



## REGULAR BOARD MEETING AGENDA

Healthy, Sustainable Communities

**Date:** Wednesday, April 27, 2022  
**Time:** Regular DNSSAB Board Meeting at 1:00 PM (or directly following the Community Services Committee)  
**Location:** By video conference while pandemic protocols are in place

Join Zoom Meeting

<https://us06web.zoom.us/j/85068712508?pwd=aVJUL01MdG53Q2JITDd4bDNna0pQQT09>

Meeting ID: 850 6871 2508

Passcode: 85734747

One tap mobile

+16473744685,,85068712508#,,,,\*85734747# Canada

+16475580588,,85068712508#,,,,\*85734747# Canada

Dial by your location

+1 647 374 4685 Canada

+1 647 558 0588 Canada

+1 613 209 3054 Canada

**Members:** Councillor Mark King (Chair), Councillor Dan Roveda (Vice-Chair), Mayor Dean Backer, Councillor Mac Bain, Mayor Jane Dumas, Councillor Terry Kelly, Councillor Chris Mayne, Councillor Dave Mendicino, Mayor Dan O'Mara, Councillor Scott Robertson, Representative Amanda Smith, Councillor Bill Vrebosch.

Item	Topic
1.0	<b>1.1 Call to Order</b>  <b>MOTION: #2022-32</b> <i>Resolved</i> THAT the Board of Directors accepts the Roll Call as read by the Recording Secretary for the Regular Board meeting of April 27, 2022 at ____ PM.

Item	Topic
	<b>1.2 Declaration of Conflict of Interest</b>
<b>2.0</b>	<b>Opening remarks by the Chair</b>
<b>3.0</b>	<b>Approval of Agenda for April 27, 2022</b> <b>MOTION: #2022-33</b> THAT Board members accept the Agenda as presented.
<b>4.0</b>	<b>Approval of Minutes</b>  <b>4.1 MOTION: #2022-34-A</b> THAT the Board adopt the minutes of the proceedings of the Regular Board meeting of March 23, 2022.  <b>4.2 MOTION: #2022-34-B</b> THAT the Board adopt the minutes of the proceedings of the Community Services Committee meeting of March 23, 2022.
<b>5.0</b>	<b>Delegations-</b> none at this time
<b>6.0</b>	<b>6.1 CAO VERBAL UPDATE:</b>  <b>MOTION: #2022-35</b> THAT the District of Nipissing Social Services Administration Board (DNSSAB) receives the CAO Verbal Report for April 27, 2022.
<b>7.0</b>	<b>CONSENT AGENDA</b> – no items at this time
<b>8.0</b>	<b>MANAGERS REPORTS</b>
	<b>8.1 HS21-22 2022-23 Homelessness Prevention Program and Social Services Relief Fund Phase 5 Investment Plans</b>  <b>MOTION: #2022-36</b> THAT the District of Nipissing Social Services Administration Board (DNSSAB) approves the 2022/23 Investment Plan for the Homelessness Prevention Program (HPP); and the April 1, 2022 to December 31, 2022 Investment Plan for the Social Service Relief Fund Phase 5 (SSRF P5), as set out in report HS21-22; and  Furthermore, THAT the District of Nipissing Social Services Administration Board authorizes staff to reallocate funds throughout the 2022/23 fiscal year to qualifying provincial projects, up to the CAO delegated authority based on emerging priorities in the district.

Item	Topic
	<p><b>8.2 PS03-22 Proposed Study and Potential Acquisition of CPR Assist Devices</b></p> <p><b>MOTION: #2022-37</b>            THAT the District of Nipissing Social Services Administration Board (DNSSAB) receive briefing note PS03-22 and approve a proposed development of a trial program to determine the efficacy of CPR assist devices when used by paramedics; and;</p> <p>THAT the study will be completed in 2022 with any recommendations to be brought forward before the end of 2022.</p>
	<p><b>8.3 Move in Camera</b></p> <p><b>MOTION: #2022-38</b>            THAT the Board (DNSSAB) move in-camera at _____ to discuss information supplied in confidence.</p>
	<p><b>8.4 Adjourn In Camera</b></p> <p><b>MOTION: #2022-39</b>            THAT the Board (DNSSAB) adjourns in-camera at _____ PM.</p>
	<p><b>8.5 Approve In Camera</b></p> <p><b>MOTION: #2022-40</b>            THAT the Board (DNSSAB) approves the direction/action agreed to in the in-camera session.</p>
9.0	<b>OTHER/NEW BUSINESS</b>
10.0	<p><b>NEXT MEETING DATE</b>            Wednesday, May 25, 2022</p>
11.0	<p><b>ADJOURNMENT</b></p> <p><b>MOTION: #2022-41</b>            THAT the Board meeting be adjourned at _____.</p>



MINUTES OF PROCEEDINGS

**REGULAR BOARD MEETING – MARCH 23, 2022**

**12:35 PM**

**Virtually via Zoom**

**MEMBERS PRESENT:**

Councillor Terry Kelly (East Ferris)

**Councillor Mark King - Chair (North Bay)**

Councillor Dave Mendicino (North Bay)

Mayor Dan O'Mara (Temagami)

**Councillor Dan Roveda Vice Chair (West Nipissing)**

Councillor Bill Vrebosch (North Bay)

Mayor Dean Backer (East Nipissing)

Representative Amanda Smith (Unincorporated)

Councillor Mac Bain – (North Bay)

Councillor Chris Mayne (North Bay)

Mayor Jane Dumas (South Algonquin)

Councillor Scott Robertson (North Bay)

**STAFF ATTENDANCE:**

Catherine Matheson, CAO

Marianne Zadra, Executive Coordinator and Communications

Melanie Shaye, Director of Corporate Services

David Plumstead – Manager Planning, Outcomes & Analytics

Justin Avery, Manager of Finance

Stacey Cyopeck, Director, Housing Programs

Tracy Bethune, Manager, Housing Operations

Lynn Demore-Pitre, Director, Children's Services

Michelle Glabb, Director, Social Services and Employment

Tyler Venable, Manager of Housing Programs  
Dawn Carlyle, Project Manager  
Donna Mayer, Manager of Project Development  
Bryce Gartner, Community Paramedicine Commander

**1.1 CALL TO ORDER**

**Resolution No. 2022-22**

**Moved by:** Dan O'Mara

**Seconded by:** Amanda Smith

**Resolved THAT the Board of Directors accept the Roll Call as read by the Recording Secretary for the Regular Board meeting of March 23, 2022 at 12:53 PM.**

The regular Board Meeting was called to order at 12:53 PM by Chair Mark King.

***Carried.***

**1.2 DECLARATION OF CONFLICTS OF INTEREST**

No conflicts were declared.

**2.0 CHAIR'S REMARKS**

The Chair welcomed everyone and introduced the new team for direct delivery of Paramedic Services including Chief Stephen Kirk, Deputy Chiefs Stephen Asselin and Dan Raymond. The superintendents were also introduced including Franco Tignanelli, Mark Beaulieu, Maxine Samson, and Andrew Pugliese. Community Paramedicine Commander Bryce Gagnon continues to oversee the Community Paramedicine program. The Chair also acknowledged Rob Smith who developed the business case for direct delivery and is leading the transition to this model for the Nipissing District.

**3.0 ADOPTION OF THE AGENDA**

**Resolution No. 2022-23**

**Moved by:** Mac Bain

**Seconded by:** Dave Mendicino

**Resolved THAT the Board accepts the agenda as presented.**

***Carried.***

#### **4.0 APPROVAL OF MINUTES**

##### **4.1 Resolution No. 2022-24-A**

**Moved by:** Jane Dumas

**Seconded by:** Terry Kelly

**Resolved THAT the Board adopts the minutes of the proceedings of the Regular Board meeting of February 23, 2022.**

***Carried.***

##### **4.2 Resolution No. 2022-24-B**

**Moved by:** Dave Mendicino

**Seconded by:** Chris Mayne

**Resolved THAT the Board adopt the minutes of the proceedings of the Community Services Committee meeting of February 23, 2022.**

***Carried.***

#### **5.0 DELEGATIONS – Census Dwelling and Population Growth, by David Plumstead.**

Manager Planning, Outcomes & Analytics, David Plumstead reviewed the data release schedule from Statistics Canada, indicating future reports will be brought forward. He introduced the divisions and subdivisions in data, and showed slides indicating increases in both population and dwellings nationally, provincially and locally. He went on to review more detailed information. (presentation attached)

#### **6.0 CAO VERBAL UPDATE**

##### **Resolution No. 2022-25**

**Moved by:** Dan O'Mara

**Seconded by:** Dan Roveda

**Resolved THAT the District of Nipissing Social Services Administration Board (DNSSAB) receives the CAO Report for March 23, 2022.**

CAO Catherine Matheson updated the Board on the Socials Services Relief Fund made available from the province over the past 24 months of pandemic. Of the \$1B dollars distributed, Nipissing received \$11.8M.

This fund in part enabled community partners to deliver services to the vulnerable through the

pandemic. By example, the first low barrier shelter for 21 individuals opened and in addition, overflow capacity was created increased for the unsheltered in hotels. SSRF enabled outreach workers to connect those living in the rough to social services and housing programs. It enabled rent relief programs, access to personal protective equipment and of course sourced additional food supply for food banks.

She indicated success of these investments is evident by example through the Nipissing by name list of 193 individuals of whom 37 have been housed.

The CAO updated the board on their investment into upstream programs for individual health and well-being such as the nurse practitioner program in shelters and community housing projects, which has now rostered over 40 individuals to primary care. It further provided funding for the harm reduction overdose prevention site development work being led by public health.

She indicated DNSSAB is hopeful to hear of an extension of these SSRF in the weeks ahead.  
***Carried.***

## **7.0 CONSENT AGENDA**

### **RESOLUTION: #2022-26**

**Moved by:** Dan Roveda

**Seconded by:** Bill Vrebosch

**THAT the Board receives for information, Consent Agenda items 7.1 and 7.2.**

**7.1 B09-22 Ontario Municipal Employee Retirement System (OMERS) 2023 Changes –** information on changes to the plan in January 2023.

**7.2 FA02-22 2022 Board Service Reimbursement Update** - information on the updated honoraria rate as prescribed in the Board Service Reimbursement Policy.

***Carried.***

## **8.0 MANAGER'S REPORTS**

### **8.1 HS14-22 Update to Gateway Campus Name Change**

#### **RESOLUTION: #2022-27**

**Moved by:** Chris Mayne

**Seconded by:** Jane Dumas

**THAT the District of Nipissing Social Services Administration Board (DNSSAB) receive the HS14-22 report Update to Gateway Campus Name Change recommending “Northern Pines” for approval.**

*Carried.*

**8.2 In Camera**

**RESOLUTION: #2022-28**

**Moved by:** Dan Roveda

**Seconded by:** Dave Mendicino

**THAT the District of Nipissing Social Services Administration Board (DNSSAB) move in-camera at 1:31 PM to discuss legal and negotiation matters.**

*Carried*

**[In-camera minutes are filed separately.]**

**8.2 Adjourn In Camera**

**RESOLUTION: #2022-29**

**Moved by:** Bill Vrebosch

**Seconded by:** Jane Dumas

**THAT the District of Nipissing Social Services Administration Board (DNSSAB) adjourns in-camera at 2:28 PM.**

*Carried*

**8.3 Approve In Camera**

**RESOLUTION: #2022-30**

**Moved by:** Scott Robertson

**Seconded by:** Mac Bain

**THAT the District of Nipissing Social Services Administration Board (DNSSAB) approves the direction/action agreed to in the in-camera session.**

*Carried.*

**9. NEW BUSINESS**

There was no new business brought forward.

**10. NEXT MEETING DATE**

Wednesday, April 27, 2022.

**11. ADJOURNMENT**

**Resolution No. 2022-31**

**Moved by:** Terry Kelly

**Seconded by:** Dave Mendicino

**Resolved THAT the Board meeting be adjourned at 2:31 PM.**

*Carried.*

---

MARK KING  
CHAIR OF THE BOARD

---

CATHERINE MATHESON  
SECRETARY OF THE BOARD

Minutes of Proceedings Recorder: Marianne Zadra, Executive Coordinator



MINUTES OF PROCEEDINGS

**COMMUNITY SERVICES COMMITTEE MEETING  
WEDNESDAY, MARCH 23, 2022  
12:00 PM – VIRTUALLY VIA ZOOM**

**MEMBERS PRESENT:**

Mayor Dean Backer (East Nipissing)  
Councillor Mac Bain – (North Bay)  
Mayor Jane Dumas (South Algonquin)  
Councillor Terry Kelly – (East Ferris)  
Councillor Mark King – (North Bay)  
**Councillor Dave Mendicino - Vice Chair (North Bay)**  
Mayor Dan O'Mara (Temagami)  
Councillor Scott Robertson (North Bay)  
**Councillor Dan Roveda - Chair (West Nipissing)**  
Representative Amanda Smith (Unincorporated)  
Councillor Bill Vrebosch (North Bay)  
Councillor Chris Mayne (North Bay)

**STAFF ATTENDANCE:**

Catherine Matheson, CAO  
Marianne Zadra, Executive Coordinator and Communications  
Melanie Shaye, Director of Corporate Services  
Michelle Glabb, Director of Social Services and Employment  
Lynn Demore-Pitre, Director Children's Services  
Stacey Cyopeck, Director, Housing Programs  
Tracy Bethune, Manager, Housing Operations  
Robert Smith, EMS Chief  
Justin Avery, Manager of Finance  
Dawn Carlyle, Project Manager  
David Plumstead, Manager Planning, Outcomes & Analytics

Donna Mayer, Manager of Project Development  
Alexandra Murphy Melnichuk, Business Operations Analyst

### **1.1 CALL TO ORDER**

The Community Services Committee was called to order at 12:01 PM by Chair Dan Roveda.

### **1.2 DECLARATION OF CONFLICTS OF INTEREST**

None were declared. Amanda Smith noted a conflict with item 5.6 in the Consent Agenda as this report involves her employer.

### **2.0 CHAIR'S REMARKS**

Chair Can Roveda welcomed members and indicated he is hopeful the Province will provide funding for transitional housing in response to the Board's strong advocacy.

### **3.0 ADOPTION OF THE AGENDA**

#### **RESOLUTION: #CSC07-2022**

MOVED BY: Bill Vrebosch  
SECONDED BY: Jane Dumas

**That the agenda for the Community Services Committee is accepted as presented.**

*Carried.*

**4.0 DELEGATIONS** - there were no delegations.

### **5.0 CONSENT AGENDA**

#### **RESOLUTION: #CSC08-22**

MOVED BY: Dave Mendicino  
SECONDED BY: Scott Robertson

**THAT the Committee receives for information Consent Agenda items 5.1 to 5.4.**

#### **5.1 CSC03-22 Canada's Early Years and Child Care Plan**

---

**That the District of Nipissing Social Services Administrative Board (DNSSAB) accepts Briefing Note CS03-22 and that the DNSSAB Board send a letter to Minister Stephen Lecce encouraging the Province to finalize negotiations with the Federal government and enter into a national early learning and child care agreement that promotes an affordable, quality and sustainable early years and child care sector.**

**5.2 SSE02-22 Ontario Works Overpayments** - information on Ontario Works (OW) overpayments.

Social Services and Employment Director, Michelle Glabb indicated this report is brought forward by request of the Board. She reviewed the processes used to recover overpayments and stress these are not always indicative of fraudulent behavior. She noted that DNSSAB recovers all but about 5% of overpayments. The Chair indicated that 7% is considered a fair amount and thinks DNSSAB is doing well in this area.

**5.3 SSE03-22 Human Services Integration Maturity Model**- information on the Ministry of Children, Community and Social Services (MCCSS) Human Services Integration (HSI) Maturity Model.

**5.4 HS13-22 Homelessness Action Plan Update** - an update on the progress to date on the Homelessness Action Plan, for information purposes.

Housing Programs Director Stacey Cyopeck reviewed that this report is an update staff committed to bringing forward when the plan was approved. She noted that 55% of the items have begun, and 21% have been completed, including the active By Name List (BNL) with signed agreements with all agencies using HIFIS and BNL. Further updates will be provided going forward. There was discussion about strategies for the future regarding encampments, and the success of the mobile Nurse Practitioner Clinic connecting a large number of orphaned patients to primary health care.

***Carried.***

## **6.0 MANAGERS' REPORTS**

**6.1 PS01-22 Canada – Paramedic Services Response Times for 2021**

### **RESOLUTION: #CSC09-22**

MOVED BY: Chris Mayne  
SECONDED BY: Mark King

Paramedic Services Chief Rob Smith reviewed how compliance and response times work, indicating Nipissing met all targets for 2021, adding the move to direct delivery will enable a quicker and more nimble in addressing needs. There was discussion how traffic congestion and construction can delay response times. Rob informed the Board

discussions will be had with fire and police services to get a sense of what can be done to mitigate delays caused by these factors.

***Carried.***

### **6.2 Move in Camera**

#### **RESOLUTION: #CSC10-22**

MOVED BY: Bill Vrebosch  
SECONDED BY: Jane Dumas

**THAT the Committee move in-camera at 12:36 PM to discuss a matter of negotiation.**

***Carried.***

### **6.3 Adjourn In Camera**

#### **RESOLUTION: #CSC11-22**

MOVED BY: Dave Mendicino  
SECONDED BY: Chris Mayne

**THAT the Committee adjourns in-camera at 13:39 PM.**

***Carried.***

**6.3 Approve In Camera – THIS MOTION WAS SKIPPED. THERE WAS NO ACTION OR DIRECTION RESULTING FROM IN-CAMERA.**

#### **RESOLUTION: #CSC12-22**

~~MOVED BY:~~  
~~SECONDED BY:~~

### **7.0 OTHER BUSINESS**

There was no other business.

### **8.0 NEXT MEETING DATE**

Wednesday, April 27, 2022

### **9.0 ADJOURNMENT**

**RESOLUTION: #CSC13-22**

MOVED BY: Mark King

SECONDED BY: Dave Mendicino

***Resolved* That the Community Services Committee meeting be adjourned at 12:40 PM.**

***Carried.***

---

DAN ROVEDA  
CHAIR OF THE COMMITTEE

---

CATHERINE MATHESON  
SECRETARY OF THE BOARD

Minutes of Proceedings Recorder: Marianne Zadra, Executive Coordinator

## BRIEFING NOTE HS21-22

For Information or  For Approval  
In-Camera

**Date:** April 27, 2022

**Purpose:** **2022-23 Homelessness Prevention Program and Social Services Relief Fund Phase 5 Investment Plans**

**Prepared by:** Stacey Cyopeck, Director, Housing Programs

**Reviewed by:** Justin Avery, Manager of Finance

**Approved by:** Catherine Matheson, Chief Administrative Officer

---

### ***Alignment with Strategic Plan: Healthy, Sustainable Communities***

Maximize Impact    Remove Barriers    Seamless Access    Learn & Grow

### **RECOMMENDATION**

THAT the District of Nipissing Social Services Administration Board approves the 2022/23 Investment Plan for the Homelessness Prevention Program (HPP); and the April 1, 2022 to December 31, 2022 Investment Plan for the Social Service Relief Fund Phase 5 (SSRF P5), as set out in report HS21-22; and

*Furthermore*, that the District of Nipissing Social Services Administration Board authorizes staff to reallocate funds throughout the 2022/23 fiscal year to qualifying provincial projects, up to the CAO delegated authority based on emerging priorities in the district.

### **BACKGROUND:**

On March 7, 2022, notification was received that effective April 2022, the Provincial Community Homelessness Prevention Initiative (CHPI) Program was being consolidated with the Strong Community Rent Supplement Program (SCRSP) and Home for Good (HFG) funding into a new Homelessness Prevention Program (HPP). HFG funding was initiated in 2017 as a partnership between the province and municipalities that funded supports and housing, however, Nipissing District does not receive HFG funding.

According to the provincial guidelines:

*The HPP is intended to be flexible and streamlined, so that Service Managers can target funding where community need is greatest and can make the most impact on reducing and preventing homelessness.*

The three key goals (outcomes) are as follows:

1. **Prevent homelessness:** People at risk of homelessness remain housed and have connections to support services.
2. **Address homelessness:** People who are homeless obtain and retain housing and support services.
3. **Reduce chronic homelessness:** Reduction in chronic homelessness.<sup>1</sup>

The HPP Operating Service Categories are as follows:

- **Supportive Housing:**
  - A combination of housing assistance with individualized, flexible, and ongoing support services
  - Includes transitional housing and residential services homes (i.e., former domiciliary hostels).
- **Community Outreach and Support Services**
  - Services and supports, such as community outreach and food security programs, as well as case management and referrals for people on By-Name Lists.
  - Ongoing supports and services (such as counselling, medical care, or assistance with daily living) for people not receiving long-term housing assistance, which would be considered supportive housing under HPP.
- **Housing Assistance**
  - Short-term/emergency assistance, non-financial housing assistance, and long-term housing assistance (such as rent supplements and housing allowances) for people not receiving ongoing support services, which would be considered supportive housing for the purposes of the HPP.
  - Rent supplements under the former SCRSP.
- **Emergency Shelter Solutions**
  - Expenses directly related to operating and staffing emergency shelters.

On April 8, 2022, notification was received that the DNSSAB had been allocated \$1,295,000 of SSRF P5 funding to be used for:

1. Enhanced safety in emergency shelters and other congregate care settings through:
  - continued operation of temporary emergency shelter spaces (e.g., in hotels or other facilities) to accommodate reduced overall shelter capacity resulting from COVID-19 safety requirements,
  - hiring additional staff to address capacity pressures, procuring Personal Protective Equipment, and implementing enhanced cleaning and isolation protocols, increasing vaccination uptake among homeless individuals through outreach and clinics, and creating isolation space to avoid COVID-19 positive individuals from being required to “shelter in place”.
2. Short-term, critical needs of vulnerable individuals through the provision of emergency financial assistance (e.g., rent banks, housing allowances), food security programs, and mental health and addictions and other medical services.
3. The creation of long-term housing solutions, including more affordable and supportive housing that will make long-term progress in addressing chronic homelessness as well as housing affordability for those most in need.

---

<sup>1</sup> Homelessness Prevention Program (HPP) Program Guidelines April 2022 p.7

## CURRENT STATUS/STEPS TAKEN TO DATE:

### HPP

The total allocated funding for the 2022-23 fiscal year through HPP is \$2,339,100. This includes \$344,612 for the continuation of long-term rent supplements for 48 households that were part of the SCRSP. The new budget amount reflects a base increase of \$223,148 for provincially mandated homelessness services and outcomes for the 2022-23 fiscal year.

The HPP Investment Plan will carry forward some of the investments from the provincial funding for homelessness in 2021-22, including the Evergreen Contract for shelter beds at Four Elms, funding for Northern Pines 1 and Strong Communities Rent Supplement funding. In addition, funding for direct client benefits formerly accessed through CHPI will continue to be available through the Homelessness Prevention Navigators (HPNs), who are the DNSSAB's access point for Coordinated Access Nipissing (CAN) and the By-Name List (BNL). The parameters of the homelessness prevention benefits will not change significantly from the original CHPI benefits, but they will be aligned with the CAN and BNL processes to create opportunities to better streamline and coordinate resources and services for individuals who are homeless.

Homelessness Prevention Program Investment Plan					
Service Category	Planned Financial Commitment by Quarter				\$2,339,100.00
Operating	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar	
Community Outreach and Support Services	\$58,619.38	\$69,869.38	\$69,869.38	\$69,869.38	\$268,227.50
Emergency Shelter Solutions	\$38,267.25	\$128,267.25	\$128,267.25	\$128,267.25	\$423,069.00
Housing Assistance	\$182,155.25	\$313,405.25	\$313,405.25	\$313,405.25	\$1,122,371.00
Supportive Housing	\$87,500.00	\$87,500.00	\$87,500.00	\$87,500.00	\$350,000.00
<b>Total Operating</b>	\$366,541.88	\$599,041.88	\$599,041.88	\$599,041.88	\$2,163,667.50
Administration	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar	
Administration Fees	\$43,858.13	\$43,858.13	\$43,858.13	\$43,858.11	\$175,432.50
<b>Grand Total</b>	<b>\$410,400.01</b>	<b>\$642,900.01</b>	<b>\$642,900.01</b>	<b>\$642,899.99</b>	<b>\$2,339,100.00</b>

### SSRF P5

The SSRF P5 funding is designed to mitigate the risks and gaps in services that have been identified as a result of the pandemic. The funding must be fully expended by December 31<sup>st</sup>, 2022 and therefore cannot be used for ongoing projects unless further funding can be allocated from other funding streams.

The SSRF P5 Investment Plan supports the prioritization of funding for the Low Barrier Shelter and Day Programming at the Northern Pines site. In addition, the proactive planning

for a warming centre in the fall and winter of 2022-23, as well as funding to offset the costs of hotel overflow will be secondary priorities. The District-wide plan for unsheltered and encampment response that is tied to the Coordinated Access Nipissing model could also be prioritized through the SSRF P 5 Funding.

Total SSRF Phase 5 Allocation					1,295,000.00
Service Categories	Projected Households Assisted (Operating) / Units (Capital)	Q1 Planned (Apr - Jun)	Q2 Planned (Jul - Sep)	Q3 Planned (Oct - Dec)	Total
<b>Operating Components</b>					
Emergency Shelter Solutions	200	100,000.00	100,000.00	100,000.00	\$ 300,000.00
Homelessness Prevention	150	85,384.00	85,384.00	85,382.00	\$ 256,150.00
Homelessness Prevention - Rent Relief	0	-	-	-	\$ -
Housing with Related Supports	60	150,000.00	150,000.00	150,000.00	\$ 450,000.00
Services and Supports	50	50,000.00	50,000.00	50,000.00	\$ 150,000.00
<b>Operating Total</b>	<b>460</b>	<b>\$ 385,384.00</b>	<b>\$ 385,384.00</b>	<b>\$ 385,382.00</b>	<b>\$ 1,156,150.00</b>
<b>Capital Components</b>					
New Facilities	0	-	-	-	\$ -
Retrofits/Upgrades	0	-	50,000.00	50,000.00	\$ 100,000.00
<b>Capital Total</b>	<b>0</b>	<b>\$ -</b>	<b>\$ 50,000.00</b>	<b>\$ 50,000.00</b>	<b>\$ 100,000.00</b>
<b>Administration Fee</b>		<b>12,950.00</b>	<b>12,950.00</b>	<b>12,950.00</b>	<b>\$ 38,850.00</b>
<i>Admin Fee % of Total (max: 3%)</i>		3%	3%	3%	3.00%
<b>Total</b>	<b>460</b>	<b>\$ 398,334.00</b>	<b>\$ 448,334.00</b>	<b>\$ 448,332.00</b>	<b>\$ 1,295,000.00</b>

## RISK IDENTIFICATION AND MITIGATION:

- The HPP funding has a decrease in allowable administrative costs from 10% to 7.5% for the 2022-23 fiscal year and a further reduction to 5% for the 2023-24 fiscal year. The change in administrative dollars will need to be incorporated into budget planning for administration of homelessness funding and services within the DNSSAB as well as within agreements with service providers.
- The HPP Guidelines provide direction that Service Managers should not rely on HPP to fund Emergency Shelters:

*The ministry recognizes that emergency shelters are an important pillar of support for people experiencing homelessness. However, as Investment Plans are developed, Service Managers are encouraged to consider how investments can best be made to shift from a reliance on emergency shelters towards prevention and long-term housing.<sup>2</sup>*

The implementation of CAN will provide the opportunity to assess the needs and track the flow of households experiencing homelessness within the District. Further, a triaging process will begin that may divert homeless individuals from shelters to safe and appropriate housing. The development of a variety of transitional and permanent housing options, including Northern Pines and Suswin Village, is also anticipated to decrease the need for shelter beds.

Other options for funding Emergency Shelter beds may need to be explored as the HPP funding is further delineated and regulated.

The new HPP funding has reporting requirements that will mean more long-term tracking of the individuals and households on the BNL and those who have received HPP funded services as a result of risk of homelessness.

<sup>2</sup> Homelessness Prevention Program (HPP) Program Guidelines April 2022 p.21

The implementation of the Homeless Individuals and Families Information System (HIFIS 4.0) will allow tracking of data from one central location. All HPP funded agencies and DNSSAB services will enter their data into HIFIS and reports will be created that will track unique households and individuals throughout their homelessness journey.

SSRF P5 will provide additional funding to alleviate the capacity pressures within the homelessness system until December 31, 2022. DNSSAB staff will use this time to align homelessness services and funding and to continue to pursue other funding options for the essential services that will need to be funded beyond 2022.

## **CONCLUSION:**

Along with the HPP and SSRF funding, the Federal homelessness funding through Reaching Home (RH) has also recently been increased and further aligned with Coordinated Access. This funding will provide additional opportunities for the stabilization and enhancement of the homelessness system within the District. The Community Advisory Board (CAB) is currently developing, in partnership with the DNSSAB, the RFP for the new RH funding.

All homelessness funding in the District is now directly tied to CAN, the BNL and the requirement to track unique households and outcomes. The first fiscal year of the new HPP and additional SSRF funding, along with the increased RH funding, will present opportunities for the DNSSAB and community partners to monitor homelessness within the District, assess housing and service needs and gaps, and realign resources based on firm data. DNSSAB staff will continue to work with the CAB and community partners to look at ways to align homelessness funding with the goal of ending chronic homelessness within the District.



## BRIEFING NOTE PS03-22

For Information or  For Approval

**Date:** April 27, 2022

**Purpose:** **Proposed Study and Potential Acquisition of CPR Assist Devices**

**Prepared by:** Robert Smith

**Reviewed by:** Justin Avery, Manager of Finance

**Approved by:** Catherine Matheson, Chief Administrative Officer

---

### *Alignment with Strategic Plan: Healthy, Sustainable Communities*

Maximize Impact    Remove Barriers    Seamless Access    Learn & Grow

### **RECOMMENDATION:**

THAT the District of Nipissing Social Services Administration Board (DNSSAB) receive briefing note PS03-22 and approve a proposed development of a trial program to determine the efficacy of CPR assist devices when used by paramedics; and;

THAT the study will be completed in 2022 with any recommendations to be brought forward before the end of 2022.

### **BACKGROUND:**

Increased access to any type of early cardiopulmonary resuscitation has a significantly positive impact on event survivability (Yan et al, 2020). For the last number of years, there has been a concentrated effort to improve the training of public so that they can initiate CPR before paramedics arrive. Along with early intervention and rapid paramedic response times, the need to deliver effective CPR remains significant (Navab et al, 2019).

In late March, staff received a letter from the Municipality of Temagami (attached), dated February 15, 2022 that referenced a council resolution from June 17, 2021. In that resolution, the council resolved to write to the DNSSAB and request the DNSSAB purchase and position a Stryker Lucas Pump (CPR assist device) at the Temagami Paramedic Station. The rationale for the resolution details lengthy transport time and a lack of a medical tiered response program with Temagami Fire Services. Council also referenced that the DNSSAB had two of these devices in North Bay.

A Stryker Lucas device was supplied and trialed in Temagami from the summer of 2021 through late March, 2022. NBRHC Paramedic Services authorized a trial of the Lucas device, and training of the Temagami paramedics was provided by NBRHC Paramedic Services staff.

A review of sudden cardiac arrest responses from the Temagami Paramedic Station for the period from January 1, 2019, through March 28, 2022, (3 years and 3 months) revealed that the paramedics in that community responded to seven cardiac arrest calls. There was no evidence in documentation that the Lucas device was utilized or required throughout the trial period.

In response to the assertion that two Lucas devices are positioned in North Bay, staff reviewed historical information that revealed the purchase of two Zoll Auto-Pulse CPR Assist device in 2011. One device was placed in Whitney. Information from Paramedic Services staff confirmed that the assets were removed from service at end of life in late 2016 or early 2017.

## **ANALYSIS OF CPR ASSISTIVE DEVICE EFFECACY**

The effectiveness of CPR assistive devices has been a specific area of research for many years, with a focus on assistive devices in the last decade. Chiang et al (2022) assert that use of CPR assistive devices show some improvement in return of spontaneous circulation, but that final outcome data is inconclusive. They do support the benefit of these devices in assisting with paramedic safety, specifically pertaining to work during transportation. The device permits staff to remain secured in the vehicle. Şan, Bekgöz, Ergin & Usul (2020) attributed lesser efficacy of paramedic performed CPR during transport to the unstable environment caused by vehicle movement.

Chen et al (2021) concluded that the pre-hospital use of mechanical CPR devices was significantly associated with improved outcomes, but also prefixed this conclusion by finding that early CPR and rapid paramedic response was necessary to achieve the outcomes.

## CURRENT STATUS/STEPS TAKEN TO DATE:

Kahn, Dhruva, Rhee & Ross (2019) observed that there was a four-fold increase in the use of CPR assistive devices between 2010 and 2016. This number has further increased since then. A review of use across northern Ontario has revealed that almost every service has implemented one of the products, either in specific areas where transport times are extended, where paramedics deploy in single staffed vehicles, or in a system wide manner.

As noted earlier, two units were deployed some years ago, and there is anecdotal information that they were utilized. There is research to suggest improved outcomes with use of the devices. Given that the use was in less urban areas of the district where there is a significant on-call model, it is reasonable to conclude that response times would have played a role in successful outcomes.

Information out of some neighbouring paramedic services suggests staff found the devices beneficial, leading to a greater sense of employee wellness. Workplace satisfaction assessed a positive outcome from access to these devices (Kahn, Dhruva, Rhee & Ross, 2019).

### Comparator Use

Thunder Bay	SSM	WAHA	Parry Sound	Timiskaming	Muskoka	Cochrane
Yes	Yes	Yes	Yes	Yes	No	Yes
Lucas	Lucas	Lucas	Auto-pulse	Lucas	2022 Budget Item	Lucas
One Unit per Vehicle	TBD	One Unit per Vehicle				

## FINANCIAL IMPLICATIONS:

The CPR assistive devices are not an insignificant costed asset. A preliminary quote from Stryker for the Lucas device was \$16,500 per unit. To operate these devices across the district would cost between \$200,000 and \$250,000. As such, the decision to implement such a program would need to be managed thoughtfully and considering all factors. A six to eight month trial program to assess the potential for one of these products should have little to no financial impact as product vendors have all shown interest in having such trials completed. Any minor costs would be managed within the existing budget. If the Board were to direct staff to procure the CPR assist devices for

deployment following a trial, the funding for this would be addressed as part of the 2023 budget process.

### **NEXT STEPS:**

Consideration for the use of CPR assistive devices in the DNSSAB Paramedic Services as a service enhancement will require staff to complete an assessment examines both the clinical and operational benefits, as well as any limitations.

In order to ensure the DNSSAB is making the best decision possible as the agency responsible for the provision of Paramedic Services and associated budgets, staff are proposing a study at identified stations within the district, using multiple devices. This approach would permit staff to assess any specific benefits that could be realized when considering response and transport time variances that pertain to the district urban and rural areas. The study would also have the opportunity to explore the overall impact of geography and staffing patterns on sudden cardiac arrest patient outcomes.

### **CONCLUSION:**

The deployment of CPR assistive devices is an emerging discussion that has both operational and financial implications. There is research that suggests that these devices can improve patient outcomes, but there is also a significant body of evidence to suggest the benefits are negatively impacted by lengthy response times.

It is recommended that staff design and implement an objective assessment of sudden cardiac arrest responses with the use of CPR assistive devices using a variety of devices and examining specific clinical and operational factors. Should Staff determine the benefit from deployment of these devices, there would be a requirement to bring forward a funding plan as part of the 2023 budget process.

### Reference

Chen, Y. R., Liao, C. J., Huang, H. C., Tsai, C. H., Su, Y. S., Liu, C. H., ... & Tsai, M. J. (2021). The Effect of Implementing Mechanical Cardiopulmonary Resuscitation Devices on Out-of-Hospital Cardiac Arrest Patients in an Urban City of Taiwan. *International journal of environmental research and public health*, 18(7), 3636.

- Chiang, C. Y., Lim, K. C., Lai, P. C., Tsai, T. Y., Huang, Y. T., & Tsai, M. J. (2022). Comparison between Prehospital Mechanical Cardiopulmonary Resuscitation (CPR) Devices and Manual CPR for Out-of-Hospital Cardiac Arrest: A Systematic Review, Meta-Analysis, and Trial Sequential Analysis. *Journal of clinical medicine*, 11(5), 1448.
- Grunau, B., Kime, N., Leroux, B., Rea, T., Van Belle, G., Menegazzi, J. J., ... & Christenson, J. (2020). Association of intra-arrest transport vs continued on-scene resuscitation with survival to hospital discharge among patients with out-of-hospital cardiac arrest. *Jama*, 324(11), 1058-1067.
- Holmén, J., Herlitz, J., Ricksten, S. E., Strömsöe, A., Hagberg, E., Axelsson, C., & Rawshani, A. (2020). Shortening ambulance response time increases survival in out-of-hospital cardiac arrest. *Journal of the American Heart Association*, 9(21), e017048.
- Kahn, P. A., Dhruva, S. S., Rhee, T. G., & Ross, J. S. (2019). Use of mechanical cardiopulmonary resuscitation devices for out-of-hospital cardiac arrest, 2010-2016. *JAMA network open*, 2(10), e1913298-e1913298.
- Kang, S. M., & Choi, S. W. (2019). Monitoring mechanical impedance of the thorax with compression and decompression cardiopulmonary resuscitation device. *Journal of Mechanical Science and Technology*, 33(2), 981-988.
- Kiguchi, T., Okubo, M., Nishiyama, C., Maconochie, I., Ong, M. E. H., Kern, K. B., ... & Iwami, T. (2020). Out-of-hospital cardiac arrest across the World: First report from the International Liaison Committee on Resuscitation (ILCOR). *Resuscitation*, 152, 39-49.
- Navab, E., Esmaeili, M., Poorkhorshidi, N., Salimi, R., Khazaei, A., & Moghimbeigi, A. (2019). Predictors of out of hospital cardiac arrest outcomes in pre-hospital settings; a retrospective cross-sectional study. *Archives of academic emergency medicine*, 7(1).
- Myat, A., Song, K. J., & Rea, T. (2018). Out-of-hospital cardiac arrest: current concepts. *The Lancet*, 391(10124), 970-979.
- Parsons, I. T., Cox, A. T., & Rees, P. S. C. (2018). Military application of mechanical CPR devices: a pressing requirement?. *BMJ Military Health*, 164(6), 438-441.
- Riva, G., Ringh, M., Jonsson, M., Svensson, L., Herlitz, J., Claesson, A., ... & Hollenberg, J. (2019). Survival in out-of-hospital cardiac arrest after standard cardiopulmonary resuscitation or chest compressions only before arrival of emergency medical services: nationwide study during three guideline periods. *Circulation*, 139(23), 2600-2609.
- Şan, İ., Bekgöz, B., Ergin, M., & Usul, E. (2020). Manual CPR Vs Mechanical CPR: Which One Is More Effective During Ambulance Transport?.
- Shekhar, A., Mercer, C., & Ball, R. (2020). PRE-HOSPITAL USE OF CPR-ASSIST DEVICES AND RETURN OF SPONTANEOUS CIRCULATION: NATIONWIDE EXPERIENCE FROM THE NEMESIS DATABASE. *Journal of the American College of Cardiology*, 75(11\_Supplement\_1), 3462-3462.
- Yan, S., Gan, Y., Jiang, N., Wang, R., Chen, Y., Luo, Z., ... & Lv, C. (2020). The global survival rate among adult out-of-hospital cardiac arrest patients who received cardiopulmonary resuscitation: a systematic review and meta-analysis. *Critical Care*, 24(1), 1-13.

