

Notice of Meeting and Meeting Agenda Hospitals and Housing Committee

Wednesday, June 2, 2021

1:30 PM

6th Floor Boardroom
625 Fisgard St.
Victoria, BC V8W 1R7

L. Helps (Chair), G. Orr (Vice Chair), D. Blackwell, S. Brice, F. Haynes, G. Holman, J. Loveday,
K. Murdoch, D. Screech, C. Plant (Board Chair, ex officio)

The Capital Regional District strives to be a place where inclusion is paramount and all people are treated with dignity. We pledge to make our meetings a place where all feel welcome and respected.

1. Territorial Acknowledgement

2. Approval of Agenda

3. Adoption of Minutes

3.1. [21-459](#) Minutes of the May 5, 2021 Hospitals and Housing Committee Meeting

Recommendation: That the minutes of the Hospitals and Housing Committee meeting of May 5, 2021 be adopted as circulated.

Attachments: [Minutes - May 5, 2021](#)

4. Chair's Remarks

5. Presentations/Delegations

In keeping with directives from the Province of BC, this meeting will be held by Live Webcast without the public present.

To participate electronically, complete the online application for "Addressing the Board" on our website. Alternatively, you may email the CRD Board at crdboard@crd.bc.ca.

5.1. [21-303](#) Presentation: Kelly Roth, Greater Victoria Coalition to End Homelessness re. GVCEH Update

Attachments: [Presentation: GVCEH Update](#)

5.2. [21-311](#) Presentation: Coreen Child, Aboriginal Coalition re. Aboriginal Coalition Update

Attachments: [Presentation: Aboriginal Coalition to End Homelessness Update](#)

6. Committee Business

- 6.1.** [21-443](#) Oak Bay Lodge Public Engagement Update
- Recommendation:** The Hospitals and Housing Committee recommends to the Capital Regional Hospital District Board:
That the Oak Bay Lodge Public Engagement Update report be received for information.
- Attachments:** [Staff Report: Oak Bay Lodge Public Engagement Update](#)
[Appendix A: Consultation Summary Report](#)
[Appendix B: Proposed Services](#)
- 6.2.** [21-444](#) Union of BC Municipalities Strengthening Communities' Services Grant Application
- Recommendation:** The Hospitals and Housing Committee recommends to the Capital Regional District Board:
That the CRD Board authorize staff to prepare and submit an application, negotiate and accept the terms, and receive funds through the Union of BC Municipalities Strengthening Communities' Services Program to support the activities outlined in the proposal presented in Appendix A.
- Attachments:** [Staff Report: UBCM Strengthening Communities' Svcs Grant App](#)
[Appendix A: UBCM Strengthening Communities' Svcs Grant App](#)
- 6.3.** [21-445](#) 3656 Raymond Street Housing Agreement Rescission Bylaw
- Recommendation:** The Hospitals and Housing Committee recommends to the Capital Regional District Board:
1. That Bylaw No. 4427, "Resale Control and Housing Agreement Rescission Bylaw (3656 Raymond Street South), 2021" be introduced and read a first, second and third time; and
2. That Bylaw No. 4427 be adopted.
- Attachments:** [Staff Report: 3656 Raymond St Housing Agrmt Rescission Bylaw](#)
[Appendix A: Bylaw 4427](#)
- 6.4.** [21-448](#) Previous Minutes of Other CRD Committees and Commissions for Information
- Recommendation:** That the following minutes be received for information:
a) Regional Housing Trust Fund Commission minutes - April 8, 2021
- Attachments:** [Minutes: Regional Housing Trust Fund Commission-April 8, 2021](#)

7. Notice(s) of Motion

- 7.1.** [21-399](#) Motion with Notice: Community Social Planning Council Grant Application (Director Helps)
- Recommendation:** That the Hospitals and Housing committee recommends to the Capital Regional District Board:
That the Board requests CRD staff to consider accepting a grant application through the federal Reaching Home funding program from the Community Social Planning Council for the homelessness prevention program, also known as the regional Rent Bank, for a grant program to assist people in maintaining rental housing.

8. New Business

9. Adjournment

The next meeting is July 7, 2021.

To ensure quorum, please advise Tamara Pillipow (tpillipow@crd.bc.ca) if you or your alternate cannot attend.

Meeting Minutes

Hospitals and Housing Committee

Wednesday, May 5, 2021

1:30 PM

6th Floor Boardroom
625 Fisgard St.
Victoria, BC V8W 1R7

PRESENT

Directors: L. Helps (Chair)(1:39 pm EP), G. Orr (Vice Chair), D. Blackwell (EP), S. Brice, J. Brownoff (for F. Haynes) (EP), G. Holman (EP), J. Loveday (EP), K. Murdoch (EP), D. Screech

Staff: R. Lapham, Chief Administrative Officer; N. Chan, Chief Financial Officer; K. Lorette, General Manager, Planning and Protective Services; M. Barnes, Senior Manager, Health and Capital Planning Strategies; D. Elliott, Senior Manager, Regional Housing; R. Lachance, Senior Manager, Financial Services; M. Lagoa, Deputy Corporate Officer; T. Pillipow, Committee Clerk (Recorder)

EP - Electronic Participation

Regrets: Directors F. Haynes, C. Plant (Board Chair, ex officio)

The meeting was called to order at 1:31 pm.

1. Territorial Acknowledgement

Acting Chair Orr provided a Territorial Acknowledgement. He recognized that today is Red Dress Day, the National Day of Awareness for Missing and Murdered Indigenous Women and Girls.

2. Approval of Agenda

The Chair noted that there is a Notice of Motion to be added under Notice(s) of Motion.

MOVED by Director Brice, **SECONDED** by Director Screech,
That the agenda for the May 5, 2021 Hospitals and Housing Committee meeting be approved as amended.
CARRIED

3. Adoption of Minutes

3.1. [21-369](#) Minutes of the April 7, 2021 Hospitals and Housing Committee Meeting

MOVED by Director Screech, **SECONDED** by Director Brice,
That the minutes of the Hospitals and Housing Committee meeting of April 7, 2021 be adopted as circulated.
CARRIED

4. Chair's Remarks

Acting Chair Orr advised the committee members that there will be an Emergency Notification Test at 1:55 pm today.

5. Presentations/Delegations

**MOVED by Director Brice, SECONDED by Director Screech,
That an additional five (5) minutes be added to the speaking time of the two (2) presenters.
CARRIED**

- 5.1. [21-302](#) Presentation: Dr. Richard Stanwick, Island Health Re: 2020-21 Island Health Report to the CRD

Dr. Stanwick spoke to the 2020-21 Island Health Report.

Discussion ensued on the following:

- outdoor burning contributing to poorer air quality
- effective enforcement of the smoking ban within parks
- people congregating outside buildings to smoke
- progress made regarding safe inhalation sites to lessen the overdose epidemic

- 5.2. [21-349](#) Capital Regional Hospital District and Capital Region Housing Corporation Audit Findings Presentation, Lenora Lee, Lead Audit Engagement Partner, KPMG

L. Lee spoke to the 2020 CRHC and CRHD Audit Findings.

6. Committee Business

- 6.1. [21-254](#) Capital Regional Hospital District 2020 Audit Findings Report and Audited Financial Statements

N. Chan spoke to item 6.1.

**MOVED by Director Screech, SECONDED by Director Brice,
The Hospitals and Housing Committee recommends to the Capital Regional Hospital District Board:
That the Capital Regional Hospital District 2020 Audit Findings Report be received and the Capital Regional Hospital District 2020 Audited Financial Statements be approved.
CARRIED**

- 6.2.** [21-253](#) Capital Region Housing Corporation 2020 Audit Findings Report and Audited Financial Statements
- N. Chan spoke to Item 6.2.
- Discussion ensued on the following:
- clarity on the number of shelter rate units
 - clarification on the variation of operating costs in the audit findings report
- MOVED by Director Brice, SECONDED by Director Screech,
The Hospitals and Housing Committee recommends to the Capital Region Housing Corporation Board:
That the Capital Region Housing Corporation 2020 Audit Findings Report be received and the 2020 Audited Financial Statements be approved.
CARRIED**
- 6.3.** [21-327](#) 2021 Minor Capital Projects and Equipment - Approval of Capital Bylaw
- K. Lorette spoke to Item 6.3.
- MOVED by Director Screech, SECONDED by Director Brice,
The Hospitals and Housing Committee recommends to the Capital Regional Hospital District Board:
1) That the recommended 2021 Minor Capital Projects totalling \$3,750,000 be approved and expensed from the 2021 requisition;
2) That the recommended 2021 equipment grants of \$30,000 to Mount St. Mary Hospital and \$2,925,000 to Island Health be approved and expensed from the 2021 requisition;
3) That Bylaw No. 406, "Capital Regional Hospital District Capital Bylaw No. 180, 2021" be introduced and read a first, second and third time; and
4) That Bylaw No. 406 be adopted.
CARRIED**
- 6.4.** [21-364](#) Capital Region Housing Corporation 2020 Annual Report (Verbal Update)
- K. Lorette spoke to Item 6.4.
- 6.5.** [21-357](#) Previous Minutes of Other CRD Committees and Commissions for Information
- MOVED by Director Helps, SECONDED by Director Screech,
That the following minutes be received for information:
a) Tenant Advisory Committee minutes - February 22, 2021
CARRIED**

7. Notice(s) of Motion

Director Helps provided the following Notice of Motion for consideration at the June 2, 2021 meeting of the Hospitals and Housing Committee.
That the Hospitals and Housing committee recommends to the CRD Board:
That the board requests CRD staff to consider accepting a grant application through the federal Reaching Home funding program from the Community Social Planning Council for the homelessness prevention program, also known as the regional Rent Bank, for a grant program to assist people in maintaining rental housing.

8. New Business

There was no new business.

9. Adjournment

**MOVED by Director Screech, SECONDED by Director Brice,
That the May 5, 2021 Closed Session of the Hospitals and Housing Committee
meeting be adjourned at 2:32 pm.
CARRIED**

Chair

Recorder



greater victoria
coalition to end
homelessness

hope has found a home

CRD Hospitals and Housing Committee Presentation

JUNE 2, 2021

PRESENTED BY:

KELLY ROTH,
EXECUTIVE DIRECTOR

Vision

A Region Without Homelessness

Mission

- To ensure appropriate solutions are in place to serve those individuals experiencing **chronic homelessness** in the capital region
- To ensure **all people facing homelessness** in the capital region have access to safe, affordable, appropriate, long-term housing.

Outcome - Ultimate Benefit

Communities throughout the region are safe, healthy, vibrant, welcoming and supporting of people from all walks of life and stages in their life journey.

STRATEGIC PRIORITIES

1. Funding Effectiveness
2. System Effectiveness
3. Inclusiveness
4. Evidence-based Capacity Building

Outcome - Ultimate Benefit

Communities throughout the region are safe, healthy, vibrant, welcoming and supporting of people from all walks of life and stages in their life journey.

Measure - Functional Zero

Functional zero is a concrete, and measurable approach to ending homelessness. When a community has reached functional zero, it means **homelessness is managed by an adequate amount of services and resources.**

Functional Zero

- Functional zero is a **concrete**, and **measurable** approach to ending homelessness.
- Simply put, it means that there are **enough, or even more homeless-serving services and resources than needed to meet the needs of individuals** who are experiencing homelessness.
- This definition and approach to ending homelessness gives communities the autonomy to reflect on what ending homelessness **would** and **should** look like.

Source: HomelessHub

Core Functions/Departments

STRATEGIC PRIORITIES 2016-2021

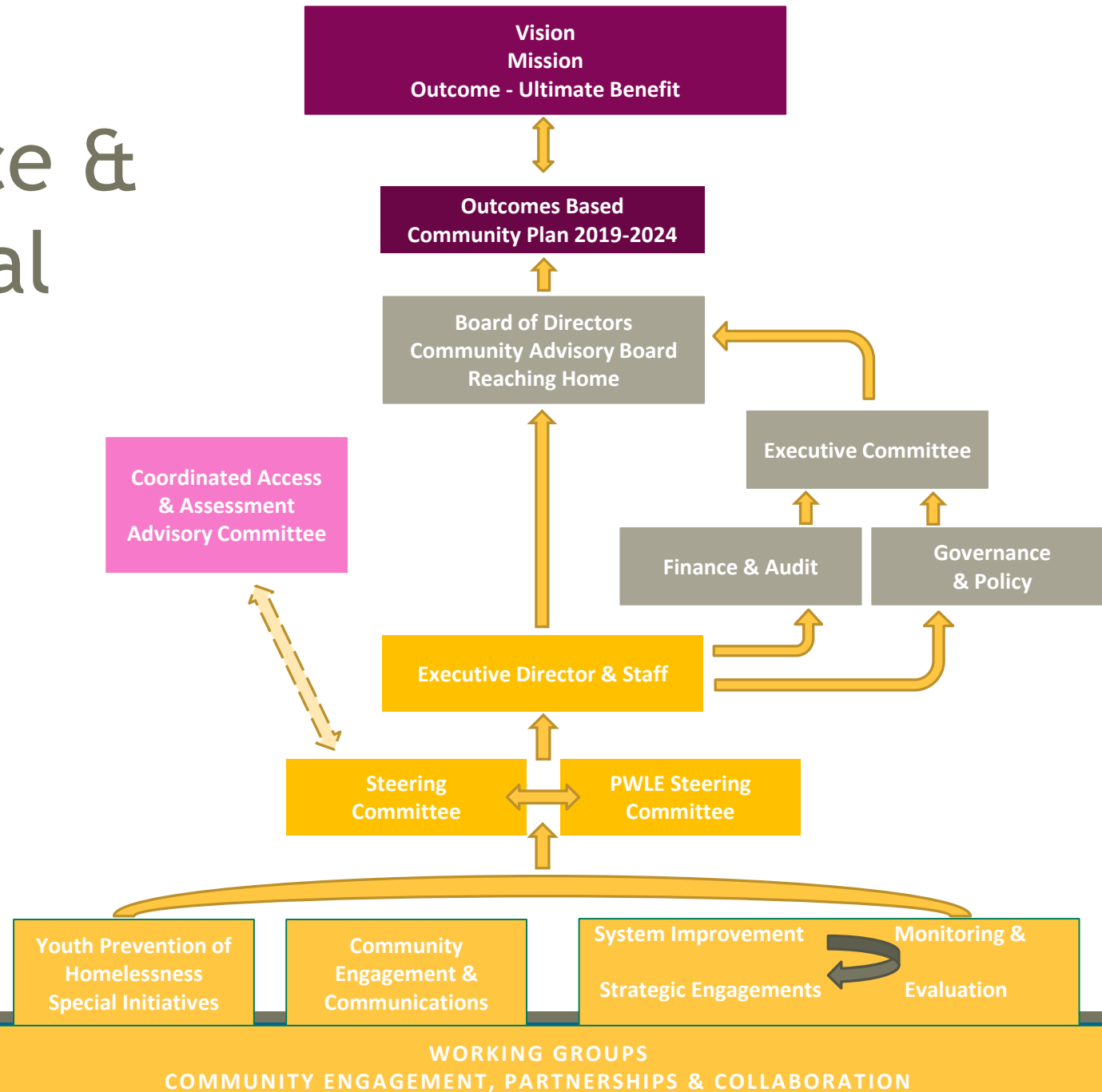
- Reorganized in May 2019.
- Departments reflect the functions that coordinate and support the collaboration of the members & partners.
- The Business Plan Human Resource budget reflects the allocation of financial resources necessary to the execute the Business Plan.

1. FUNDING EFFECTIVENESS
2. SYSTEM EFFECTIVENESS
3. INCLUSIVENESS
4. EVIDENCED-BASED CAPACITY BUILDING



Internal operational planning supports delivery of the Outcomes-Based 2019-2024 Community Plan.

Governance & Operational Structure

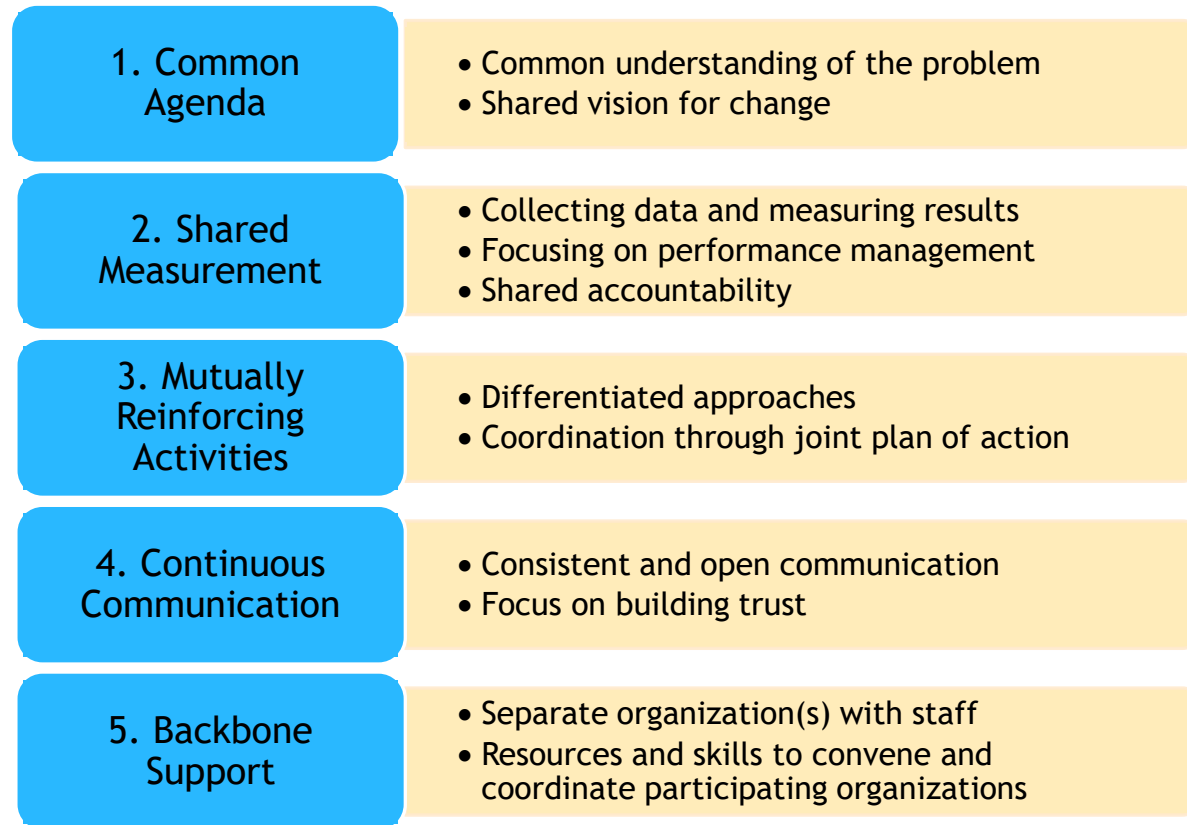


Staff Organizational Chart



Collaborative Social Development Framework

COALITION COLLABORATIVE PARTNERSHIPS

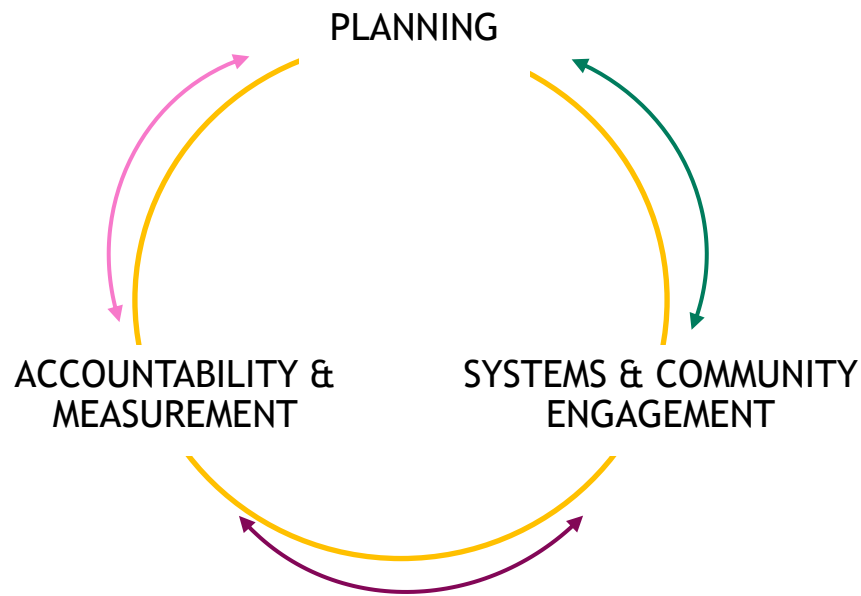


- Board of Directors
- Steering Committee
- PWLE Steering Committee and PWLE Council
- System Improvement Strategic Engagements
- Monitoring & Evaluation Working Group
- Community Engagement & Communications Working Group
- Youth Prevention of Homelessness Special Initiatives, Youth Task Force
- CAA Advisory Committee

Retrieved from FSG and the Stanford Social Innovation Review

Community Plan to End Homelessness in the Capital Region 2019-2024

OUTCOMES BASED PLANNING PROCESS



Engagement of all working groups in establishing priority outcomes

- Consensus building process with working groups

Collaborative Community Planning Day.

- Looking Back/Reporting Progress
- Planning Forward

Establishing shared accountability and indicators of success

COMMUNITY PLAN - 5 CORE OUTCOME AREAS

Support Services (SS)

- a. People experiencing homelessness quickly and equitably receive the support they need over the course of their journey;
- b. Support services have the mandate and capacity to deliver services.

Housing (HO)

A supply of accessible, appropriate, safe and person-centred housing is available.

Advocacy and Awareness (AA)

Communities and neighbourhoods are inclusive, empathetic, compassionate and welcoming of people experiencing homelessness; facilitated through advocacy and awareness and our collective experience of homelessness.

Prevention Support (PS)

People are prevented from becoming homeless.

Collaboration and Leadership (CL)

Leadership at all levels of community and government share a common sense of purpose; are effective, collaborative, supportive and inclusive.

GVCEH Business Plan Review

Year 1 - 2019/20

Development of the Community Plan to End Homelessness in the Capital Region 2019 - 2024

• Year 2 - 2020/21

Business Plan initiated action on 23 Strategic Initiatives

COVID March 20, provincial shut down & GVCEH pivot.

COVID Vulnerable Populations Response Plan

Year 3 Targets - 2021/22

18 Community Plan Initiatives

21 GVCEH Business Plan Initiatives

Community Plan Outcome 3: Advocacy and Awareness (AA)

Communities and neighbourhoods are inclusive, empathetic, compassionate and welcoming of people experiencing homelessness; facilitated through advocacy and awareness and our collective experience of homelessness.

Initiative: Awareness and Education Workshops - Face to Face with Stigma Program

“The impact our actions can have on others and how important it is to be aware of our actions during interactions.” Vic PD participant quote

11 Workshops

Total Participants: 185 persons in cross-sectoral trainings

By-law, Police, Health, Social Work, Post-secondary Education.

Victoria Police Department Recruits:

5 participants (in-person)

Victoria General Hospital:

2 Workshops with 10 participants

City of Victoria Bylaw:

2 Workshops with 20 participants in total

Camosun Community Social Workers:

28 participants (in-person)

Camosun Mental Health and Addictions:

20 participants (Zoom)

Glengarry Hospital:

10 participants (in-person)

UVIC Mental Health and Addictions:

29 participants (in-person)

UVIC Nurses:

33 participants (in-person)

Victoria Police Department:

30 participants (in-person active duty officers,)

Business Plan Year 2 Results: Red Type

Outcome 1: Support Services

1.1 Coordinated Support Service Program Think Tank Health and Housing Report and Recommendations	1.6 Indigenous Specific Systems Improvement Map Underway through the Aboriginal Coalition to End Homelessness	1.9 Peer Housing Support/Support Services Pivot to support Temporary Sheltering Sites and RHFP	1.13 Support Services for Regional Housing First Program's New Housing Units Initiated but not sufficient to meet need. Reaching Home Funded RFP.	1.15 Wrap Around Support System for Women Experiencing Violence National Housing Solutions Lab well underway.	1.16 Youth and Indigenous Support Services Strategies Initiating 2021	1.17 Youth Extreme Weather Protocol Complete
Year 2 (2020/21)	On-going Y1 (2019) + Year 2 (2020/21)	On-going Y1(2019) + Year 2 (2020/21)	On-going (2019) + Year 2 (2020/21)	On-going Y1 (2019) + Year 2 (2020/21) + Year 3 (2021/22)	On-going Y1(2019) + Year 2 (2020/21)	On-going Y1(2019)

Outcome 2: Housing

2.1 Acute Care Temporary Shelter No developments	2.3 Indigenous Low Barrier Housing Spa'Qun House Open	2.6 New Supportive Housing Program(s) Vulnerable Population COVID Temporary Shelters to Supportive Housing	2.9 Youth Housing No purpose-built youth Housing	2.10 Youth Housing Model Development Youth Hostel Supportive Housing Cross Sectoral Model Underway
Year 2 (2020/21)	Year 2 (2020/21)	Year 2 (2020/21)	Year 2 (2020-21)	Year 2 (2020-21)

Outcome 3: Advocacy and Awareness

3.2 Awareness and Education Workshops Face to Face with Stigma Workshops	3.3 Community Anti-Stigma Media Campaign Initiated Phase I – Media tracking and development of Key Messages	3.4 Community Plan Roadshow - Start 2021 - 20222
On-going Y1 (2019) + Year 2 (2020/21)	Year 2 (2020/21)	On-going (2019) + Year 2 (2020/21)

Outcome 4: Prevention Supports

4.7 RentSmart Guarantee Fund Pilot Pivot to Sooke with Pacifica in partnership	4.12 Tenancy Information On-Sight Project No initiation	4.13 Transitional Programs - Ongoing Youth Prevention of Homelessness Transitional Program Development
On-going (2019) + Year 1 (2020/21)	On-going (2019) + Year 2 (2021/22)	Year 2 (2020/21)

Outcome 5: Collaboration and Leadership

5.1 By-Name List (BNL) Ongoing and integrated into CAA for 2021-2022	5.2 Coordinated Access and Assessment Ongoing	5.4 Homelessness Management Information System (HMIS) Ongoing and will be integrated into CAA	5.7 Inventory of Stakeholders Complete Vulnerable Population Response Plan	5.9 Share Expertise and Education Complete & Ongoing
Year 2 (2020/21)	Year 2 (2020-21)	Year 2 (2020-21)	Year 2 (2020/21) + Year 3 (2021/22)	Year 2 (2020/21)

Business Plan 2021 – 2022		18 Initiatives					
Outcome 1: Support Services							
1.1 Coordinated Support Services	1.6 Indigenous Specific Systems Improvement Map	1.7 Neighborhoods Citizen’s Mobilization Strategy	1.9 Peer Housing Support/Support Services	1.12 Street Survival Guide (SSG)	1.13 Support Services for Regional Housing First Program’s New Housing Units	1.15 Wrap Around Support System for Women Experiencing Violence	1.16 Youth and Indigenous Support Services Strategies
Proposed Key Lead: BCH/Island Health/ CRD/ GVCEH	Proposed Team Lead: ACEH, GVCEH		Proposed Key Lead: GVCEH	Proposed Team Lead: GVCEH	Proposed Team Lead: GVCEH, CRD, BCH	Proposed Team Lead: ACEH, GVCEH, Shift Collaborative	Proposed Team Lead: ACEH & GVCEH.
Ongoing Y1-3 (2019 - 2022)	Ongoing Y1-3 (2019 - 2022)	New Y3 (2021 - 2022)	Ongoing Y1-3 (2019 - 2022)	Ongoing Y1-3 (2019 - 2022)	Ongoing Y1-3 (2019 - 2022)	Ongoing Y1-3 (2019 - 2022)	Ongoing Y1-3 (2019 - 2022)
Outcome 2: Housing							
2.3 Indigenous Low Barrier Housing			2.6 New Supportive Housing Programs			2.10 Youth Housing Model Development	
Proposed Team Lead: ACEH/VNFC/Makola Housing			Proposed Team Lead: BCH, CRD			Proposed Team Lead: Threshold, Pandora, YM/WCA, MCFD	
Ongoing Y2 (2020/21)			Ongoing Y2 (2020/21)			Ongoing Y2 (2020-21)	
Outcome 3: Advocacy and Awareness							
3.2 Awareness and Education Workshops			3.3 Community Anti-Stigma Media Campaign			3.4 Community Plan Roadshow	
Proposed Key Lead: GVCEH			Proposed Team Lead: Our Place, GVCEH			Proposed Key Lead: GVCEH	
Ongoing Y1-3 (2019 - 2022)			Ongoing Y2-3 (2020 - 2022)			Ongoing Y1-3 (2019 - 2022)	
Outcome 4: Prevention Supports							
4.7 Rent Smart Guarantee – Sooke / Pacifica Pilot				4.13 Transitional Programs – Youth			
Proposed Key Lead: RentSmart				Proposed Team Lead: YTF & GVCEH			
Ongoing Y1-3 (2019 - 2022)				Ongoing Y2-3 (2020 - 2022)			
Outcome 5: Collaboration and Leadership							
5.1 Development of Data Dashboard (5.1 BNL, 5.2 CAA, 5.4 HMIS)				5.9 Share Expertise and Education			
Proposed Team Lead: GVCEH, CAA Advisory				Proposed Team Lead: CRD/CE, CAA Advisory			
Ongoing Y2-3 (2020 - 2022)				Ongoing Y2-3 (2020 - 2022)			
ACEH: Aboriginal Coalition to End Homelessness; BCH: BC Housing; CAA Advisory: Coordinated Access and Assessment Advisory Committee; CAB Community Advisory Board; CSPC Community Social Planning Council. CRD: Capital Region District; GVCEH: Greater Victoria Coalition to End Homelessness, MCFD: Ministry of Child and Family Development; YTF: Youth Task Force; VNFC: Victoria Native Friendship Centre							

GVCEH 21 Initiatives Business Plan 2021 - 2022 Administration and Leadership (A&L)				
1. Regional Priority Support Strategies	2. Board Orientation & Board Governance / Development	3. Reaching Home Program: Community Advisory Board Representation	4. Community Plan Review and Update	5. Market Rent Strategy
Ongoing Y1-3 (2019 - 2022)	Ongoing Y2-3 (2020 - 2022)	Ongoing Y2-3 (2020 - 2022)	Partner/Member Leads: CRD/CAB & GVCEH New Y3 (2021 - 2022)	Partner/Member Leads: CAA Advisory, Island Health & Pacifica New Y3 (2021 - 2022)
Inclusion and Collaboration (I&C)				
1. Wellness Alliance Initiative	2. Specialized Youth Peer Support Services	3. PWLLE Practicing Council	4. System Improvement Engagement Strategy	
Ongoing Y2-3 (2020 - 2022)	New Y3 (2021 - 2022)	New Y3 (2021 - 2022)	New Y3 (2021 - 2022)	
Communication (Comm)				
1. Media Strategy	2. Storytelling Website HUB	3. Business Community Engagement	4. Media and Technology Training for People Experiencing Homelessness	5. Homelessness Resources Kiosk
Ongoing Y2-3 (2020 - 2022)	New Y3 (2021 - 2022)	New Y3 (2021 - 2022)	New Y3 (2021 - 2022)	New Y3 (2021 - 2022)
Prevention (Prev)				
1. Rent Bank	2. Tiny Homes		3. Youth Participatory Budgeting Project – Hostel Supportive Housing Project	
Partner/Member Lead: CSPC New Y3 (2021 - 2022)	Partner/Member Lead: Our Place Society, BCH New Y3 (2021 - 2022)		Ongoing Y2-3 (2020 - 2021) Expected completion 2021	
Research (Res)				
1. Youth PAR/Peer Housing Support Coordination & Research at Hostel	2. Public Perceptions and Attitudes	3. Eviction Prevention: Typology and Needs Mapping of Evictions	4. Housing Factors: Analysis and Action	
Ongoing Y2-3 (2020 - 2022)	New Y3 (2021 - 2022)	New Y3 (2021 - 2022)	New Y3 (2021 - 2022)	

2020 COVID- 19 Vulnerable Populations Response

Victoria (over 700)
Sooke (38)
Salt Spring Island (139)
Sidney (6-10)

GVCEH members and
partners pivoted to support
coordination of services
into Topaz Park.

212 tents and 196 persons

Heroic support from all levels of
government, service organizations and
community volunteers.

Vulnerable Populations Response Plan emerged as a collaborative response with

- over 30 organizations across our region;
- departments of local, regional and provincial government;
- pivoted to respond and support our vulnerable population during the outbreak of COVID-19

Triple crisis:

- COVID
- Homelessness
- Opiod

How?

- Food, washing stations, covid-protocol cleaned showers, safety and security, outreach, health and harm reduction support.



Example: Topaz Park Collaborative Community Response

City of Victoria Licensed Topaz Park to BC Housing (funded Operations)
Dandelion Society start-up.

Transitioned to Greater Victoria Coalition to End Homelessness Operator

Operations: On-site Staff

2 Site Managers (co-share 7 days per week)

5 FTE Outreach Workers:

- 24/7 (will be multiple persons)
- Maintenance Contract: Daily 8- hour shift spread throughout the day.

Safety & Security Support:

- Paladin - 3 Persons (24/7) reports daily
- By-law Officers – daily walk throughs
- Vic PD
- Fire Department – educational walk throughs

Health & Harm Reduction Support Services:

- Doctors of the World
- Island Health YT5 Youth Outreach Team
- VICCR Doctors in reach
- Island Health nurses – on site services and health assessments for housing moves
- AVI Harm Reduction and Overdose Prevention On-Site
- SOLID - Peer support
- Umbrella Society – Harmreduction Peer Support
- PEERS
- St John's First Aid
- Medical In-reach Safe Supply
- Narcotics Anonymous Circle Meetings

Volunteers:

- Hero Works / Boxes of Hope / Showers and Washroom Management



PEOPLE

Paid staff without lived experience of homelessness

Staff: **7**
Hours: **413**
Wages: **\$10,399**

Paid staff with lived experience of homelessness

Staff: **4**
Hours: **440**
Wages **\$11,724**

DVBA Volunteers

Topaz Park Volunteers:

Volunteers: **47**
Shifts: **184**
Hours: **714**

Boxes of Hope Volunteers

Volunteers: **40**
Shifts: **288**
Hours Worked: **551**

DVBA SPECIAL RECOGNITION

Downtown Victoria Business Association Volunteers:

*Nathan Bird - 63 hours
30 shifts total*

*David Hyde - 60 hours
46 shifts*

*Shaylene Keddy - 43.5
hours 21 shifts*

*Devon Jenkins - 43.5 hours
21 shifts*

*21 Carolyn Cade - 31 hours
18 shifts*

IMPACT

Meals provided: **18,211** (\$10 each)
Snacks provided: **5,116** (\$1 each)
Total: **23,327**

Locations provided to

March 13 - 22:

Centennial Square & Beacon Hill Park

March 22 – May 20:

Topaz Park Sanctioned Encampment

March 22 – May 20:

Hotel Sites – Temporary Shelter Locations

March 28 – Ongoing:

**Vulnerable Populations Response Plan
Hotel Locations**



greater victoria
coalition to end
homelessness
hope has found a home

What we learned:

Our system can respond in a coordinated way.

Collaboration across all partners is key.

Pivoting and shifting policies to try new ways of working together results in more effective practices.

Our system needs housing with health supports both on site and off site to appropriately support our population on their journey out of homelessness.

- Think Tank Health and Housing Summary Report and Recommendations.
- 40 recommendations to support a person-centred health and housing model for the region

Every person experiencing homelessness has a unique story and unique needs.

Person-centred support is critical to effectively address the needs of individuals in a manner that results in positive health outcomes for ALL.

Through partnership we have the potential to reach and maintain Functional Zero by 2024



Community Plan to End Homelessness in the Capital Region 2019 - 2024

Collaboration is the key to success and together we can create a region that is safe, healthy vibrant and welcoming!

**Presentation to the
CRD Hospitals and
Housing Committee
by the Aboriginal
Coalition to End
Homelessness**

**Presenter: Coreen
Child, Associate
Director**



Artist: Evan James

EXECUTIVE DIRECTOR'S ROLES AND RESPONSIBILITIES

- Oversees the operation of the Culturally Supportive House and related Indigenous Alcohol Harm Reduction Research Project.
- Oversees the operation of the Family Townhouse which provides the Participates monthly on the GVCEH Steering Committee.
- Facilitates Indigenous Networking Circle monthly meetings. Responsibilities include sharing of information, networking and case management. There is also a focus on identifying gaps in support services and housing.
- Participates with local community stakeholders in the development of a research plan, design, implementation, operation and evaluation of the Indigenous Managed Alcohol Program (MAP). This project and its delivery will have far reaching implications for Greater Victoria.

ASSOCIATE DIRECTOR: ROLES AND RESPONSIBILITIES

- Oversees the operation of Spaken House, which houses 22 Indigenous women.
- Represents the Executive Director when the ED is absent.
- Represents ACEH at key community tables.
- Participates in the CCI working group to ensure a culturally appropriate lens is being applied in the development of regional systems processes which address the issue of homelessness.
- Attends Downtown Service Provider monthly meetings.
- Engages with community members with lived experience.
- Participates in the ACEH Indigenous Street Community Advisory Committee.
- Has community engagement with local service providers and organization leaders.
- Engages with front-line workers who work with Indigenous populations.



Current Research Projects

Decolonized Harm Reduction Framework
Stigma Project
Indigenous Systems Improvement Map
Culturally Supportive Housing Toolkit
House Surveys
Land-based Healing and Camps
National Housing Strategy Solutions Lab
Indigenous Healing Centre

CAPACITY DEVELOPMENT MADE POSSIBLE BY THE HOUSING AND HOSPITALS COMMITTEE

- Expansion of ED and AD roles, allowing for organizational growth from 5 to 62 employees
- New West Shore office for administration and management staff including Finance, Human Resources, Occupational Health and Safety, and Research Team.



**REPORT TO HOSPITALS AND HOUSING COMMITTEE
MEETING OF WEDNESDAY, JUNE 02, 2021**

SUBJECT Oak Bay Lodge Public Engagement Update

ISSUE SUMMARY

To provide an update on the first round of public engagement at Oak Bay Lodge.

BACKGROUND

The Capital Regional Hospital District (CRHD) took over ownership of Oak Bay Lodge (2251 Cadboro Bay Road) from the Vancouver Island Health Authority (Island Health) effective August 14, 2020. On October 14, 2020 the CRHD Board approved the award of contract to Kirk and Co. Consulting Ltd. for public engagement on the Oak Bay Lodge Redevelopment project. At the December 02, 2020 Hospitals and Housing Committee, staff reported on the public engagement timeline/process and committed to bring a report back to the Board on the results of the first round of engagement.

The first stage of the public engagement process focused on seeking community feedback and ideas regarding the future development of the Oak Bay Lodge property. The first round of consultation took place between January 6 and February 4, 2021. Due to provincial COVID-19 restrictions, engagement activities took place online using tools such as Zoom webinar and online feedback forms, to enable safe interactions. Hard copies of engagement materials were also distributed in community centres and to those who requested them.

There was significant interest from the community in this initial consultation period, with over 759 public and stakeholder interactions. The *Consultation Summary Report – Round One* outlines input received from the community (Appendix A). We engaged the community on three healthcare services areas: primary care, seniors’ hub, and a public health unit. A summary of the key suggestions are shown in the Table below.

Healthcare Service Area		Healthcare Services
Primary Care	43%	general practitioners, nurse practitioners, urgent care, acute care, hospital overflow and more
Seniors’ Hub	25%	long term care, extended care, assisted living, independent living, adult day programs, dementia care and more
Addictions and Mental Health	24%	addictions and mental health including outpatient and inpatient detox and rehabilitation support and more
Public Health Unit	13%	walk-in clinic, diagnostics and testing, immunization clinic, youth health services, maternity services, nutrition services and more

There were also comments and questions received and information shared related to engagement, decision-making and project timeline, including involvement of other agencies, covenants on the property, municipal zoning, demolition and construction.

Next Steps

The feedback received from this initial period provided the CRHD with important information to inform potential options for the future use of the property.

The second round of consultation is anticipated in Spring/Summer 2021 and will focus on reporting back to the community what was heard during this first period, demonstrating how the CRHD has considered that input, and introducing potential development concepts for further feedback.

Activity	Description	Timeline
Planning / materials development	<ul style="list-style-type: none"> ○ Develop Consultation and Engagement Plan ○ Develop materials for consultation and engagement 	May-June 2021
Round 2 launch	<ul style="list-style-type: none"> ○ News release ○ Launch website/start of public notifications 	June 2021
Consultation period	<ul style="list-style-type: none"> ○ Virtual open houses ○ Virtual small group meetings ○ Physically distant pop-ups 	June-August 2021
Final Report	<ul style="list-style-type: none"> ○ Round 2 - Consultation Summary Report 	August-September 2021

CRD/CRHD staff have met with Island Health and preliminary discussions have focused on Island Health findings from needs assessment and functional programming for the Oak Bay Lodge site.

The existing building is 14,220 Building Gross Square Metres (BGSM), three stories with a 30 percent site coverage. Options for consideration and discussion as part of the second round of public engagement include a range of 30,000-50,000 BGSM, 3-6 stories, with 50-75 percent site coverage. Some of the health related service options include hospital based services such as rehabilitation services and intermediate care and housing. Other non-hospital based services under consideration include senior’s long term care and primary care. Other services are still being considered as well such as affordable housing, private health facilities and independent seniors living (see Appendix B for additional information regarding these services). These options will be discussed with the community as part of the second round of engagement and staff will bring back schematic design options to the Board for consideration.

ALTERNATIVES

Alternative 1

The Hospitals and Housing Committee recommends to the Capital Regional Hospital District Board:

That the Oak Bay Lodge Public Engagement Update report be received for information.

Alternative 2

That the Oak Bay Lodge Public Engagement Update report be referred back to staff for additional information based on Hospitals and Housing Committee direction.

IMPLICATIONS

Demolition Process

Staff have allocated \$10 million in the CRHD Capital Plan for Oak Bay Lodge demolition and redevelopment for 2021-2022. Resources will be allocated toward hiring consultants to develop a concept plan and working through a procurement process for receiving development proposals. Costs for the public engagement consultants and development of the conceptual plan will be funded from the Administration and Feasibility Studies Reserve.

CONCLUSION

A multi-round consultation and engagement process is underway. There was significant interest from the community in the first round of public engagement and those suggestions will be shared and incorporated into the second phase of the process. The second phase of the engagement process will focus on reporting out on what was heard from the community during the first round, and introducing potential development concepts for feedback.

RECOMMENDATION

The Hospitals and Housing Committee recommends to the Capital Regional Hospital District Board:

That the Oak Bay Lodge Public Engagement Update report be received for information.

Submitted by:	Michael Barnes, MPP, Senior Manager Health & Capital Planning Strategies
Concurrence:	Kevin Lorette, P. Eng., MBA, General Manager, Planning & Protective Services
Concurrence:	Robert Lapham, MCIP, RPP, Chief Administrative Officer

ATTACHMENT

Appendix A: Consultation Summary Report

Appendix B: Proposed Services



Consultation Summary Report

March 2021

Future use of the Oak Bay Lodge property

Community Consultation – Round One

January 6, 2021 – February 4, 2021

Kirk&Co.

ABOUT KIRK & CO. CONSULTING LTD.

Kirk & Co. is a recognized industry leader in designing and implementing comprehensive public and stakeholder consultation and engagement programs. Utilizing best practices, consultation and engagement programs are designed to maximize opportunities for input, Kirk & Co. independently analyzes and reports on public and stakeholder input.

The views represented in this engagement summary report reflect the priorities and concerns of engagement participants. They may not be representative of the views of the public and other stakeholders because participants self-selected into the community engagement, and therefore do not reflect a random sample.

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Appendix A

Notification materials

Appendix B

Engagement materials

1.0

Executive summary

The Capital Regional Hospital District (CRHD) is committed to developing and improving healthcare facilities in the capital region. The redevelopment of the former Oak Bay Lodge property provides an opportunity for a discussion with the community about reimagining its future use. The CRHD launched a comprehensive planning and consultation process, with the first round of consultation taking place between January 6 and February 4, 2021. There was significant interest from the community in this initial consultation period, with over 759 public and stakeholder interactions. This *Consultation Summary Report – Round One* outlines what input was received from the community.

The focus of the first round of consultation was to seek feedback and ideas on the region’s healthcare priorities. Respondents were provided multiple ways to participate. This report summarizes the notification, engagement methods, and key themes of the input received from participants regarding the future use of the property. Quantitative results from the feedback form are also detailed within the report.

We engaged the community on three healthcare services areas: primary care, seniors hub, and a public health unit. Below are high-level healthcare suggestions participants would like to see as part of any new proposed development.

Primary Care



43%

Healthcare services including general practitioners, nurse practitioners, urgent care, acute care, hospital overflow and more

Seniors Hub



25%

Healthcare services specific to seniors including long term care, extended care, assisted living, independent living, adult day programs, dementia care and more

Addictions and Mental Health



24%

Healthcare services for addictions and mental health including outpatient and inpatient detox and rehabilitation support and more

Public Health Unit



13%

Healthcare services including a walk-in clinic, diagnostics and testing, immunization clinic, youth health services, maternity services, nutrition services and more

As well, there were comments and questions related to engagement, decision-making and project timeline, including involvement of other agencies, covenants on the property, municipal zoning, demolition and construction.

A second consultation period is anticipated in spring 2021 and will focus on reporting back on what was heard during the first round of consultation, demonstrating how the CRHD has considered that input, and introducing potential development concepts for further feedback.

Due to provincial COVID-19 restrictions, engagement activities took place online using tools such as Zoom webinar and online feedback forms, to enable safe interactions. Hard copies of engagement materials were also distributed in community centres and to those who requested them.

How input will be used

The Capital Regional Hospital District is reviewing and considering all input received in community meetings, online, and in written submission from this round of consultation for the redevelopment of the Oak Bay Lodge property.

2.0

Background

The Oak Bay Lodge was a regional healthcare facility located on a 3.9-acre property in Oak Bay, British Columbia. For over four decades, this facility cared for thousands of individuals who required long-term care or seniors-care supports. The 235-bed building closed in summer 2020 as part of a long-term plan. The majority of residents were relocated to the new complex-care facility at The Summit in Victoria and ownership of the property was transferred to the CRHD on August 14, 2020.

After a review with partner agencies, it was determined that the Oak Bay Lodge building is past its useful life. Two covenants exist on the property, including one from its sale in 1971. Those covenants state that the land must be used for the 'public good' and the property must be used as a 'retirement home'. These covenants are ultimately subject to municipal rezoning and/or Island Health approval processes.

The future use of the property will align with the CRHD's mandate, developing and improving healthcare facilities in the CRD in partnership with Island Health. Working with the community to reimagine the future use of the property is a priority for the CRHD and is part of the Capital Regional District (CRD)'s Capital Plan for 2021-22. This project presents an important opportunity to recognize and address growing healthcare needs in the region.



3.0

Engagement overview

From January 6 to February 4, 2021, the CRHD conducted the first round of engagement on the redevelopment of the Oak Bay Lodge property. Due to provincial COVID-19 restrictions, engagement activities took place online and hard copies of project and engagement materials were provided upon request.

Two public online open houses were held on January 21 and 26, 2021 and two online small group meetings were held on January 19, 2021 with neighbours and key stakeholders. The sessions provided information about the project and allowed for questions and comments.

Stakeholders and the public received notification of the engagement period by media release, postcard mail drop, newspaper advertisements, signage, social media posts, email, and the CRD website. Notification materials directed participants to the project webpage at crd.bc.ca/oakbaylodge, where they could find the engagement materials and opportunities to provide feedback.

Leading up to the two public open houses, a series of small group meetings and phone interviews with community members took place. A meeting with immediate neighbours of the property was set up to hear their thoughts and input. Feedback was also received in a meeting with board members of the Community Association of Oak Bay Board. Several phone interviews were conducted with leaders from local schools, recreation centres, building property managers and first responders in the area.



4.0

Notification

Stakeholders and the public were notified about the engagement opportunities using several notification methods – all of which included the link to the project webpage at crd.bc.ca/oakbaylodge.

Media release

A media release was issued on January 6, 2021: *Capital Regional Hospital District seeks community input on future use of Oak Bay Lodge property*. The release was distributed by the CRD to media in the local region.

Postcards

Within the first week of the engagement period, 1,097 postcards were delivered to local residences within a 500m radius of the Oak Bay Lodge property.

Newspaper advertising

Seven advertisements ran in community newspapers in the engagement period. The ads appeared in both the print and digital versions.

- Saanich News – January 6 and 13, 2021
- Oak Bay News – January 7 and 14, 2021
- Victoria News – January 7 and 14, 2021
- Times Colonist – January 10, 2021

Social media

Multiple posts were shared on the CRD's social channels to create awareness of the engagement and how to participate. Posts were also retweeted and shared by other groups and organizations.

- Twitter (@crd_bc): 13 posts
- Facebook (@CapitalRegionalDistrict): 6 posts
The January 6 post was pinned to the top of the CRD page for the duration of the engagement period.

Stakeholder outreach

Emails were sent to 16 key stakeholders to provide information about meetings and other opportunities to participate in the engagement. There were 17 telephone calls made to stakeholders.

Emails were also sent to stakeholders and members of the public who signed up through the project webpage to receive periodic email updates.

- January 18, 2021 – sent to 42 contacts
- February 1, 2021 – sent to 72 contacts

Signage

Two large signs (2' x 3') were erected at the entrance and exit of the Oak Bay Lodge property site with information on the engagement period and the project's webpage address.

CRD Events calendar

The two online open house events on January 21 and January 26, 2021 were both listed on the CRD's Events calendar and included links to register for the events.

Project webpage

All notification materials directed participants to the project webpage at crd.bc.ca/oakbaylodge.

The CRD homepage highlighted the Oak Bay Lodge Redevelopment webpage link as a feature topic starting on January 6, 2021. A panel was also added on the CRD's website under "Get Involved" to encourage feedback and participation.

Copies of the notification materials can be found in Appendix A.

5.0

Participation

Between January 6, 2021 and February 4, 2021, there was a total of 759 public and stakeholder interactions:



615

completed surveys
(606 online, 9 hard copy)



14

attended two small group meetings



121

online open house attendees
155 total questions and comments
(138 written, 17 oral)



9

written emails received to project
email address

FIRST NATIONS

Notification of the engagement process was facilitated at the bi-weekly Lekwungen Liaisons meetings. The CRD continues to work with the Liaisons group to ensure ongoing participation and feedback regarding healthcare priorities.

6.0

Engagement methods

Pre-interviews

Key community representatives from a range of fields, including education, business, property management, neighbourhood groups, and first responders were contacted in advance of the start of consultation. The project team shared information about the upcoming consultation, methods of engagement and sought input on the process.

Online open houses

There were 121 attendees at two online open houses on January 21 and 26, 2021. At each online open house, Michael Barnes, Senior Manager of Health and Capital Planning Strategies at the Capital Regional District, presented an overview of the project and scope of the first phase of engagement.

- Thursday, January 21, 2021 – 6:00-7:30 p.m.
- Tuesday, January 26, 2021 – 6:00-7:30 p.m.

Following the presentation, Kirk & Co. facilitated a question and comment period. 155 total written and oral questions and comments were made during the two open houses. Attendees were encouraged to complete a feedback form following their participation in the open houses.

Small group meetings

14 people attended two small group meetings, which provided the community with an opportunity to take part in a more in-depth discussion about the Oak Bay Lodge property. The meetings were held with residents on Zoom on January 19, 2021. A CRHD representative was available to answer questions and hear feedback.

- Project neighbours:
Tuesday, January 19, 2021 – 5:00-6:00 p.m.
- Community Association of Oak Bay:
Tuesday, January 19, 2021 – 6:00-7:00p.m.

Discussion guide

The discussion guide provided information about the project and engagement, including an overview of the CRHD, history of the Oak Bay Lodge property, location of the property, purpose of the redevelopment project, details related to land use, rezoning and building demolition, topics of engagement, and how to participate in the engagement process.

Hard copy materials

Due to provincial COVID-19 restrictions, engagement activities took place online. To ensure that the engagement was accessible to all, more than 150 hard copies of the discussion guide, with the feedback form attached, were distributed to community and recreation centres in Oak Bay. The public was also able to request a copy of the materials sent to them by mail.

Feedback form

615 surveys were received between January 6 and February 4, 2021. The online feedback form was available through a link on the project webpage at crd.bc.ca/oakbaylodge and was hosted on a civic engagement platform. Hard copies of the feedback form were also available at community and recreation centres in Oak Bay and upon request by mail.

The feedback form asked participants to prioritize and provide suggestions for healthcare services to consider in the redevelopment; prioritize and provide suggestions for other priorities for a mixed-use development proposal (once healthcare options on the property are exhausted); and provided an opportunity for open-ended response.

- 606 online feedback forms were received
- 9 hard copy feedback forms were received

Project webpage

All community consultation materials were available on the project webpage at crd.bc.ca/oakbaylodge starting January 6, 2021. This included information about the engagement period, options for participation, the discussion guide, feedback form link, media release, online sign-up for the two open houses, and frequently asked questions. As well, a link to the project email address at OBLengagement@crd.bc.ca and an option to subscribe to updates were available.

The project webpage will exist throughout the life of the project and will be updated as more information and engagement opportunities become available.

Email

Nine emails were received to the project email address at OBLengagement@crd.bc.ca, which was established for the duration of the engagement period to accept submissions of feedback and to answer questions. This email address was available on the project webpage at crd.bc.ca/oakbaylodge.

Neighbourhood canvas

Members of the project team visited multiple residences in close proximity to Oak Bay Lodge to discuss the engagement and provided copies of the discussion guide and postcard. Social distancing was maintained at all times.

Copies of the engagement materials can be found in Appendix B.

7.0

What we heard

Online open houses

There were 121 attendees at two online open houses, where 155 total written and oral questions and comments were shared. The following provides a summary of the number of written and oral questions and comments shared at each of the open houses, as well as the key themes observed in the feedback.



Online open house 1

Thursday, January 21, 2021
6:00-7:30 p.m.

- 64 attendees
- 87 questions and comments
(77 written, 10 oral)



Online open house 2

Tuesday, January 26, 2021
6:00-7:30 p.m.

- 57 attendees
- 68 questions and comments
(61 written, 7 oral)

Themes

Engagement and decision-making processes related to property use, including comments about removing the existing covenants, municipal zoning, and the importance of meaningfully considering public input

Island Health's participation in the engagement process and intentions for programming at the development

Seniors hub, including long term care, respite care, day care, intergenerational programming and more

Maximizing value of the property by including a range of services and adopting an integrated model of care that promotes community congregating, including suggestions for a community garden

Primary care and the health unit, including the need for more general practitioners and healthcare uses for the site that benefit the whole community

Themes

Property use and decision-making, including comments about removing the existing covenants and municipal zoning, and the importance of conducting continuous meaningful engagement

Demolition, including comments related to demolition timeline, remediation, and potential effects to nearby properties

Using the property as housing for people experiencing homelessness in the interim or long-term, including comments about BC Housing

Seniors hub, including long term care, respite care, day care and more

Healthcare and seniors care is the priority for the property, with affordable housing as the priority if other uses are pursued

Small group meetings

14 people attended two online small group meetings. Small group meetings provided a project and engagement overview and discussion related to stakeholder interests.



Project neighbours

Tuesday, January 19, 2021

5:00-6:00 p.m.

- Eight attendees



Community Association of Oak Bay

Tuesday, January 19, 2021

6:00-7:00p.m.

- Six attendees

Themes

Project timelines, including demolition and construction

The importance of carrying out extensive and meaningful engagement, and affording additional weight to the input provided by the immediate neighbourhood surrounding the property

Preservation of existing vegetation, trees and wildlife, including deer and eagles

Traffic and parking during demolition, construction, and operation, noting it could put stress on roadways in the area

Themes

Engagement and decision-making process, including details about the new information that will be brought forward in the next phases of engagement, and who makes the final decisions

Discussion around the **potential use of the property**, its intended audience, and funding opportunities, including housing, intergenerational programming, and Indigenous recognition opportunities

Consideration of an **architect with local roots** during procurement



Feedback form

615 feedback forms were received between January 6 and February 4, 2021. 606 feedback forms were received online, and nine were received as hard copies through the mail. The following demonstrates the quantitative results of the feedback form, as well as the key themes observed in the open-ended questions.

1. Did the discussion guide help you understand how future use of the property needs to align with the CRHD mandate?

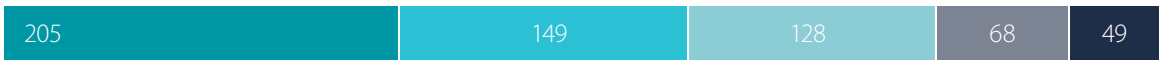


2. Based on preliminary discussions with Island Health, three key healthcare service areas have been identified for the property. How important are each of the following healthcare service areas in a future redevelopment of the property? Please rate each item's importance.

Health Unit



Primary Care



Seniors Hub



3. Based on the description of these three key service areas, are there any specific healthcare services that you would like to see considered in this redevelopment?

Key themes	Number of mentions
<p>Specific healthcare service suggestions related to primary care, including general practitioners, nurse practitioners, urgent care, acute care, hospital overflow, long term care, dementia care and more</p> <ul style="list-style-type: none"> • Focusing on seniors 45 • Focusing on children and families 8 	190
<p>Specific healthcare service suggestions related to a seniors hub, including long term care, extended care, assisted living, independent living, dementia care, respite care, meal program, day care, arthritis care and more</p>	112
<p>Consideration of addictions and mental health services, including outpatient and inpatient detox and rehab</p> <ul style="list-style-type: none"> • Focusing on youth 20 • Focusing on seniors 10 • Focusing on people experiencing homelessness 7 	104
<p>Specific healthcare service suggestions related to a public health unit, including nutrition services, maternity services, diagnostics and testing, immunization clinic, youth health services, speech therapy, midwifery, walk-in clinic and more</p> <ul style="list-style-type: none"> • Focusing on seniors 14 • Focusing on children and families 10 	57
<p>Consideration of affordable or subsidized housing</p> <ul style="list-style-type: none"> • Focusing on seniors 22 • Focusing on individuals with disabilities and/or complex health issues 6 • Focusing on children and families 1 	37
<p>Consideration of congregating space and day programming</p> <ul style="list-style-type: none"> • Focusing on seniors 20 • Multigenerational programs and spaces 7 • For children, youth and families, including childcare, youth at risk programs 3 	32
<p>Consideration of private health facilities, including dentist, physiotherapist, massage, chiropractic, rehabilitation, pharmacy, occupational therapy, traditional medicine, health research and more</p>	28

Key themes	Number of mentions
Redevelopment should be focused on seniors , including comments about there being a growing aging population in need, and staying true to the historical use of the property	27
Consideration of healthcare models to emulate, including “campus of care”, “integrated care model”, “continuum of care model”, and “team model of care”	16
Consideration of housing for people experiencing homelessness , in the interim or long-term	16
Other uses related to commercial space , including hair services, convenience or grocery store, coffee shop, movie theatre, office space and more	11
Importance of maximizing value of the property , building for the future, and providing a diverse range of services	8
Opposition to providing housing for people experiencing homelessness and/or providing mental health services, including comments about public safety as a result of there being a homeless shelter	8
Consideration of end-of-life or hospice care , including palliative care, and related counselling and support	7
Property should only be used for healthcare and seniors care , opposition to non-healthcare uses and services	6
The engagement materials or process	6
Concern about increased traffic during construction and operation , including comments about pedestrian safety from vehicles, and limited parking availability	5
Property use , including covenants, zoning and municipal rezoning	4
Public park , green space, and trail connections	3
Opposition to uses for the property that focus on seniors care , including that there is enough focus on seniors, and that focus should shift to attract young families to Oak Bay	3
Timeline of the project , including demolition and construction	2
Ensuring proper engagement with Indigenous groups and suggestions related to services for Indigenous peoples	2

4. Once all healthcare options on the property are exhausted the CRHD may consider other priorities that could be addressed as part of a mixed-use development proposal. How important are each of the following priorities when considering future redevelopment of the property? Rate each item's importance.

Affordable housing



Market rental housing



Commercial space



Other – themes	Number of mentions
Consideration of affordable or subsidized housing <ul style="list-style-type: none"> Focusing on seniors 35 Focusing on individuals with disabilities 12 Focusing on children and families 6 	58
Consideration of addictions and mental health services , including outpatient and inpatient detox and rehab <ul style="list-style-type: none"> Focusing on seniors 4 Focusing on youth 3 Focusing on people experiencing homelessness 1 	38
Consideration of day programs and community congregating space <ul style="list-style-type: none"> For children, youth and families, including childcare, youth at risk program 19 Focusing on seniors 4 Multigenerational programs and spaces 1 	32
Property should only be used for healthcare and seniors care , opposition to non-healthcare uses and services	27

Other – themes	Number of mentions
Healthcare service suggestions related to primary care , including general practitioners, nurse practitioners and more <ul style="list-style-type: none"> Focusing on seniors 11 	26
Other uses related to commercial space , including fitness facility, venue for fine arts, post office, recreation centre, office spaces, cafeteria and more	26
Specific healthcare service suggestions related to a seniors hub , including long term care, assisted living, independent living, dementia care, day care and more	19
Consideration of housing for people experiencing homelessness , in the interim or long-term	19
Consideration of public park , green space, and trail connections	12
Redevelopment should be focused on seniors , including comments about there being a growing aging population in need, and staying true to the historical use of the property	12
Consideration of private health facilities , including dentist, physiotherapist, massage, chiropractic, rehabilitation, pharmacy, occupational therapy and more	9
Property use , including covenants, zoning and municipal rezoning	9
Specific healthcare service suggestions related to a public health unit , including counselling services, immunization clinic, walk-in clinic, nutrition services and more <ul style="list-style-type: none"> Focusing on children and families 3 Focusing on seniors 1 	6
Opposition to providing housing for people experiencing homelessness and/or providing mental health services, including comments about public safety as a result of there being a homeless shelter	6
Consideration of end-of-life or hospice care , including palliative care, and related counselling and support	4
Comments about the engagement materials or process	4
Consideration of market-rental housing	3
Impact to neighbouring properties during construction and operation, including noise, property values, and sightlines	2
Improving housing affordability in Oak Bay and the CRD	2

5. Are there any other uses or services that you believe should be considered in the future use of the property?

Themes	Number of mentions
Consideration of affordable or subsidized housing <ul style="list-style-type: none"> Focusing on seniors 29 Focusing on individuals with disabilities 8 Focusing on children and families 2 	74
Consideration of addictions and mental health services , including outpatient and inpatient detox and rehab <ul style="list-style-type: none"> Focusing on youth 5 Focusing on people experiencing homelessness 4 Focusing on seniors 3 	55
Consideration of day programs and community congregating space <ul style="list-style-type: none"> For children, youth and families, including childcare, youth at risk program 22 Multigenerational programs and spaces 19 Focusing on seniors 10 	54
Healthcare service suggestions related to primary care , including long term care, pediatricians, urgent care and more <ul style="list-style-type: none"> Focusing on seniors 11 Focusing on children and families 2 Focusing on individuals with disabilities 2 	50
Other uses related to commercial space , including fitness space, post office, library, grocery store, restaurants, educational or research centre, coffee shop, outdoor pool, office spaces, lawyer's office, accountants, meal delivery services, hair salon, cafeteria and more	36
Consideration of public park , green space, and trail connections	34
Consideration of housing for people experiencing homelessness , in the interim or long-term	28
Property should only be used for healthcare and seniors care , opposition to non-healthcare uses and services	26
Redevelopment should be focused on seniors , including comments about there being a growing aging population in need, and staying true to the historical use of the property	21
Consideration of private health facilities , including pharmacy, dentist, chiropractor, physiotherapy, psychology, optometry, naturopathic clinic and more	19

Themes	Number of mentions
Healthcare service suggestions related to a public health unit , including walk-in clinic, maternity services, women’s health services, diagnostics and testing, podiatry services and more <ul style="list-style-type: none"> • Focusing on children and families 2 • Focusing on seniors 1 	14
Property use , including covenants, zoning and municipal rezoning	13
Protecting the environment , including mitigation of impacts to wildlife, trees, vegetation	7
Improving housing affordability in Oak Bay and the CRD	6
Opposition to providing housing for people experiencing homelessness and/or providing mental health services, including comments about public safety as a result of there being a homeless shelter	5
Consideration of Oak Bay's approach when it comes to the region's crises of homelessness and mental health	5
Consideration of market-rental housing	4
Maximizing value of the property , building for the future, and providing a diverse range of services	4
Increased traffic during construction and operation, including comments about pedestrian safety from vehicles, and limited parking availability	4
Consideration of end-of life or hospice care , including palliative care, and related counselling and support	3
Timeline of the project , including demolition and construction	3
Ensuring proper engagement with Indigenous groups and suggestions related to services for Indigenous peoples	3
Development be built sustainably , including green building codes and a green roof	3
Consideration of healthcare models to emulate, including “campus of care”, “integrated care model”, “continuum of care model”, “team model of care”	2
Impact to neighbouring properties during construction and operation , including noise, property values, and sightlines	2

6. How do you prefer to be notified about future opportunities for community input? Check all that apply.



Other – Themes	Number of mentions
News media, including radio, TV	8
CRD and Oak Bay website	3
Other social media	3
Phone	2

7. Please provide any additional questions or comments you have regarding future use of the property.

Themes	Number of mentions
Specific healthcare service suggestions related to primary care , including pediatricians, general practitioners, gynecologists, nurse practitioners, urgent care and more <ul style="list-style-type: none"> • Focusing on seniors 13 • Focusing on children and families 2 • Focusing on individuals with disabilities 2 	33
The redevelopment should be focused on seniors , including comments about there being a growing aging population in need, and staying true to the historical use of the property	34
Property should only be used for healthcare and seniors care , opposition to non-healthcare uses and services	30
Property use , including covenants, zoning and municipal rezoning	29
Increased traffic during construction and operation, including comments about pedestrian safety from vehicles, and limited parking availability	29
Affordable or subsidized housing <ul style="list-style-type: none"> • Focusing on seniors 12 • Focusing on children and families 3 	26
Timeline of the project , including demolition and construction	26
Opposition to providing housing for people experiencing homelessness and/or providing mental health services, including comments about public safety as a result of there being a homeless shelter	25
Consideration of public park , green space, and trail connections	22
Consideration of housing for people experiencing homelessness , in the interim or long-term	18
Protecting the environment , including mitigation of impacts to wildlife, trees, vegetation	17
Additions and mental health services , including outpatient and inpatient detox and rehab <ul style="list-style-type: none"> • Focusing on people experiencing homelessness 3 • Focusing on youth 1 • Focusing on seniors 1 	16

Themes	Number of mentions
Other uses related to commercial space , including coffee shop, cafeteria and more	16
Consideration of Oak Bay's approach when it comes to the region's crises of homelessness and mental health .	16
Day programs and community congregating space <ul style="list-style-type: none"> • For children, youth and families, including childcare, youth at risk programs 7 • Multigenerational programs and spaces 7 • Focusing on seniors 2 	15
Engagement materials or process	14
Specific healthcare service suggestions related to a seniors hub , including assisted living, independent living, long-term care and more	14
Development be built sustainably , including green building codes and a green roof	11
The building should blend in with the character of the neighbourhood and be visually appealing	10
Importance of maximizing value of the property , building for the future, and providing a diverse range of services	9
Improving housing affordability in Oak Bay and the CRD	7
Specific healthcare service suggestions related to a public health unit , including counselling, walk-in clinic, maternity services and more <ul style="list-style-type: none"> • Focusing on children and families 2 • Focusing on seniors 1 	6
Impact to neighbouring properties during construction and operation, including noise, property values, and sightlines	5
Private health facilities , including pharmacy, massage and more	4
Market-rental housing	3
Expressing opposition to uses for the property that focus on seniors care , including that there is enough focus on seniors, and that focus should shift to attract young families to Oak Bay	3
Ensuring proper engagement with Indigenous groups and suggestions related to services for Indigenous peoples	2

8. I live in...

390 Oak Bay	6 Central Saanich	1 Juan de Fuca Electoral Area
131 Victoria	4 Langford	11 Salt Spring Island Electoral Area
46 Saanich	3 View Royal	1 Sidney
12 Esquimalt	2 North Saanich	1 Other

8.0

Next steps

This first round of engagement on the future use of the former Oak Bay Lodge property will help inform the next stage in the planning process.

The feedback received from this initial period will provide the CRHD with important information in developing potential options for the future use of the property.

The second round of consultation is anticipated in spring 2021 and will focus on reporting back to the community what was heard during this first period, demonstrating how the CRHD has considered that input, and introducing potential development concepts for further feedback.



Appendix A

Notification materials



Media Release

For Immediate Release

January 6, 2021

Capital Regional Hospital District seeks community input on future use of Oak Bay Lodge property

Victoria, BC- The Capital Regional Hospital District (CRHD) is seeking community input on the future use of the Oak Bay Lodge property. The CRHD is responsible for a comprehensive planning and consultation process for the future use of the property, and the first round of consultation is now open for public participation.

“Working with the community to reimagine the future use of the property is a high priority project for the region,” said CRHD Board Chair Denise Blackwell. “We look forward to delivering a project that considers local input and places the individual at the centre of care, supporting our long term goal for an improved healthcare facility.”

The CRHD is planning two online open houses on January 21 and January 26, 2021 to outline elements of the project and seek input from the public on regional healthcare-related priorities for the property. This consultation period will run until February 4, 2021.

The CRHD has completed Phase 1 of an Environmental Site Assessment and Hazardous Materials Assessment, which supports the conclusion that demolition of the existing building is necessary for any future use of the property to proceed. The CRHD is in the process of applying to the District of Oak Bay for a permit to demolish the existing building. It is anticipated that this application will be submitted to the District in early 2021, and that upon approval, the remediation and demolition process could begin in early 2021 and would take 8-10 months.

Capital region residents are invited to visit www.crd.bc.ca/oakbaylodge to review the discussion guide, provide input through an online feedback form, and to sign up for the online open houses. Input from the public will be used to support planning efforts with partner agencies at Island Health to develop potential options for a second round of consultation, expected in the spring of 2021.

A corporation of the CRD, the Capital Regional Hospital District partners with Island Health and community stakeholder agencies to develop and improve healthcare facilities in the Region, including

replacing buildings that have reached the end of their economic and functional life. Through capital and other community investments, the CRHD supports a healthy, vibrant and livable region for all citizens.

-30-

For media inquiries, please contact:

Andy Orr, Senior Manager

CRD Corporate Communications

Tel: 250.360.3229

Cell: 250.216.5492



Postcard



CRHD
Capital Regional Hospital District

We want your thoughts and ideas.

Help the Capital Regional Hospital District envision the future use of the **Oak Bay Lodge property** (2251 Cadboro Bay Rd) by sharing your priorities for healthcare in the region.

To learn more, visit our project webpage at crd.bc.ca/oakbaylodge



CRHD
Capital Regional Hospital District

The Capital Regional Hospital District is seeking feedback January 6 to February 4, 2021.

How to participate


Sign up for an online open house

ONLINE OPEN HOUSE SCHEDULE
Thursday, January 21, 2021 6:00–7:30pm
Tuesday, January 26, 2021 6:00–7:30pm

Submit an online feedback form

To learn more, visit our project webpage at crd.bc.ca/oakbaylodge

Newspaper ad



CRHD

Help the Capital Regional Hospital District (CRHD) envision the future use of the **Oak Bay Lodge property** (2251 Cadboro Bay Rd) by sharing your priorities for healthcare in the region.

The CRHD is seeking feedback from **January 6 to February 4, 2021.**


How to participate

Attend an online open house

ONLINE OPEN HOUSE SCHEDULE
Thursday, January 21, 2021 6:00–7:30pm
Tuesday, January 26, 2021 6:00–7:30pm

Submit an online feedback form

To learn more or register to attend an event, visit our project webpage at:
crd.bc.ca/oakbaylodge



Signage



Capital Regional Hospital District



Share your thoughts and ideas!

The CRHD is seeking feedback on the future use of the Oak Bay Lodge property from **January 6 to February 4, 2021.**

To learn more and get involved:
crd.bc.ca/oakbaylodge



CRD website and events calendar

Agendas & Minutes | Electoral Areas | Maps | Careers | Media Room | Community Events | Data | Contact Us

Search Site

CRD
Making a difference...together

Capital Regional District

ABOUT THE CRD | SERVICES | PARKS, RECREATION & CULTURE | PROJECTS & INITIATIVES | EDUCATION & ENVIRONMENT | I WANT TO

Encouraging residents to safely walk, roll and cycle more often >>

OAK BAY LODGE REDEVELOPMENT
The CRHD is seeking community input on the future use of the Oak Bay Lodge property until February 4.

SOLID WASTE MANAGEMENT PLAN
Provide your feedback on the draft: solid waste management plan until February 15.

Tweets by @crd_bc
CRD @crd_bc
Correction: the deadline for feedback is Thursday, February 4. https://twitter.com/crd_bc/status/1356322711992225784

CRD @crd_bc
This is the last week to share your feedback as part of our first round of community consultation. Help the CRHD envision the future use of the Oak Bay Lodge property by sharing your priorities for healthcare in the region by Friday, February 4 [crd.bc.ca/oakbaylodge](https://www.crd.bc.ca/oakbaylodge)

INTEGRATED WATER SERVICES

COVID-19 (coronavirus)

CRD
Let's Regional Prosper Better

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Events

CRD Home > About CRD > Events

Events

Events Calendar

Filters (0)

Events on January 21, 2021
Show all events >

Future use of the Oak Bay Lodge property: Online Open House 1
Jan 21, 2021, 6pm-7:30pm

January 2021

S	M	T	W	T	F	S
27	28	29	30	31	1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31	1	2	3	4	5	6

Board and Committee Meetings

- Meeting Schedule
- Agendas & Minutes
- Watch Meetings Live

Email to subscribed list



CRHD

**Future use of the
Oak Bay Lodge property
Community Consultation**
January 6 to February 4, 2021

Thank you for your interest as the Capital Regional Hospital District envisions the future use of the Oak Bay Lodge property located at 2251 Cadboro Bay Road.

This is a reminder that Thursday (February 4th) is the last day to submit your feedback and ideas in this first round of engagement. The consultation process launched on January 6, 2021 and is focused on defining the project and seeking community feedback regarding potential opportunities for the future development of the property.

The second consultation period, anticipated in Spring 2021, will focus on potential concepts for further feedback.

You can provide input by submitting an online **feedback form** or residents may also **email** the Capital Regional Hospital District to request a hard copy of the Discussion Guide and feedback form by mail.

To learn more, visit the project webpage (crd.bc.ca/oakbaylodge).

Thank you
Capital Regional Hospital District.

This message was sent to you by [Capital Regional Hospital District - Oak Bay Lodge](#)

625 Fisgard Street
Victoria, BC V8W 1R7

You can [change your communication preferences](#) or [unsubscribe](#) from future mailings

Social media posts

Facebook

 **Capital Regional District**
January 15 at 9:25 AM · 🌐

We want your thoughts and ideas. Help the Capital Regional Hospital District envision the future use of the Oak Bay Lodge property by sharing your priorities for healthcare in the region.

How to participate: sign up for an online open house on Thursday, January 21 (6:00-7:30pm) or Tuesday, January 26 (6:00-7:30pm), review the Discussion Guide and submit an online feedback form. To learn more, visit the project webpage at crd.bc.ca/oakbaylodge



CRHD
Capital Regional Hospital District

👍 2 1 Share

Twitter

 **CRD**
@crd_bc

The Capital Regional Hospital District is seeking feedback on the future use of the Oak Bay Lodge property. Join us for a virtual open house on Thursday, January 21 from 6-7:30pm. Register for the open house, submit your feedback and learn more at crd.bc.ca/oakbaylodge.



CRHD
Capital Regional Hospital District

10:01 AM · Jan 18, 2021 · Hootsuite Inc.

1 Retweet 1 Quote Tweet 3 Likes

Appendix B

Engagement materials

Discussion guide



Future use of the Oak Bay Lodge property

**Community Consultation
Discussion Guide and Feedback Form**

January 6, 2021 to February 4, 2021

We want to hear from you



From January 6th to February 4th, 2021, we're seeking your feedback and ideas about potential future uses of the Oak Bay Lodge property at 2251 Cadboro Bay Road.

Through this engagement, we're sharing information about the Capital Regional Hospital District's mandate, project goals, and proposed timelines. Learn more and participate by visiting the project webpage at:

crd.bc.ca/oakbaylodge

How to participate

Submit an online feedback form

Sign up for an online open house

(brief presentation and an opportunity to ask questions and provide comments)

How your input will be used

The input you provide during this community consultation process will be summarized and considered by the CRHD in the plans for the future use of this property.

ONLINE OPEN HOUSE SCHEDULE

Thursday, January 21, 2021
6:00–7:30pm

Tuesday, January 26, 2021
6:00–7:30pm

Who are we and what do we do?

A corporation of the Capital Regional District (CRD), the Capital Regional Hospital District (CRHD) partners with the Vancouver Island Health Authority (Island Health) and community stakeholder agencies to develop and improve healthcare facilities in the region.

The CRHD provides the local share of capital funding for healthcare infrastructure (such as hospitals) in the capital region. Working with Island Health, the CRHD supports a healthy region by investing in healthcare services and strategic capital priorities such as:

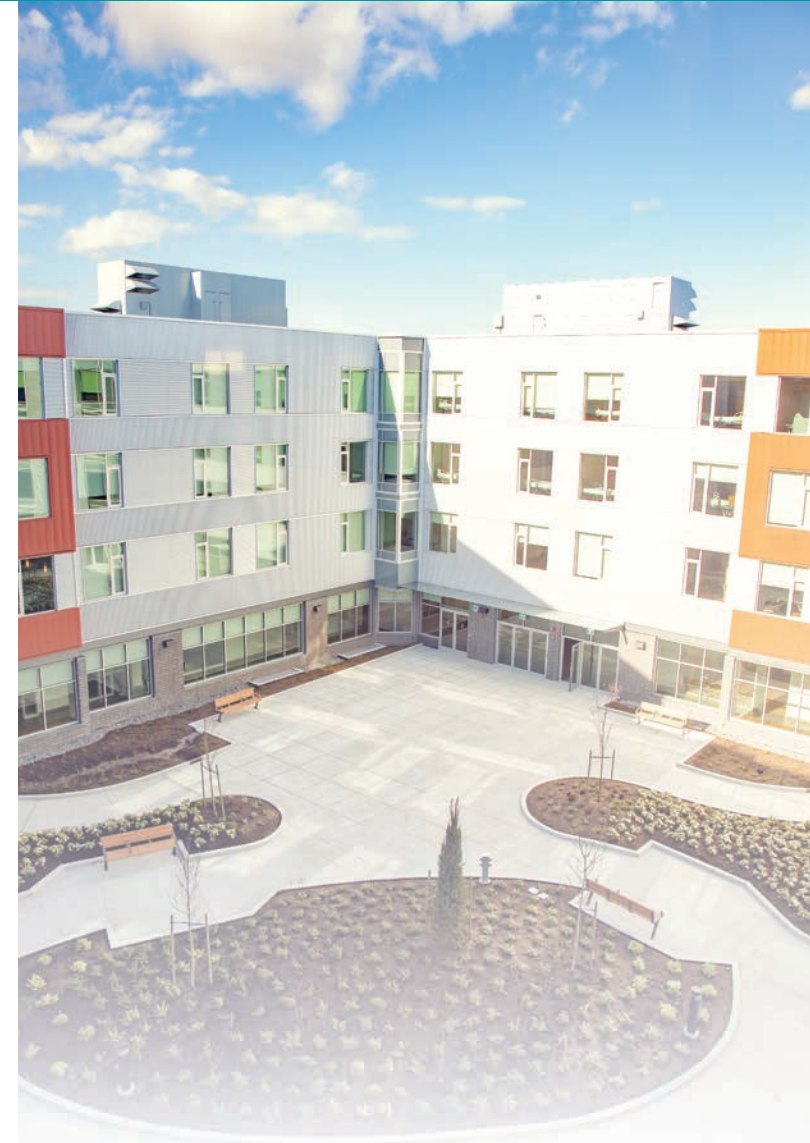
Upgrades and renewal of existing health facilities and medical equipment to meet changing service requirements and to prolong the economic life of buildings;

Replacement of existing buildings that have reached the end of their economic and functional life; and

New projects and expansion of existing facilities to meet increasing demand for healthcare services.

Our most recent significant project is The Summit at Quadra Village.

This 320-bed long-term care home in Victoria opened in summer 2020, and was developed to replace the Oak Bay Lodge and Mount Tolmie Hospital. The Summit is a state-of-the-art facility serving seniors who have dementia or other complex care needs.



History of the property



The Oak Bay Lodge was a regional healthcare facility located in Oak Bay, British Columbia.

Built in 1972, the Oak Bay Lodge and its staff cared for hundreds of individuals who required long-term care or seniors-care support for over 40 years.

The 235-bed facility closed this past summer as part of a long-term plan. The majority of the residents were relocated to the new complex-care facility at The Summit in Victoria, and ownership of the property was transferred to the CRHD on August 14, 2020.

Two covenants exist on the property, including one from its sale in 1971. Those covenants state that the land must be used for public good and that the property must be used as a retirement home.



The redevelopment of the Oak Bay Lodge is part of the CRD's Capital Plan for 2021-22. In October 2020, the CRD approved the development of a consultation and engagement plan.

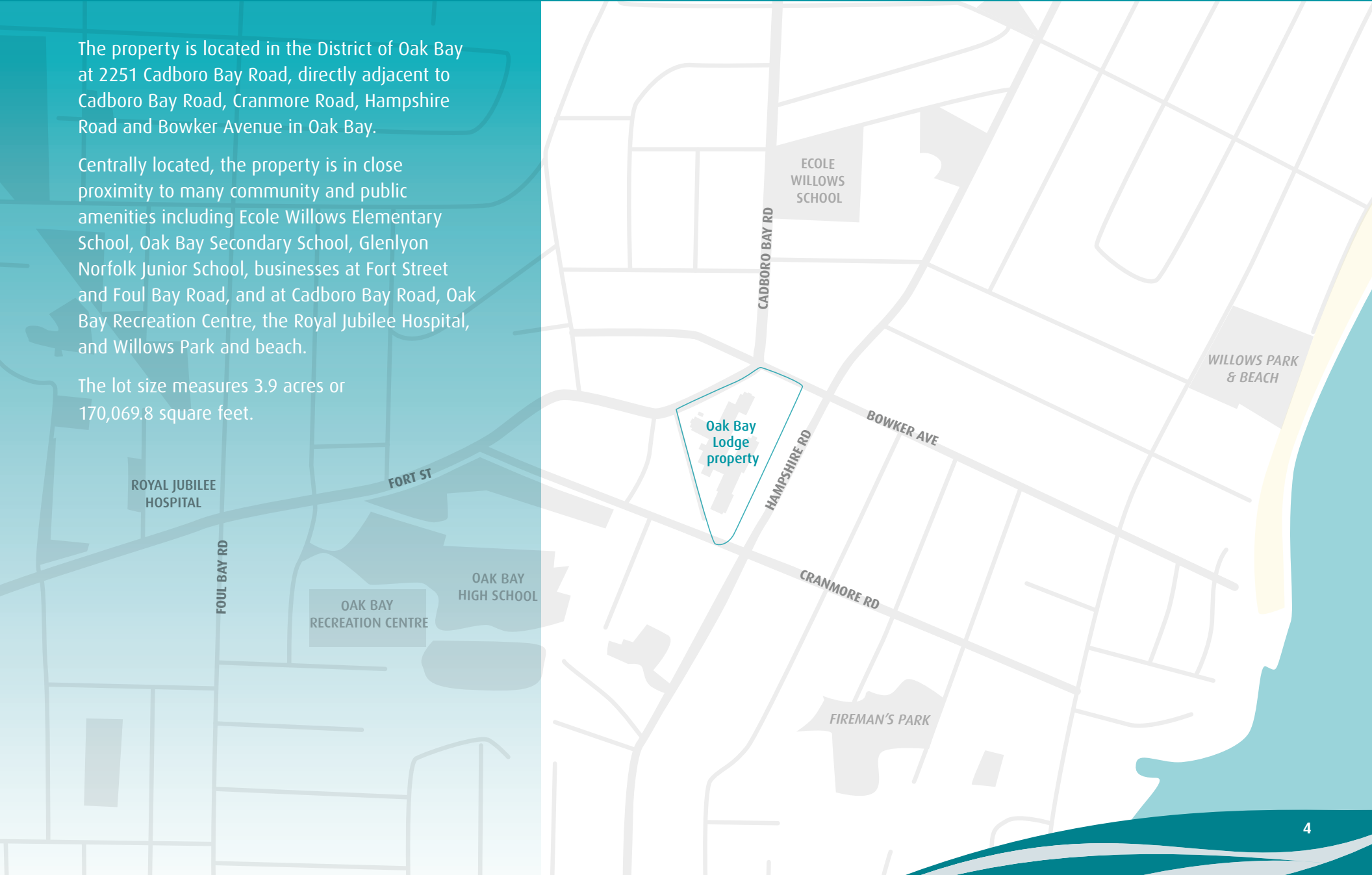
Location



The property is located in the District of Oak Bay at 2251 Cadboro Bay Road, directly adjacent to Cadboro Bay Road, Cranmore Road, Hampshire Road and Bowker Avenue in Oak Bay.

Centrally located, the property is in close proximity to many community and public amenities including Ecole Willows Elementary School, Oak Bay Secondary School, Glenlyon Norfolk Junior School, businesses at Fort Street and Foul Bay Road, and at Cadboro Bay Road, Oak Bay Recreation Centre, the Royal Jubilee Hospital, and Willows Park and beach.

The lot size measures 3.9 acres or 170,069.8 square feet.



Purpose of the redevelopment



Working with the community to reimagine the future use of the property is a priority for the CRHD. This project presents an important opportunity to identify and address growing healthcare needs in the region.

EXISTING STATE OF THE OAK BAY LODGE

The CRHD and partners at the CRD, have reviewed the state of the Oak Bay Lodge building and concluded that it has passed its useful life.

MANDATE OF THE CRHD

The CRHD's first priority is to ensure that the future use of the property is aligned with our organization's core mandate, which is to develop and improve healthcare facilities in the CRD in partnership with Island Health. The CRHD must thoroughly consider how the property can be used to support healthcare in the region before exploring any additional uses.

Once all healthcare-focused options have been fully exhausted, if there is any excess capacity on the property, the CRHD would then consider other possible uses in partnership with relevant third parties.

Land use and rezoning



Land use considerations

The District of Oak Bay is responsible for the review and approval of any rezoning applications for the property.

The property has two covenants on it, which put simply, restricts how the property can be used by the CRHD.

Those covenants are:

1. The property must be used for the **'public good'**; and
2. The property must be used as a **'retirement home'**.

These covenants are ultimately subject to municipal rezoning and/or Island Health approval processes.

COMPREHENSIVE PLANNING AND CONSULTATION

On July 20, 2020, Oak Bay Council passed a motion requiring a comprehensive planning and consultation process as an essential component of the rezoning process for any temporary or long-term use of the property.

After assuming ownership of the property in August 2020, the CRHD is now responsible for revisioning and eventually redeveloping the property.

In October 2020, the CRD approved a community engagement process for the future use of the property.



“Public good” includes not-for-profit care facilities in the health field or other publicly funded healthcare services, as well as other forms of affordable housing.

“Retirement home” is a term that has largely been replaced in usage by “long-term care”, which refers to housing that includes additional support for people who have complex care needs, such as seniors and people with disabilities.

Two-round consultation process



The CRHD is responsible for a comprehensive planning and consultation process for the future use of the property. Beginning in January 2021, the CRHD began the first of two anticipated rounds of public consultation.

Round 1

January to February 2021 (UNDERWAY)

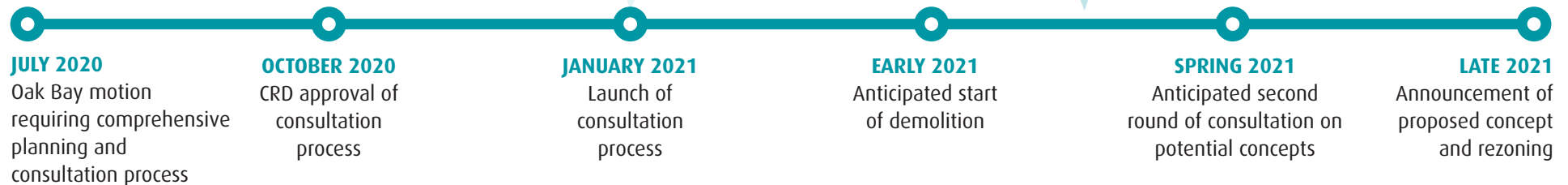
We are currently in the first round of consultation, which is focused on defining the project and seeking feedback on issues and interests related to the future development of the property.

The feedback we receive from the first round of public consultation will provide the CRHD with important information in developing potential options for the future use of the property.

Round 2

Winter/Spring 2021 (ANTICIPATED)

The second round of consultation, anticipated in later winter or spring 2021, will focus on reporting back to the community regarding what was heard during the first round of consultation, demonstrating how the CRHD has considered that input, and introducing potential development concepts for further feedback.



Demolition of existing building



One of the first steps in the process of revising and redeveloping the property is to conduct site remediation and ultimately remove the existing structure on site. Remediation includes removing pollutants or the reversal of any environmental impacts from its previous use.

As part of the review of the existing building on site, the CRHD completed Phase 1 of an Environmental Site Assessment and Hazardous Materials Assessment. As previously noted, the assessments indicate that the building is past its useful life. Demolition of the existing building is necessary for any future use of the property to proceed.

The CRHD is in the process of applying to the District of Oak Bay for a permit to demolish the existing building.

It is anticipated that this application will be submitted to the District in early 2021, and that upon approval, the remediation and demolition process could begin in early 2021 and would take 8-10 months.

The CRHD has issued a Request for Proposal (RFP) for a contractor to manage the remediation and demolition, and will ensure that the successful proponents

meet all health, safety, and environmental requirements of the permit.

This will include:

- Structural survey
- Disconnection of existing services
- Noise and vibration monitoring
- Safety fencing and signs
- Blasting Notification Plan
- Traffic Management Plan



Future use of the property



It is the intention of the CRHD to ensure the future use of the property is aligned with our mandate to develop and improve healthcare facilities in the CRD in partnership with Island Health.

Island Health, as the entity responsible for the delivery of healthcare on Vancouver Island and surrounding areas, is responsible for plans to deliver healthcare services that meet community needs. Island Health and the CRHD then work together to align service planning with facility needs in the CRD.

In recent months, the CRHD and Island Health began discussions to outline potential healthcare uses for the property that are aligned with the healthcare needs of those living in the CRD. These discussions will be informed by Island Health and their functional programming work and analysis to facilitate data-based regional healthcare decisions.

Future use of the property



The CRHD's first priority is to properly consider how the property can be used to support healthcare in the region before considering any other uses.

As part of this process, we are seeking your feedback about healthcare priorities for you, your family, and your neighbours.

PUBLIC HEALTHCARE SERVICES

Based on preliminary discussions with Island Health, three key services could form the core of a future vision for the redevelopment:

1. **Health unit** – community health services that could include immunization clinics, nutrition services, perinatal services, youth clinics, wound clinics, public health space, administrative space, and more;
2. **Primary care** – same-day, urgent, non-emergency public health services, such as space for General Practitioners (GPs); and
3. **Seniors hub** – could provide a variety of housing options such as long-term care, and other outpatient services for seniors aging-in-place.

The future use of the property may include facilities where one or more of these services are provided, after considering your feedback as part of this consultation process.



Other potential uses



It is possible that once the CRHD and Island Health have considered community input, as well as Island Health's plans for healthcare service delivery in the region, that other local priorities could be addressed as part of a mixed-use development designed to maximize the return on the property.

The property is a significant parcel of land, and the CRHD has an obligation to taxpayers to ensure that the property is fully utilized.

A mixed-use development is when a property is planned and zoned to include multiple uses, which could include healthcare, housing, commercial, or other uses.

HOUSING

One other potential use that could be explored after exhausting all healthcare options at the property would be some form of housing. Housing options that could be addressed at the site include:

Affordable housing – affordable housing is broadly defined as rental housing that is offered at rents below market rates. Affordable housing can be provided in a range of ways, such as in partnership with a provincial organization like BC Housing.

Market-rental housing – market-rental housing is a type of housing where rents are offered at rates that fluctuate with a local rental market. Market-rental housing is often provided by for-profit third-party organizations.

Once all healthcare-focused options have been fully exhausted, if there is any excess capacity on the property, the CRHD would then consider other possible land-use options.

The CRHD and Island Health do not provide housing services, but could consider partnering with a third-party as part of a future mixed-use redevelopment proposal that would be submitted for rezoning to the District of Oak Bay.

Other potential uses



COMMERCIAL

Another potential use that could be considered in a future mixed-use development proposal would be the inclusion of commercial space. Commercial spaces generally cover the use of space for the buying and selling of goods or services.

Commercial spaces could be used for (but are not limited to) services such as:

- Child care
- Retail (such as grocery, shopping, or restaurants)
- Fitness facility
- Pharmacy
- Private health facilities (e.g. dentist, physiotherapist, massage or chiropractic services)
- Post office



Feedback Form



The CRHD wants your feedback on the future use of the Oak Bay Lodge property.

Complete this feedback form online by visiting crd.bc.ca/oakbaylodge

After reviewing the Discussion Guide, share your thoughts with us by completing this Feedback Form. Your feedback as part of this consultation will provide the CRHD with important information in developing potential options for the future use of the property.

1. Did the Discussion Guide help you understand how future use of the property needs to align with the CRHD mandate?

- Yes
- No
- Somewhat

2. Based on preliminary discussions with Island Health, three key healthcare service areas have been identified for the property. How important are each of the following healthcare service areas in a future redevelopment of the property? Rate each item's importance.

	Not at all important	Slightly important	Moderately important	Very important	Extremely important
Health unit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Primary care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seniors hub	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Based on the description of these three key service areas, are there any specific healthcare services that you would like to see considered in this redevelopment?

Feedback Form



4. Once all healthcare options on the property are exhausted, the CRHD may consider other priorities that could be addressed as part of a mixed-use development proposal. How important are each of the following priorities when considering future redevelopment of the property? Rate each item's importance.

	Not at all important	Slightly important	Moderately important	Very important	Extremely important
Affordable housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Market-rental housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Commercial space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (indicate below)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other:

5. Are there any other uses or services that you believe should be considered in the future use of the property?

6. How do you prefer to be notified about future opportunities for community input? (Check all that apply)

- Facebook
- Twitter
- Community newspaper advertisements
- Notices at community and recreation centres
- CRD email list
- Postcard
- Other: _____

Survey

Feedback Form

Information collected in this survey is in accordance with Section 26(e) of the Freedom of Information and Protection of Privacy Act. Questions about the collection or use of information in this form can be directed to Michael Barnes, Senior Manager Health and Capital Planning at 250.360.3114.

1. Did the Discussion Guide help you understand how future use of the property needs to align with the CRHD mandate?

<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Somewhat
------------------------------	-----------------------------	-----------------------------------

2. Based on preliminary discussions with Island Health, three key healthcare service areas have been identified for the property. How important are each of the following healthcare service areas in a future redevelopment of the property? Please rate each item's importance.

	Not at all important	Slightly important	Moderately important	Very important	Extremely important
Health unit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Primary care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seniors hub	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Based on the description of these three key service areas, are there any specific healthcare services that you would like to see considered in this redevelopment?

4. Once all healthcare options on the property are exhausted, the CRHD may consider other priorities that could be addressed as part of a mixed-use development proposal. How important are each of the following priorities when considering future redevelopment of the property? Rate each item's importance.

	Not at all important	Slightly important	Moderately important	Very important	Extremely important
Affordable housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Market-rental housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Commercial space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (indicate below)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other (question 4)

5. Are there any other uses or services that you believe should be considered in the future use of the property?

**6. How do you prefer to be notified about future opportunities for community input?
(check all that apply)**

- Facebook
- Twitter
- Community newspaper advertisements
- Notices at community and recreation centres
- CRD email list
- Postcard
- Other (please specify)

7. Please provide any additional questions or comments you have regarding future use of the property.

8. I live in...

Select... | v

Other (question 8)

Previous

Next

Quit Survey

Kirk&Co.



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Making a difference...together

REPORT TO HOSPITALS AND HOUSING COMMITTEE MEETING OF WEDNESDAY, JUNE 02, 2021

SUBJECT **Union of BC Municipalities Strengthening Communities' Services Grant Application**

ISSUE SUMMARY

A Capital Regional District (CRD) Board resolution is required to support a CRD grant application to the Union of BC Municipalities (UBCM) *Strengthening Communities' Services Program*.

BACKGROUND

On February 24, 2021, the Union of British Columbia Municipalities introduced the Strengthening Communities' Services Program, a component of the Canada-BC Safe Restart Agreement. The program aims to address unsheltered homelessness that has been exacerbated by COVID-19 and related community impacts.

Eligible applicants include local governments (municipalities, regional districts and the Islands Trust) and Treaty First Nations in BC.

The intent of the Strengthening Communities' Services Program is to assist eligible applicants with:

- Improved health and safety of unsheltered homeless people living in public or private spaces, including reduced risk of COVID-19 or other disease transmission.
- Reduced community concerns about public health and safety in neighbourhoods where unsheltered homeless populations are seeking temporary shelter and services.
- Improved coordination among eligible applicants and health/social service providers, Indigenous organizations and others working on housing, homelessness and service provision.
- Increased capacity of eligible applicants to work with homeless persons and Indigenous organizations towards culturally safe and trauma-informed responses.

In March 2021, CRD staff responsible for Salt Spring Island (SSI) services identified the need for additional bylaw and public information services to help address ongoing issues related to unlawful activities in community parks in Ganges Village, specifically Centennial Park, most of which are related to the ongoing impacts of COVID-19 pandemic restrictions and the lack of options to address the needs of people experiencing homelessness on Salt Spring Island.

At the same time, staff at Salt Spring Island Community Services (SSICS) approached CRD Housing Division staff requesting the CRD consider applying for a grant from the UBCM program to help support additional services for people experiencing homelessness and contributing to some of the issues in the Ganges Village area and Centennial Park. CRD staff proposed and SSICS staff have agreed to enter into a contract to deliver services that align with the grant program requirements.

Consultations between Regional Housing and SSI Administration staff have identified the opportunity to apply to the UBCM grant program to potentially support both the CRD and SSICS proposed services and an application for funding, presented in Appendix A, was submitted to UBCM in April 2021. One of the requirements of UBCM is for regional councils to approve resolutions to receive funding from the grant program.

ALTERNATIVES

Alternative 1

The Hospitals and Housing Committee recommends to the Capital Regional District (CRD) Board: That the CRD Board authorize staff to prepare and submit an application, negotiate and accept the terms, and receive funds through the Union of BC Municipalities *Strengthening Communities’ Services Program* to support the activities outlined in the proposal presented in Appendix A.

Alternative 2

That the UBCM Strengthening Communities’ Services Grant Application report be referred back to staff for additional information based on Hospitals and Housing Committee direction.

IMPLICATIONS

Social Implications

The social and employment development services proposed by SSICS will help address the need people experiencing homelessness have for shelter, material support and meaningful occupation in the community. The additional bylaw services and the public information campaign will target interventions that will create a more peaceful and orderly environment in public spaces, especially in the Ganges Village and Centennial Park areas of SSI. This will reduce conflict of use issues among different park users and contribute to increased use of these spaces by all people living on the island.

Financial Implications

CRD costs related to providing additional time-limited bylaw services, conducting a public information campaign and administering the contract with SSICS are eligible for funding under the UBCM Program, hence these costs will be covered on a cost recovery basis through the grant funding.

Service Delivery Implications

The Regional Housing Division has a mandate as well as the capacity to provide overall management of the grant.

Alignment with Existing Plans & Strategies

The Regional Housing Affordability Strategy supports the CRD engaging with community partners in efforts to address issues related to the impacts of homelessness in the region.

CONCLUSION

There is a need to take action to address the social and economic needs of vulnerable populations who are unsheltered on SSI while also providing short-term increases in bylaw services in order to ensure public spaces, especially those in the Ganges Village area, remain safe and inclusive spaces for all those wishing to use these spaces during high-use months of the year. The introduction of the UBCM Strengthening Communities’ Services Grant Program provides a unique

opportunity for the CRD to access funding to support augmented service levels, but also social and employment support services to be provided by the SSICS. Applying for and receiving funding through this grant program to meet short-term needs associated with the persistence of the COVID-19 pandemic will not create any expectation or requirement that the CRD sustain these services or its contract with SSICS beyond March 2022.

RECOMMENDATION

The Hospitals and Housing Committee recommends to the Capital Regional District (CRD) Board:

That the CRD Board authorize staff to prepare and submit an application, negotiate and accept the terms, and receive funds through the Union of BC Municipalities *Strengthening Communities’ Services Program* to support the activities outlined in the proposal presented in Appendix A.

Submitted by:	Don Elliott, MUP, Senior Manager, Regional Housing
Concurrence:	Kevin Lorette, P. Eng., MBA, General Manager, Planning & Protective Services
Concurrence:	Robert Lapham, MCIP, RPP, Chief Administrative Officer

ATTACHMENT

Appendix A: UBCM Strengthening Communities Grant Application

Strengthening Communities' Services 2021 Application Form

Please complete and return the application form and all required attachments. All questions are required to be answered by typing directly in this form. If you have any questions, contact lgps@ubcm.ca or (250) 356-0930.

SECTION 1: Applicant Information	AP- <i>(for administrative use only)</i>
Local Government or Treaty First Nation: Capital Regional District	Complete Mailing Address: 625 Fisgard St., PO Box 1000, Victoria, BC V8W 2S6
Contact Person: John Reilly	Position: Manager, Housing Initiatives and Programs
Phone: 250 360 3081	E-mail: jreilly@crd.bc.ca

*Contact person must be an authorized representative of the applicant.

SECTION 2: <u>For Regional Projects Only</u>
<p>1. Identification of Partnering Applicants. For all regional projects, please list all of the partnering eligible applicants included in this application. Refer to Section 4 in the Program & Application Guide for eligibility.</p> <p>n/a</p>
<p>2. Rationale for Regional Projects. Please provide a rationale for submitting a regional application and describe how this approach will support cost-efficiencies in the total grant request.</p> <p>The Salt Spring Island Electoral Area does not have a municipal government body and relies on the CRD for municipal service delivery within this jurisdiction. Currently the CRD provides building inspection and bylaw services as well as parks, recreation and other services appropriate within an electoral area. Local community services often provide services that complement municipal services, and in the Capital Regional District such services can augment the efficacy of its own services. In this way, the CRD frequently works in partnership with local service providers in assuring the health and well being of the residents of the communities on Salt Spring Island. The CRD has established, through the Regional Housing Affordability Strategy, a legitimate role in supporting efforts to address issues related to homelessness in communities throughout the region. This project proposes incremental, short-term additions to CRD services as well as a partnership between Salt Spring Island Community Services and the CRD to strengthen the capacity of services unique to Salt Spring Island in their efforts to address the needs of vulnerable populations during the COVID pandemic.</p>

SECTION 3: Project Information

3. Project Information

- A. Project Title: Salt Spring Island Homelessness COVID Response
- B. Proposed start and end dates. Start: April 1, 2021 End: March 31, 2022

4. Funding Request. Please refer to Section 3 in the Program & Application Guide for the Funding Guidelines.

- A. Total proposed project budget: \$325,570.00
- B. Total proposed grant request: \$308,520.00
- C. If the proposed grant request exceeds the Funding Guideline, please provide a rationale for the increased request: n/a
- D. Have you applied for, or received, funding for this project from any other sources? No.

5. Project Summary. Provide a summary of your project in 150 words or less.

The Salt Spring Island Homelessness COVID Response project will augment social, recreational and bylaw services capacities in order to address the health and social wellbeing of unsheltered people to address public safety and order maintenance issues in the community related to the COVID pandemic. Overall project management and administration will be carried out by the CRD through its SSI Administration and Regional Housing Divisions and social service and outreach to people experiencing homelessness will be carried out through a contract between the CRD and Salt Spring Island Community Services. The CRD will facilitate a term limited increase in bylaw services and will coordinate information and public education within the community. Sheltering services, outreach support including case management, connections with health supports, liaison with business and RCMP, and basic needs such as food and hygiene as well as liaison among key partners will be carried out by SSICS staff.

SECTION 4: Detailed Project Information

6. Local Context & Evidence:

- A. Describe the extent of unsheltered homeless populations in your community and existing responses (including local or regional strategies, plans or projects):

Recent homeless counts have identified Salt Spring Island as having the highest rate of homeless per population in BC. The homeless count on Salt Spring is in the same range as much larger communities (eg. Campbell River, Port Alberni, Nelson, Terrace, Penticton) This is a significant challenge and burden for a small community with limited shelter and affordable housing options, health services, public safety and supports for marginalized populations. The geographic nature of this island community means that it is "remote" in many contexts, in that there are few efficient ways to benefit from regionalized or nearby resources.

Salt Spring Island has historically had a regular homeless population of local and transient people. The community culture has been accepting and supportive of homeless camps and people. As numbers increased and community tolerance of camps declined a cold weather shelter was developed by the United Church in 2004. By 2007 the shelter was being used by 10+ individuals per night and mental health and substance use-related incidents were commonplace. SSI Community Services took on the shelter service and initiated the first focussed homelessness assessment and plan.

In November 2016 the Salt Spring Plan to End Homelessness was developed along with the establishment of the Salt Spring Housing First Coalition. The plan included an assessment of shelter, housing and support needs. The Coalition was formed to strengthen the coordination of planning and service delivery, and included the formation of a Housing Supports Committee to provide a coordinated access process for the Health Authority and two main local affordable housing providers. Funding has been secured from the BC Rural and Remote division of the federal Reaching Home (formerly Homeless Partnering Strategy) annually since 2015 to provide the foundation of the SSI Community Services Housing First team. The housing first team currently has an active caseload of approximately 100 people who are homeless, in extremely sub-standard housing, or are at risk of homelessness.

- B. Provide a summary of evidence of unsheltered homeless populations in your community. This may be derived from existing strategies, plans or projects or from recent homeless population counts or housing needs reports. *Copies of documents should not be submitted with the application.*

The 2007 Salt Spring Homeless Count, coordinated by SSI Community Services, identified "at least 32 homeless individuals and an additional 25-50 individuals at imminent risk of homelessness, or living in substantially sub-standard shelter".

The 2008 three-part comprehensive Salt Spring Housing Study funded by Islands Trust, CRD, and the Real Estate Foundation of BC consistently identified people who lack a home, or are marginally housed, as the most vulnerable and the highest priority. Stage One of the report, the Housing Needs Assessment, was completed in 2009. This broadly consultative assessment identified a number of affordable housing gaps and key issues and concluded that "the most urgent needs are for the homeless and those at risk of homelessness".

In 2011 a study by City Spaces Consulting recommended that a 15-bed year round shelter be established to address the chronic and persistent emergency housing needs on Salt Spring Island.

Between the years of 2007 and 2021 there was a steady evolution of the In From the Cold Emergency Shelter from a 15-bed Extreme Weather Response facility to a 30-bed Year Round 24/7 facility that has operated at full capacity (90%+) every step of the way.

In 2016 Salt Spring joined the national Point in Time Count process and conducted a count with surveys following standard PIT Count protocols. The total 2016 count was 83 homeless individuals, of which 55 were unsheltered.

In 2018 Salt Spring joined the national process again, with an added step of confirming the process followed the BC Housing PIT Count protocols as well. The total 2018 count was 115 homeless individuals, of which 82 were unsheltered. It was commonly thought that a factor in the 38 % increase from 2016 to 2018 was the deactivation of Victoria's "tent city" in 2017 that directed some homeless to supported housing while others elected to move to neighboring communities.

In 2020 the proposed Point in Time count on Salt Spring Island was cancelled due to the COVID pandemic. The best estimates of service providers based on shelter, food bank and housing outreach activity are that numbers are at least as high as 2018, and mostly likely a bit higher. The SSICS Housing First program has an average active case count in 2020 of approximately 100 people.

The 2018 Salt Spring homeless count compares in the following way with the greater regional and provincial context: The homeless rate of 11 per 1,000 is the highest known rate of any community in the province, with Nelson being second at 6 per 1,000. The BC rate is 2 per 1,000 province-wide. The percentage of Salt Spring homeless that are

unsheltered at 71% is considerably higher than the BC average of 37%, as well as being higher than urban centres with more shelter resources (Victoria 35% and Vancouver 29%).

- C. Provide a summary of concerns about public health and safety in relation to unsheltered homeless populations that have been identified in your community:

Community parks and outdoor areas around local businesses are intended to be used for community recreation, public gatherings and social interaction. With the emergence of the pandemic and the associated restrictions, the CRD has have seen an increase in disorderly conduct, assaults, open liquor consumption, drug use, garbage, graffiti, vandalism and the illegal sale of drugs and alcohol in community parks and in public areas around local businesses. These illegal activities can be intimidating and discourage people from visiting the park and shopping at surrounding businesses; and parks staff have reported workplace incidents related to threats and aggressive behaviour by park users. The CRD has a legal duty to conduct incident investigation in accordance Workers Compensation Act, Occupational Health and Safety and related policies.

Meetings have been held with local businesses, Harbour Authority, United Church, the RCMP, Bylaw enforcement and CRD parks staff expressing concerns with the conduct in our community parks. Despite consultation and increased enforcement to address concerns reported by park visitors, complaints from surrounding businesses and neighbours continue to increase.

The CRD Salt Spring Island Administrative office has been vandalized on a number of occasions with windows being smashed, spitting on the windows and door entrance, carving hate symbols into the windows and putting dog feces through the mail slot. The vandalism stopped once cameras were installed and video surveillance signs were posted.

In December 2019 an alternative approval process to fund a community safety service which could have provided additional funding for RCMP, neighbourhood watch, security patrols and other safety supports was proposed to the community. The proposal was voted down by residents despite increasing safety concerns in the down town core.

The Downtown community parks have become a place that attracts or enables offending behavior due to informal management practices and little surveillance. Public trust and perception in the parks being a safe place is being undermined by the lack of control and not addressing the antisocial behavior. This has been a very active topic for community discussion and commentary, including planning meetings, social media discussion, complaints to RCMP and others, and general community discussion.

Other concerns have been raised about the health and safety of the unsheltered people themselves, with a particular focus on the public park and residential areas in the main community village of Ganges. The most commonly expressed concerns include:

1. Lack of access to potable water and hygiene
2. Lack of access to washroom and indoor facilities (COVID pandemic has prompted the closure of washroom access at restaurants, indoor dining, library etc.)
3. General feeling of lack of safety (expressed both by general community, local businesses and unsheltered populations)
4. Increasing negative interactions between residents and unsheltered persons
5. Lack of overnight shelter spaces and space for homeless to spend time during the day
6. Lack of positive activities in which unsheltered people can engage
7. Untreated individuals with mental health or substance use issues displaying aggressive and antisocial behaviors in public

8. An emerging need for harm reduction and overdose prevention resources
9. Limitations of RCMP and bylaw services staff, both in number of staff available and limit to actions taken in response to acting out behavior
10. Public use of alcohol and drugs, including drug sales in public areas
11. Garbage accumulation including general litter and human feces left in public areas, beaches, homeless camp areas
12. Noise in residential areas created by unsheltered people using parks for sheltering purposes
13. Lack of control of pets by unsheltered individuals (primarily unleashed large dogs)
14. Damage to private vehicles due to unauthorized use for sheltering purposes by
15. Limited park and public spaces being monopolized or dominated by unsheltered individuals
16. Insufficient Bylaw services to support order maintenance in public areas
17. Assaults on, and aggression towards By Law officers by park users
18. Safety concerns during stormy weather for people sheltering on derelict boats

7. Impact of COVID-19. Based on the local context identified in Question 6, provide a description of how these issues have been exacerbated by COVID-19.

The Covid pandemic has impacted the homeless population in many ways including:

1. Shelter capacity has decreased from 30 to a maximum of 17 people
2. Indoor spaces in the community of all sorts have been limited from public to service organizations to restaurants and gathering places. This has includes an abrupt decrease in access to washrooms and potable water.
3. There has been an increase in the presence and visibility of unsheltered people in public places as their options of where to gather have narrowed, and the general public are not as frequent in these areas.
4. In addition to shelter challenges, other affordable permanent and transitional housing options have become more limited. Salt Spring is losing affordable market rent units due to the sale of dwellings that have provided secondary or garden suites as affordable rental units
5. Covid pandemic protocols and shifted priorities have left the local health system with far less capacity to provide timely supports and service to marginalized and homeless people. this includes emergency response, public health, and mental health and addictions services. Some services which were provided from off-island have been restricted by travel and social distancing protocols.
6. Many homeless people have challenges in following Covid-related health directives, due to living conditions, mental health disabilities, and/or poverty. This includes social distancing, hygiene, and reducing risk of disease transmission.
7. The Covid pandemic, and its effect on tourism, has resulted in a depressed labour market where there is far less casual and seasonal work, and marginalized people with employment barriers are effectively shut out of employment opportunities.
8. The Covid pandemic has had a profound effect on the levels of stress, mental wellness and resiliency of the entire population. This heightened tension and lowered capacity has contributed to added volatility to the typically challenging relationship between homeless

people and the community at large. Problematic substance use is noticeably higher across most populations, which is always hard on community harmony.

8. Proposed Activities. Refer to Sections 4 to 6 of the Program & Application Guide for funding requirements and eligibility and provide the following information:

A. Describe the specific activities you plan to undertake:

A full accounting of projected costs requiring UBCM funding can be found in the attached budget document. Additional cost detail and other funding received and in-kind services to support project operations are summarized in Appendix 2.

CONTRACTED SERVICES

1. Improve health and safety of unsheltered homeless people living in public or private spaces, including reducing the risk of COVID-19 or other disease transmission

Actions: Temporarily increase emergency shelter space. New shelter spaces will be created by renting 3 additional rooms at the Seabreeze Inne. This will be in addition to the 8 rooms funded by BC Housing and supported by the SSICS Housing First team. This will bring the number of emergency shelter beds in the community to 29. This is only one less than the 30 that were in place prior to the Covid pandemic and will be in place once pandemic protocols regarding social distancing are relaxed. Along with the additional beds will be temporary incremental increases in support to the people sheltering in Seabreeze Inn rooms including case management, food services, life skills support and connections to other support services through SSICS housing First and community organizations (eg. Public Health). The SSICS Housing First team currently has one primary staff person assigned to support the Seabreeze rooms, and this will be increased as much as 50% to cover the increased people and needs. Additional detail related to planned shelter operations are provided in Appendix 1.

2. Improve communication, coordination and relationships between unsheltered people, service providers, and community at large to maximize the range and effectiveness of support services and health services

Actions: The Housing First Worker as well as two Peer Support Workers will provide immediate outreach to people sheltering out of doors. These individuals will assess the needs of unsheltered people and help facilitate their access to food services, hygiene services as well as other health and social supports. In order to provide a base for these additional operations and to provide a place for unsheltered people to make contact with other services, SSICS will establish an outreach office and increase the presence of the SSICS Housing First team in Ganges Village. A site will be established in the SSICS Hereford Avenue offices for the period of the emergency order and following its removal to make all of the SSICS Housing First activities more accessible to the population of unsheltered people. This short term increase in accessibility will provide more timely and responsive service that will address some of the immediate needs of unsheltered people seeking help in a location where they have been congregating during the pandemic. The Hereford outreach site will also provide space and opportunity for unsheltered people to connect including SSICS services, Public Health (basic health and harm reduction), Mental Health and Substance Use, RCMP, faith groups, Copper Kettle, IWAV, business owners etc.

CRD SERVICES

3. Strengthen the capacity to provide services that better maintain order within the community, particularly during the summer months.

Actions: An incremental, short-term increase in bylaw services staff will provide for additional order maintenance and ability to provide bylaw response during hours outside of normal daytime office hours. A recreation technician will work with bylaw and policing services as well as local business and community groups to develop and facilitate an information and public education campaign to provide businesses and residents with information to support them in contacting the proper authorities when facing issues of conflict between business owners, residents and unsheltered populations. This will help direct concerns to authorities with the mandate and jurisdiction to appropriately respond to community issues.

- B. How will activities provide temporary solutions that address increased urgent and immediate needs related to unsheltered homelessness and not create ongoing long-term financial obligations:
1. Shelter capacity will be increased until COVID pandemic restrictions relax and previous shelter capacity is returned.
 2. The increased outreach activity will need to be reviewed and scaled back, as it is activity which is not exclusively linked to Covid-19 pandemic pressures.
 3. The public order issues are likely to diminish with colder weather in the fall of 2021 and as restrictions related to the COVID pandemic are lifted later this year. This is expected to reduce the need for additional bylaw services and public information measures.

- C. How will the proposed activities meet the intent of the funding program. Refer to Section 1 of the Program & Application Guide:

The project addresses the following Strengthening Communities' Services program priorities:

1. Improved health and safety of unsheltered homeless people living in public or private spaces: Increasing shelter capacity is a primary project activity, and will directly create more safe spaces for people and provide an instant connection with health care supports.
2. Reduced community concerns and providing appropriate service responses related to public health and safety in neighborhoods: The project will reduce the number of unsheltered people, and provide an opportunity to re-direct some of the anti-social behavior and tense public interaction into more positive and pro-social behavior through having more immediate access to Housing First support services. Additional bylaw services and improved information for the public on how to access appropriate bylaw services
3. Improved coordination among service providers: the increased case management staff time, and accessible location in Ganges village will create the opportunity, capacity and incentive for service providers to connect and coordinate their respective functions.

- D. How will the proposed activities and costs form part of comprehensive, multi-faceted approach to addressing unsheltered homelessness:

The project activities will contribute to the greater plan for addressing shelter, supports and services for the unsheltered homeless in the following ways:

1. Strengthen the "shelter to housing" continuum by adding shelter beds that are part of the Housing First case management process,
2. Add to, and strengthen the system of supports by adding staff time for coordination, and locating the increased service in an accessible location that will enhance contact and connection among service providers,
3. Increase community engagement by establishing the new accessible location with a focus on connecting unsheltered people with needed health, dental, hygiene and food services.

4. Increase the capacity of bylaw services to respond in a timely way to issues of public disorder and to connect local residents and businesses to services that can appropriately intervene to resolve use conflicts in public areas.

Each of these activities will be well-integrated into the broader community strategy because each component of the project will be led by either Salt Spring Island Community Services (direct services to the homeless) and CRD SSI Administration (bylaw services and public information roles). Throughout the project, SSICS and CRD SSI Administration will work collaboratively to address local community issues as they emerge.

9. Anti-Stigma Lens. Describe how proposed activities will apply an anti-stigma lens and increase public awareness and understanding of causes and responses to homelessness.

1. The use of the Seabreeze Inn will continue to reinforce the positive impact that housing stability has on people's health, self-esteem, motivation and community connection. There is already a marked difference between the greater stability experienced at the Seabreeze site and Emergency Shelter site in terms of problem behaviors, police attendance, and the demeanor of residents. It illustrates that the more stable and "normal" the housing, the more stable and community-minded the residents will be.

2. Having a Housing First team present in Ganges will broaden the scope of interventions available to unsheltered people experiencing homelessness in the heart of the community, and has the potential to reduce the reliance on law enforcement interventions where social support may be better able to address individual needs.

10. Partnerships & Engagement. Please indicate how you intend to engage or collaborate with the following and what specific role they will play in the proposed activities. If possible, please identify the specific agencies or organizations you intend to work with.

A. Indigenous leadership, organizations and communities, including engagement during the development of the application package:

There is no single concentrated indigenous population or community on Salt Spring Island. There is consistent, but low number of indigenous people that are unsheltered and accessing services such as emergency shelter and food. There is specific indigenous organization or group that has been active in homelessness planning or action.

The CRD First Nations Relations office will be informed of this project and, if needed, will help the partners in the initiative engage with local First Nations.

In addition, Salt Spring Island Community Services has a long standing collaborative relationship with the Stqeeye' Learning Society, a local leadership and coordinating group, to provide mutual support when serving indigenous people. This has primarily had a youth focus, with elder connections and land-based healing activities at the Xwaaqw'um traditional village site. Over the past two years there has been a connection with the SSICS Community Counsellor for the same purposes with marginalized adults. The Stqeeye' Learning Society has been informed of this initiative, as is the case with other new programming directions for marginalized populations.

B. Distinct needs-serving organizations, public health, health authorities, non-profit organizations, other local governments, police, bylaw enforcement):

The project will be supported through the CRD's operation of the Salt Spring COVID Task Force, which will act as a communication and advisory hub for the project. The Task Force includes representatives from all the identified organizations listed above.

In addition, the Salt Spring Homelessness Coalition will provide an additional locus for connections among other various needs-serving organizations.

Each organization has been highly supportive of this proposal going forward, and includes: RCMP, Public Health, VIHA Mental Health and Substance Use team, Copper Kettle, Islanders Working against Violence, Harvest Food Programs, In From The Cold Shelter, Inter-ministerial Group, CRD Director, Island Trust Trustees, and the Salt Spring Health Advancement Network. The project and its activities will be highly involved with Public Health and MHSU team. Both the RCMP and Public Health have expressed an interest in working closely with the project to provide better harm reduction and overdose prevention support for the marginalized populations.

C. Other:

11. People with Lived Experience. Indicate how you intend to communicate and engage with unsheltered homeless populations to include perspectives of people with lived experience.

The Peer Support Workers will play an important role in sustaining effective helping relationships with people sheltering outdoors. Salt Spring Island Community Services has a long-standing connection in one way or another with virtually all of the people experiencing homelessness in the community, whether they be long term community residents or transient newcomers. The SSICS main site, and cluster of services (shelter, food bank and meal programs, Housing First services including case management, rent subsidies and emergency support, counselling, basics needs services including laundry, shower and internet, and mental health peer support drop in) make it a bustling "one-stop" location for the homeless and other marginalized individuals. There has always been a priority placed on maintaining positive relationships, which had included a basic process of listening and responding to the concerns and perspectives of the people served. Many services have been developed on this basis, such as the dental program, shower and laundry service, meal programs, etc. During the Covid pandemic SSICS has hosted numerous outdoor gatherings with unsheltered groups in "the garden" to problem solve pressing issues such as safety, community stigma, encampments, vehicle problems, and shelter pressures. This format has been used to help shape the development of a healthy culture and peer support system at the Seabreeze Inne. We anticipate that this level of engagement will be elevated even more through this project as we are able to engage leaders within the homeless group to take up peer support and/or work experience positions in the casual labour service.

12. Outcomes & Performance Measures. Please describe the proposed outcomes and performance measures.

A. How will the outcomes address the challenges identified in Questions 6 and 7:

The outcomes of this project will result in an increase in the safe sheltering for currently unsheltered individuals, provide immediate supports and connections for these individuals to access health care and disease transmission prevention (including overdose prevention), provide optional places and spaces and activities for homeless individuals currently having an intimidating presence in community public spaces, and bring a refreshing positive vitality to a small beleaguered collection of service providers who have diminishing time and energy to collaborate.

Local residents and businesses will have improved information on how to best respond and who to contact to help with issues of conflict and more effective order maintenance will be possible with additional bylaw services staff. These staff will endeavour to work with people with lived experience to help support a problem solving approach that succeeds in bringing a greater order in key public areas of SSI.

B. What performance measures will be used to assess these outcomes:

1. Number of additional people sheltered and length of stay in shelter beds.
 2. Number of additional people engaged with Housing First case management activities and other associated supports, and the level and quality of these cases. This is readily tracked through the case management system use by the Housing First team, which includes measures of individual outcomes and satisfaction.
 3. Work is currently being done with the Salt Spring Homelessness Coalition to better identify goals and measures to track successful collaboration and system effectiveness. This project will be in a good position to be a "guinea pig" to track these performance measures once they are established.
 4. Number of requests for service from local bylaw services and a reduction in the incidence of disorderly conduct in the community.
 5. Increased awareness among residents and businesses with respect to how to access services designed to address disorder issues in the community.
- C. Demonstrate a plan for winding up and concluding the funded activities (or continuing with alternative sources of funding):
1. Shelter capacity will be increased until COVID pandemic restrictions relax and previous shelter capacity is returned. Once restrictions are relaxed or removed, there will be increased capacity at local emergency shelters and the units at the Seabreeze will no longer be needed for sheltering purposes.
 2. The increased outreach activity will need to be reviewed and scaled back, as it is activity which is not exclusively linked to COVID-19 pandemic pressures. SSICS operates a core Housing First program, and the impact of this project may lead to an ongoing presence in the core Ganges village area where outreach and access to services may become more easily available to people in need.
 3. The CRD bylaw and public information services are expected to be only needed during spring, summer and early fall and will be scaled back later in 2021.

13. Additional Information. Please share any other information you think may help support your submission.

A resolution from the CRD Board is being sought to support this application and is expected to be presented to the Board at its meeting on June 9, 2021.

SECTION 5: Required Attachments

Please submit the following with the completed Application Form:

- Detailed project budget
- Council or Board, Local Trust Committee or Treaty First Nation resolution that indicates support for the proposed project and a willingness to provide overall grant management
- For regional projects: Council, Board, Local Trust Committee, Treaty First Nation resolution from each partnering applicant that clearly states approval for the primary applicant to apply for, receive, and manage the grant funding on their behalf.
- Optional: Up to three letters of support as evidence of partnership or collaboration with partners such as community-based organizations, non-profit service providers, health authorities and public health units, local First Nations and/or Indigenous organizations.

Submit the completed Application Form and all required attachments as an e-mail attachment to lgps@ubcm.ca and note "2021 SCS" in the subject line. Submit your application as either a Word or PDF file(s).

SECTION 6: Signature. Applications are required to be signed by an authorized representative of the applicant. Please note all application materials will be shared with the Province of BC.

I certify that: (1) to the best of my knowledge, all information is accurate, (2) the area covered by the proposed project is within the applicant's jurisdiction (or appropriate approvals are in place) and (3) we understand that this project may be subject to a compliance audit under the program.

Name: Kevin Lorette

Title: General Manager

Signature:



Date: April 20, 2021

All applications should be submitted to:

Local Government Program Services, Union of BC Municipalities

E-mail: lgps@ubcm.ca

UBCM STRENGTHENING COMMUNITY SERVICES' GRANT PROGRAM
Capital Regional District - SSI Electoral Area

Budget

Project Term April 1, 2021-March 31, 2022

UBCM Grant Request

\$ 308,520.00

Expenses		
	Direct Cost	In Kind
Capital Regional District Services		
Project Management		\$ 5,500.00
Project Governance (Advisory Group)		\$ 12,000.00
Additional Bylaw Services (35hrs/wk for 10 wks at \$89/hr.)	\$ 31,150.00	
Recreation Technician (35 hrs/wk for 4 weeks at \$55/hr.)	\$ 7,700.00	
Program Expenses	\$ 5,000.00	
Administration	\$ 5,720.00	
Sub Total	\$ 49,570.00	\$ 17,500.00

Contracted Social Services		
Wages and benefits		
Housing First Worker (\$25.70/hr X 1,456 hrs + Merchs)	\$ 47,700.00	
Project Coordinator (\$28.22/hr X 728 hrs + Merchs)	\$ 26,200.00	
Program Director (\$38.96/hr X 104 hrs + Merchs)	\$ 5,250.00	
Staff Development	\$ 750.00	
Travel	\$ 1,800.00	
Meeting Costs	\$ 1,250.00	
Communications	\$ 2,500.00	
Food	\$ 18,000.00	
Program Supplies	\$ 2,400.00	
Telephone	\$ 2,500.00	
Equipment (Office furniture, computer, printer, etc)	\$ 2,000.00	
Stipend - Peer Support (2 @ \$25/hr X 36 hrs/mo X 10 mos)	\$ 18,000.00	
Seabreeze Acoomodations (3 units over 12 months)	\$ 83,600.00	
Emergency Supports to Unsheltered Persons (medication, health supports, clothing, household items)	\$ 6,000.00	
Office Costs (50% of SSICS Hereford Site Office for 12 mos)	\$ 24,000.00	
General Admin-SSICS 7%	\$ 17,000.00	
Sub Total	\$ 258,950.00	\$ -

TOTAL PROJECT EXPENSES	\$ 308,520.00	\$ 17,500.00
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DIFF \$ -

Social Service Staff Summary

<u>Position</u>	<u>class</u>	<u>rate</u>	<u>hrs/wk</u>	<u>weeks</u>	<u>hrs/yr</u>	<u>wages</u>	<u>benefits</u>	<u>total</u>
Housing First Worker	JJEP12	25.70 \$	28.00	52	1,456	37,419.20	10,290.28	47,709.48
Program Director		38.96 \$	2.00	52	104	4,051.84	1,215.55	5,267.39
TOTAL		\$ 30.00			1,560	41,471.04	11,505.83	52,976.87

Seabreeze Inne Costs

Unit Type	Number	Months	Monthly Rate	Total
Queen Room	3	7	\$ 1,600.00	\$ 33,600.00
Queen Room	4	5	\$ 1,000.00	\$ 20,000.00
King Room with Kitchenette	3	5	\$ 2,000.00	\$ 30,000.00
Total				\$ 83,600.00



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REPORT TO HOSPITALS AND HOUSING COMMITTEE MEETING OF WEDNESDAY, JUNE 02, 2021

SUBJECT 3656 Raymond Street Housing Agreement Rescission Bylaw

ISSUE SUMMARY

The Capital Regional District (CRD) needs to approve a bylaw that repeals Bylaw No. 4402 because the developer-initiated housing development proposed for 3656 Raymond Street South was not supported by the District of Saanich Council.

BACKGROUND

The CRD's Regional Housing Division, through discussions with the District of Saanich staff and Abstract Developments (the Developer), agreed to enter into a housing agreement for a development located at 3656 Raymond Street South in the District of Saanich.

At its March 10, 2021 meeting, the CRD Board approved Bylaw No. 4402 to support the CRD entering into a Housing Agreement with Abstract Developments to administer resales of six below-market units within the development.

On April 21, 2021, Abstract Developments informed the CRD in writing that the proposed development was not supported by District of Saanich Council, and that Abstract Developments was withdrawing its application.

ALTERNATIVES

Alternative 1

The Hospitals and Housing Committee recommends to the Capital Regional District Board:

1. That Bylaw No. 4427, "Resale Control and Housing Agreement Rescission Bylaw (3656 Raymond Street South), 2021" be introduced and read a first, second and third time; and
2. That Bylaw No. 4427 be adopted.

Alternative 2

That the 3656 Raymond Street Housing Agreement and Bylaw report be referred back to staff for additional information based on Hospitals and Housing Committee direction.

IMPLICATIONS

Service Delivery Implications

This decision will relieve the CRD of its statutory obligations outlined in CRD Bylaw No. 4402.

CONCLUSION

The CRD agreed to enter into a Housing Agreement with Abstract Developments in order to administer resales of below-market housing units. The project was not supported by District of Saanich Council and the CRD needs to rescind Bylaw No. 4402 in order to relieve itself of its commitments under the Bylaw.

RECOMMENDATION

The Hospitals and Housing Committee recommends to the Capital Regional District Board:

1. That Bylaw No. 4427, “Resale Control and Housing Agreement Rescission Bylaw (3656 Raymond Street South), 2021” be introduced and read a first, second and third time; and
2. That Bylaw No. 4427 be adopted.

Submitted by:	Don Elliott, MUP, Senior Manager, Regional Housing
Concurrence:	Kevin Lorette, P. Eng., MBA, General Manager, Planning & Protective Services
Concurrence:	Kristen Morley, J.D., General Manager, Corporate Services & Corporate Officer
Concurrence:	Robert Lapham, MCIP, RPP, Chief Administrative Officer

ATTACHMENT

Appendix A: Bylaw 4427

CAPITAL REGIONAL DISTRICT
BYLAW NO. 4427

**A BYLAW TO REPEAL A HOUSING AGREEMENT
FOR 3656 RAYMOND STREET SOUTH (BYLAW NO. 4402)**

WHEREAS:

- A. The owner of land legally described as Lot E (D.D. 386779I) of Section 14, Victoria District, Plan 14121, PID: 004-356-993 planned to develop it in the District of Saanich to provide, among a strata development of market housing, six units of affordable housing, in the form of one studio, four one-bedroom, and one two-bedroom units, and the Capital Regional District entered into a housing agreement, option to purchase and restrictive covenant relating to said affordable units by bylaw;
- B. The owner of land was unable to secure appropriate zoning permissions from the applicable local government and no longer wishes to proceed with the housing agreement, option to purchase and restrictive covenant; and
- C. The Capital Regional District Board must discharge such a housing agreement and covenant by bylaw;

NOW THEREFORE, the Capital Regional District Board in open meeting enacts as follows:

- 1. Bylaw No. 4402, "Resale Control and Housing Agreement Bylaw (3656 Raymond Street South), 2021", is hereby repealed.
- 2. This Bylaw may be cited for all purposes as "Resale Control and Housing Agreement Rescission Bylaw (3656 Raymond Street South), 2021".

READ A FIRST TIME THIS	___	day of	2021
READ A SECOND TIME THIS	___	day of	2021
READ A THIRD TIME THIS	___	day of	2021
ADOPTED THIS	___	day of	2021

Chair

Corporate Officer



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Minutes of a Meeting of the Regional Housing Trust Fund Commission Held April 8, 2021 via Microsoft Teams Meeting

PRESENT: **Commissioners:** Bob Thompson, Meagan Brame, Ann Baird, Marie-Terese Little, Eric Wood Zhelka, Zac de Vries, Terri O’Keeffe, David Screech, Gary Holman, Paul Brent.

ABSENT: **Commissioners:** Ebony Logins, Sarah Potts, David Howe, Celia Stock

Staff: Kevin Lorette, General Manager, Planning and Protective Services; Don Elliott, Senior Manager, Regional Housing; John Reilly, Manager, Housing Initiatives and Programs; Jerry Michael, Administrative Coordinator, Housing Initiatives and Programs (recorder)

The meeting was called to order at 2:12 pm.

1. Territorial Acknowledgement

John Reilly acknowledged the traditional territories of the Lekwungen speaking people as well as other First Nations whose lands the commissioners present are working.

2. Welcome and Introductions

Kevin Lorette welcomed new and returning commission members and introduced CRD staff who support the RHTF.

3. APPROVAL OF AGENDA

MOVED by Commissioner Eric Wood Zhelka, **SECONDED** by Commissioner Ann Baird
That the agenda be approved as circulated.

CARRIED

4. ELECTION OF CHAIR AND VICE CHAIR

Kevin Lorette called for nominations for the position of Chair of the Regional Housing Trust Fund (RHTF) Commission for 2021. Nominations were called for a second time

Commissioner David Screech was nominated and the nomination was accepted.

Commission Meagan Brame was nominated and the nomination was declined

Nominations were called for a second and third time and as there were none, nominations were closed. Commissioner David Screech was declared Chair of the Regional Housing Trust Fund for 2021 by acclamation.

Kevin Lorette called for nominations for the position of Vice-Chair of the Regional Housing Trust Fund Commission for 2021.

Commissioner Meagan Brame was nominated and the nomination was accepted.

Nominations were called for a second and third time and as there were none, nominations were closed. Commissioner Meagan Brame was declared Vice-Chair of the Regional Housing Trust Fund for 2021 by acclamation.

Commissioner David Screech assumed the Chair and welcomed members.

5. APPROVAL OF MINUTES OF September 25, 2020

MOVED by Commissioner Meagan Brame, **SECONDED** by Commissioner Paul Brent
That the minutes from the September 25, 2020 Regional Housing Trust Fund meeting be approved as circulated.

CARRIED

6. APPROVED RHTF PROJECTS UPDATE

Staff provided updates to the Commission on the current RHTF-funded projects and a brief discussion followed. No questions by commissioners arose from the update.

Motion to receive the report as written.

MOVED by Meagan Brame **SECONDED** by Eric Wood Zhelka

CARRIED

7. Michigan Project Amendment and Discussion

CRHC staff addressed commissioner questions around projected rent differences between building A and building B.

MOVED by Commissioner Gary Holman, **SECONDED** by Commissioner Paul Brent
That the Regional Housing Trust Fund (RHTF) Commission recommends to the Capital Regional District Board: That a grant in the amount of \$525,000 to the Capital Region Housing Corporation be approved to support the development of 35 additional units of affordable rental housing at 330 Michigan Street, Victoria, subject to meeting the terms of the RHTF Grant Funding Agreement.

CARRIED

8. Prosser Letter of Intent

MOVED by Commissioner Meagan Brame **SECONDED** by Commissioner Eric Wood Zhelka
That the Commission recommend the proponent work with Capital Regional District staff to prepare and submit a full grant application for review by the Regional Housing Trust Fund Advisory Committee.

CARRIED

9. Grant Approval Process Amendment and Discussion

MOVED by Commissioner Gary Holman, **SECONDED** by Commissioner Paul Brant
That the Regional Housing Trust Fund Commission suspend the requirement of a Letter of Intent from prospective Regional Housing First Project applicants until all eligible projects have been awarded funding.

CARRIED

10. ROUND TABLE

Commissioners held a round table to share information on housing in their respective municipalities and electoral areas.

11. ADJOURNMENT

MOVED by Commissioner Meagan Brame, **SECONDED** by Commissioner Gary Holman
That the meeting be adjourned.

CARRIED

The meeting adjourned at 2:55pm.

Chair