



REPORT FOR ACTION

Update on the Specialized Program for Interdivisional Enhanced Responsiveness (SPIDER)

Date: August 25, 2017

To: Community Development Recreation Committee

From: Executive Director, Social Development, Finance and Administration, Executive Director, Municipal Licensing and Standards, Medical Officer of Health

Wards: All

SUMMARY

On December 9, 2015, City Council directed the Executive Director, Social Development, Finance and Administration to implement the Specialized Program for Interdivisional Enhanced Responsiveness (SPIDER) on an ongoing basis. Since that time, SPIDER continues to strengthen the effectiveness of coordinated City and Community services to improve safety and well-being for vulnerable individuals and the communities they live in.

In essence, complex situations that could not be resolved by individual City divisions or involved community partners have been brought to resolution through SPIDER due to the efficient manner in which situations of elevated risk are assessed at the SPIDER Situation Table, and the committed and professional mobilization in response to these situations by Community-based organizations and City divisions, timely risk resolutions have been achieved and in most situations, vulnerable residents have been helped to remain living at home safely, with appropriate supports.

The collaboration that SPIDER fosters continues to enhance coordination across City services and with third party service providers has benefitted City service delivery outside of SPIDER.

SPIDER continues to work to align City policies and procedures for responding to vulnerability. Through the leadership of City Clerks, interdivisional information-sharing protocols have been solidified. In partnership with other Divisions and Community Agencies, staff training in vulnerability, targeted engagement and open dialogues have increased awareness about situations impacting vulnerable Torontonians and the programs and services available. These collaborations have also helped build networks across the service sector and created opportunities for operation and systemic level innovation. As a result, system-level policy changes to improve responsiveness to vulnerable residents have been identified, recommended and advanced.

This report will provide an update about SPIDER.

RECOMMENDATIONS

The Executive Director, Social Development, Finance & Administration, the Executive Director, Municipal Licensing and Standards, and the Medical Officer of Health recommend that:

1. City Council request the Minister of Health and Long-Term Care and all 5 Local Health Integration Networks that service the City of Toronto identify opportunities to invest in the implementation of the Coordinated Hoarding Response System for the City of Toronto and to further increase access to evidence-based mental health supports for vulnerable residents, including those with lived experience with hoarding.
2. City Council direct the Executive Director of Social Development Finance and Administration to ensure best practices identified from SPIDER and long-term care for vulnerable seniors with mental health and addictions issues be reflected and prioritized in implementation of the Toronto Seniors Strategy 2.0.
3. City Council request the Minister of Health and Long-Term Care and all 5 Local Health Integration Networks that service the City of Toronto prioritize the development of Hospital and Community processes to create seamless transition from hospital to community and to consider the referral source as part of the circle of care to advance integrated service delivery for vulnerable populations.
4. City Council forward these recommendations to the Ministry of Health and Long-Term Care, The Toronto Board of Health, the Ministry of Children and Youth Services, the Ministry of Community Safety and Correctional Services, the United Way of Toronto and York Region, and other relevant groups to request support for our community partners to enhance their capacity and have the appropriate resources available to provide necessary psychological health and safety supports to their staff who deal with heightened vulnerability and trauma.
5. City Council forward this report, for consideration, to the Toronto Board of Health; Board of Directors of Toronto Community Housing Corporation; the Toronto Police Services Board; the Office of the Information and Privacy Commissioner of Ontario; the Minister of Health and Long-Term Care; the Office of the Public Guardian and Trustee; the Minister of Community Safety and Correctional Services; the Toronto Central Local Health Integration Network; United Way Toronto and York Region and the Toronto Hoarding Support Network.

FINANCIAL IMPACT

There are no immediate financial impacts.

DECISION HISTORY

On December 9, 2015, City Council directed the Executive Director, Social Development, Finance and Administration to implement the Specialized Program for Interdivisional Enhanced Responsiveness (SPIDER) on an ongoing basis.
<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2015.CD8.3>

On December 16, 17 and 18, 2013, City Council authorized the Executive Director, Social Development, Finance and Administration to establish the Specialized Program for Interdivisional Enhanced Responsiveness (SPIDER) on a 'proof of concept' basis and authorized a transfer of funds in the amount of \$199,000 from the Social Assistance Stabilization Reserve (XQ1054) to fund two temporary staff positions.
<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.EX36.10>

SPIDER was established to respond to several 2013 City Council directions related to the need for improved coordination between service systems (e.g. municipal, provincial, community-based) in extreme cases involving chronic hoarding, multiple property standards and fire code violations, bed bug and other pest infestations as well as the need to train staff more broadly on their role in serving all residents, including those facing heightened vulnerability. The links to these motions are provided below.
<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.MM30.6>
<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.HL19.13>
<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.LS18.6>
<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.CD18.5> (part c)

COMMENTS

Equity Impact Statement

The City of Toronto serves all residents, including those who may be subject to increased vulnerability related to aging, chronic health challenges, diminished capacity, mental health issues, social isolation, and other factors.

To ensure equitable outcomes for all Torontonians, City Council and the Toronto Public Service have committed to the removal of systemic barriers to City services. This commitment requires innovating to deliver different or even higher levels of service to residents experiencing vulnerability.

SPIDER is an innovative mechanism for delivering enhanced levels of service in accordance with this commitment. SPIDER delivers customized responses to elevated risks involving vulnerable residents to ensure that safety and well-being is available equitably to everyone.

SPIDER Overview

City Divisions and Community Agencies are first responders to complex property and community standards issues, some of which arise as a result of a person experiencing vulnerability. City staff have encountered extreme cases of chronic hoarding of animals,

Update Report for the Specialized Program for Interdivisional Enhanced Responsiveness

possessions and refuse, multiple property standards and fire code violations, bed bug and other pest infestations. While staff may take the immediate appropriate actions to remedy the circumstance at the time, it is often the case that additional, chronic issues go unresolved. SPIDER was created to mobilize appropriate responses to such complex situations and continues to strengthen the effectiveness of coordinated City and Community services to improve safety and well-being for vulnerable individuals and the communities they live in.

The City of Toronto Working Group on Vulnerability has defined vulnerability as a gap between the challenges a person faces and the resources they can access when facing those challenges. Vulnerability must be assessed in context – a person’s vulnerability or resilience will depend on their circumstances, environment and resources in the broadest sense.

This definition of vulnerability emphasizes service and resource gaps, not characteristics of the person, as the core driver of vulnerability and affirms the role of the service provider to make extra efforts to reduce vulnerability by closing these gaps.

In 2016, the Social Development Finance and Administration Division reorganized existing resources to create the Community Safety and Wellbeing Unit to strategically respond to growing community safety and vulnerability needs within the City of Toronto. The Unit is essentially an amalgamation of 3 key programs:

- Community Crisis Response Program (CCRP)
- Specialized Program for Interdivisional Enhanced Responsiveness (SPIDER)
- Furthering Our Community by Uniting Services (FOCUS)

The creation of the Community Safety and Wellbeing Unit better positions the City of Toronto to mobilize inter-sectoral approaches to interventions, prevention, preparation and capacity building that will enhance the development of responsive and supportive systems for Torontonians. Additionally, the implementation of the unit creates a focused structure for developing necessary policy level interventions that will advance community safety and wellbeing goals for the City of Toronto and its partners.

SPIDER Vision and Mandate

The vision guiding SPIDER is the safe inclusion of vulnerable Torontonians in their communities. The program mandate is to reduce acutely elevated health and safety risks involving vulnerable residents, their homes or property and their neighbours by:

(a) Enhancing coordination of front-line responses across City of Toronto divisions and Community-based agencies;

(b) Building supportive systems to identify effective linkages to relevant health care and social services; and

(c) Mobilizing policy and system reforms related to vulnerability.

Focus on Elevated Risk Situations Involving Vulnerability

SPIDER is not designed to supersede normal City services and does not. Strict situation selection methods and threshold criteria are applied to ensure that the resource

intensity delivered through SPIDER is reserved for the most complex and intractable situations of vulnerability encountered by City staff, and to ensure that SPIDER interventions are implemented only when an enhanced interdivisional response is required to reduce vulnerability and risk for vulnerable individuals, their property and the wider community. To respond to the diversity of requests that do not meet the threshold of risk for the situation table, SPIDER staff have worked on a consultative nature with Councillor Offices and City Divisions to best identify appropriate referral pathways and solutions for more than 135 complex situations.

Enhanced Service Coordination

The SPIDER Situation Table meets bi-weekly to coordinate innovative front-line responses to immediate situations of risk and documents systemic barriers that prevent coordination or long-term solutions. The term "situation" is used rather than "case" to distinguish the work of the table from conventional case management that may be delivered by any of the participating services, which include City Divisions and Agencies from across the Toronto Public Service and external service providers. The Situation Table is chaired by SPIDER staff. The City divisions and Community agencies participating at the SPIDER Situation Table are identified in the table below:

City of Toronto Services	Community-based Services
Children's Services	Cota
Toronto Fire Services	Canadian Mental Health Association
Long-Term Care Homes and Services	Mid-East Toronto Health Link
Municipal Licensing and Standards	Office of the Public Guardian & Trustee
Toronto Paramedic Services	St. Michael's Hospital
Revenue Services	Toronto Central Community Care Access Centre
Shelter, Support and Housing Administration	Woodgreen Community Services
Social Development Finance and Administration	
Toronto Building	
Toronto Community Housing Corporation	
Toronto Employment and Social Services	
Toronto Public Health	

Risks and Vulnerabilities

As of July 31, 2017, the SPIDER situation table has coordinated 115 responses to acutely elevated risk situations. Data collected about these situations identify vulnerabilities, risks and system barriers that have been historically most challenging for the City to address through normal mechanisms. It is important to note that most risk factors are related in one way or another and can be grouped in four distinct categories: Mental/Physical Health, Housing, Social Isolation and Poverty.

Risk of Harm

SPIDER situations are very complex, there are an average of 5 risk factors per situation which can fluctuate depending on the severity. The information below is based on 115 situations:

- 99% of the situations at the SPIDER situation table involved individuals or families that were at risk of serious harm if left unresolved.
- 77% of those situations involved individuals or families that did not understand the severity of the risk situation that they faced prior to a SPIDER intervention.
- The following risk factors were prevalent in SPIDER situations:
 - 70% - Risk of Community Disruptions
 - 66% - Risk of Harm to Community if Unresolved
 - 44% Risk of Fire
 - 33% - Odour and Waste Risk to Community
 - 16% - Multiple 9-1-1 calls for person/residence

Imminent Eviction/Homelessness, Fire, and Sanitation were the Highest Risks

- Most situations involved acutely elevated risk of eviction (88%), risk of fire (44%), and/or sanitation issues associated with odor and waste (54%).

Problematic Hoarding is a Prevalent Risk Factor

- Problematic Hoarding behaviours and related property maintenance issues were core drivers of these risks.
- Within the fire risks, 75% involved problematic hoarding, 43% involved excessive storage of combustible materials, and 31% had blocked exits.
- Within the eviction risk situations, 50% had safety risks due to excessive clutter
- Other hoarding risks included client safety a risk due to excessive clutter (54%), unsafe housing due to unsanitary conditions (55%), lacking appropriate hoarding support (46%), requiring assistance with home maintenance (31%) and living in home without utilities (such as potable water, heat, hydro etc) (6.5%)

Social Isolation and Low Income were the Major Vulnerabilities

- 45% of all situations were introduced by Toronto Community Housing.
- In the majority of situations, vulnerabilities were associated with social isolation (60%), and low income (60%).

- Although aging is not a vulnerability, it may trigger a vulnerability. Seniors aged 60+ represented 50% of situations. In most situations (52%), the individual had refused services that were offered to them, prior to the SPIDER intervention.

Vulnerable Residents were Lacking Appropriate Mental Health Services and Help with Functional Activities of Daily Living

- Service needs were reported for mental health (75%), assistance with activities of daily living (50%), hoarding relapse prevention (45%), and financial assistance for housing repairs and maintenance (23%).

Who is SPIDER Serving?

- **Gender Identifiers** - Female (49%), Male (49%), Transgender/Gender Neutral (2%)
- **Age** – 60+ (50%), 40-59 (30%), 25 – 39 (10%), 0-24 (5%), unknown (5%)
- **Family Status** – Individuals (87%), Couple (2%), Families (11%), Pets or Animals involved (13%)
- **Housing** – Tenants (67%), TCHC Specific (45%), Property Owner (21%), No Fixed Address/Homeless/Shelter (7%)

50% of SPIDER situations involve vulnerable and aging individuals. The information below identifies the trends related to Toronto's aging population served by SPIDER:

Breakdown of SPIDER Situations involving Age 60+	Percentage
Single, over the age 60+	40%
Risk of Eviction/Homelessness for 60+	43%
Lack of Appropriate Housing for 60+	20%
Unable to Maintain Residence in Toronto 60+	25%

Breakdown of SPIDER Situations Risk Factors Involving Age 60+	Percentage
Physical/Mental Illness	33%
Social Isolation	25%
Inability to Manage Functional Activities of Daily Living	22%
(Safety) Risks Related to Excessive Clutter	20%
Odour & Waste Risks	20%
Risk of Fire due to Problematic Hoarding	14%

The data generated by SPIDER continues to demonstrate examples of health inequities in Toronto, as articulated within the Toronto Public Health report, "Unequal City" (2015) and the City's Poverty Reduction Strategy, "TO Prosperity". Low income and unmet health and social service needs lead to poor quality of life for vulnerable Torontonians. They can also produce unsustainable pressures on City services, including enforcement and safety services that do not have a primarily therapeutic or social service mandate.

SPIDER will continue to build effective linkages to address unmet needs. An immediate consideration for the City is to consider the expanding population vs. the current capacity of existing health and social services. There are extensive waiting lists for services such as case management and housing. The innovation of our service system is necessary to support the most vulnerable who rely heavily upon accessible services.

SPIDER's findings also demonstrate that there are solutions to issues identified in the "Evictions of Senior Tenants in the GTA: A Call to Action to Curtail an Emerging Crisis Report" by the Centre for Equal Rights in Accommodation. The report identifies: "What makes seniors particularly vulnerable is isolation. In Toronto, four out of 10 people who are 85 and older lived alone, according to the report. By 2041, seniors are expected to make up almost 25% of the population in the city." The data generated by SPIDER should advise future implementation of the Toronto Seniors Strategy 2.0.

SPIDER Impacts

Timely Risk Resolution

As of July 31, 2017, 104 of 115 (91%) of elevated health and safety risk situations introduced to the SPIDER Situation Table were "resolved" (i.e. elevated health and safety risks were reduced to levels manageable by normal services and the appropriate services are in place).

- Out of the 104 resolved situations, 6 situations were re-opened requiring further intervention
- 11 situations were currently open at the SPIDER situation table.
- 26% of Situations were resolved within 1 month
- 20% of situations were resolved within 2 months
- 25% of situations were resolved within 4 months
- 17% of situations were resolved within 6 months
- 12% of situations were resolved beyond 6 months

Effective Service Connection and Enhanced Service Coordination

SPIDER is a process that relies on the expertise and professionalism of City Divisions and Community-based Agency staff that participate in SPIDER. Each partner has identified and empowered, qualified and passionate human service professionals that are supported by their divisions and is what fundamentally makes SPIDER work. The SPIDER membership continues to develop internal communication plans that are activated to identify situations that require the support of SPIDER or to efficiently mobilize service to respond to situations of risk.

Originating SPIDER Agencies	Total Submissions
TCHC	55
Toronto Fire Services	15
MLS	13
SSHA - City of Toronto	12
Woodgreen	7
Toronto Paramedic	5
CCAC	4
Toronto Public Health	4
SDFA - City of Toronto	4
Toronto Public Health	4
Cota	1
Toronto Employment & Social Services	1

Responding SPIDER Agencies	Total Responses
Toronto Community Housing Corporation	50
Cota	39
Toronto Fire	35
Toronto Public Health	34
Woodgreen	33
Toronto Community Care Access Centre	33
Social Development Finance and Administration	28
Municipal Licensing and Standards	24
Shelter, Support and Housing Administration	23
Toronto Paramedics	17
Office of the Public Guardian & Trustee	16

Responding SPIDER Agencies	Total Responses
Toronto Employment & Social Services	16
Toronto Revenue Services	15
Canadian Mental Health Association	14
Toronto Police	14
Health Links	13
Fred Victor	12
Children's Services	5
Ontario Commission for Housing Equity	5
Toronto Building	3
Long-Term Care Homes and Services	1

There is an average of 4 Agencies/Divisions per situation and that can fluctuate depending on the scope and severity of the situation. Effective information sharing protocols combined with the willingness of the City and its partners to come together to balance approaches, maximizes the scope of available tools and mandates to respond to SPIDER situations. This has created a deeper understanding of how available resources can be utilized to respond to complex situations of risk. For example Toronto Fire Services has reported that 50% of the SPIDER situations with which they are involved have been diverted or withdrawn from court as a result of leveraging community expertise through the collaborative interventions mobilized at SPIDER.

Top Risk Categories When Opened at SPIDER		Top Service Connected to when Resolved at SPIDER	
Eviction/Homelessness	86%	Mental Health	72%
Mental/Physical Health	76%	Housing	66%
Social Isolation	60%	Hoarding Support	29%
Poverty	60%	Physical Health	25%
Service Refusal	52%	Financial Support	17%
Functional Activities of Daily Life	50%	Legal Support	12%

Top Risk Categories When Opened at SPIDER		Top Service Connected to when Resolved at SPIDER	
Hoarding/Unsafe Living Conditions	45%		
Pests/Bed Bugs	22%		
Hospital Discharge Process	15%		
Capacity to Understand the Severity of the Risk	77%		

Safer Housing Outcomes for Vulnerable Residents

In 99% of the resolved situations, SPIDER made it possible for most vulnerable individuals to remain living in their own homes safely (82%) or to be relocated to more appropriate housing (17%), such as long-term care.

Housing Outcome	Percentage
Averted Eviction/Homelessness	99%
Resident Remains at Home Safely	82%
Relocated to Supportive Housing, Long-Term Care or Private Dwelling	17%
Evicted to or Remains at Shelter or No Fixed Address	1%

An infographic visually demonstrating SPIDER statistical data is attached to this report (See Appendix 1).

Supportive Systems

Information Sharing and Privacy

SPIDER Staff and Legal Services worked together to build a step-by-step protocol for sharing any personal information as part of SPIDER. This protocol outlines the steps that must be followed when Situations are discussed at the Situation Tables and further, when interventions are developed by participating divisions and agencies. Each step in the protocol aims to ensure compliance with all applicable legislation. Further, the SPIDER information sharing protocol serves to both (i) reduce the number of parties receiving personal information (i.e. only those persons that require the information as part of their divisional mandate) and (ii) reduce the amount of information that will be shared (i.e. only that information that is necessary). (See Appendix 2).

Although privacy advice from Legal Services was sought out prior to beginning the program, Corporate Information Management Services, City Clerk's Office, conducted a privacy audit to identify and minimize risks associated with information management practices to ensure SPIDER processes were in compliance with applicable legislation.

(See Appendix 3). The Audit identified 7 recommendations for implementation, including the submission of a test case to the Information and Privacy Commissioner of Ontario.

Corporate Information Management Services, City Clerk's Office, Toronto Public Health and Social Development Finance and Administration worked collaboratively to assess and implement the recommendations which continue to be implemented.

Simultaneous to the SPIDER privacy audit, FOCUS Toronto a collaborative risk-driven approach led by the City of Toronto Social Development Finance and Administration Division, Toronto Police Service and the United Way of Toronto York Region worked other jurisdictions and police services across Ontario to support the Ministry of Community Safety and Correctional Services and the Information and Privacy Commissioner of Ontario to develop the "Guidance on Information Sharing in Multi-Sectoral Risk Intervention Models" document (See Appendix 4).

Community Sector Capacity Building

To explore some of the emerging issues identified in SPIDER interventions and in the ongoing service delivery of the City and its partners, SPIDER launched the Open Dialogue on Vulnerability monthly workshop series. The free half-day workshops aim to:

- Increase awareness about situations impacting vulnerable Torontonians and the programs and services available
- Build networks across the service system to create opportunities for operation and system level innovation.

To date, the Open Dialogue on Vulnerability series has engaged 3,125 participants including residents, City staff, City Councillors, and service providers in the health and community service sectors from within Toronto and beyond (See Appendix 5).

Additionally SPIDER staff have developed specialized workshops to staff teams of community partners, City divisions and to political staff.

In Q4 2017, SPIDER will explore opportunities with other City resources to livestream the sessions and make them available on line and accessible to all.

Staff Workplace Psychological Health and Safety

Staff who have worked repeatedly without resolution to address risk situations involving vulnerable residents often experience distress, compassion fatigue, and vicarious trauma. An ongoing goal for SPIDER is to increase staff access to workplace psychological safety supports to ensure the well-being of employees working with vulnerable residents.

Internally at the City of Toronto, the Occupational Health, Safety & Workers Compensation team within the Human Resources Division is leading some development work to innovate the City's Psychological Health and Safety Policy.

This report recommends a need for the City to explore an additional level of support such as its Employee Assistance Program, peer support and other mechanisms for those with constant, in-depth exposure to unresolved health and safety risks or the complex situations experienced by vulnerable Torontonians.

Community Partners, specifically smaller community-based or grassroots organizations often have little to no capacity to support staff who have consistent exposure to trauma and complex situations experienced by vulnerable Torontonians. The City relies heavily on such organizations and groups to build trusting relationships and to support interventions that reduce risks. These groups often rely upon the Toronto Public Health Community Support Team or the City of Toronto Community Crisis Response Program for support. Therefore the City can play a pivotal role in identifying opportunities to enhance support for these groups.

The Community Safety and Wellbeing Unit will convene discussions with funders and other levels of government to identify what supports can be made available to community partners in this regard. SPIDER recommends that City Council forward these recommendations to the Ministry of Health and Long-Term Care, the Toronto Board of Health, the Ministry of Children and Youth Services, the Ministry of Community Safety and Correctional Services, the United Way of Toronto and York Region, and other relevant groups to request support for our community partners to enhance their capacity and have the appropriate resources available to provide necessary psychological health and safety supports to their staff.

System Reform & Innovation

Inter-Sectoral Data Working Group on Community Safety and Wellbeing

In Q4 2017, the Community Safety & Wellbeing Unit will launch the Inter-Sectoral Data Working Group on Community Safety and Wellbeing to be a cross-sector group of influential research and policy stakeholders, aimed to mobilize action to increase the value generated by data related to community safety and wellbeing. This will specifically include data generated by FOCUS Toronto and SPIDER.

The role of the Data Working Group will be to provide recommendations, advice, and information to the Executive Director of SDFA, the FOCUS Toronto and SPIDER steering committees and existing City system change processes including the System Reform and Innovation Table on specialized matters related to community safety, wellbeing, and vulnerability.

Coordinated Hoarding Response System Design for the City of Toronto

Problematic hoarding behavior includes complex mental health and behavioral challenges. It can lead to serious health and safety risks for both those individuals living with problematic hoarding, and the surrounding community. The lack of a coordinated system can create significant challenges for City divisions and Community Agencies.

Although service providers from diverse sectors and disciplines in Toronto regularly respond to hoarding concerns, to date there has been no clear understanding or guidelines of how to best coordinate this work and what best practice(s) should be implemented. As a result, efforts are often targeted to address emergency situations. Prevention and long-term risk reduction are compromised due to lack of community programs and services aimed at reducing or preventing problematic hoarding.

In 2015, VHA Health Care and 14 Partner organizations joined forces to launch the Toronto Hoarding Support Service Network (THSSN) to help Toronto area residents with lived experience hoarding. The network aims to integrate services in a manner that will help support clients to manage their clutter while providing the emotional support they require to live safely. The initiative is partially funded through the Shelter Support and Housing Administration and supported by City Divisions. The THSSN focusses on prevention and with little to no outreach there is a waitlist for services.

Toronto Community Housing is currently partnering with Sunnybrook Health Sciences Centre, Frederick W. Thompson Anxiety Disorder Centre, to deliver peer support models in a supportive and interactive community setting. Given the early successes of the model, Sunnybrook and TCHC have expanded the pilot to additional buildings.

SPIDER has worked with the City's Solid Waste Management Division to implement the Garbage Bag Tag program. This advances Action 4.7 of the TO Prosperity Strategy. By providing free garbage bag tags to vulnerable individuals, steps are taken to reduce clutter in a way that advances the waste diversion goals of the Solid Waste Management Division.

Under the direction of the System Reform Table on Vulnerability in Toronto, and with the support of Toronto Public Health and the Toronto Central LHIN, SPIDER led the development of a Coordinated Hoarding Response System design for the City of Toronto (See Appendix 6). The design process identified 8 recommendations for implementation that would enhance City and community processes.

Although the City currently responds to situations of problematic hoarding, prevention, and harm reduction, long-term treatment approaches are often beyond the City's scope, and are better served by the Community Social Service and Health sectors. In Q4 2017, SPIDER will convene a table of City, Social Service and Health funders to identify investment opportunities to implement the Coordinated Hoarding Response System for the City of Toronto.

This report recommends that City Council request the Minister of Health and Long-Term Care and all 5 Local Health Integration Networks that service the City of Toronto identify opportunities to invest in the implementation of the Coordinated Hoarding Response System for the City of Toronto and further increase access to evidence-based mental health supports for vulnerable residents, including those with lived experience hoarding, to respond to risks involving vulnerable Torontonians, their homes and property and their neighbours.

Hospital to Community Discharge Processes

The discharge of persons from hospital to community without factoring community supports and interventions can regularly lead to siloed service delivery, duplication in service or service gaps that contribute/elevate the risk that vulnerable Torontonians face, including re-hospitalization. The inclusion of community referral sources in the Circle of Care allows for continuity of care and the identification of best practices in community discharge to prevent re-hospitalizations, particularly for Vulnerable Torontonians who have experienced mental health considerations and those who have been victims of violence.

Increasingly, Community Crisis Response Program (CCRP) staff are supporting victims of gun violence that have been discharged from hospital with little to no discharge plan including knowledge or understanding of how to treat a wound, change bandages, administer medication, or how to access trauma-informed psychosocial support and follow up appointments.

Hospital-to-Community discharge processes become even more challenging when the discharge happens to someone who is homeless. Toronto shelters are increasingly expected to serve clients with complex healthcare needs. In some cases, clients with chronic complicated health issues present at point of intake, having just been discharged from hospital. In other cases, chronic or complex health issues become apparent sometime after client admission to a shelter. Recent health-related trends across the shelter system in Toronto include hospitals and mental health institutions discharging patients with high levels of health needs directly into the shelter system. Shelters provide emergency and temporary accommodation and are not designed nor are they staffed to operate as hospitals or healthcare facilities.

The City's Shelter Support & Housing Administration (SSHA) is currently working with health partners to develop a coordinated approach to working with clients being discharged from hospitals or who are currently in the shelter system to ensure they receive the right health care, in the right place, at the right time. This work will support shelter staff, hospital discharge units and healthcare providers to ensure adequate healthcare services are in place before client admission to a shelter, and to work with service coordination tables, including SPIDER, to source additional supports or identify alternative places of care where client health needs exceed shelter capacity.

The Community Safety & Wellbeing Unit is currently working with Community-based providers and the Urban Health Alliance, a grassroots community-based non-profit that advocates for the mental health and wellness of urban families and communities, to look at further innovations.

This report recommends that City Council request the Minister of Health and Long-Term Care and all 5 Local Health Integration Networks that service the City of Toronto prioritize the development of Hospital and Community processes to create seamless transition from hospital to community and to consider the referral source as part of the circle of care to advance integrated service delivery for vulnerable populations.

Legal Capacity and Decision Making

On May 10, 2016, under the direction of the System Reform and Innovation Table on Vulnerability in Toronto, SPIDER led a stakeholder consultation at Toronto City Hall, titled, "Reforms to Ontario's Legal Capacity, Decision-Making and Guardianship Laws – an Information and Consultation Session for Toronto Service Providers and Stakeholders".

The objective of the consultation session was to provide feedback to the Law Commission of Ontario, which is examining and recommending reforms to Ontario's legal capacity, decision-making and guardianship laws, and in particular the Substitute Decisions Act and the Health Care Consent Act. An interim report was completed in October 2015. A final report was released in March 2017.

Over 65 individuals, representing over 15 service and advocacy organizations, discussed the LCO's proposed reforms, with a focus on providing implementation advice and exploring the implications of the reforms for Toronto's vulnerable residents and the service providers who support them. The stakeholder consultations results were prepared in a report and shared with the LCO (See Appendix 7).

The final LCO report can be found here: <http://www.lco-cdo.org/en/our-current-projects/legal-capacity-decision-making-and-guardianship/>

Multi-Tenant Houses

The City of Toronto supports housing diversity in all neighbourhoods across Toronto for all types of households. Multi-tenant houses, often referred to as rooming houses, are an important part of the affordable rental housing stock and provide single-room accommodation to a diverse tenant demographic including students, seniors, new immigrants and vulnerable Torontonians. The city's Affordable Housing Action Plan 2010-2020 encourages an increase in legal, well-run multi-tenant houses.

Current regulations for multi-tenant houses do not adequately address the need for this type of housing. The demand for affordable housing has resulted in the conversion of properties to multi-tenant houses in areas of the city where they are not currently permitted and without the benefit of appropriate permits or inspections. These factors potentially impact the quality of life and safety of both occupants and the surrounding community.

Municipal Licensing and Standards and City Planning are currently reviewing the regulations for multi-tenant houses with the goal of improving conditions for tenants and mitigating neighbourhood impacts. A report that proposes new zoning and licensing requirements for multi-tenant houses is expected at the Executive Committee later this year.

In Q4 2017, SPIDER will work with Municipal Licensing and Standards to identify how SPIDER and FOCUS Toronto can be utilized to mobilize supports for vulnerable residents to ensure their safe inclusion in their communities.

Housing Unit Takeover (HUT)

Housing Unit Takeovers (HUT) are situations in which vulnerable tenants are forced to accommodate unwanted guests in their homes often to fulfill unmet social, economic and personal needs. In many cases, HUTs occur for the purpose of drug dealing. In these instances, legitimate tenants find themselves in situations where they are unsafe and experience physical, financial and psychological abuse and harm. Perpetrators often prey on the most at-risk tenants, exploiting their vulnerabilities such as substance use, mental health concerns, cognitive issues or concurrent disorders that reduce the individual's capacity to contest to the person invading their space. HUTs are a growing concern for community providers who support vulnerable populations.

The Social Development Finance and Administration Division's Community Funding Unit funded The Dream Team, a peer based non-profit organization dedicated to advocacy, education, and research in the areas of supportive housing, mental health, discrimination, and stigma to lead a research project to further articulate the issue of HUTs and identify recommendations. SPIDER actively collaborated with The Dream Team to consult stakeholders, lead Open Dialogue on Vulnerability sessions and problem solve the issue. In Q4 2017, the Community Safety & Wellbeing Unit will explore potential opportunities to advance these recommendations

The "Safe At Home: The Dream Team's Study of Housing Unit Takeovers in Toronto" Executive Summary identified 13 recommendations. (See Appendix 8)

Long-term Care for Vulnerable Seniors

When in-home supports are not available or an individual's needs are greater than in home support can provide they are usually referred to Long-term care. However, in some situations SPIDER has identified that vulnerabilities such as mental health and addiction issues can impact accessibility to long-term care facilities. Without adequate supports in place, this can place Vulnerable Seniors further at risk.

The Toronto Public Health Vulnerable Adults and Seniors Team (VAST) provides short-term case management to help connect marginalized community members to Social Determinants of Health related services and supports. VAST has identified that 25% of their case load supports individuals living with mental health and addictions and 38% of their caseload supports individuals with multiple or complex health conditions. Additionally among its' current caseload, the Vulnerable Adults and Seniors team responds to vulnerable seniors who have stress and difficulty coping (30%), poor and insecure housing (15%) and hoarding/excessive clutter (29%).

At its meeting of November 3 and 4, 2015, City Council endorsed the project scope for the George Street Revitalization and the Seaton House transition plan. The scope includes a men's shelter with 100 beds, a transitional living program with 130 beds, a long-term care home with 378 beds, 21 units of affordable housing and a community hub.

Long-Term Care Homes & Services and the Shelter Housing and Support Administration are currently leading the development of coherent service provision for men and women from the shelter system who are eligible for long-term care but require additional supports due to behavioural issues or other circumstances. This collaboration will ensure that even as they age, residents receive the services that best meet their needs.

This report recommends City Council direct the Executive Director of Social Development Finance and Administration to ensure best practices identified from SPIDER and long-term care for vulnerable seniors with mental health and addictions issues be reflected and prioritized in implementation of the Toronto Seniors Strategy 2.0.

Bed Bug Policy and Procedures

The Toronto Public Health Bed Bug Control Initiative (BBCI) and representatives of SPIDER identified opportunities to enhance employee and partner awareness and policies regarding bed bugs. Current revisions to the policy are being led by Occupational Health, Safety & Workers Compensation team of the Human Resources Division. Final revisions will be presented to the Occupational Health and Safety Coordinating Committee in Q4 2017.

This report recommends that the Toronto Public Health, Bed Bug Control Initiative and the Organizational Development, Learning and Workforce Planning Unit in the Human Resources Division explore training and capacity building platforms to advance modernized bed bug strategies and approaches for City Divisions and Community Partners. Updated training and capacity building are critical in ensuring that bed bug responses do not stigmatize or reduce access to services for vulnerable residents.

This report recommends that City divisions utilize the modernized approach to review procurement practices to ensure that contracted partner or third party services are aligned with the City's approaches to customer service and reducing vulnerability.

Conclusion

SPIDER continues to demonstrably strengthen the City's capacity to reduce acutely elevated health and safety risks involving vulnerable Torontonians, their homes or property, and their neighbours. The enhanced coordination within SPIDER has become a very valuable tool to further the existing valuable work of City Divisions by creating an integrated response platform aligned with Community-based health and social service sectors. SPIDER, FOCUS Toronto and other Collaborative models across the province of Ontario have introduced, further developed, implemented and audited new information-sharing protocols that aim to protect personal privacy while allowing City Agencies, Divisions and partners to communicate and coordinate more effectively to reduce harms. This work is heavily supported and aligned with the Information and Privacy Commissioner of Ontario and the Ministry of Community Safety and Correctional Services.

Including SPIDER in the Community Safety & Wellbeing Unit within the Social Development Finance and Administration division allows the data generated by SPIDER to be utilized for longer-term service planning and building supportive systems as well as identifying opportunities for system reform and innovation. SPIDER's ability to leverage front line experience and connected it to system change processes benefits the City's response to vulnerable residents. However the early successes of SPIDER suggest that further cross-divisional database development could enhance the City's response by identifying opportunities for preventative approaches.

The Open Dialogue on Vulnerability staff and stakeholder education program continues to attract more than 200 participants each month from within Toronto and beyond and continues to create new relationships for the City with local health care systems stewards and the Province of Ontario to promote the safety of vulnerable Torontonians. Going forward, SPIDER continues to mobilize effective interventions and push system change issues that prevent service delivery to ensure that services are available in all communities across Toronto.

CONTACT

Scott Mckean
Manager, Community Safety & Wellbeing
Community Resources
Social Development, Finance and Administration
416-392-0103
Scott.mckean@toronto.ca

SIGNATURE

Chris Brillinger
Executive Director
Social Development, Finance & Administration

Tracey Cook
Executive Director
Municipal Licensing and Standards

Dr. Eileen de Villa
Medical Officer of Health
Toronto Public Health

ATTACHMENTS

Appendix 1 – SPIDER infographic

Appendix 2 – SPIDER Information Sharing Protocol

Appendix 3 – SPIDER Privacy Audit

Appendix 4 - Guidance on Information Sharing in Multi-Sectoral Risk Intervention Models – Ministry of Community Safety & Correctional Service

Appendix 5 – Open Dialogue on Vulnerability Summary

Appendix 6 - Coordinated Hoarding Response System Design for the City of Toronto

Appendix 7 - Reforms to Ontario's Legal Capacity, Decision-Making and Guardianship Laws – an Information and Consultation Session for Toronto Service Providers and Stakeholders.

Appendix 8 - Safe At Home: The Dream Team's Study of Housing Unit Takeovers in Toronto