing consensus in decision-making, the Advisory Board will make decisions by majority vote; dissensions and abstentions will be recorded.

Appendix B:

A List of Participants in Working Groups and Meetings

Advisory Board Membership

City of Kingston Department of Community Services, Social Housing Division
Home Base Housing, Youth Net
Human Resources Development Canada
Kagita Mikam
Kingston Frontenac Housing Corporation
Kingston Not-for-Profit Housing Association
Low Income Needs Coalition
Migizi Wiigwaam
North Kingston Community Health Centre
Ryandale Shelter for the Homeless
Sisters of Providence, Justice and Peace Office
Social Planning Council (*ex-officio*)
Tipi Moza
Town Homes Kingston
The United Way

Community Planning Committee Membership

Bridge House Kingston
Dawn House Women's Shelter
Detoxification Centre
Downtown Youth Drop-In Centre
Elizabeth Fry Society/Kaye Healey Homes
Frontenac Community Mental Health Services
(Formerly Kingston Friendship Homes)
Habitat for Humanity
Home Base Housing, Housing Help Centre
Home Base Housing, Youth Net
Human Resources Development Canada
Inn from the Cold
Kagita Mikam
Kingston and District Immigrant Services
Kingston Association for Tenants
Kingston Co-operative Homes Incorporated
Kingston Frontenac Housing Corporation
Kingston Interval House
Kingston Not-for-Profit Housing Association
Kingston Youth Shelter Project
Martha's Table
Ongwanada
Ryandale Shelter for the Homeless
St. Vincent de Paul Society
The Salvation Army Harbour Light Centre
Sisters of Providence
Social Planning Council
Tipi Moza
Town Homes Kingston
The United Way

Information Group Membership

Central Frontenac Community Services
City of Kingston
Downtown Kingston!
Elder Abuse Task Force
Frontenac Kingston Council on Aging
Greater Kingston Homebuilder's Association
Home Base Housing
Inn from the Cold
Katarokwi Native Friendship Centre
Kingston and District Association for Community Living
Kingston Construction Association
Kingston Senior's Association
Llynlea Corporation
Migizi Wiigwaam
Peer Support of Kingston
Project Reconciliation
Providence Continuing Care Centre Mental Health Services
(Formerly Kingston Psychiatric Hospital)
Red Cedars Shelter
Ryandale Shelter for the Homeless
St. Vincent de Paul Society
Soup Truck Mission

Thanks to all participants and others in the community for your invaluable assistance in the formulation of this *Community Plan*. We could not have done it without you and are grateful for your assistance. The Social Planning Council is solely responsible for any errors and/or omissions found in this document.

Appendix C:

An Inventory of Services in Homelessness and Housing in Kingston

Shelter/Service/Support	Inventory	Demand	Gap
✓ Emergency shelters			
Dawn House Women's Shelter - Monday to Friday 24-hour emergency service	10 beds, women (age 16+) and children; 24- hour crisis line, counselling, basic necessities including meals, information, referral, assistance with housing search, advocacy, public education.	Turnaways measured starting last six months--not compiled yet--approx. 6/month when full-consistent occupancy rates of approx. 80-84%.	All of the shelters are currently experiencing high occupancy rates (summer 2001).
Gabriel Home Kingston - Monday to Friday 8:30-4 (Office)	6 fee-for-service beds; young, pregnant women given priority; counselling, life skills, recreation, crafts. Fees \$10.50/day or \$325.00/month for singles. Mothers with babies \$511/month.	Occupancy rate: 1997 - 70% 1998 - 80% 1999 - 75% 2000 - 55%	All of the shelters are currently experiencing high occupancy rates (summer 2001).
Harbour Light Centre, The Salvation Army - Monday to Friday, 8-4 (Office) 24 hour hostel	6 hostel beds, 18 suites in treatment program, for men (age 18+) who suffer from substance abuse; assessment, treatment, rehabilitation and after care; accessible; smoke-free. Five-(5) day length of stay limit in hostel accommodations.	Occupancy rate: Jan-Mar 54.2% Apr-Jun 59.6% Jul-Sep 62.9% Oct-Dec 50.1%	All of the shelters are currently experiencing high occupancy rates (summer 2001). Allowable lengths of stay need to be increased to reflect the difficulty of finding affordable housing.
Home Base Housing Inn from the Cold - <u>Closed Apr. 27/01</u> 8p.m. - 8a.m.	12 beds, seasonal; shelters must be full before accommodation is given. No limit of stay is imposed.	Occupancy rate 100% - no one is turned away. 11 people served per day on average, 79 individuals served per month.	The shelters are experiencing high occupancy rates; this overflow space is greatly missed.
Kingston Interval House Outreach Mon-Fri 9-5 Otherwise 24 hours	20 beds for women and children only, priority given to women leaving abusive situations; if space allows, women in housing crises accommodated; accessible; counselling; crisis line; transitional support program; early intervention outreach programs for children. Length of stay is maximum 2 months.	Occupancy rates vary dramatically because based on length of stay: 1998 - 70%, 1999 - 81%, 2000 - 83%, 2001 to-date - 75%	All of the shelters are currently experiencing high occupancy rates (summer 2001).
Kingston Youth Shelter Project - Daily 24 hours except 1-4 p.m.	6 beds (up to 18, if staffing permits) for youth up to age 25, counselling, information and referral, basic necessities including meals; drug-, alcohol-, violence- and threat-free environment.	Very rarely turn away-32 in 20 months of operation. Consistent occupancy rate all year of 6 beds. Inn from the Cold provided a place to send those who couldn't stay for various reasons, e.g.	Full occupancy of beds could be provided if funding allowed for more staffing.

	Length of stay limit is 15 days per month.	violence, severe mental health issues.	
Ryandale Shelter for the Homeless - Monday to Friday 8-4 (Office); first come, first serve, daily 4 p.m. to 8 a.m.	9 beds (plus 2 couches in winter) for men and women 18+ and their families; support worker, information and referrals. Soon to be accessible. Five- (5) day length of stay limit.	24 turn aways per month. 2000 average capacity: 69% Jan 2001 capacity: 73% Jan - June 2001 average capacity: 87%	Lengths of stay need to be increased to reflect the difficulty of finding affordable housing. All of the shelters are currently experiencing high occupancy rates.
✓ Transitional housing	Inventory	Demand	Gap
Frontenac Community Mental Health Services (formerly Kingston Friendship Homes) Office Mon-Fri 8-4 - accessible	73 beds in 13 locations (3 permanently serviced houses, 2 high support, 4 medium support, 4 low support); for men and women ages 16-65 with a mental illness. Services also include Community Case Management Team, Assertive Community Care Team (ACCT) and a North Shore ACCT, Family Resource Centre, Friendship Centre (see Drop In), 24-hour Emergency Response Services (telephone crisis) (see also Child care supports).	2-3 intake interviews per week/10 individuals per month. Approx. 2 placements per week to housing or wait list. 100% occupancy	The agency is in negotiations for an additional 42 beds; and requested funding for 2 respite beds, which was not approved. More respite beds are required to avoid housing those with a mental illness in the shelters, where staff are not trained for such needs.
Home Base Housing - Youth Net - Passage House	6 beds, up to 24 hour support, 1 location, men and women aged 16-24, counselling, life skills, referrals to other agencies, outreach with past clients only.	Demand is high because of slow turnover and low number of beds. 96% occupancy fiscal year ending Mar. 31 st /01 for Youth Net as a whole. Wait list varies from immediate to two months.	There is a grave need for affordable transitional housing for youth in Kingston.
Joyce Detweiler Half-way House - Elizabeth Fry Society 24 hour staffing	10 (8 federal & 2 provincial) beds for women on conditional release from correctional facilities; programming and counselling to support transition to the community. RGI 25% of resident's income to a maximum of \$25/week. If no income, fully subsidized. Services available to women in the community as well. Community outreach in the form of a 24-hour support and referral line; on-call service (emergency back up); referrals to other agencies; crisis intervention; accessible.	Turn-aways for women not on official conditional release (e.g. bail, provincial probation or provincial parole). 34 women supported in 2000/2001 fiscal year. 60-80 % average occupancy for the last 3 fiscal years. Last fiscal year: Community outreach served 755 women, 310 referrals; 251 calls from incarcerated women.	One condition for bail is having housing, so many women are detained because they have no place to go.
Portsmouth Community Correctional Centre	30 beds; supportive housing for men; sliding scale rent Max \$100 employed residents; allowance for unemployed residents; rehabilitation programs in the community; referrals to community services and life skills training based on individual needs.	Occupancy averages between 90-100%. Wait list: variable.	Wait lists vary but transitional housing is needed for men coming out of this institution who require some assistance with reintegration into the community.
St. Lawrence Youth Association Achievement St. Lawrence (Long- or short-term depending on individual sentence.)	10 beds; supportive housing for phase one young offenders (12 - 16 years of age) in conflict; residential and community-based services; 24-hour crisis line; serving Kingston and surrounding townships; Lennox and Addington; Hastings; Lanark; Leeds and Grenville;	Occupancy fiscal year 1999-2000: Occupancy fiscal year 2000-2001: 83.6% Apr 2001: 107.6 % Predicted average occupancy for 01/02: 88-90%. Gradually and progressively higher demand.	There are no provincial half-way houses in Ontario.

	Prince Edward; counselling; occasional life skills training; referrals by community support services		
St. Lawrence Youth Association Sundance (Long- or short-term depending on individual sentence.) 44 days average length of stay Apr 2000 - Dec 2000.	10 beds; supportive housing for phase one young offenders (12 - 16 years of age) in conflict; residential and community-based services; 24-hour crisis line; serving Kingston and surrounding townships; Lennox and Addington; Hastings; Lanark; Leeds and Grenville; Prince Edward; counselling; occasional life skills training; referrals by community support services	Occupancy fiscal year 1999-2000: 84.6% Occupancy fiscal year 2000-2001: 88.9% Apr 2001: 95.7% Predicted average occupancy for 01/02: 88-90%.	Demand is high for this service.
✓ Second stage housing	Inventory	Demand	Gap
	Currently, there is no second stage housing in Kingston.	There is a great need for intermediary – i.e. between emergency and permanent independent - supportive housing.	
✓ Supportive housing (short/medium term)	Inventory	Demand	Gap
Almost Home	9 units low-cost accommodations (overnight or daytime respite) for families of children receiving medical care in Kingston; kitchen facilities and staples; laundry facilities; information and referrals.	Approx. 60%-100% variable occupancy.	Need is being met.
Bridge House I	10 units affordable housing for women and children visitors to local penitentiaries; support worker; child care, affordable transportation, emotional support, counselling, information, and referrals on the correctional system and housing. 2 beds reserved for female youth under care of CAS.	Cyclical - May - Sept. demand is higher, as are December and Spring Breaks (Children off school, holiday time from work) 99/00 served 1,914 women, 857 children 00/01 served 1,974 women, 656 children	Demand is increasing for this valuable service.
Bridge House II	As above, Bridge House I	As above, and: 99/00 served 1,483 women, 1,172 children 00/01 served 1,594 women, 468 children	As above.
Extend-a-Family partnered with Ongwanada/KDAACL/ Community Living North Frontenac, Child and Family Services L&A MCSS is governing body	Out-of-home Respite Initiative: 112 children (as of June 18/01) eligible (multiple disability) candidates have been identified for need. Partners use a Risk Assessment Device to determine relative level of need fairly. Under 18 years only. List is in constant flux, based on new referrals and changes within families. Eligibility for this service does not connote crisis, but risk.	Can serve top 40 on list for now. Attempting to serve more. Wait list holds remaining children.	Several children in the community who have been identified for need will not receive service due to lack of funding and staffing.

Frontenac Community Mental Health Services, formerly known as Kingston Friendship Homes	Duration of stay depends on individual needs; see Transitional Housing .	N/A	N/A
Geaganano Residence (Our Home)	17 beds in one facility for patients from the western James Bay area in Kingston for health care; support worker; for Cree or Northern patients and their families; social work, translation in Cree/English for patients in local hospitals; information and referrals. Funded by the Weeneebayko Health Ahtuskaywin (Between two bays health council).	Average 1100 patients and 500-700 family members per year. Total 1600-1700 individuals per year.	Have to use local hotels for overflow on a daily basis.
Home Base - Youth Net - Medium support housing.	6 RGI beds in two locations for youth aged 16-24; for graduates of Passage House and individuals from the community; counselling, life skills, referrals, information, outreach with past clients.	Average of 3 individuals on wait list - time frame is immediate to 3 months.	There is grave need for medium-term supportive housing for youth.
Kingston and District Association for Community Living - Adult Respite	3 short-term respite beds available to qualifying families with developmentally challenged adults. See also Supportive Housing (long term) .	Intermittent occupancy based on demand and availability. Currently serving 16 adults.	Demand for this service is predicted to increase as more aging parents care for their adult developmentally disabled children at home.
Kingston and District Association for Community Living - Homesharing Respite	Numerous community families provide support for 11 children and 25 adults with developmental challenges.	N/A	Demand for this service is predicted to increase as more aging parents care for their developmentally disabled children of all ages at home.
Ongwanada - Respite Services Families are asked to call Human Resources (613) 548-4417 ext. 157 for a list of individuals willing to do in-home respite.	Short-term respite services: available for family caregivers; a list of staff willing to work for families needing support in their own home. 17 beds (7 currently being used by full-time people).	Wait list for additional respite exists.	Demand for this service is predicted to increase as more aging parents care for their developmentally disabled children of all ages at home.
Providence Continuing Care Centre - Respite Care Program	4 beds; for chronically ill persons who live in the community. Minimum stay 14 days, maximum stay 30 days.	Wait list: one (1) week	Varies depending on need. Six beds might eliminate or at least alleviate wait list.
✓ Supportive housing (long-term)	Inventory	Demand	Gap
Abbeyfield Houses Society of Kingston	Project in development.	Project under development for 10 seniors barrier-free units; counselling, some meal preparation, 'family-like' support system.	Housing for seniors who don't require nursing home care, but who do need some supports.
Extendicare Nursing Home	150 long-term care beds; recreation; physio-, speech and occupational therapy; referrals to services in community; social worker; beautician; personal laundry; volunteer program; tuck shop; meals service; dietician; residents'	Wait list: 29 individuals	29 beds. Note that some individuals may be on more than one list.

	council; advisory physician. All referrals by Community Care Access Centre.		
Fairmount Home	96 long-term care beds; some secure rooms; recreation; physio- and occupational therapy; referrals to services in community; beauty parlour; personal laundry; volunteer program; meals service; dietician; residents' council; three advisory physicians. Recognized for its gentle care philosophy. All referrals by Community Care Access Centre.	Active wait list: 40 individuals On-hold wait list: approx. 100 individuals.	40 beds. Note that some individuals may be on more than one list. Just received allocation of 32 new long-term care beds. Digging starting next spring to be completed summer or fall 2003. This phased project will not affect the existing residents.
Frontenac Community Mental Health Services, formerly known as Kingston Friendship Homes	Duration of stay depends on individual needs; see Transitional Housing .	N/A	N/A
Home Base Not-for-Profit Housing Inc. Core Program Monday to Friday, 8:30-4:30.	60 units (2 accessible); of these, 45 are RGI, rent supplements available; most shared living but also one-bedroom units available; for single adults and youth; also for people with various disabilities or who are transient; counselling; lifeskills; 24-hour on-call; referrals; advocacy. Operates the Kingston Housing Help Centre and the Housing Registry Services for Kingston, Frontenac, Lennox and Addington	Wait list: 1 month -2 years	There is a shortage of supportive housing in Kingston.
Home Base Housing - Youth Net - permanent housing	2 permanent RGI beds in 1 location; counselling, life skills, referrals, information, outreach with past clients	Demand is high because of slow turn-over and low number of beds. 96% occupancy fiscal year ending Mar. 31 st /01 for Youth Net as a whole. Wait list varies from immediate to two months.	There is a shortage of supportive housing for youth in Kingston.
Kaye Healey Homes - Elizabeth Fry Society	37 RGI supportive units in 14 locations; for women and their families who have economic and counselling needs; support worker; counselling.	Wait list for rent supplement 2 years+.	There is a shortage of supportive housing for women in contact with the law in Kingston.
KDACL - Home Sharing Program (formerly Associate Family Program)	Residential long-term housing in community families for 1 child and 24 adults.	3 adults on wait list for appropriate family match	3 families willing to take on a developmentally disabled adult long-term.
Kingston and District Association for Community Living - Residential Program	Residences with supports for developmentally challenged adults 18+. 46 individuals in 12 locations.	Pressures and priorities process in county - participants include KDACL, Christian Horizons, North Frontenac Community Services, Adult Protective Service managers; Ongwanada. (Inventory of people in desperate need of service.) Turn over is very slow, as many people need life-long supports.	Desperate need for increased capacity (i.e. funding) in services for developmentally challenged people; demography of population will make situation worse before it gets better e.g. senior parents with children at home needing support.

Ongwanada - Community Residences Community Residences and Home Share Telephone: (613) 548-4417 ext.310	26 accessible community residences for children and adults with developmental disabilities in Kingston and Area; 3 provide 24-hour nursing support to individuals with chronic medical conditions; 138 spaces.	Wait list: 33 individuals (turn over is very slow)	33 beds.
Ongwanada - Home Share	Individuals are placed with a host family that receives remuneration and support from Ongwanada; 60 spaces.	Wait list: 66 individuals (turn over is very slow).	66 beds.
Ongwanada - Supported Independent Living	Four (4) hours of support is provided per week to individuals aged 18+ with a developmental disability.	Wait list: 4 individuals	16 hours of support.
Providence Continuing Care Centre - Endymion Project	10 one bedroom RGI fully supportive units; support workers; accessible; 24-hour assistance; ages 16+; for people with a permanent physical disability who can direct their own care.	100% occupancy. Wait list: turn over very slow, 3-5 years conservative estimate. 7 individuals presently on active list.	7+ beds. Note that some individuals may be on more than one list.
Providence Continuing Care Centre - Providence Manor	223 beds; fees geared to income; men and women 18+ who require long term care or secure nursing; 2 dedicated Short Stay program beds; services in Portuguese, Spanish, Polish, Dutch, Italian, French.	Active wait list: 130 individuals Hold wait list: 276 individuals On-hold are people living in community with assistance from the CCAC and family. When they have to be admitted, they are slotted in from time they applied.	130 beds. Note that some individuals may be on more than one list. Short Stay program beds are also in high demand in Kingston, and crisis situations are difficult to manage.
Rideaucrest	170 beds, 44 of which are in a protective environment; some geared to income, all referrals by Community Care Access Centre; men and women age 18+; long-term care; social activities department; dietician; meals program; tuck shop; beautician; volunteer program.	Active wait list: 138 individuals.	138 beds. Note that some individuals may be on more than one list.
Trillium Ridge	93 long-term care beds; recreation; physio-, speech and occupational therapy; referrals to services in community; social worker' beautician; personal laundry; volunteer program; meals service; tuck shop; dietician. All referrals by Community Care Access Centre.	Active wait list: 30 individuals	30 beds. Note that some individuals may be on more than one list.
✓ Not-for-profit housing	Inventory	Demand	Gap
Crystal Springs Manor	50 units for seniors; some accessible; some supplements available; common space. 30 market; 20 RGI.	Wait list RGI: up to 50 individuals. Wait list Market: 10-12.	There is a shortage of RGI units for seniors in Kingston, especially for those who don't require nursing home care, but who do need some supports.
Downtown Kingston Senior Citizens Apartments	80 affordable units for seniors, including 8 accessible	No wait list.	There is a shortage of RGI units for seniors in Kingston, especially for those who don't require nursing home care, but who do need

			some supports.
Dutch Heritage Villa	35 market rent units for seniors; sponsored by the Dutch community in Kingston.	Information unavailable at this time.	There is a shortage of RGI units for seniors in Kingston, especially for those who don't require nursing home care, but who do need some supports.
Elizabeth Cottage	13 market rent units for women seniors; meal program; laundry facilities.	Wait list one year+.	There is a shortage of RGI units for seniors in Kingston, especially for those who don't require nursing home care, but who do need some supports.
Habitat for Humanity	Homeowners and volunteers build simple, decent, affordable houses in partnership with those in need of affordable shelter. Houses sold to families at no profit, with no interest charged on the mortgage. One house built in Kingston since 1994, plus at least 3 significant renovations and numerous minor repairs.	Receive 2-3 calls per week, many from people who meet the criteria based on demonstrated need. Clients are generally living at or near the Low Income Cut-Off but also must have income to cover usual household expenses associated with homeownership.	There is a shortage of affordable housing in Kingston. Habitat needs property on which to build.
Kaye Healey Homes - Elizabeth Fry Society	See above, in transitional housing, and supportive housing, short-term.	N/A	N/A
Kingcole Homes	19 units affordable housing. No housing subsidies available.	No wait list, currently. 85% occupancy, approx.	There is a shortage of affordable housing in Kingston.
Kingston Elderly Citizens Homes (including Rosedale)	94 market rent seniors units in 2 locations; sponsored by the Kinsmen Service Club; some accessible.	Wait list married couples: 15-20 households. Less for singles apartments. Turnover very slow.	There is a shortage of RGI units for seniors in Kingston, especially for those who don't require nursing home care, but who do need some supports.
Kingston Frontenac Housing Corporation	977 rent geared to income units, 472 rent supplement program units.	Wait list: 1,220 households. Homeless list as of April 5 is 133, of which 89 applicants want 1 bedroom	There is a shortage of RGI units in Kingston.
Marion Community Homes Corporation	49 (50% RGI, 50% market) units for seniors; 3 accessible.	Wait list: average 30 individuals; currently 34; 1-2 years.	There is a shortage of RGI units for seniors in Kingston, especially for those who don't require nursing home care, but who do need some supports.
Phoenix Homes Kingston	6 units in 3 locations; for families; rent supplement available; counselling	Wait list for rent supplement 3 years+	There is a shortage of RGI units in Kingston.
Porto Village	40 rent geared to income units, 10 market rent. Accessible.	Wait list one year+.	There is a shortage of RGI units in Kingston.

Royal Canadian Legion Villa	40 units; for seniors, veterans; rent supplements available; sponsored by local Branches of the Royal Canadian Legion. Accessible?	Information unavailable at this time.	There is a shortage of RGI units for seniors in Kingston, especially for those who don't require nursing home care, but who do need some supports.
Seven Eighty (780) Division (CMHC)	107 units; for families; limited accessibility.	Information unavailable at this time.	There is a shortage of RGI units in Kingston.
Tipi Moza (Iron Homes)	17 rent geared to income scattered houses. Urban Native housing; counselling available.	Very limited turnover on an annual basis. Wait list 2 years+, 21 households.	At least 15 units of family and singles housing is needed for urban aboriginals in Kingston.
Town Homes Kingston	262 RGI units, 156 market rent units at 7 sites; some accessible; for families, seniors, disabled persons.	Wait list 2 years+, 621 households	There is a shortage of RGI units in Kingston.
Weller Arms Non-Profit Homes Inc.	24 rent supplemented, 6 market rent units for seniors; 2 accessible units.	Wait list: 48 households as of May/01; 100% occupancy.	There is a shortage of RGI units for seniors in Kingston, especially for those who don't require nursing home care, but who do need some supports.
Zion United Church Foundation	Up to 21 rent-geared-to-income units, as a part of 42 units, seniors 60+only; accessible.	1 vacancies for June 2001; Wait list: less than one year.	There is a shortage of RGI units for seniors in Kingston, especially for those who don't require nursing home care, but who do need some supports.
✓ Co-operative housing	Inventory	Demand	Gap
Cataraqui Co-operative Homes	13 rent-supplemented units, 13 market units, for families; 2 accessible units; for families.	Wait list 3 years+	There is a shortage of subsidized units in Kingston.
Kingston Co-operative Homes	95 market and rent supplemented houses, for families (of 95, 8 are for singles); 4 accessible.	Wait list for subsidy: 2-3 years; no wait list for market rent units.	There is a shortage of subsidized units in Kingston.
Lois Miller Co-operative Homes	84 market and rent supplemented units, mixed; 5 (of 84) are accessible.	Wait list 3 years+, currently vacancies in market rent units only.	There is a shortage of subsidized units in Kingston.
Science '44 Co-op	18 scattered co-ed houses for 142 students, meal program available	The needs of students are currently being met, but housing shortages are predicted upon arrival of the double cohort.	
✓ Access to housing services	Inventory	Demand	Gap

Corporation of the City of Kingston	Administration of downloaded Federal and Provincial housing programs. Direct administration is scheduled to begin October 1 st , 2001.	N/A	N/A
Hearthmakers Energy Co-operative	Community based, non-profit co-operative working to reduce energy bills through bulk purchase of oil and promotion of more efficient energy use; home energy audits, education of the community.	Currently 100-150 members, anticipate 500-1000 by end of December. Expected savings: Approximately 30% from energy efficiency audit, \$300 in bulk oil per heating season, depending on case.	This program is new, so the co-operative is working toward a higher profile in the community.
Home Base – Youth Net - Transition Worker	For youth, aged 16-24; advocacy, transportation, referrals to other services, life skills training, stress management, minimal nutrition	Demand is high because of slow turn-over and low number of beds. 96% occupancy fiscal year ending Mar. 31 st /01 for Youth Net as a whole. Wait list varies from immediate to two months.	This worker's contract has been extended but is up at the end of August; 33 of 66 clients have received assistance finding housing. Continuation of this position will be beneficial to youth in Kingston and the agencies who serve them.
Home Base Housing Help Centre – Monday to Friday 8:30-4:00	70 people currently using free voicemail services, 11 walk-ins per day average, central application processing for not-for-profit and co-op housing, housing registry, housing outreach service; accessible. Street outreach starts in May; see Outreach Services , below.	Applications for not-for-profit housing, 85 per month average, 3/day average. Placements: 19 per month average. During the four months this drop-in service operated staff at the Housing Help Centre helped 45 different individuals gain and secure affordable housing.	The addition of more staff, and training of new and existing staff to provide for increasing numbers of clients with mental health issues could enhance this service.
Home Base Housing - Housing Help Centre Door Ways Program (rent and utilities bank)	Interest-free loans to a maximum of \$700. Total funds raised privately: \$20,000. Must be homeless to be eligible. The intent of this program is to help move people out of shelters faster. Loans for last month's rent, moving expenses, standard utility connection costs, paying rent in arrears to non-profit housing providers which affects their ability to be approved for further non-profit housing; repayment in monthly instalments or hours of documented volunteer work.	This is a new program – extensive statistics are unavailable as yet. In 3-4 weeks of operation, 5-6 applications have been approved, for a total of approx. \$2,500, and people have already begun to repay their loans.	Within the boundaries of eligibility, the need is being met, however sustainability may prove a problem for this program. Tenants in Kingston would benefit from increased funding to such initiatives. Private fundraising continues.
Kingston and Area Housing Registry – maintained by Home Base Housing	See above in Not-for-Profit Housing ; see also Housing Help Centre, above.	N/A	N/A
Kingston District Community Information Centre	Puts out Where to Turn for Housing Services booklet (available in fall 2001), a subsection of the Where to Turn, a directory of community services and agencies.	1000 copies printed annually; between 900 and 1000 copies generally are sold each year. 2000 copies of the Where to Turn for Housing Services booklet have been printed and are available at the Housing Help Centre and other locations.	Need is being met.

Kingston Not for Profit Housing Association	An association of not-for-profit housing providers working to facilitate and advocate for the maintenance and development of not-for-profit housing in the Kingston area.	N/A	N/A
Kingston, Frontenac, Lennox & Addington Community Care Access Centre	Arranges housing in long-term care facilities; eligibility determined by Care Manager.	During intake process, people identify which facilities they'd like to be in. Wait list: variable depending on individual needs and choices.	Services are being cut due to lack of funding despite increases in demand.
Queen's University Apartment and Housing Service	Housing listing service registers houses, apartments, shared accommodation; copying available for a fee.	N/A	N/A
St. Vincent de Paul Society Emergency Services	See below: Drop-In Centres, Food banks, Furniture banks and sources, Appliance banks and sources, and Storage for donations.		N/A
Summerhill Apartments	Support from Kinsmen for qualifying seniors 60+ in the form of bursaries.	No wait list for bursaries at the moment.	Need is being met.
The Salvation Army Tenant Assistance Program (Rent and Utilities Bank)	Up to \$1,500 per household/individual. If you pay back, you can come for more. Eligibility requirements include paying no more than 75% of income on housing. Priority to families with children. Minimum of 2.5% of income in repayment plan. Must be under threat of eviction due strictly to rental arrears of two months or less. OW recipients are eligible. Must have exhausted all other resources. Those who are chronically in arrears are not eligible, because the \$1,500 won't cover their needs. Must have ability to repay the loan. Must be willing to attend credit counselling and more. Sustainability problems if people do not or cannot pay back.	In excess of \$60,000 has been loaned since inception of program as of June 19 th ; more for utilities than rent.	Tenants in Kingston would benefit from increased funding to such programs.
The Salvation Army/Kingston Frontenac Housing Corporation Tenant Assist Program	Co-operative program to assist entry into not-for-profit housing by supplying appliances and utilities hook-up assistance.	Program started with \$8140. 4 fridges & 3 stoves given out so far.	Tenants in Kingston would benefit from increased funding to such programs.
The Salvation Army/Union Gas Share the Warmth Program	Current utility bill assistance (no arrears) for families, seniors, and people with disabilities. Consumers of utilities services collect money through donations. Winter months only. Hydro One is not part of the plan.	54 applicants, of which 51 were approved. Never more than \$400/household.	Tenants in Kingston would benefit from increased funding to such programs.
✓ Drop-in centres	Inventory	Demand	Gap
Downtown Youth Drop-In Centre Tuesday, Wednesday, Thursday 4-10	A recreationally based program for youth aged 16-25; pro-social, constructive activities; sports, workshops,	Monthly variations depending on social assistance schedule and weather.	Financial stability for existing programs is at risk. Youth have expressed a need for a drop-

p.m. The hours of this program have been extended as of the end of October 2001.	some computer usage, field trips; healthy snacks available.	1999 average/month 125 2000 average/month 528 2001 average/month 550 Demand and awareness have increased over the last year. Average age 19-20.	in centre in Rideau Heights; funding is required to expand programming.
Frontenac Community Mental Health Services, formerly Kingston Friendship Homes Friendship Centre Mon-Sat 9:30-3:30, Wed 'til 7:30 p.m.	Provides social, recreational, psycho-educational, vocational, rehab services (see also Employment and Pre-Employment Services) for Frontenac Community Mental Health Services clients; second-hand boutique for affordable clothing; Daily lunches Mon-Sat (\$1.50), Wed night meals (\$2.50) for current and past clients; monthly family night.	Services all FCMHS clients.	More residential and respite beds are required for people with mental illness.
Home Base - Housing Help Centre	See above - Access to housing services.	N/A	N/A
Home Base Housing – Drop-In Centre <i>Open May 2001</i> 8-noon, Mon-Fri; Tues. and Thurs. 4-8 p.m., Sat. 7 Sun. 8 a.m.- 2 p.m.	Information and referrals; support staff; weekly life skills and education programs; 4 computers with Internet access (half-hour limit); Housing Help Centre upstairs.	The 24-Hour Drop-In Centre averaged 34 people each day.	The centre provides an invaluable service. Their statistics support the claim of a gap in affordable housing, among others.
Katarokwi Native Friendship Centre - Mon-Fri 9 am - 5pm Friday meals \$2 or free. \$5 membership which is not required to participate in programming.	Social, cultural organization which offers programs to the Native community and links on- and off-reserve Native populations as well as the native Brotherhood and Sisterhood in the prison system. Programs: Healing and Wellness, Life-Long Care (including Aboriginal diabetes outreach worker), Aboriginal Healthy Babies, Aboriginal Pre-Natal Nutrition Program (see Child Care Supports). Potluck socials, cultural events and quarterly ceremonies.	40 members; 35-50 for Fri. meals; over 150+ people for social events; 40-45 people per year for life-long care program; variable numbers for prenatal programs; 30+ Aboriginal Healing and Wellness. 1996 census: 1335 Aboriginal Population in Kingston.	The high usage of these programs indicates the level of need in the community.
Kingston Youth Shelter Project Drop-In 6 - 9 p.m. Daily This program has closed as of the end of October.2001.	For youth up to age 25; meals; message board for contacts; storage of belongings during the day and evening; postings of social events and community resources.	Busier on weekends. Up to 30 individuals per night. 2000 total: 4969 2000 (Jan – Mar): 789 2001 (Jan - Mar): 1163 Nov. 99 to end of April 2001 provided over 6000 meals.	Demand is greatest in summer and fall months, and is increasing.
Martha's Table Friendship Room M,W,Th: 10-4; T, F: 10-1 (Nov - Apr) M,W,F: 1-4 (May - Oct)	Gather to relax, chat with friends, play games or read; tailoring tips once/week; occasional visits from a chiropractor; coffee and snacks provided free.	No statistics are maintained for the Friendship Room.	N/A
Peer Support of Kingston	See below, Health Services	N/A	N/A

Project Reconciliation M, W, F 1-3 p.m., Sun 7-9 p.m. Women: Th. noon-2 Women & Men: Mon 7-9 Narcotics Anonymous: T, Sa 7-9 p.m.	A broad spiritual program for ex-offenders, victims of crime, and their families; private and group counselling.	Quarterly numbers of clients (excludes admin, meetings, etc.) Sept '99: 681 Dec '99: 738 May '00: 1232 Dec '00: 1850 Jan '01: 1469 May '01: 1155 Fluctuations represent availability of workers (i.e. funding)	Numbers do not reflect need. Clients are under-served due to lack of funding. Need program development and crime prevention.
Soup Truck Mission	Hot food (M,W,F,Su) (also see below in clothing banks). Supported by the faith community. Oct 15-March 15 starting 10 p.m. to overnight. Shelter, nourishment, some clothing, companionship. Community Centre for street people.	Between 10 and 20 per night, approximately. Groupings of people change from year to year. Last year many youth, this year 25-65 age group is predominant.	Same as above.
St. Vincent de Paul Society Hospitality Centre Mon-Fri 8:30 a.m.	Coffee and newspapers available. Most stay for lunch but this is also becoming a community space.	Approximately 75% stay for lunch (see below, Meal programs , for data).	See below, Food banks .
✓ Food banks	Inventory	Demand	Gap
Partners in Mission Food Bank (Accessible 3 times per year.)	9,355 hampers in 1999; 9,203 in 2000; 950 in first quarter 2001.	30% single women with children. 14% part- or full-time workers. 12% with disabilities. 64% on social assistance.	Food bank use is a good indicator of the high degree of poverty in Kingston.
St. Vincent de Paul Society Warehouse location (Stephen St.) Emergency food supply See below, Clothing banks and sources, Furniture banks and sources, Appliance banks and sources, Storage.	Provides food for those in need no more than once/month; rarely turn people away. For those who have exhausted their options or who cannot access the food bank. Overnight lodging and transportation can also be arranged. Have also provided camp fees for children, paid for telephone bills, parking permits for St. Lawrence College, bus permits, eye glasses, orthotics, car seats, work shoes or boots, toiletries; assisted burnt-out families.	All figures quoted are from September 2000 to June 2001. Groceries given for 4051 individuals. Vouchers given. Utilities assistance: 21 people (\$2,609). Rent Assistance also. Work closely with The Salvation Army. ~\$3000 for rent given out to 12 families. Closely linked to Healthy Babies, that sends people for diapers and formula. Also assistance with medication. 31 people (~\$1000).	Many who are assisted have mental health, and/or addiction issues. Safe, affordable housing is scarce. Utilities are a problem for people living in social housing, where there have been numerous evictions from in June 2001 due to utilities arrears.
The Salvation Army Community and Family Services	Support services to singles, families, and children in the form of provisions, food, rent (see Access to Housing Services), furniture and household items, medical, clothing, etc. Emergency services, including after-hours response. Counselling and follow-up, suicide prevention, missing persons, supervised child access.	In 1999, assisted 1929 people. In 2000, assisted 2191 people.	Numbers of people requiring assistance are increasing.
The Salvation Army Community and Family Services Christmas Basket Program	Food hampers and toys given to qualifying families and children referred by local agencies. Some deliveries.	Year 2000 total value of hamper contents and toys: \$52,439.	Each year the demand for this service increases.

✓ Meal programs	Inventory	Demand	Gap
Bread of Life Supper Club - The Salvation Army (Weller Ave. location)	Hot meals 3:30-5:00 on the last seven days of the month.	Average 335-365 people per (last week of the) month, two-thirds of which are children.	All of Kingston's meal programs do a lively business, which is indicative of the food crisis in the community.
Frontenac Community Mental Health Services	See Drop-In Centres (above). For FCMHS clients only.	FCMHS clients.	Same as above.
Home Base - Youth Net Dinners	Suppers 2 Sundays per month for past and present clients only.	Youth Net clients.	Same as above.
Martha's Table	\$1 suppers (M,W,Th,F)(M,W,F only in summer months)	1999: 22,588 meals served. 2000: 24,721 meals served. About 10% of clientele are children.	Demand is increasing. Many children use this service. All of Kingston's meal programs do a lively business, which is indicative of the food crisis in the community.
Peer Support of Kingston (see also Health Services)	Tuesday lunch and Thursday evening for members only. (Yearly membership \$5, but no turn-aways.)	30+ people at each meal.	All of Kingston's meal programs do a lively business, which is indicative of the food crisis in the community.
Seventh Day Adventist Church Hot Meal Program	hot vegetarian supper (T)	25-27 people per meal	Same as above.
St. Andrew's Sunday Meal	hot supper Sep-Jun (Su)	Information unavailable at this time.	Same as above.
St. George's Cathedral Lunch Program	hot lunches (M,T,W,Th,F), coffee and snacks earlier	Information unavailable at this time.	Same as above.
St. Mary's Cathedral Hot Meal Program	hot lunch (Sa) Donated loaves of bread also available.	Numbers per meal vary from 30-75 depending on time of month and season.	Same as above.
St. Vincent de Paul Society Sep-Jun (M,T,W,Th,F)	hot lunches	Since September 2000, 6600 meals served. Numbers beginning to increase.	Same as above.
✓ Nutrition programs	Inventory	Demand	Gap
Birthright See also Clothing Banks and Sources, below.	Volunteer-run service offering milk vouchers for six months provided the mother is breast feeding; also free and confidential pregnancy tests, referrals to community agencies, maternity and baby clothing., non-judgmental and empathetic counselling by trained listeners. French.	In Progress	Vitamins for infants, prenatal vitamins

Food for you, food for two KFL&A Health Unit	Drop-in centres for pregnant women and mothers of babies 6 months or younger, who are interested in learning about healthy food choices while pregnant. Free groceries, childcare and transportation.	Community Food Advisors reached 2,095 people with information on healthy eating and safe food handling in 2000. Food for you is a part of that program.	Vitamins for infants, prenatal vitamins
Healthy Babies, Healthy Children KFL&A Health Unit	An early identification and prevention programs for pregnant women and families with young children. Home visits, milk coupons, infant screening, community referrals and information.	1,444 mothers were contacted by a Public Health Nurse after the birth of their baby – a total of 85 % of all births in 2000. 3,498 calls were made to the Baby Talk parenting information line., 25% of which were about breast feeding, 17% about nutrition. The Health Unit serves 175,000 residents in KFL&A.	Vitamins for infants, prenatal vitamins
Nutrition Working Group: partners Better Beginnings for Kingston Children KFL&A Health Unit Limestone Food Sharing Project North Kingston Community Health Centre Partners in Mission food Bank	Milk coupons (2/week, \$3-off bag of milk) and nutrition support for children up to one year, pregnant and breast feeding mothers. Community Gardens, currently running. Community-based cooking programs: What's New in the Kitchen, Basic Shelf, Good Food Box.	BBKC client base: 250 families from catchment area served per month. What's New in the Kitchen: cooks and serves food for families on the last Friday of the month in conjunction with the Bread of Life Supper Club (see Meal Programs, above) – 70-100 servings of food are prepared. Basic Shelf: 6-week program currently running with 10 participants per class. Good Food Box: Average 350 per month.	Networking of nutrition and meal-based programming. Good Baby box in Kingston. Good Lunch box in Kingston. Ongoing funding and resource support. Vitamins for infants, prenatal vitamins
The Salvation Army Community and Family Services	Milk vouchers (through National Child Benefit)	In Progress	
✓ Clothing banks and sources	Inventory	Demand	Gap
Ban Righ Foundation - Queen's University 9-3 M-Th 9-12 F	Free clothing for women in the community (not just students). Other services as well, such as informal counselling, and information about possible financial support for studies.	No monitoring of clothing bank use.	Unknown.
Birthright	Free maternity and baby clothing (see also Nutrition Programs , above).	In Progress	
Free Clothing Drop-in and Textile Recycling Centre (QECVI)	Clothing (\$2 yearly fees for individuals, \$10 for organizations)	In Progress Information unavailable at this time.	
Frontenac Community Mental Health Services, formerly Kingston Friendship Homes	Affordable clothing in boutique in Friendship Centre. (see Drop-in Centres)	FCMHS clients only.	

Goodwill	Affordable clothing	In Progress	
Kingston Youth Shelter Project	Free clothing for youth - very little storage - accept some donations.	There is demand but the shelter is unable to store potential donations to meet need.	Storage space.
Loyalist Community Sharing Centre	Affordable clothing	In Progress Information unavailable at this time.	Storage space.
MOD shops	Affordable clothing	In Progress	
Neighbourhood Sharing Centre	Affordable clothing	In Progress	Storage space.
The Salvation Army Community and Family Services	Emergency clothing - vouchers for Thrift Store. "Give-Away Board" - donations posted with phone number	In Progress	Storage space.
The Salvation Army Thrift Store	Affordable clothing	In Progress	Storage space.
Soup Truck	Clothing Oct-Apr (M,W,F,Su) See above in Drop-In Centres.	See above in Meal Programs.	Storage space.
St. Vincent de Paul Society Clothing depot	Have space for storage of clothes, household linens, toys, small appliances, dishes, utensils, etc.	Demand is high for dishes and other kitchen items, especially.	Storage space.
Value Village	Affordable clothing	In Progress	
Westbrook United Church Clothing Depot	Affordable clothing and household items, \$2/bag, proceeds to Mission and Service Fund. Closed July and August.	Information unavailable at this time.	
✓ Furniture banks and sources	Inventory	Demand	Gap
Goodwill	Affordable furniture	In Progress	
Home Base Housing Help Centre	Links between givers and receivers; very little storage.	Storage space is not available to meet the demand.	Storage space.
Low Income Needs Coalition	Links between givers and receivers; no storage	Storage space is not available to meet the demand.	Storage space.

Servicemaster	Affordable furniture restored from fire and water clean-out sites.	In Progress	
St. Vincent de Paul Society Furniture depot.	Have space for temporary storage. Turn-around time for furniture is very rapid: within 1-5 days	Wait list 3-4 weeks, but it varies. Beds, fridges, stoves especially needed, and have longer wait lists.	Storage space. Service unavailable in summer time.
The Salvation Army Community and Family Services	1 free piece of furniture; priority given to fire victims.	Can't keep up; had to impose 1 piece limit.	Storage space.
The Salvation Army Thrift Store	Affordable furniture	In Progress	
Value Village	Affordable furniture	In Progress	
✓ Appliance banks and sources	Inventory	Demand	Gap
Goodwill	Affordable appliances	In Progress	
Low Income Needs Coalition	Links between givers and receivers; no storage	Storage space is not available to meet the demand.	Storage space.
Servicemaster	Affordable appliances restored from fire and water clean-out sites.	In Progress	
St. Vincent de Paul	Have space for temporary storage. Turn-around time for appliances is very rapid: within 1-5 days	There is a wait list for delivery of appliances and furniture. See also Furniture banks and sources.	Storage space. Services unavailable in the summertime.
Value Village	Affordable appliances	In Progress	
✓ Storage for donations	Inventory	Demand	Gap
	Currently being done on a temporary, ad-hoc basis by LINC, Housing Help Centre, St. Vincent de Paul, and other agencies. No permanent or stable storage exists.	There is a wait list for delivery of appliances and furniture.	An organization willing to accept the liability.
✓ Storage for personal items – temporary and long-term	Inventory	Demand	Gap
	This would allow temporarily 'un-housed' people to keep their belongings (saving them some money).	The shelters the other agencies get numerous requests for storage – long and short term - of personal items large and small.	No free long-term storage of personal effects currently exists in Kingston.

Kingston Youth Shelter Project	Provides lock-up storage for personal effects of clients during the day and evening.		
The Salvation Army Harbour Light Centre	Clients may leave personal effects during the day and evening. Lockers provided, but no locks.		
✓ Outreach services	Inventory	Demand	Gap
Better Beginnings for Kingston Children	Family Visitor Program provides pre- and postnatal outreach and support, one-on-one, focussing on child development. Prenatal education worker is seconded through NKCHC.	Information unavailable at this time.	Hard-to-reach families with high needs are always a concern for providers of children's services.
Frontenac Community Mental Health Services, formerly Kingston Friendship Homes Partnered with Pathways for Children and Youth in Emergency Response Services	Assertive Community Care Team (ACCT), North Short ACCT provide intensive support to individuals living on their own in Frontenac County. Community Case Management Team, offers low to medium support to clients living on their own in the community. Emergency Response Services provides 24-hour telephone crisis support and mobile response to Frontenac County. Crisis response for children in co-operation with Pathways (see Child care supports). Members of Elder Abuse Consultation Network.	62 clients for ACCT and North Shore ACCT. Approximately 90 clients, with 2-4 intakes per week. See above.	There is a gap in outreach services to the shelters in the field of mental health. ACCT and case management teams are busy, and are not funded to provide the kind of support that shelters require at this time. See above.
Frontenac Community Mental Health Services, formerly Kingston Friendship Homes Family Resource Centre	Provides information and resources (books, videos etc.) for individuals and families dealing with mental health issues; community education (including local high schools) and outreach. NAMI - Family to Family Educational Group.	In Progress	
Home Base Housing - Youth Net- Youth Transition Worker <i>Started Feb. 5, 2001</i>	Assist youth in accessing affordable housing in Kingston. Outreach mainly with youth at Kingston Youth Shelter Project or other shelters, Youth Net, or on streets. Help moving into and maintaining housing; advocacy; follow-up services; information on tenant rights and responsibilities; getting income assistance; referrals to community agencies; street outreach and surveying with volunteers to gather data on street youth.	Services were provided to 66 youth, found housing for 33. In 2001, 62% of Kingston street youth are male. 52% of Kingston street youth are homeless. The majority are aged 16-18 years.	Sustainable funding for this position is needed to continue the valuable work being done.
Housing Help Centre - housing outreach support worker	Assistance with obtaining housing; transportation; advocacy; help getting financial assistance; acquiring identification, furniture, clothes, groceries; referrals to local service agencies; information on tenant rights and responsibilities.	See stats on Housing Help Centre, access to housing services	Sustainable funding for this position is needed to continue the valuable work being done.

Kingston Employment Youth Services (KEYS)	Youth outreach worker is working on a Job Creation Project, concentrating on downtown street youth and connections in Kingston West with Bayridge Learning Centre, and other resources. Linked with Home Base Housing outreach workers, and visiting local youth sites for programming and hangouts. Previous JCP did focus groups with youth on what services they want.	Program began recently, so statistics are unavailable as yet.	Sustainable funding for this position is needed to continue the valuable work being done.
KFL&A Health Unit - Healthy Babies, Healthy Children	Pregnant women and families with young children who are identified as having stresses are offered home visits by a public health nurse and a lay home visitor. Milk coupons are available to pregnant women unable to meet their nutritional needs. All new mothers are contacted after birth and offered a home visit. Screening of children; information; referrals.	See Nutrition Programs , above.	This program does a very good job of reaching most families, and although home visits are not possible for homeless people, services could possibly be arranged for in shelters.
North Kingston Community Health Centre	Three community development workers do outreach around the broader determinants of health, namely employment, education, poverty, and social isolation. Community capacity building can include everything from social and recreational activities such as community picnics, to social action and advocacy at the policy level.	Outreach services are available to the greater Kingston area.	More funding could be put to good use in this program, especially for reaching isolated individuals.
Providence Continuing Care Centre (formerly Kingston Psychiatric Hospital) Soon to be Ambulatory Care Centre for all of Kingston	Community Outreach Team (COT) providing case management, and two (2) ACCT teams with more intense service for those with more severe mental illnesses: the Community Integration Program (CIP) and the Psycho - Social Rehab team (PSR) Joint intake with Frontenac Community Mental Health Services.	325 individuals seen by the three teams plus another 125 in less intensive support in the community. Wait list – have not been able to take on many new clients in approximately two and a half years – case management teams are at maximum capacity.	There is a dearth of case management and a lack of affordable and suitable housing along a continuum of needs. Supportive housing is needed, especially 24-hour care for those who require supervision for various reasons.
✓ Health services (general, addictions, mental health, counselling)	Inventory	Demand	Gap
After Hours Medical Clinic	One downtown and one Kingston West site providing drop-in medical services.	In Progress	
Bertha's Co-operative Counselling Centre 847 Princess St.	Individual, family, couple and group therapy for children, youth, men and women; trauma recovery, self-esteem issues, depression, mental health disorders, adjustment issues, relaxation therapy, relationship issues, workplace issues/mediation, childhood abuse recovery, developmental disabilities, loss & grief, alcohol & drug	Bertha's Counselling Centre had to close this year due to lack of funding.	Closure of this type of service is a loss to the community.

	addiction, behavioural difficulties, life skills, anger management, stress management (including job loss). Fee-for-service is geared to income. Accessible.		
Canadian Mental Health Association	Advocacy and public education; information and referrals; workshops, support groups; children's programming; membership fees \$20/year on a sliding scale. No fees for information.	In KFL&A, community educational programming and direct services in mental health issues affect 16,000 people.	Funding through fundraisers and United Way meets needs of mandate but programs rely heavily on volunteers and staff would like to provide more services. E.g. longer phone hours, or more educational programs.
Centre for Addiction and Mental Health	Consultants provide information, assistance, evaluation consultation; information line; brochures and information concerning treatment facilities and community resources.	No direct clinical services of any kind.	N/A
Detox Centre- open 24 hours a day, 7 days a week.	22 beds; including 1 family suite; free, short-term, non-medical, voluntary treatment service; men and women; alcohol and/or other drugs; supportive counselling; referrals; self-help groups; treatment programs; walk-ins; telephone crisis; emergency accommodation when space available. There is no limit of stay but 5-10 days is usual.	144 turn aways in '99 fiscal year.	The turn-aways represent a large number of people not receiving services due to limitations of funding for staffing and space. There is also limited transitional housing for those who need supports after leaving detox.
Family Medicine Urgent Care Centre	One facility providing medical services on a drop-in basis in Kingston West.	In Progress	
Hotel Dieu	Adult Outpatient Psychiatry and Eating Disorder Clinic, Acute care psychiatric services. Assessment and consultation. Individual, couple and group therapy.	In Progress Information unavailable at this time.	Discharge planning has been identified as a gap in service by local agencies serving the homeless.
Frontenac Community Mental Health Services Formerly Kingston Friendship Homes	Provide a variety of services - community support provided for over 200 clients dealing with mental health issues. 2 psychiatrists, 1 psychologist on staff.	Usually a waiting list for services.	
Kingston Frontenac Lennox & Addington Health Unit	Various programs on health, including Healthy Babies, Healthy Children; community food advisors; dental services; dietician; speech and language; environmental health; immunisation and travel clinic; smoking cessation; Raise and little Health!; parenting programs and information; sexual health clinic; street health centre (see below); Way to Wellness program and more.	The health unit serves 175,000 residents in KFL&A.	N/A
Kingston General Hospital	Information is unavailable at this time. Acute care services are lodged at Hotel Dieu (see above).	In Progress	
Kingston Psychiatric Hospital	Now existing as part of Providence Continuing Care Centre Mental Health Services, with no change in mandate, services, staff or location.		
Kingston, Frontenac, Lennox and Addington Community Care Access Centre	Assesses, arranges and co-ordinates health care in people's homes, schools and other locations in the community outside of hospitals. Co-ordinates services for	In Progress	

	personal care; nursing; physio-, occupational and speech therapy, social work, nutritional services, etc.		
Mental Health Services Coalition	In Progress		
North Kingston Community Health Centre	Offers health care services and health promotion programs to North Kingston Community residents. A multi-disciplinary staff provides family medicine, individual and family counselling, nutrition services, occupational therapy and programs to improve health; referrals; advocacy; education. Programming includes Seniors Programs, Diabetic Education, sexual health, Prenatal education, Breastfeeding Support, Infant Group and more. Services in French and Italian.	Population of 23,000 in North Kingston catchment area. 3000 encountered for primary health and other services. Outreach services are available to the extended community (see above).	
Options for Change Community Addictions Treatment Services (Merger of the Alcohol & Drug Referral Centre and Options for Change)	Free and confidential assessment, day treatment lasting 25 days, weekly counselling, aftercare; special programs for women, older adults, family members, problem gamblers, mental health issues.	Wait list 2-3 weeks.	More outreach is needed to bring services to the need.
Pathways for Children and Youth	Mental health services for children, youth and families across KFL&A at 7 sites, 2 of which are in Kingston. Assessment and consultations; individual, family and group counselling; parenting education. Also provide intensive out-of-home, child and family, and day treatment services. Resources: psychiatric, behavioural paediatric, psychological, speech and language professionals.	Provided services for 2,355 individuals in the fiscal year 2000-2001. There is a demand for services for rural children and youth in the areas of housing and transportation. Protocols are in development by local mental health providers.	Gaps include: transitional youth, especially in transfer to the adult system; services for those not seriously ill; dual diagnosis and concurrent disorders treatment protocols.
Peer Support of Kingston 286 Montreal St.	All activities conducted by consumer/survivors of mental health system. Transitions social support groups meet weekly at Kingston Psychiatric Hospital; self-help groups; volunteer positions; referrals to and from professionals. Other activities include: weekly coffee house, meal program, movies, bingo, special events, educational workshops, guest speakers, community resource information, health concerns, arts activities, casual labour positions. Annual membership fee \$5. For men and women 16+. Accessible.	Approximately 30+ drop-ins per day. Active membership 110 persons.	
Providence Continuing Care Centre Mental Health Services	255-bed psychiatric hospital provides inpatient, outpatient, day care, consultation services, teaching, and research. Adult treatment and rehabilitation, mood	In Progress	Discharge planning has been identified as a gap in service by local agencies serving the homeless.

	disorders service, personality disorder s service, geriatric psychiatry, forensics, acute admissions and intensive care, medical infirmary, community placement, community integration program and vocational rehabilitation services. Volunteer program. Resources and information.		
Queen's University at Kingston - Health, Counselling and Disability Services	Medical, nursing, psychiatric services; group therapy; health education; personal counselling, learning support, career exploration, services for students with disabilities. Queen's students only. Fee at registration for part-time students.	In Progress	
Schizophrenia Society of Ontario	Support and education to people with schizophrenia, their families and friends; public awareness; outreach education; advocacy; services in French; membership fees.	In Progress	
South Eastern Ontario District Health Council	Provide planning services for health in the counties of Frontenac, Lennox & Addington, Leeds & Grenville, Lanark, Hastings, Prince Edward	N/A	N/A
Street Health Centre – KFL&A Health Unit	Multi-service centre providing primary care, prevention and treatment to reduce drug-related harm. Multi-disciplinary staff provide needle exchange, counselling, methadone treatment, on-site medication dispensing and specific services for women, children and the aboriginal community. Special clinic for high-risk youth. Confidentiality is stressed.	About 200 people visit the centre on a daily basis. Centre is partnered with other service agencies and is looking to build bridges with other providers to address gaps in services. There are over 200 people in the methadone program.	Cannot reach the need that is present in the community. People need more medical care, counselling, and general health services.
✓ Educational services	Inventory	Demand	Gap
Bayridge Community Education Resource Centre – Limestone District School Board	Offers flexible programming for adults who wish to upgrade their skills or complete Grade 12; all welcome.	In Progress	There are numerous educational services in Kingston, but barriers exist in providing services to homeless people.
Bridging the Gap Council – Limestone District School Board	Offers non-credit and interest courses to adults and (75%) seniors. Annual membership fee	In Progress	See above.
English as a Second Language – Limestone District School Board	ESL instruction at all levels, 5 mornings, 5 afternoons and 2 evenings per week for those 16+. Courses in Citizenship, Pronunciation, Writing Oral Presentations, and TOEFL. Some childcare. Summer courses; all welcome in summer. Fees.	In Progress	See above.

Kingston Literacy Read-Write Centres I & II	Promotes adult literacy. One-one tutoring in reading, writing, spelling and basic mathematics, as well as on-site literacy assessments at KEYS, OW offices, and ERC (see below, Employment and pre-employment services).	In Progress	See above.
Kingston Literacy Family Literacy Centre	Promote and encourage reading in families. Reading and Parenting Program (RAPP) provides packs of books and activities.	In Progress	See above.
Language Instruction for Newcomers to Canada Program – Industry Education Council	ESL program specifically designed to meet the needs of new residents of Canada. Offers childcare while in class; assistance with transportation. Provides continuous intake and graduation. 18+.	In Progress	See above.
Later Life Learning	Lecture series at university level for retirees. Hearing assistance devices available. Fees. 50+.	In Progress	See above.
Limestone School of Community Education	Adult education and training programs; grade 12 diplomas. Daytime or evening, individual or group instruction. ESL, computer skills, work site training, native studies, heritage languages, native languages, customized company training programs. Fees for books.	In Progress	See above.
Literacy Link Eastern Ontario	A co-ordinating body of all adult basic education programs in eastern Ontario. 19+. Read Line provides info to general public about programs and volunteer opportunities.	In Progress	See above.
Open Book	Continuous intake literacy program provides academic counselling, assessment and upgrading to improve skills in reading, writing and math at all levels. Classes in computers, life skills, cooking and nutrition, ESL. 18+	In Progress	See above.
Queen Elizabeth Community Education Centre – Limestone Distric School Board	Full-time instruction at own pace for Grade 12 diploma or upgrading. Co-operative day care, all welcome. Fees: \$10/course, \$25 computer courses (for graduates).	In Progress	See above.
Queen's University at Kingston	Non-denominational and co-educational; 15 faculties and Theological College. Fall, winter, spring, summer terms. Fees. Numerous community groups and services.	In Progress	See above.
Routes to Learning Canada	National office of a charitable organization offering programs through a global network of educational institutions. 55+. French. Fees include meals and accommodation.	In Progress	See above.
School of Extended Education – Algonquin Lakeshore Catholic District School Board	Individualized, negotiated education programs are supportive, non-denominational. Transition to re-enter school or complete Grade 12 diploma. ESL, free childcare during class. Continuous intake. Japanese,	In Progress	See above.

	Spanish, French, German, Filipino, Polish. Fee for books.		
St. Lawrence College	Community college offers full-time post-secondary programs, part-time certificate programs and apprenticeships, continuing education. Fees.	In Progress	See above.
St. Lawrence College - Literacy and Basic Skills Program (see also below – employment services)	Full and part-time preparatory courses for adult students. 19+ or out of school for one year. Eligibility requirements for tuition subsidies. Fees.	In Progress	See above.
Streetsmart – KCVI – Limestone District School Board	An alternative school, which can be used as transition back into school, for youth 16+ who have left the school environment. One-on-one instruction, assessments, flexible scheduling.	One school year – kids come and go approx 120 kids per year, 25 grads last year. Do work with homeless kids... average year 30-40 individuals who are homeless or unstable transitory.	Need Adolescent Care Worker Staffing cut from last year by about 50%
✓ Employment and pre-employment services	Inventory	Demand	Gap
Adecco	Private firm	In Progress	There are numerous employment services in Kingston, but barriers exist in providing services to homeless people.
CORCAN - Corrections Canada	Skills training and work placement program for federally sentenced offenders.	In Progress	There are numerous employment services in Kingston, but barriers exist in providing services to homeless people.
Drake	Private firm	In Progress	See above.
Employment Resource Centre - partners: MOD, Kingston Literacy and HRDC	Job search assistance; referrals for counselling, training and educational services; jobs bank; ongoing workshops	In Progress	See above.
Frontenac Community Mental Health Services, formerly Kingston Friendship Homes (partnered with ODSP/March of Dimes)	Vocational rehabilitation services (employment and life skills) for people with mental illness. See also Drop-in Centres .	In Progress	See above.
Industry Education Council	ESL, continuous intake and graduation – partnering with business, labour, education and community – host many job-related programs	In Progress	See above.
John Howard Society	Employment assistance programs, including On-Site Training in Woodworking	In Progress	See above.
Kagita Mikam	Employment and training services for aboriginal people	In Progress	See above.

Kelly Services (Canada) Inc.	Private firm. Permanent staffing, call centre specialists, manufacturing and distribution, professional and technical, aptitude evaluations, behavioural profiling.	In Progress	See above.
Kingston and District Immigrant Services – partnered with KEYS (see above)	Job-search workshops for new immigrants; culturally sensitive pre-employment training.	In Progress	See above.
Kingston Employment and Youth Services – downtown office (KEYS)	Resource centre and job bank open to all, employment counselling and workshops for youth, Job Connect in partnership with St. Lawrence College(federal program for those out of work, school and ineligible for EI)	In Progress	See above.
Kingston Employment and Youth Services – Kingston Centre Office (KEYS)	Ongoing workshops open to all, one-on-one employment counselling for adults; training subsidies for those who qualify	In Progress	See above.
Kingston Independent Living Resource Centre	Employment program offers incentives and support to encourage employers to hire people with disabilities; supportive work tools supplied; job placements for people with disabilities	In Progress	See above.
Kingston Military Family Resource Centre	Employment assistance program, resource centre. Some programs open to the whole community, services in French and English.	In Progress	See above.
Kingston Psychiatric Hospital (VOCEC)	Voices, Opportunities and Choices Employment Club: consumers of mental health services through. the establishment of affirmative businesses	In Progress	There are numerous employment services in Kingston, but barriers exist in providing services to homeless people.
Kingston Youth Shelter Project/ Human Resources Development Canada	Youth employment initiative/training starting Sept. 2001; duration 12 months (2 previous programs each lasted 6 months); on- and off-site. Will focus on relationship building with small business in Kingston; peer counselling. Programs will be based on individual goals, with ongoing life skills programming, referrals, etc.	In previous programs, youth did renovations on the shelter, including building bunk beds, and built a patio/deck for the shelter.	There are added barriers for homeless and at risk youth seeking employment skills.
La Route du Savoir	Literacy and basic skills, resume services, practice firm (on the job training), most services in French, some in both languages, FSL classes.	In Progress	There are numerous employment services in Kingston, but barriers exist in providing services to homeless people.
Labour-Ready Temporary Services Ltd.	Private firm. Casual, sort-term employment service - payment on day of work.	In Progress	See above.
March of Dimes	Job Finding Club; special programs directed to people with developmental Disabilities	In Progress	See above.
Métis Nation of Ontario Training Initiatives	Offers training, subsidies and employment services for people of Métis heritage; serves Eastern Ontario.	In Progress	See above.

Migizi Wiigwaam See also Discharge Planning and Child Care Supports .	Aboriginal clientele, pre-employment program with continuous intake. 6-week program offering life skills, career exploration, resume writing, interviewing techniques and job-finding club.	18 people did 12-week program in 2000/2001 fiscal year.	There are added barriers for homeless and at risk aboriginal people seeking employment skills.
Opportunities Kingston	Open to all with priority given to those with lower incomes or on social assistance; micro-enterprise/pre-employment/life skills workshops	In Progress	See above.
Skebo and Associates	Private firm; those who qualify for EI or OW can take courses on starting a micro business (8 weeks training/32 weeks follow-up)	In Progress	See above.
The French Employment Resource Centre	Employment resource centre. Services in French.	In Progress	See above.
Vocational Rehabilitation Services	supported employment and skills training in addition to a variety of programs.	In Progress	See above.
✓ Life skills programs (e.g. budgeting, nutrition)	Inventory	Demand	Gap
Better Beginnings for Kingston Children	See below, Child care supports .	N/A	N/A
Frontenac Community Mental Health Services, formerly Kingston Friendship Homes	Generally in all houses, primarily in high support/full service houses. See above, in Employment and Pre-Employment Services .	N/A	N/A
Home Base Housing Youth Net	See above in Transitional housing; Supportive housing (long-term) .	N/A	N/A
Kingston Employment and Youth Services	Pilot project: <u>women@work</u> providing life skills. This is a pre-employment program for women only.	Group is small (under 12)	There are added barriers for homeless and at risk women seeking employment and life skills.
Kingston Youth Shelter Project	See above in Employment and Pre-employment services .	N/A	N/A
PCCC MHS Community Connections	Day program – rehabilitation for community living for consumers of mental health services	In Progress	
The Salvation Army - Take a Break Program - spring & fall	For women parents. Childcare provided during programs on self-esteem, grooming, budgeting etc.	102 adults and 10 children served in 2000.	
✓ Cultural services	Inventory	Demand	Gap

Kingston Regional Arts Council	A charitable, not-for-profit organization. Umbrella group for visual, literacy and performing artists, artisans, art organizations and anyone interested in the arts. Bi-monthly newsletter, special events throughout the year, periodic workshops. Fees.	Unknown.	
Kingston Artists' Association Incorporated	Membership \$25/yr (\$17 seniors/students); quarterly newsletter with info on art scene, exhibitions, calls to artists, exhibit space at galleries, and exhibition assistance grants from Ontario Arts Council (need address to apply).	Unknown.	
Kingston District Community Information Centre	Where to Turn community services directory contains a lengthy list of cultural groups in Kingston. For current information, call 542-1001.	N/A	N/A
Queen's University at Kingston – International Centre	Various cultural student groups. Organize orientations and cultural sensitivity programs for incoming international students and Canadian students.	In Progress	
✓ Moving costs	Inventory	Demand	Gap
Home Base Housing	Proposal in development	In Progress	
OW/ODSP	Start-up allowance	In Progress	
✓ Child care supports	Inventory	Demand	Gap
Better Beginnings for Kingston Children Office: Mon-Fri 8:30-4:30	Numerous parenting programs including prenatal programs; family visitor program offering 1-1 home support; several playgroups for infants and toddlers (up to age 5); community development worker; parent relief and childcare during programs; limited catchment area; 4 locations of service in North Kingston only. Prenatal Education worker seconded through North Kingston Community Health Centre.	In Progress 250 families/month receive service.	There is a need for programming on parenting skills for parents whose children are in care of the Children's Aid Society.
Child Care Resource and Parenting Centre - Office Tues-Friday, 8:30-4:30; call for specific hours for playgroups.	9 playgroups per week, plus additional sporadic services in outlying communities; toy lending library, childcare info, intermittent workshops on topics of interest for parents, information assistance phone line, quarterly newsletter, info to home child care providers, adult resource library on childcare and parenting. Non-mandatory membership \$15/year.	Funding restrictions limit locations and variety of programming.	Services in Kingston East. Parenting programs designed for specific needs of families. Ongoing support groups for parents. Affordable space with child care and transportation to host such programs

Counties of Frontenac, Lennox & Addington Children's Services Committee	Planning for children's services is being done by member agencies across the region.	N/A	N/A
Early Years Coalition	The Coalition sees its role as providing a network for information sharing, facilitating projects, mentoring community groups trying to establish early years resources centres and advocating for the need for improved early years services.	N/A	N/A
Frontenac Children's Aid Society	Administers the Child and Family Services Act. Investigates allegations of child neglect and abuse, offers alternate care to children when necessary, provides guidance, counselling, adoption and foster care services.	In Progress	There is a need for programming on parenting skills for parents whose children are in care of the Children's Aid Society.
Frontenac Community Mental Health Services, formerly Kingston Friendship Homes Emergency Response Services	Provides crisis response for children in co-operation with Pathways for Children and Youth (see above, in Outreach services). Also ACCT supports families with mental health issues, as does Family Resource Centre (see Drop-Ins , above).	In Progress	
Katarokwi Native Friendship Centre - Aboriginal Healthy Babies Program (Aboriginal Healing and Wellness Strategy)	All clients are assessed; early intervention with 0-6 age group and their families (esp. high risk); off-reserve aboriginal people. Outreach and home visits address holistic well-being of individual, family and community; providing traditional aboriginal-appropriate teachings; community referrals and information; resources on parenting, child development, nutrition, pre- & postpartum matters.	9-10 families ongoing in services. Wait list: unknown due to newness of program.	This is the only aboriginal program addressing these needs in the community - recently moved from part- time to full-time.
Katarokwi Native Friendship Centre - Aboriginal Prenatal Nutrition Program	Provides services for off-reserve aboriginal; food supplements; counselling support; education; referrals to community agencies; counselling especially to at risk pregnant women around high-risk behaviours; outreach; home and hospital visits, one-one counselling and program development; transportation.	Up to 10 families. No wait list maintained.	No programming for after infant is 6 months old (home visits only).
Kingston Military Family Resource Centre Office: Mon-Fri 8-5 Social Worker and Family Crisis: on-call 24-7 24-hour emergency child care provided under strict criteria.	Promotes the well-being of military families in the Kingston area; support to separated families; welcome to newcomers, volunteer training, information and referral; family life enrichment programs, child care alternatives, youth programs, emergency and deployment childcare services, employment assistance; Resource Library and Teen Centre. Open to all military members at CFB Kingston and their families; services in English and French. Fees for some services.	Population served is approximately 1600 families, of which 800 are on and 800 are off base. There is demand for childcare services on evenings and weekends, but not enough funding to provide it.	Weekends are a gap for most services. Off base personnel claim they need more services. Housing is a frustration for those staying for only one- or two-year courses. Not enough Private Married Quarters for all to be on base.

Migizi Wiigwaam	Stay in School program 8-14 year olds; homework club, cultural and recreational 2 times per week. Summer day camp 8 weeks jointly offered in conjunction with Tipi Moza. Little Turtles social, recreational cultural program for 5-10 year-olds.	In Progress	
Shelters: Interval House, Dawn House Women's Shelter and Ryandale Shelter have spaces for children and families, as does the Detox Centre	See above, in Emergency Shelters , and Health Services .	N/A	N/A
The Salvation Army - Christian Summer Day Camps	Camps for children at various locations run during the summer. Also for single mothers. Planning extra week of service for summer '01.	60-65 children registered per week in a 7-week program in 2000.	
The Salvation Army - Parent Relief program – T and Th p.m.	Childcare (usually under school age) provided for parents who need time alone in the community for appointments/errands; up to 3 hours; \$10 to register.	31 adults and 42 children assisted in Oct/00.	
The Salvation Army - Supervised Child Access Program	Usually court-ordered supervised visitation - funded by Ministry of Attorney General	94 children and 159 adults assisted in Mar/01.	
✓ Animal health care	Inventory	Demand	Gap
St. Lawrence College	Affordable care by students of Animal Care Technology program	In Progress	
✓ Eviction prevention (tenants' rights and responsibilities)	Inventory	Demand	Gap
Frontenac Community Mental Health Services, formerly Kingston Friendship Homes	Internal tenant eviction prevention program (Residential Team, Community Case Management Team).	FCMHS clients only.	N/A
Kingston Association for Tenants	Currently contacting people on CERA's list of evictions from the Rental Housing Tribunal list, and assisting them.	Collection of data is in progress.	There is a great need in the community for these types of services, as outlined in Gap #1 in the Priorities Table. (see page 19.)
Kingston Not-for-Profit Housing Association	Proposal in development to meet gap #1, Homeless Prevention Worker.	N/A	
✓ Discharge planning (hospitals, correctional services)	Inventory	Demand	Gap
Detoxification Centre	Discharge is unstructured and client-directed. Staff provide an introduction to various community supports, encourage appointment making, assist clients to stay and	There is a 2-week wait period for referrals to most community supports and treatment facilities across the region.	People of no fixed address, from other communities, or even from Kingston have a week lag between leaving detox and getting

	connect with the community. Limited referrals to treatment; most are done by agency within client's own community. Options for Change (2-week waiting list) is a deterrent.	The risk of recidivism is high for those without social supports.	other supports. Referral centre brings people in as a group and wait is another week before counsellors can deal with each individual.
Elizabeth Fry Society	Discharge planning is done directly from institutions at federal and provincial level. Help with housing, referrals to community services. Guidance is provided, but follow-up is client-directed. Individual counselling in a safe, non-judgemental atmosphere.	Quinte detention centre houses approximately 25 women requiring service at any one time. High rates of turnover there mean that Elizabeth Fry has approximately 100 cases per year. Federal institutions have considerable programming: transition and case planning contracted to Elizabeth Fry in partnership with corrections staff.	Provincial institutions provide almost no pre-release planning for women, except for volunteer programs offered by Elizabeth Fry. Services are greatly needed at the provincial level.
Frontenac Community Mental Health Services, formerly Kingston Friendship Homes	Especially from medium and low support houses; internal referrals to ACCT and Community Case Management Team. Externally, partnered with Hotel Dieu and Providence Continuing Care Centre, formerly Kingston Psychiatric Hospital.	In Progress	
Hotel Dieu	Information unavailable at this time.	In Progress	
John Howard Society	Discharge planning is done directly from institutions at federal and provincial level. Provides counselling, referral and advocacy services to offenders, ex-offenders, their families, people affected by crime and the whole community.	In Progress	
Kingston General Hospital	Information unavailable at this time.	In Progress	
Migizi Wiigwaam	Programs for aboriginal current and ex-offenders within and without institutions. Alcohol and drug programs, cultural spiritual services within 6 federal institutions and one provincial, counselling, healing circles, relapse prevention and reintegration programs. Outreach worker.	In Progress	Transitional housing is desperately needed for the aboriginal community, especially those coming out of institutions.
Providence Continuing Care Centre Mental Health Services (formerly Kingston Psychiatric Hospital)	There is an active process being done, but there are barriers; some discharge themselves against medical advice, or do not agree with the professionals' assessments of their needs for aftercare.	Recidivism is down because there are fewer beds and the ACCT teams are working in the community, but some people are still circulating through the system. Aftercare, follow-up and housing are all a problem.	Case management is the biggest gap. Most people need a psychiatrist to prescribe meds, or less intensive treatment than is provided by ACCT, but none is available.
The Salvation Army – Correctional and Justice Dept.	Looking into a plan for housing seniors released from incarceration.	In Progress	

✓ Other services in the continuum of supports	Inventory	Demand	Gap
Community Volunteer Centre	Volunteer resource and promotion centre; workshops, recruitment, and training in management of volunteers.	Each of the shelters relies on volunteer support to run their programming.	More volunteers are always needed, but training is required, which can be expensive for the shelters to provide.
Low Income Needs Coalition	Volunteer advocacy group to address policies of organisations and governments that affect the poor and disabled in Kingston and the Area Organisations which affect peoples' incomes e.g. OW, utilities, others. Assistance with problems involving those orgs.	Receive on average 40-50 calls monthly. Approx. 30% of calls are related to affordable housing issues.	Resources in community are not what they should be, so these volunteers are limited in what they can address.
The Salvation Army – Community and Family Services	Critical incident commander for Zone 2: Kingston, Brockville, Belleville, Kemptville and Napanee - contract with City of Kingston to provide food, clothing, pastoral care and emotional support in the event of an emergency. City uses 24-hour line at Harbour Light Centre as contact.	N/A	N/A
Disaster resource contact	9-1-1 546-4291 (City of Kingston)	N/A	N/A

Abbreviations:

RGI = Rent Geared to Income

RSP = Rent Supplement Program

CSW = Community Support Worker(s)

KFL&A = Kingston Frontenac Lennox & Addington

Credit where credit is due: Much of this information was garnered from the Where to Turn, issues 2000 and 2001, of the Kingston District Community Information Centre, and from the KNPHA website database on housing groups. Thanks also to organizations and individuals that gave excellent assistance and information.

Appendix D:

Defining Homelessness

*Excerpted from Kingston's Report Card on Homelessness,
Co-document to this Community Plan*

The stereotypical homeless person is often defined as an individual residing in a cardboard box, along the pavement or under a bridge. This is a misconception far from the truth. The structural causes of homelessness, as pointed out earlier, are numerous. Some of these are personal while others are systemic.¹ In many cases homelessness is the result of a combination of elements from both. Golden *et al.* therefore contend that, homelessness “is the ragged edge of the entire system of human services. It is tied to issues of housing, . . . welfare and community services, education . . . and the corrections systems”(1999:17).

A key issue, however, that confronts any study on homelessness, is the lack of a general consensus as to what exactly constitutes homelessness. Many definitions exist; the term has been applied to individuals in a broad spectrum of unsatisfactory shelter conditions ranging from sleeping on park benches thro

ugh night-shelters and direct access hostels, to bed and breakfast accommodation or even ‘surfing’ friends' couches.

A key reason underlying the difficulty in attaining a standard definition, is the fact that the homeless are not a homogeneous group. They represent several different sub-populations with varying characteristics and needs. Accordingly, the needs of a homeless family are very different from that of a single male or female, and again different from that of a teenager or developmentally challenged individual. Indeed, while most studies do make an attempt to distinguish the ‘houseless’, ‘shelterless’ and the ‘at risk’, it has to be acknowledged that these people are not in a static situation. Many move from the streets to hostels or other temporary accommodation and back again. Consequently, no single classification system has proven satisfactory though it continues to be common practice to distinguish ‘rough sleepers’ from people in hostels, lodging houses and bed and breakfast motels (cf. Layton 2000; Peressini 1995; Peressini *et al.* 1996). Hence, the argument that who gets defined as homeless is as much a statistical statement as it is a political and value stance (Layton 2000; Peressini 1995).

Definitional issues aside, there is a widespread consensus amongst researchers, academics and service providers that: the core notion of homelessness includes not only the simple fact of houselessness but also a lack of resources and community ties resulting in both isolation and disaffiliation with society (see Peressini *et al.* 1996). Homelessness, therefore, reflects vulnerability. It is a vicious cycle that grows and feeds off itself. For instance, without a permanent address, how does one seek out employment? Conversely, without a job and/or source of income, how does one obtain fixed shelter?

This Report Card acknowledges the problem of definition and does not claim to have the solution to it, nor is it going to try and re-invent the wheel. It therefore adapts the operational definitions employed by the United Nations² and the Toronto report card on homelessness (2001)³ to model a feasible solution applicable to Kingston. A homeless person is therefore categorized as:

¹ Personal factors include, but are not limited to: alcohol and substance abuse, mental illness, marital break-ups, inadequate education, etc. Systemic factors similarly include: inadequate supply of affordable housing, governments' cuts to social housing initiatives, reductions in social assistance, weakening social safety nets, changing job market, rising rental costs and a low rental vacancy rate (cf. Golden *et al.* 1999; Peressini 1995).

² The United Nations defines a homeless person as anyone without permanent, adequate and suitable shelter.

³ The Toronto Report Card on Homelessness (2001), defines homelessness as “a condition of people who: live outside (for example, on the street, or in ravines and parks; stay in emergency shelters; spend most of their income on rent; or, live in overcrowded, substandard conditions and are therefore at serious risk of becoming homeless” (2001:2).

Anyone without a permanent address, or adequate and suitable shelter.

The purpose of this fluid and multi-dimensional definition is twofold. First, it seeks to acknowledge the complexity of homelessness. Secondly, it will enable the Report Card to adequately address both the systemic and personal factors that shape homelessness in Kingston. The latter is particularly important because homelessness involves more than just a lack of housing. Certain life events, unforeseen circumstances, contingencies, shocks and stresses all can, and do, play key roles in determining who ultimately becomes homeless.

Ultimately, the definition should make it possible for this report to highlight both the plight of individuals and/or families who are visibly homeless (without any permanent address and/or acceptable accommodation, for example living 'rough' on park benches, under bridges, and sleeping in open spaces), persons who are without a place of their own (houseless, or living in short-term accommodation such as emergency shelters, institutions, transitional housing, or surfing couches) and the larger "at risk" population.

Appendix E:

List of Participants in Community Focus Groups

From the Community Planning Committee, Advisory Board and Information Group :

City of Kingston Community Services Social Housing Division
Dawn House Women's Shelter
Home Base Housing
Human Resources Development Canada
Frontenac Community Mental Health Services (Friendship)
Kagita Mikam
Kingston & District Immigrant Services
Kingston Frontenac Housing Corporation
Kingston Interval House
Kingston Youth Shelter
Low Income Needs Coalition
North Kingston Community Health Centre
Ryandale Shelter
Sisters of Providence
Social Planning Council
Tipi Moza (Iron Homes)
Town Homes Kingston
United Way
Youth Net

From the community:

Better Beginnings for Kingston Children
Canadian Hearing Society
Council on Aging
Frontenac Community Mental Health Services
Housing Help Centre
Justice and Peace Office – Sisters of Providence
Kingston City Police
Kingston Co-operative Homes Inc.
Kingston Employment Youth Services
Kingston Frontenac Housing Corporation
Kingston Literacy
Nutrition Working Group (Better Beginnings)
Ongwanada (representing Karen Menzies-Turner)
Ontario Works and City of Kingston Children's Services
Partners in Mission Food Bank
PCCC (KPH Patient Council)
Queen's University School of Urban and Regional Planning
Representative from John Gerretson's office
Salvation Army Community and Family Services
South Eastern Ontario District Health Council
St. Lawrence College Job Training
Interested citizens and homeless individuals

Appendix F:

Notes on Community Forums

Notes on Community Forum #1 – July 16/01 – Wilson Room, Library

Overview:

Janet Comis gave a brief description of SCPI activities since September of 2000, and summarized what would happen at the forum.

Liana Finucan noted that the tasks for the day were to:

- analyse and identify areas of greatest need and prioritize them
- identify the priorities that the Community Plan will address between now and March 31, 2003
- list the potential initiatives that the community expects to undertake to respond under each of the priorities (*Action* items)
- estimate the cost per year (SCPI and beyond)

Liana then went over each of the gaps identified (there were 30 points). There were questions about using the broader headings rather than each individual gap. The gaps were numerous but vary greatly under the headings, which would make voting for priorities overly complex. (For example, under the broad heading of Long-term Affordable Accommodation and Housing, *National Housing Policy* was identified by all as the number one issue, yet under the same heading, *Establish Status of Existing Affordable Housing* received only two votes.)

It was decided by consensus of the group that “National Housing Policy” is number one for everyone, and is really an umbrella point which touches on each gap. Over and above this point, then, each person had 5 votes.

The votes broke down as follows:

❖ Secure existing beds	18 - #3
❖ Warm Room / Inn from the Cold	8
❖ Transitional housing	21 - #1
❖ Supportive housing for people with mental health issues	19 - #2
❖ Supportive housing for people with developmental challenges	1
❖ Supportive housing for seniors	12 - #5
❖ Youth Housing - supportive, affordable, transitional	14 - #4
❖ Second Stage Housing	5
❖ National Housing Policy	<i>declared top priority</i>
❖ Affordable housing (especially one-bedroom apartments)	5
❖ Establish status of existing affordable housing (physical condition, wait lists, empty units)	2
❖ Improve access to existing subsidized housing	11
❖ Tenant Assist/Rent & Utilities Bank: Funding and Alternatives	9
❖ New program 'Door Ways Fund' from private individuals and corporation.	0
❖ Youth Transition Worker	3
❖ Outreach for adults and youth would not or cannot come to shelters for various reasons	3
❖ Extend psychiatric services to shelters	8
❖ Regular and specialized health practice for homeless people	8
❖ Utilities - warning system on cut-off/advocacy	3
❖ Third party organization to monitor landlords	1
❖ Neutral Ombudsman for people who are accessing emergency services	1
❖ Tenant support worker and eviction prevention	7
❖ Coordination of discharge planning (hospitals, correctional facilities, etc.)	11

❖ Estimate the number of homeless & at risk people	0
❖ Data collection is not consistent between shelters	8
❖ Transportation, especially for children	0
❖ Animal care	0
❖ Storage for donations of clothing, furniture and appliances	1
❖ Storage and moving costs for personal items of homeless people, both long- and short-term	0
❖ Lobbying of government at all levels regarding the United Nations Declaration of Human Rights where housing is a universal right	9

Based on the voting, the top six priorities identified were, in order:

1. A National Housing Policy
2. Transitional housing
3. Supportive housing: mental health issues
4. Secure existing beds
5. Youth housing: affordable, supportive, transitional
6. Supportive housing for seniors

Notes from each break-out group regarding each issue are as follows:

1. **A National Housing Policy** – no discussion
2. **Transitional housing** – defined as: affordable housing with support services not as emergency shelter and not covered by the Tenant Protection Act.

Step-by-step, people go from emergency to support situations, then to transitional housing and finally independent living.

Action: Identify needs.

Action: Provide links to the community.

Action: Lobby government.

Action: Build links between community partners.

Action: City re-zoning.

Action: Bricks and mortar.

Action: Sustain funding.

3. **Supportive housing: people with mental health issues** –

Action: Increase funding for agencies that supply housing and supports to those with mental illness (as in Plan). N.B. \$\$\$ should follow client, not agency or program.

Action: More funding for respite housing for organizations providing care to mentally ill (as in Plan).

Action: Tailor number of bed closures to available units (housing) and supportive services.

Action: Have all supports in place first, prior to discharge. (Consult with community providers.)

Action: Need continuum of supports for clients as well as for providers, and also for tenants of all housing providers, including shelters and street outreach.

4. **Secure existing beds** –

Per diems:

Action: Advocate for higher per diem

Action: Actual pot of \$ in city budget needs to be increased or else it will run out.

Action: Per diem funding should be replaced by core funding – need increase to cover extra costs such as utilities, food and staffing.

Action: Recognize disparity of funding between shelters and standardize.

Staffing:

Action: Recognize that current shelters need more/higher staffing levels to work with higher need clients.

Action: Recognize need to pay staff fairly for the work they do.

Action: Need staffing for children (could be shared between shelters).

Length of stay and clients:

Action: Look at flexibility around length of stay.

Action: Advocate for continuation of Personal Needs Allowance (\$3.75/day).

5. **Youth housing: affordable, supportive, transitional –**

Emergency housing was added to the list of needs by the subgroup.

Action: Sustain staffing for

- 1) KYSP – will increase emergency beds – high risk for staff
- 2) Youth Net – Youth Transition Worker
- 3) Drop Ins – Downtown Youth & KYSP

Action: \$ for 24-hour drop-in to provide shelter & food in both overnight and day programs

Action: Increase affordable housing and provide employment for youth with a joint providers project where youth build their own housing (one-bedrooms/bachelors especially).

Action: Public education – HRDC \$

6. **Supportive housing for seniors –**

Action: As in Community Plan, plus:

Action: Need graduated housing

Action: Need neighbourhood type supportive housing

- Look at all aspects of security (visual, aural)
- Provide independence with aides for housekeeping, bathing, shopping and security
- Geared-to-income
- Additional government support required

Action: Need Life Interest Centre

- Set up and monitored by one governing body

Action: Need wide spectrum of options before nursing homes

Action: Need improved screening process

Action: Need funding for more than just long-term care beds (rent-geared-to-income supportive housing).

Action: Need supportive housing that includes couples.

Action: Need assistance for moving.

Action: Need respite beds, emergency, convalescence; all accessible.

Action: Need special shelters for homeless seniors.

Please note: The results from these forums were used to inform the process of prioritization of the identified gaps, which are tabulated in Table 2 (p. 19).

Notes on Community Forum #2 – July 31/01 North Kingston Community Health Centre

Overview:

Janet Comis gave a brief description of SCPI activities since September of 2000, and summarized what would happen at the forum.

Liana Finucan noted that the tasks for the day were to:

- analyse and identify areas of greatest need and prioritize them
- identify the priorities that the Community Plan will address between now and March 31, 2003
- list the potential initiatives that the community expects to undertake to respond under each of the priorities (**Action** items)
- estimate the cost per year (SCPI and beyond)

Liana then went over each of the gaps identified (there were 29 points). There was a question about the format and accuracy on the process of the community forums as a way to identify priorities. Possible limitations of the forums are:

- a) bias could be introduced depending upon the numbers of people who come who might represent differing viewpoints,
- b) as expressed by many members of the Advisory Board and Community Planning Committee, it is most difficult to collect information from people who use the services, and
- c) not all concerned parties are available at the same time or location.

Certainly the process is not flawless, but it is necessary to provide an opportunity for the larger community to provide input into the Community Plan and the prioritization of the issues. The results from these forums will be used to inform the process of prioritization of the identified gaps, as will information gathered from past and future Advisory Board and Community Planning Committee meetings. The Advisory Board will have the final say.

There was discussion about National Housing Policy (and the lobbying that goes with it) being included by the previous group as the number one priority, an umbrella point which touches on all other issues. For this reason, this point was included as a priority to be discussed by the group.

The votes broke down as follows:

❖ Secure existing beds	8 - #3
❖ Warm Room / Inn from the Cold	7
❖ Transitional housing	3
❖ Supportive housing for people with mental health issues	8 - #3
❖ Supportive housing for people with developmental challenges	4
❖ Supportive housing for seniors	2
❖ Youth Housing - supportive, affordable, transitional	5
❖ Second Stage Housing	0
❖ National Housing Policy & Lobbying of Government at all levels	7
❖ Affordable housing (especially one-bedroom apartments)	19 - #1
❖ Establish status of existing affordable housing (physical condition, wait lists, empty units)	4
❖ Improve access to existing subsidized housing	2
❖ Tenant Assist/Rent & Utilities Bank: Funding and Alternatives	5
❖ New program 'Door Ways Fund' from private individuals and corporation.	1
❖ Youth Transition Worker	3
❖ Outreach for adults and youth would not or cannot come to shelters for various reasons	0
❖ Extend psychiatric services to shelters	7
❖ Regular and specialized health practice for homeless people	2
❖ Utilities - warning system on cut-off/advocacy	8 - #3
❖ Third party organization to monitor landlords	0
❖ Neutral Ombudsman for people who are accessing emergency services	0
❖ Tenant support worker and eviction prevention	10 - #2
❖ Coordination of discharge planning (hospitals, correctional facilities, etc.)	0
❖ Estimate the number of homeless & at risk people	0
❖ Data collection is not consistent between shelters	4
❖ Transportation, especially for children	0
❖ Animal care	0
❖ Storage for donations of clothing, furniture and appliances	0
❖ Storage and moving costs for personal items of <u>homeless</u>	0

Based on the voting, the top six priorities identified were, in order:

1. Affordable housing
2. Tenant support worker and eviction prevention

3. Secure existing beds
4. Supportive housing: mental health issues
5. Utilities advocacy
6. A National Housing Policy

Notes from each break-out group regarding each issue are as follows:

1. Affordable housing –

- Action:* build more units/renovation of substandard units
- Action:* financial support from all levels of government
- Action:* private sector support – willing to decrease profit margins – donations of property
- Action:* match housing allowance with real/market housing costs
- Action:* government should have annual housing targets
- Action:* tie housing to employment somehow
- Action:* Habitat for Humanity – support to become more active in Kingston
- Action:* forge public/private partnerships
- Action:* land banking (industrial)
- Action:* give tax breaks to builders
- Action:* get microloans through banks, etc – need core group (Advisory Board?) to support
- Action:* relax building codes
- Action:* decrease waiting periods for inspections

2. Tenant support worker and eviction prevention –

- Action:* increase awareness of tenants and landlords regarding the Tenant Protection Act (TPA) on respective responsibilities (1-888-#) – need someone well-informed
- Action:* form a regional office to advocate and answer questions, especially issues not covered under TPA
- Action:* Property Standards awareness and follow-up – call with a problem (1 – 800 #)
- Action:* include in the awareness campaign those in private homes who rent out space, not just rental companies
- Action:* include in awareness campaign: Landlord Tenant Paralegal Centre, Legal Aid, Landlords' Association

3. Secure existing beds –this should be a high priority for government funding from all levels

- Action:* increase staff – numbers and training
- Action:* increase *per diems* – women's shelters
- Action:* Inn from the Cold (Heat) – winter is only two months away
- Action:* bring supports in, e.g. Medical (first aid) supports for persons with mental illness
- Note:* KPH/PCCC downsizing has meant an increase in risks for those with mental illness

4. Supportive housing: people with mental health issues –

- Action:* build more units/provide supports
- Action:* discharge planning with graduated steps of independent living – reinstate this program which helps institutionalized people especially, and make institutions part of this process
- Action:* provide trained staff for outreach into shelters and/or registered staff with accountability
- Action:* provide supportive programs – drop-in – warm room
- Action:* prevent victimization by housing providers
- Action:* make this a health issue – all parts of society to participate in discharge planning
- Action:* involve the South Eastern Ontario District Health Council

5. Utilities advocacy –

- Action:* make rents inclusive of utilities
- Action:* coordinate efforts of everyone around the table (landlords, non-profit housing, Utilities Kingston)
- Action:* advocacy for equal billing and reduction of hook-up costs

- Action:* Share the Warmth – to cover hydro costs also
- Action:* connect with early warning system – when cut-off is imminent
- Action:* approach oil companies for excess after changeover within catchment area
- Action:* make hydro bills ‘geared-to-income’
- Action:* advocate for a greater ‘minimum notice’ for missing social service cheques due to computer error

6. A National Housing Policy – lobbying government at all levels

- Action:* Everyone must lobby – needs to be done collectively
- Action:* provide shelter – buildings from the City?

**Notes on Community Forum #3 – Aug. 1/01
Martha’s Table**

Overview:

Janet Comis gave a brief description of SCPI activities since September of 2000, and summarized what would happen at the forum. There were questions about the Supporting Communities Partnership Initiative, funding and general activities.

Liana Finucan noted that the tasks for the day were to:

- analyse and identify areas of greatest need and prioritize them
- identify the priorities that the Community Plan will address between now and March 31, 2003
- list the potential initiatives that the community expects to undertake to respond under each of the priorities (*Action* items)
- estimate the cost per year (SCPI and beyond)

Liana then went over each of the gaps identified (there were 29 points).

The votes broke down as follows:

❖ Secure existing beds	6 - #3
❖ Warm Room / Inn from the Cold	7 - #2
❖ Transitional housing	4
❖ Supportive housing for people with mental health issues	10 - #1
❖ Supportive housing for people with developmental challenges	0
❖ Supportive housing for seniors	0
❖ Youth Housing - supportive, affordable, transitional	7 - #2
❖ Second Stage Housing	1
❖ National Housing Policy & Lobbying of Government at all levels	1
❖ Affordable housing (especially one-bedroom apartments)	6 - #3
❖ Establish status of existing affordable housing (physical condition, wait lists, empty units)	1
❖ Improve access to existing subsidized housing	2
❖ Tenant Assist/Rent & Utilities Bank: Funding and Alternatives	2
❖ New program 'Door Ways Fund' from private individuals and corporation.	0
❖ Youth Transition Worker	0
❖ Outreach for adults and youth would not or cannot come to shelters for various reasons	3
❖ Extend psychiatric services to shelters	0
❖ Regular and specialized health practice for homeless people	4
❖ Utilities - warning system on cut-off/advocacy	2
❖ Third party organization to monitor landlords	0

❖ Neutral Ombudsman for people who are accessing emergency services	0
❖ Tenant support worker and eviction prevention	2
❖ Coordination of discharge planning (hospitals, correctional facilities, etc.)	0
❖ Estimate the number of homeless & at risk people	1
❖ Data collection is not consistent between shelters	1
❖ Transportation, especially for children	0
❖ Animal care	0
❖ Storage for donations of clothing, furniture and appliances	1
❖ Storage and moving costs for personal items of homeless people, both long- and short-term	1

The group added the following items and ideas:

❖ Help without conditions	0
❖ Central agency for collecting donations specifically for homelessness	1
❖ Service Exchange – e.g. dancing lessons for brick laying – Registry	0
❖ Specify an amount as a percentage of government tax income designated for poverty	0
❖ Provide spaces in community, like churches, where they are often otherwise empty	1
❖ Meaningful Rent Control (changes to Tenant Protection Act)	0
❖ Including Utilities in Rent Costs	0

Based on the voting, the top five priorities identified were, in order:

1. Supportive housing: mental health issues
2. Warm Room/Inn from the Cold/Heat
3. Youth Housing
4. Secure existing beds
5. Affordable Housing

Notes from discussion :

1. Supportive housing: people with mental health issues –

Action: lobby health care sector – show results of cuts

Notes: similar to transitional housing for those coming out of correctional institutions – special need of women leaving unsafe situations

Notes: we have some of this, but not enough

Notes: police involvement due to discomfort of staff not trained to deal with issues

Notes: recognize those homeless by choice

Action: advocate for province to address mental health issues – need to fill gap before this happens (timing!)

Action: same for developmentally handicapped people

Action: discharge planning, especially for correctional institutions – conditions for offenders; should be conditions for community as well

Action: Neighbours in Need – extra on utility bill for helping others

Action: Same idea – voluntary acceptance of small increase in property taxes.

2. Warm Room – Inn from the Cold

Action: ASK people what they want

Action: provide volunteer opportunities - \$ for funding and training

Notes: “Lack of government WILL” – indifference – taking responsibility

Action: Consciousness raising – SPC to continue stories and letters to media

Appendix G:

Summary of Urgent Needs Projects from 2001

- A) Urgent need contract with Home Base Housing was signed effective January 8th, 2001, and ended April 27th 2001. Contract activity was for a Multi-Service Centre, providing 8-10 beds for emergency shelter and daytime drop in resource centre for housing needs. Contract value is \$81,260.
- B) Urgent need contract with Dawn House Women's Shelter Inc. was signed effective Feb. 5th 2001, and has an end date of June 1st 2001. Contract activity is for maintenance and improvements to the facility in areas of safety, security and services to residents. Contract value is \$23,581.
- C) Urgent need proposal for Ryandale Shelter for the Homeless has been approved. Request was for upgrades to facilities in regard to emergency preparedness, safety and hygiene as well as to start process of making shelter wheelchair accessible. Contract started March 19th, 2001 and will end July 13th, 2001. Value is \$25,724.
- D) Youth Homelessness contract under YIP has been signed with Home Base Housing. Contract for Youth Outreach Worker started February 5th 2001 and will end June 22nd 2001. Contract value is \$14,630. Contract was extended to end of August and funds increased to \$21,946.
- E) Urgent need proposal from Kingston Youth Shelter has been approved and funding is in place. Proposal will enable shelter to upgrade facilities and address areas of concern with regard to water pressure and supply, increase hygiene, health and safety of residents. Contract started May 1st, 2001 and will end Sept. 28th, 2001. Value is \$34,525.

Appendix H:

Proposal Process

The SCPI program is designed to address the immediate needs of homeless people and take steps in reducing and preventing homelessness. Under the auspices of SCPI, the Government of Canada provided funding to the Kingston community for three consecutive fiscal years, beginning in 2000. The eligibility criteria for selection and the guidelines for review processes are detailed below. These criteria were central to the Advisory Board's decision making process when recommending community proposals for SCPI funding.

1. Eligibility

Eligible Organizations

Individuals, not-for-profit organizations and municipal governments are eligible to receive funding. Public health and educational institutions *may* be eligible for funding with the agreement of a provincial or territorial government.

For-profit enterprises are eligible for funding, provided that the nature and intent of the activity is non-commercial and conforms to the Community Plan. In addition, for-profit enterprises may receive funding to assist them in providing homeless people with work experience.

Eligible Costs

Planning - In each eligible community, contributions may be made to cover the full reasonable and direct costs of preparing a plan to reduce homelessness and disseminating information about that plan. These costs may include those incurred to rent meeting space for community consultations, hire a consultant to facilitate the planning process and draft a plan, and publish and distribute the plan.

Implementation - SCPI contributions may cover any or all portions of the reasonable and direct costs of developing, administering, delivering and evaluation projects that fall within the Community Plan. Contributions may be provided for capital projects. In the event that a proposal is approved for funding, the eligible costs of a project will be specified in detail in a contribution agreement. Project costs that would be eligible, in whole or in part, as part of the implementation of the plan include such items as: planning and feasibility studies, architectural costs for new buildings, costs of building, buying, renovation or making additions to shelter space, supportive or transitional housing, enhancing the skills of the staff of service organizations, supplies and equipment required to carry out an approved project, and administrative costs as outlined below.

Administrative Costs - Financial assistance may be provided to cover such administrative costs as wages and employment related costs for staff, licenses, permits, fees for professional service, disbursements for research or technical studies, disability needs, bank interest, utilities, materials, supplies, travel, insurance, rental of premises, leasing or purchase of equipment, costs of audits, evaluations and assessments.

2 Potential Funding Sources:

SCPI - Announced by Federal Government in December 1999.

Note: There is a requirement for matching funds (in-kind contributions, cash contributions, and volunteer time). (See Appendix E: Matching Funding Form. Can go back to beginning of 1999 fiscal year, i.e. April 1999.)

Municipal, Provincial and Federal Governments
Job Creation Partnership, Youth Internship Program

Canada Mortgage and Housing Corporation: Residential Rehabilitation Assistance Program, Shelter Enhancement Initiative, Mortgage Insurance Fund
Foundations – e.g. United Way, Kingston Community Foundation
Others as identified.

3. Goals:

Proposals should do one or more of the following:

- contribute to fulfilling the *Community Plan*
- address one or more of the SCPI objectives:
 - ↳ alleviate poverty of those who are absolutely homeless
 - ↳ promote a “continuum of supports” approach to addressing homelessness
 - ↳ strengthen the capacity of communities to serve homeless people and reduce homelessness
 - ↳ develop partnerships among all stakeholders
 - ↳ develop a base of knowledge
- enhance or build on existing resources, not duplicate them;
- build on or create partnerships with other organizations;
- be sustainable (i.e. demonstrate that funding can be sustained for projects initiated with SCPI funds);
- increase ease of access to affordable housing: increase supply and enhance access
- find solutions to the root causes –some contributing factors: education, skills, income are all related and contribute to self-sustainability of the individual; health sector; mental health issues; transitional housing for those coming out of institutions; environment, both emotional and physical.
- create economic opportunities; job and life skills are a big part of this.
- be mindful of the overall goal, which is to prevent and reduce homelessness

4. Assessment Criteria for the Supporting Communities Partnership Initiative:

- A) The organization or sponsor:
- must have the ability, in terms of history and mandate, to carry out the activity
 - will benefit if it can show partnership(s) with other organizations
- B) The proposal must:
- describe the activities to be undertaken in a sequenced time-framed work plan;
 - include in the budget all sources of funding, although there is no absolute requirement for a community contribution;
 - enhance or build on what exists, not duplicate it;
 - include the people affected within the targeted sector;
 - be sustainable;
 - be reviewed by the GOC City Facilitator (i.e. HRDC Staff);
 - include the following information:
 - ⇒ A project summary that includes what urgent need it will meet
 - ⇒ Project goals and objectives
 - ⇒ Expected outcomes
 - ⇒ An operational plan and description of project activities
 - ⇒ Project milestones with dates
 - ⇒ Evaluation and monitoring procedures
 - ⇒ A list of all partner organizations and a description of each organization's involvement
 - ⇒ A description of how these activities will be sustained should the proposed activities not be completed by the SCPI end date and if there are ongoing costs associated with these activities
 - ⇒ Project budget by cost category
 - ⇒ The source and amounts of funding from partners with written confirmation from each one

- ⇒ A description of financial accounting practices
 - ⇒ Sponsor background information and a description of the sponsor's ability to manage the project
 - ⇒ Details with respect to all salaried positions, including job descriptions, pay levels, length of term and hours of work as well as a description of the proposed hiring process including who will be involved and what criteria and process will be used (the wages for project staff should reflect the local prevailing rate for similar positions)
 - ⇒ An evaluation plan, including a description of how and at what stages the project's progress and success will be measured
- C) Each approved application or proposal for SCPI funding will be the subject of a formal contribution agreement specifying the responsibilities of each party, the items for which expenditures are anticipated, the conditions under which payments will be made and mutually agreed upon measures designed to assess the success of the activity in attaining its objectives.

Agreements will include a requirement to disclose the involvement of former public servants who are under post-employment guidelines. A clause will be included in the agreement which would allow for a reduction in the amount of financial assistance specified should funding made available to HRCD be reduced. Agreements will also include appropriate termination clauses indicating that agreements may be terminated upon notice by either party.

5. Guidelines for Review Process of the Advisory Board

- A) Deadline dates will be set to allow fairness of opportunity for submitting proposals.
- B) Due consideration will be given to transparency of process and fairness.

Guidelines for Review Process:

NOTE: Guidelines for review are subject to change in accordance with new Advisory Board or HRDC directives.

- 1) After proposals are submitted, Social Planning Council staff will review them using the assessment checklist (see 1.7). Staff will then circulate proposals (via email or fax) to the Advisory Board. At this time, applicant(s) will also receive information on the 21-day response time for this stage of the process, noting that, if approved, the proposal will be sent on to HRDC for further review. These will all take place **within three (3) working days**.
- 2) The Advisory Board will respond and meet to decide on approval **in 5 to 10 more days**. They will also decide at this time if they need to hear from some applicants for more information or clarification in the form of a brief (maximum 10 minutes) presentation.
- 3) After steps 1) and 2) have been completed, a letter will be sent to the applicant(s) **within 3 to 5 more days**.

STEPS 1-3 should take a maximum of 21 working days.

- 4) The Advisory Board is responsible for ensuring the proposal is submitted to HRDC by the Social Planning Council.

6. Assessment Criteria

*Requirements for **for-profit** sponsors submitting proposals:*
(Please attach all relevant documentation.)

- Name of Applicant: _____
- Website (if applicable): _____
- Names of:
 - 1) Owner _____
 - 2) Senior Administrator _____
- Signatures of:
 - 1) Owner _____
 - 2) Senior Administrator _____

Also Please Include:

- Philosophical and/or Mission Statement
- Most recent audited financial statement
- Most recent Annual Report
- Letters Patent /Documents of Incorporation
- Copy of Complaints Procedure
- Brief description of organization

*Requirements for **not-for-profit** sponsors submitting proposals:*
(Please attach all relevant documentation.)

- Name of Applicant: _____
- Website (if applicable): _____
- Names of:
 - 1) Executive Director _____
 - 2) Senior Administrator _____
 - 3) Board Chairperson _____
- Signatures of:
 - 1) Executive Director _____
 - 2) Senior Administrator _____
 - 3) Board Chairperson _____
- Canada Customs and Revenue Agency Charitable No.: _____

Also Please Include:

- Philosophical and/or Mission Statement
- Most recent audited financial statement
- Most recent Annual Report
- Amendments to Bylaws (if applicable)
- Constitution and Bylaws
- Letters Patent /Documents of Incorporation
- Copy of Complaints Procedure
- Confirmation that Board Members have had the opportunity to see or be made aware of this submission
- Names and contact information for all Board Members