

Population Health, Community Safety & Well-Being: A Made in Greater Sudbury Solution





City of Greater Sudbury
Population Health - A Call to Action
 June 20, 2018

INKED
by
ERICA BOTA



This info graphic depicts the community's largest Population Health Safety & Well-Being engagement session which was held June 20th, 2018. Over 175 organizational leaders, front line staff, community network members, staff, etc... gathered at the Garson Community Centre/Arena to discuss questions and issues surrounding these ten priorities to continue moving solutions upstream and to determine the calls to action for each of the ten identified community priorities; Indigenous, Families, Resiliency, Mental Health & Addictions, Housing, Healthy Streets, Age Friendly Communities, Compassionate City, Play, Holistic Health. This consultation was the foundation for the overall Population, Health, Safety & Well-Being Plan.

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Mayor Brian Bigger

Message from the Mayor

Population health and community safety and well-being is a priority for the City of Greater Sudbury. We are committed to improving local supports, programs and services that benefit the residents in our community and recognize the need for a concerted effort to address complex social issues.

Focusing on Calls to Action, from the 2017 population health engagement sessions, and the City's current Strategic Plan, the City of Greater Sudbury has developed this Population Health Safety & Well-Being (PHSWB) Plan. This Plan is focused on being proactive and recognizing the social determinants of health that effect our safety and well-being. Empowering residents to recognize that multiple factors in the community affect individual health is essential in our population health approach.

We aspire to establish a community filled with resiliency and compassion, and a city where people feel safe and supported by their community. Citizens from across our community shared their stories and provided their input which has been incorporated into this plan.

On behalf of City Council, I would like to thank all staff, community members and multidisciplinary teams involved in this initiative. This is truly "A Made in Greater Sudbury Solution" and the City of Greater Sudbury is incredibly fortunate to have so many engaged partners. Their hard work to ensure the health and well-being of our citizens is most appreciated.

A handwritten signature in black ink, appearing to read 'B. Bigger'. The signature is fluid and cursive, written on a plain white background.

Mayor Brian Bigger



Marc Gauthier



Robert Kirwan

Message from the Population Health, Safety & Well-being (PHSWB) Panel Co-Chairs

Creating healthy individuals and improving their quality of life will ensure a more fulfilling community for all.

The City of Greater Sudbury is implementing a **Population Health Safety & Well-Being (PHSWB) Plan** directed at Greater Sudbury's most vulnerable individuals. To the best of our ability, we have created a plan that includes actions to support services and programs that are easily accessible, affordable and universal. We recognize the need to target all individuals, including various age groups, family types and cultures. Strong social connections and support from community members, businesses, community social networks and other disciplines are also key to having a resilient and secure community.

A profound thank you goes out to all staff, community members and others who have helped in achieving and further developing our overall vision for the City of Greater Sudbury.

Marc Gauthier
Directeur de L'Education/Director of
Education Conseil scolaire public du Grand
Nord de L'Ontario

Robert Kirwan
City Councillor

Acknowledgements

The City would like to acknowledge that we are located on the lands of the Robinson-Huron Treaty territory, the traditional territory of the Atikameksheng Anishnawbek, which includes two First Nations communities and several urban Indigenous organizations. We are grateful for the time and collaborative efforts of our Indigenous partners towards improving health, safety and well-being of all our residents.

As a population health approach, Ontario views the community safety and well-being of all citizens as a priority for our government. Addressing the root causes of societal challenges is essential for social development, prevention and effective risk interventions.

Although we have great support from law enforcement, community safety and well-being is a shared responsibility of all members of the community. In this Plan, we encourage multi-sectoral partnerships through innovative collaborations to minimize risks in the community and promote safety & well-being.

The strategies and actions in this document meet the needs of multiple groups, including those most vulnerable and victims of health inequities. The City's population health approach aspires to further develop and maintain feelings of safety and support among our citizens.

The City of Greater Sudbury has a long history of working collaboratively to advance Community Safety and Well-Being in our Community. We are well positioned to move forward with this Plan based on the developmental work completed and the numerous multiple collaborative strategies ongoing that are proactively addressing root causes and targeting local risks.

The PHSWB Advisory Panel would also like to acknowledge the contributions of the community and stakeholders through consultations, information sessions, community planning sessions and social network mapping and analysis, as well as the valuable contributions of all our partners. Thank you for making a difference in 'our shared responsibility.'



Photos in this document were taken prior to COVID-19 when masking and physical distancing guidelines were not yet in place.

Introduction

Greater Sudbury is geographically the largest city in Ontario and the most populous in northern Ontario with over 160,000 residents. For more than 100 years, our economy has been rooted in the mining sector, and while our mining roots continue to be a foundation of our economy, we are no longer simply a mining community. Our city is home to Health Sciences North, Northern Ontario's hub for health care. With our trio of outstanding post-secondary institutions, including Laurentian University, Cambrian College and Collège Boréal, Greater Sudbury is the educational capital of northern Ontario. We are home to the third largest French-speaking population in Canada outside of the province of Québec. We are also a leading destination for tourists, both regionally and nationally. Greater Sudbury is built on a foundation of diversity. Our Bridge of Nations recognizes and celebrates some of the many dozens of population groups who live and thrive in our community. Much of our strength lies in this diversity. The City of Greater Sudbury operates approximately 58 lines of business. This Plan captures our community's key priorities and risk areas that are evidence-based, completed by the collaborative efforts of all agencies and residents to address safety and well-being which is fundamentally important for the community's quality of life and place.

This plan was guided and developed through combined efforts of our Population Health, Safety & Well-Being Panel members by sharing data and other evidence needed to inform the actions and advise on the current needs of our City in order to ensure safety and well-being. We recognize that the social determinants of health need to be dealt with in an upstream manner and that similar to most communities, mental health, addictions, affordable housing, social isolation and lack of programs and services are key contributors to our current state.

This plan is needed, and the actions of our multiple partners and local residents are even more crucial to the work to be done in addressing social disorder along with improving the overall health, safety and well-being of our community. Greater Sudbury is renowned for its ability to bring partners together and is committed to this mandate by working towards upstream actions and initiatives to address the social determinants of health. The following is the panel member listing.



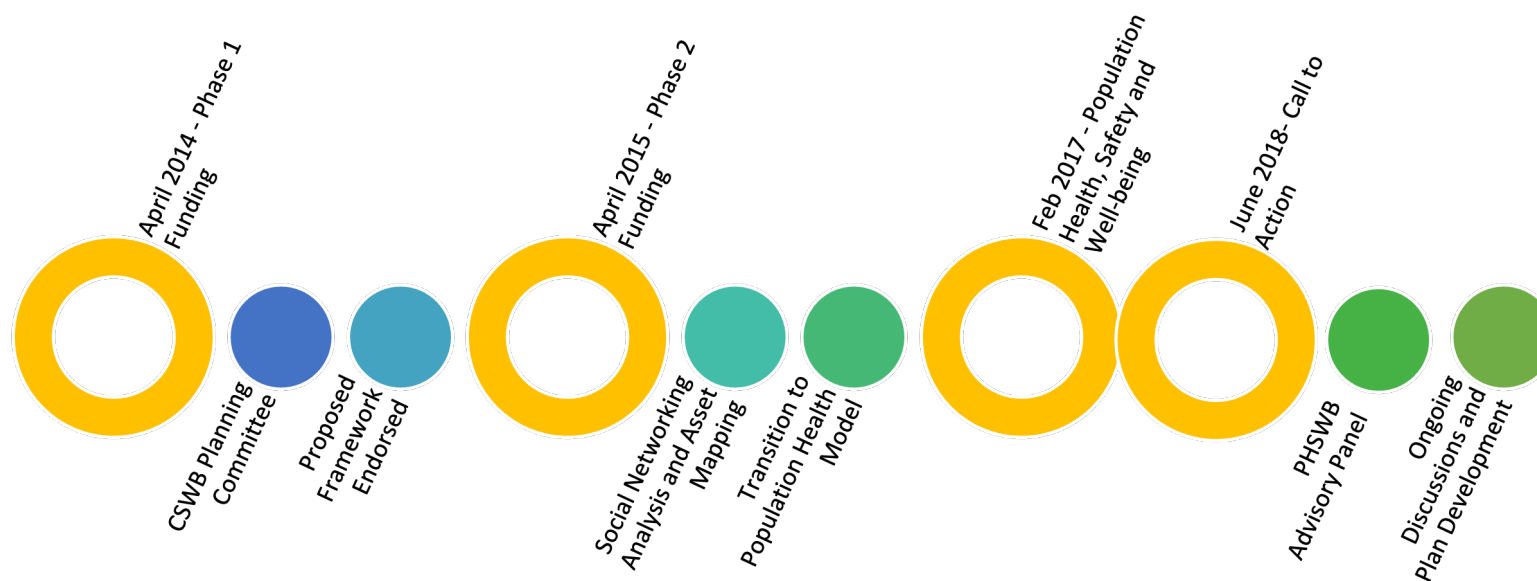
Population Health, Safety and Well-Being Advisory Panel

Last Updated: June 30, 2020

Representation	Member Name	Member Organization
Three (3) City Staff to lead/liase the Population Health, Safety & Well-Being Panel/Plan Network	Steve Jacques Tyler Campbell Sherri Moroso	City of Greater Sudbury
One (1) representative of, and appointed by the Ngo Dwe Waangizjig 'We Are One' Urban Indigenous Sacred Circle	Angela Recollet (Until Circle determines individual)	Ngo Dwe Waangizjig 'We Are One' Urban Indigenous Sacred Circle
One (1) representative of, and appointed by the North East Local Health Integrated Network	Terry Tilleczek	Ontario Health
	Adam Day	Ontario Health
One (1) representative of, and appointed by Health Sciences North	Maureen McLelland Dr. Natalie Aubin	Health Sciences North (HSN)
One (1) representative of, and appointed by the Canadian Mental Health Association	Stephanie Lefebvre	Canadian Mental Health Association (CMHA)
One (1) representative of, and appointed by Public Health Sudbury & Districts	Dr. Penny Sutcliffe	Public Health Sudbury & Districts (PHSD)
One (1) representative of, and appointed by Centre de santé communautaire du Grand Sudbury	Denis Constantineau	Centre de santé communautaire du Grand Sudbury
One (1) representative from the local school boards and one (1) representative from the local post-secondary schools appointed by Council (preferably one French and one English representative)	Norm Blaseg	Rainbow District School Board (RDSB)
	Marc Gauthier	Conseil scolaire public du Grand Nord de l'Ontario
	Daniel Giroux	Collège Boréal

Representation	Member Name	Member Organization
One (1) representative of community or social services providers appointed by Council	Martin Boucher	Northern Institute for Social Action (NISA)
One (1) representative of community or social services providers to children or youth appointed by Council	Mark Fraser	Compass/Boussole/ Akii-Izhinoogan
One (1) representative of custodial services providers to children or youth appointed by Council	Elaina Groves	Children's Aid Society of The Districts of Sudbury and Manitoulin
One (1) member of City Council (to act as Co-chair)	Robert Kirwan	Ward 5 Councillor
	Bill Leduc	Ward 11 Councillor
	Joscelyne Landry-Altmann	Ward 12 Councillor
Two (2) representatives appointed by the Greater Sudbury Police Services Board comprised of one (1) member of the Police Services Board and one (1) high ranking officer of the police service (for example Chief or Deputy-Chief of Police)	Frances Caldarelli	Greater Sudbury Police Services (GSPS) Board Member(s)
	Michael Vagnini	Greater Sudbury Police Services (GSPS) Board Member(s)
	Deputy Chief Sheilah Weber	Greater Sudbury Police Services (GSPS)
Three (3) community members or experts appointed by Council, representing the following: seniors, children and youth, vulnerable and/or at-risk individuals, multi-cultural groups, the housing sector, and recreation.	Jo-Anne Palkovits	St. Joseph's Health Centre
	Dr. Suman Koka	Northwood Medical Clinics
	Evelyn Dutrisac	Former CGS Councillor

Historical Timeline – Greater Sudbury’s Journey



The City of Greater Sudbury embarked on a journey towards ‘population health’ as part of its Healthy Community Initiative. This included efforts to address well-being, environmental sustainability, civic engagement and investments in social capital. In June 2018, the City and community partners hosted a community-wide effort to create “A Call to Action for Population Health: 2018 – 2028.”

This effort continues through the newly established Population Health, Safety and Well-Being Advisory Panel, which aligns with the provincial mandate to establish a Community Safety & Well-Being Plan. This strategic goal reflects the continued desire of City Council to effect change within the Greater Sudbury community to improve health, economic and social outcomes for its citizens.

The City of Greater Sudbury’s ongoing efforts to improve community outcomes will be highlighted throughout the plan, as the community’s response to community, safety and well-being issues are described in the context of the Provincial Community Safety and Well-Being Planning Framework.

City of Greater Sudbury Health Overview

Rate their general health as “very good” or “excellent”¹



Rate their mental health as very good or excellent¹



51%

Meet the Canadian Physical Activity Guidelines¹



24%



Reported being a heavy drinker.¹

Males who reported having 5 or more drinks, or women having 4 or more drinks, on one occasion, at least once a month in the past year.

20%

Reported being a daily smoker¹



Proportion of food insecure households with children aged 4 to 17²

450



Premature deaths are those of individuals who are younger than age 75 per 100,000³

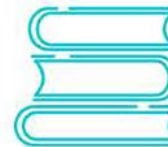


85.7%

Secondary School 5 Year Graduation Rate⁴

54%

Population who hold a Postsecondary certificate, diploma or degree⁴



85%

Students who met or exceeded provincial standard on the EQAO Grade 6 reading assessment⁴

¹ Canadian Community Health Survey - Annual Component (2), 2017-18. Geography: CMA. Statistics Canada. Table 13-10-0805-01 Health characteristics, two-year period estimates, census metropolitan areas and population centres

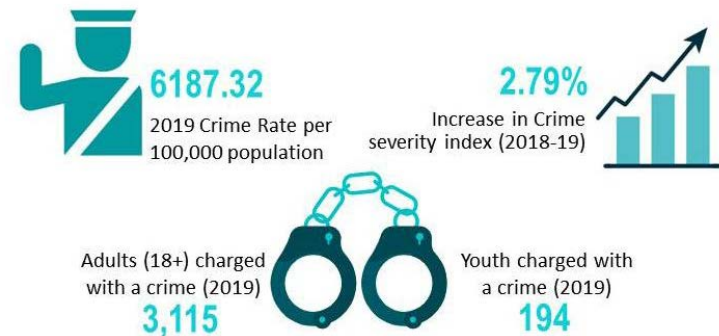
² Statistics Canada. Table 13-10-0815-01 Selected socio-demographic and health indicators to better understand the impact of school closures during the COVID-19 pandemic on children (various reference periods). Geography: Health Unit Region, 2020

³ Statistics Canada. Table 13-10-0753-01 Premature and potentially avoidable mortality, three-year period, Canada, provinces, territories, health regions (2018 boundaries) and peer groups. Geography: Health Unit Region, 2015-17

⁴ Ministry of Education. School Board Progress Reports <https://www.app.edu.gov.on.ca/eng/bpr/index.html>

Community Safety and Well-Being Government of Ontario Mandate

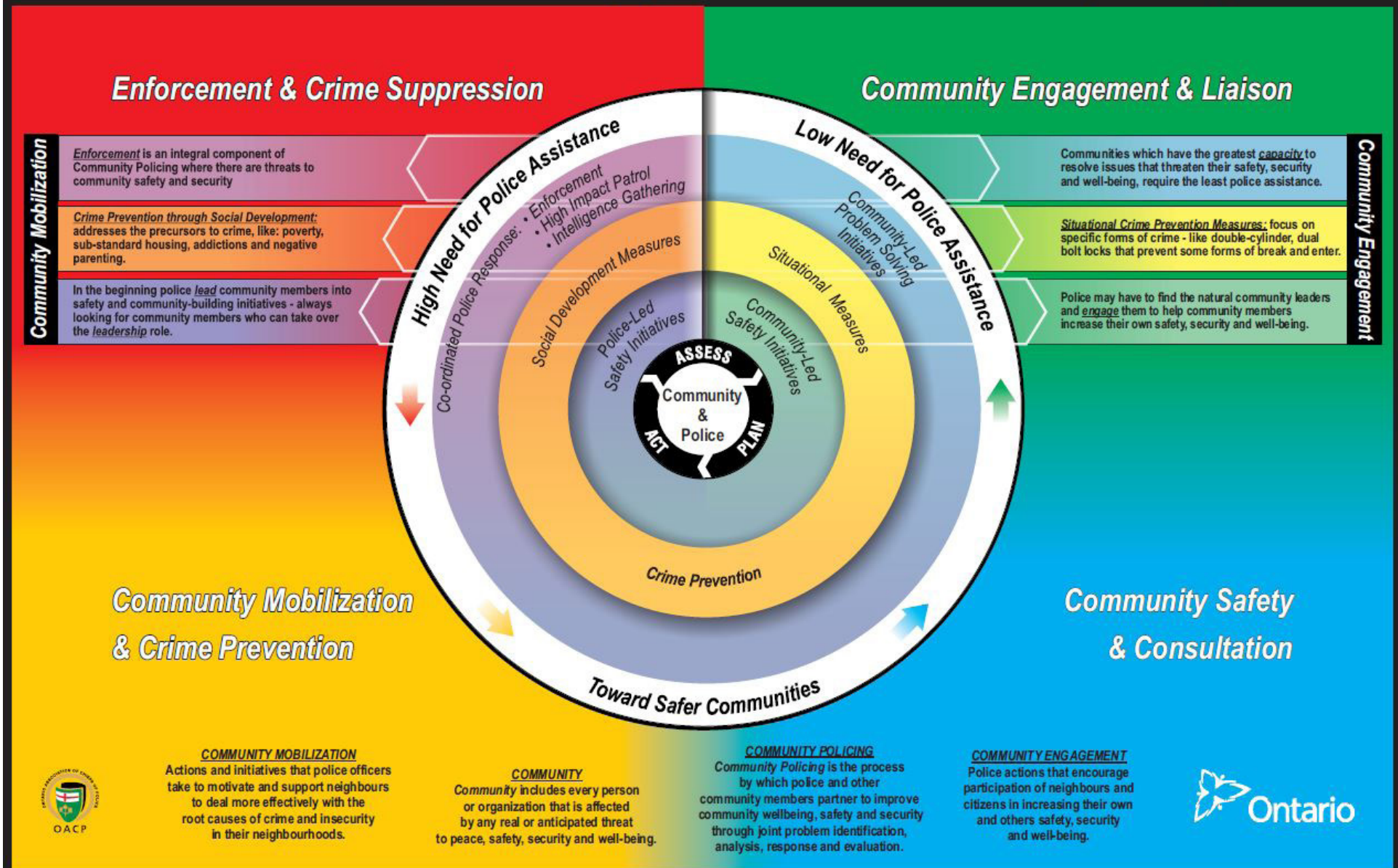
The Police Services Act of Ontario mandates that, “municipalities are required to develop and adopt community safety and well-being plans working in partnership with a multi-sectoral advisory committee comprised of representation from the police service board and other local service providers in health/mental health, education, community/social services and children/youth services.”



Source: Statistics Canada (2019, Greater Sudbury CMA) Tables 35-10-0177-01 and 35-10-0026-01

The mandate has additional requirements outlined in legislation pertaining to; conducting consultations, contents of the plan, monitoring, evaluating, reporting and publishing the plan. This approach allows municipalities to take the leadership role in defining and addressing priority risks in the community through proactive, integrated strategies that ensure vulnerable populations receive the help they need from the providers best suited to support them.

Ontario's Mobilization & Engagement Model of Community Policing



Four Levels of Intervention

What Is a Community Safety and Well-Being Plan?

"A community safety and well-being plan shall,

- a. Identify risk factors in the municipality or First Nation, including, without limitation, systemic discrimination and other social factors that contribute to crime;
 - b. Identify which risk factors the municipality or First Nation will treat as a priority to reduce;
 - c. Identify strategies to reduce the prioritized risk factors, including providing new services, changing existing services, improving the integration of existing services or coordinating existing services in a different way;
 - d. Set out measurable outcomes that the strategies are intended to produce;
 - e. Address any other issues that may be prescribed; and
 - f. Contain any other information that may be prescribed"
- (Section 251, Police Services Act)

The community safety and well-being planning framework, as illustrated in Figure 1, is the Province of Ontario's approach for municipalities, First Nations communities and their partners as they develop their local plans.

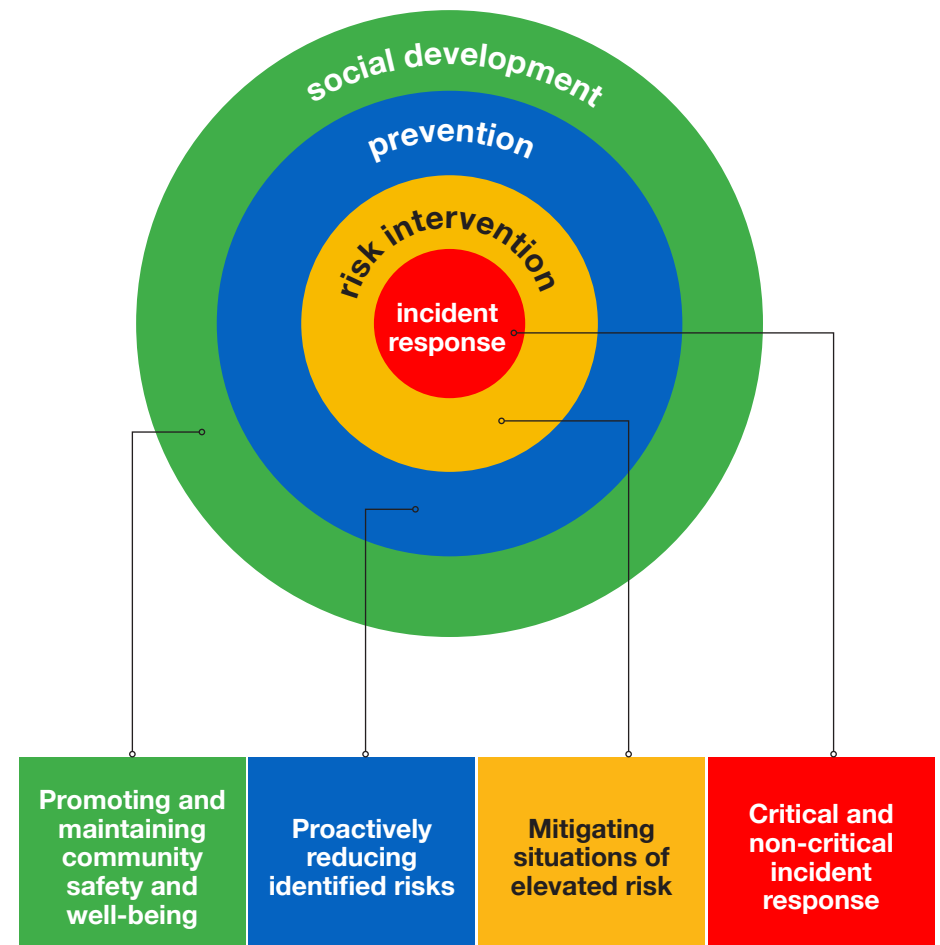


Figure 1: Community Safety and Well-Being Planning Framework

The City of Greater Sudbury Plan was completed by multiple agencies working to address complex social issues. The Plan includes this framework.

The ultimate goal is to have your community initiatives functioning in the green zone as this is optimal from a health and safety standpoint. This is where we would focus on social development and upstream efforts to keep residents safe and healthy. This action may take a long time before the final impacts are seen as the goal is to improve overall social determinants of health. The City's Homelessness Community Consultation is a great example of this zone.

The goal of the blue zone is preventative actions that would guide work towards the green zone to avoid reliant responses as found in the yellow or red zones. Proactive approaches, such as policies and programs, are grounded in evidence to address before they lead to crime. An example of this locally would be the use of the PHSWB priorities, which are included as part of all Council reports that go to the City. Staff must identify the priority being addressed and the expected impact.

The yellow zone is where individuals are acutely elevated and are at risk to themselves or others. This zone requires a collaborated approach to addressing escalated situations to try to mitigate the risk of harm that could occur just before the situation may happen. Our mobilization table is a prime example of this zone and often wrap around services are brought into play to address the urgent need.

The red zone is crisis mode and requires an immediate critical emergency response utilizing first responders. An example of this could be a fire in the community or an opioid death.

Highlighting Existing Local Initiatives within Planning Zones

The following section serves to highlight existing efforts, programs, services and initiatives within Greater Sudbury according to the Planning Zones. Many have been extremely beneficial to residents living within our community.



social development

Social Development – Promoting and Maintaining Community Safety and Well-Being

Social development requires long-term, multi-disciplinary efforts and investments to improve the social determinants of health (i.e. conditions in which people are born, grow, work, live, and age, such as education, early childhood development, food security, quality housing, etc.) and thereby reduce the probability of harm/victimization.

Ngo Dwe Waangizjik
“We Are One” Sacred Circle to
provide wisdom, knowledge and
guidance on this community priority

Public Health Sudbury & Districts
staff dedicated to leading and
supporting implementation of
Indigenous Engagement, Racial
Equity, Health Equity, Public Mental
Health and Health Promotion
portfolios; engagement with
community partners

City has a Regional Centre of
Expertise with the United Nations

Seniors Advisory Panel to Mayor &
Council's Keeping Seniors Warm
Initiative clothes 100 older adults in
need of winter clothing each year

City of Greater Sudbury obtained
Age Friendly Designation and is also
recognized for this work by the World
Health Organization

Housing Developments:
1. Spark street Housing for
Older Adults
2. Home for Good
3. Supportive Housing with HSN

Homelessness Network

Public Health Sudbury & Districts has
implemented an Indigenous Engagement
Strategy– Four Strategic Directions:

1. Inform our work through Indigenous
community
2. Engage in meaningful relationships to
support Indigenous community well-being
3. Strengthen our capacity for a culturally
competent workforce
4. Advocate and partner to improve health

City of Greater Sudbury held a Homelessness
Community Consultation January 2021 having
450+ residents and agencies responding to
this call. The following themes arose;

1. Housing
2. Provision of Food, Shelter, and Support
Services
3. Priority Populations
4. Addiction and Mental Health
5. Enforcement
6. Leadership
7. Communication and Collaboration

In response to need for marginalized population needing connectivity to primary care, social, health and leisure services, the City of Greater Sudbury, in partnership with community agencies created a pilot virtual infrastructure project within Greater Sudbury Housing Buildings and local libraries

Futures North, A Network for Youth: Sudbury is one of thirteen communities across Canada chosen to create system-wide solutions by youth for youth as they act upon plans for their future. The overall goal of the initiative is to address barriers youth (15-30) face in pursuing education and employment opportunities within their communities, and to help successfully navigate transitions from youth to adulthood

Continuum of Care: Sudbury Manitoulin CAS and Compass are leading efforts to better serve children and youth in their own community with enhanced wrap-around services that support them remaining with their families. To achieve this, community agencies are engaged in planning for community based residential and treatment options for children and youth who present with complex special needs to remain in their community and connected to their families

Public Health Sudbury & District's Public Health Mental Health Action Framework

The Sudbury Local Immigration Partnership hosted within the municipality has developed a new strategic plan that supports the proper settlement and retention of newcomers in our community. Over six different tables will support education, mental health, economic integration, anti-racism efforts and many other matters regarding newcomers

social development

prevention

Prevention – Proactively Reducing Identified Risks

Planning in the area of prevention involves proactively implementing evidence-based situational measures, policies or programs to reduce locally identified priority risks to community safety and well-being before they result in crime, victimization and/or harm.

Community Drug Strategy, a collaborative effort with key community stakeholders, co-chaired by Public Health Sudbury & Districts and Greater Sudbury Police Service – bringing together partners from across various sectors within four pillars:

1. Health Promotion
2. Harm Reduction
3. Treatment
4. Enforcement and Justice

PHSWB Panel members are leading the Compassionate City Designation by developing a 'Campaign for Hope' to address COVID-19 isolation, loneliness with the overarching goal of bringing a message of hope to all residents

United Nations World Research Project, lead by the City of Greater Sudbury, brought world leaders in education together to determine best practices to Reorientate Education for Indigenous and Marginalized Youth

Early Years Truth & Reconciliation Project

Ontario Health Building Virtual Infrastructure in Housing and Libraries

Local Immigration Program creates settlement services

Districts of Sudbury and Manitoulin and the City of Greater Sudbury have collaborated to plan Transitional Housing for Youth, to support sustained, independent and secure housing

The Sudbury Local Immigration Partnership has been working with black youth driven organizations to deliver allyship training in order to better support the BIPOC members facing racism and discrimination

Suicide Safer Network

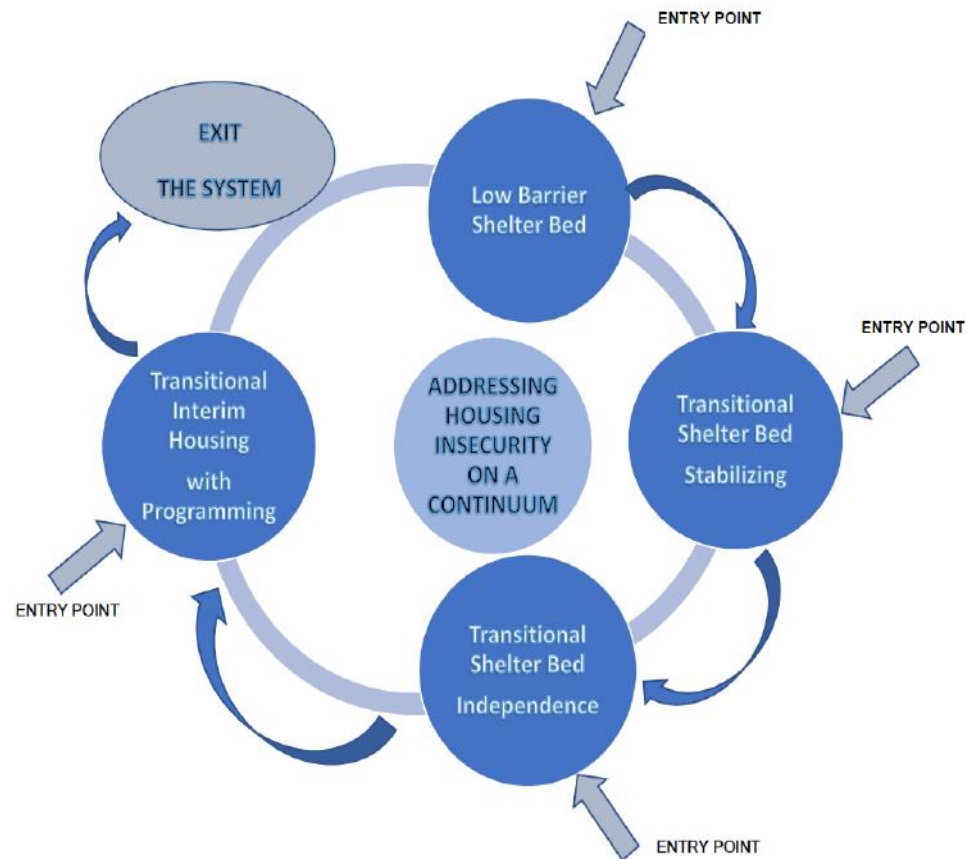
Age-friendly Strategy Report Card

<https://pub-greatersudbury.escribemeetings.com/filestream.ashx?documentid=38672> <https://pub-greatersudbury.escribemeetings.com/filestream.ashx?documentid=38672>

<https://www.greatersudbury.ca/live/covid-19-coronavirus/seniors-vulnerable-people/resource-guide-for-seniors/>

Model for Addressing Housing Insecurity for Youth

The Children's Aid Society of the Districts of Sudbury and Manitoulin



risk intervention

Risk Intervention – Mitigating Elevated Risk Situations

Planning in the risk intervention area involves multiple sectors working together to address situations where there is an elevated risk of harm, stopping something bad from happening, right before it is about to happen. Risk intervention is intended to be immediate and prevent an incident, whether it is a crime, victimization or harm, from occurring, while reducing the need for, and systemic reliance on, incident response.

Under the leadership of the Canadian Mental Health Association, The City of Greater Sudbury's Rapid Mobilization Table identifies and collaboratively mitigates risk for people in crisis, reducing the need for incidence response. The RMT actively collects risk data to inform the Population Health, Safety and Well-Being Panel, and other collaborative action tables

The Canadian Mental Health Association has developed and implemented several programs to assist homeless and precariously housed individuals and families:

- Housing Case Management Supports
- Residential Housing Supports
- Harm Reduction Home
- Off the Street Shelter

Violence Threat Risk Assessments

HSN Virtual Emergency Medicine Pilot Project

Community Paramedicine Programs in Greater Sudbury Housing Projects and to allow patients to age in place at home

The City of Greater Sudbury and Health Sciences North partnership for an Assertive Community Treatment Team and supportive housing options for the city's most marginalized homeless population

Ongoing planning by Public Health Sudbury & Districts and Réseau Access for a Supervised Consumption Service in the downtown core

The Sudbury Local Immigration Partnership will be developing an Anti-Racism tool kit to support the BIPOC community in regards to the best approaches to take when facing acts of racism and discrimination

The Sudbury District Human Services & Justice Coordinating Committee (HSJCC) is comprised of a number of partners in the social services and justice sector. It reports up to the North East Regional HSJCC, as well as the Provincial HSJCC. It recognizes the need to coordinate resources and services and plan more effectively for people who are in conflict with the law. Priority consideration is for people with a serious mental illness, developmental disability, acquired brain injury, drug and alcohol addiction, and/or fetal alcohol syndrome. Locally, this committee establishes an annual work plan and works together in five areas: Collaboration & Collaborative Care, Training and Professional Development, Knowledge Translation & Exchange, Direct Service, Service & System performance, and Information management.

Incident Response – Immediate Response to Urgent Incident

This area represents what is traditionally thought of when referring to crime and safety. It includes immediate and reactionary responses that may involve a sense of urgency, like police, fire, emergency medical services. An example is a child welfare organization taking a child out of their home, a person being apprehended under the Mental Health Act, or a school principal expelling a student.

City of Greater Sudbury's Community Development Department has partnered extensively with the community to provide enhanced supports to the vulnerable as an integral part of the City's pandemic response. This included:

- a number of action tables for homelessness and responding to COVID-19 outbreaks
- a seat at the sequencing table for vaccination planning
- community response to COVID-19 for older adults
- coordinating a community response for marginalized populations

A Crisis Rapid Mobile Response Team has been created by Greater Sudbury Police Service and Health Sciences North to provide 24/7 Crisis Intervention service which is a wrap-around response and support high risk incidences

During the winter months, the City of Greater Sudbury worked with YMCA of Northeastern Ontario, Sudbury Action Centre for Youth and Le Centre de santé communautaire du Grand Sudbury to open Warming Centres for the homeless population

Highest number of opioid overdose deaths in the province of Ontario

Safe Supply offered on site at the Supervised Isolation Centre

The Mayor's Downtown Task Force was put in place in late fall 2020. Its role is to identify existing service gaps, leverage existing strategies among partner organizations, build organic partnerships and engage with the public

The Sudbury Local Immigration Partnership is working with different partners to develop a proper public response to issues of racism and discrimination. This tool will support BIPOC members to properly inform authorities about matters of racism and discrimination

**incident
response**

Critical Success Factors for the Plan

Based on the direction from the Office of the Solicitor General, the following critical success factors are to be taken into consideration when developing a plan:

Strength-Based: The actions to be utilized to address the current needs and gaps are evidence-based and use strength-based approaches for successful outcomes. An example of strength-based approaches was used in local Francophone schools to build resiliency. Great success was seen within their students in being able to address stressful encounters and issues.

Risk-Focused: The yellow zone of this report is a flag that there are certain actions that require actions now. This table recognizes the need for a collective approach to address the at-risk individuals to improve life outcomes. The goal is to manage and address the risk areas for those in need to move take an upstream approach into the social and prevention zones. Great examples of this are the Violence Threat Risk Assessment and RMT tables.

Awareness & Understanding: Are critical to any strategy. It is evident that a communications strategy is required to address the lack of knowledge, as well as increase one's understanding of what services and programs are available. The Community Drug Strategy is an example of this.

Highest Level of Commitment: PHSWB Panel members are all executive level leaders within their organizations. They are regular participants and are the decision makers, therefore, are able to address requests from a systems approach level.

Effective Partnerships: Greater Sudbury is known for its unique ability to bring all partners to the table to plan actions to address local needs. An example of this is the Systems Priority Mental Health and Addiction Table where there are over 78 partners working collectively to address mental health and addiction issues at the local level.

Evidence & Evaluation: Identified calls to action from community engagement sessions and local statistics obtained from census, hospital, Public Health, police, school data, along with indicators and outcomes have been incorporated on pages 25 - 31.

Cultural Responsiveness: The PHSWB Plan includes a variety of advice and guidance from community partners to ensure that we are meeting the diverse needs of the community. Agencies such as, Ngo Dwe Waangizjig – Sacred Circle and Francophone representation, with over half of the Panel being Francophone, will work closely with the local immigration planning table to ensure diverse and culturally appropriate responses/actions are requested for advice on the needs, gaps and issues facing our residents.



Figure 2: Critical Success Factors

World Council on City Data (WCCD) Update

This is part of the Data for Canadian Cities Pilot Project supported by the Ministry of Infrastructure and Communities. We are working with WCCD on a communications plan to announce the great news.

“Made in Sudbury’s Nickel Model of Shared Community Commitment”

Greater Sudbury Police Service developed the ‘Nickel’ Model of Shared Community Commitment and hosted a number of information-sharing meetings in every ward to share this model and to explain the importance and relevance of the various pieces that contribute to safety and well-being of individuals. It notes that all areas revolve around a ‘victim-focused’ approach being the core of work and planning. The following are explanations of what each area’s responsibility is, keeping in mind that police “cannot arrest their way out of this”.

Champion Community Safety, Security and Wellness

As champions at every level, our shared responsibility is to work across the broader community to build and maintain relationships among key agencies and community-based partners, to communicate core concepts of our shared commitment and to be ambassadors.

Initiate and Partner to Achieve Positive Change in Community Outcomes

“Our Shared Commitment to Community Safety and Well-being” goes beyond addressing crime and victimization and their immediate risk factors. Effective and economically sound systemic changes are needed in the community to build and sustain better lives and living conditions for more of our citizens, especially our youth and the most marginalized members of our population.

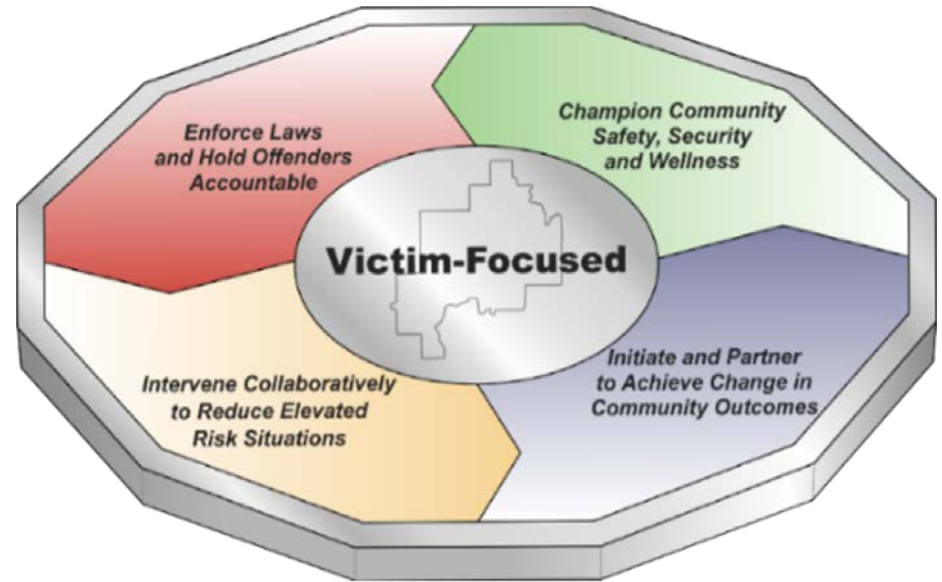


Figure 3: ‘Nickel’ Model of Shared Community Commitment

Intervene Collaboratively to Reduce Elevated Risk Situations

This Plan is largely about stopping crime and victimization before they happen. Through collaboration across agencies to recognize elevated risk situations faced by individuals, families or locations; multiple partners are able to mobilize effective and quick actions in response, collaboration, intervention to elevated risk situations.

Enforce Laws and Hold Offenders Accountable

Police, justice, corrections officials and others have vital roles to play in enforcing the law, suppressing crime and disorder, holding offenders accountable for their actions, and thus keeping our streets and neighbourhoods safe. Working together, appropriate agencies will continue this focus through; effective deterrents, targeted enforcement strategies, effective investigations, successful prosecutions and ensuring rehabilitation of offenders. Consideration will be given using an equity lens and will be mindful of potential biases when implementing targeted enforcement strategies.



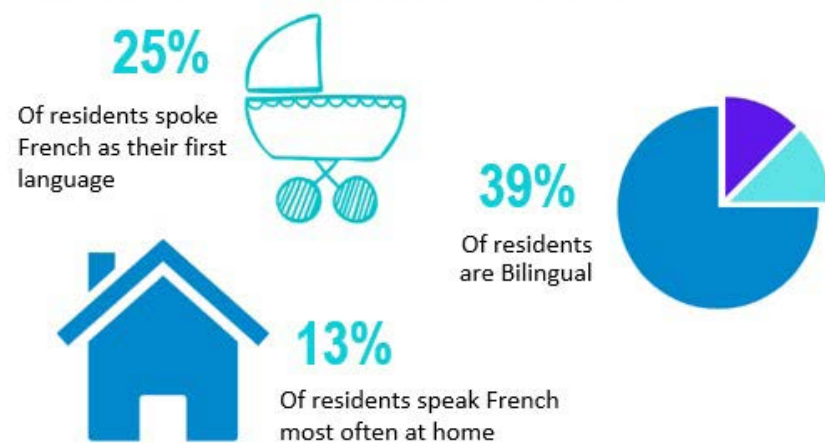
How Population Health Blends with Community Safety & Well-Being

Population health has been defined as, "an approach to health that aims to improve the health of the entire population and to reduce health inequities among population groups. To reach these objectives, a population health model looks at and acts upon the broad range of factors and conditions that have a strong influence on our health."

(<http://www.phac-aspc.gc.ca/ph-sp/approach-approche/index-eng.php>)

To ensure that collective community efforts were not lost from over a decade of prior work done towards sustaining a healthy community and working to improve overall population health by implementing upstream approaches to health and well-being, the PHSWB Panel decided to align the historical efforts of Population Health into the newly mandated Community Safety & Well-Being Plan. Collective efforts from partners continue and are included in the Calls to Actions listed within the Plan.

Francophone Population in Greater Sudbury



Source: 2016 Census of Canada, Statistics Canada

Using Health Equity Lens

The City of Greater Sudbury's PHSWB Plan applies a health equity lens to identify risks and opportunities to improve community safety and well-being. This plan considers existing disparities in health among community members and seeks to create opportunities for all to achieve optimal and equitable health/wellness. With these factors in mind, Greater Sudbury's Plan includes the following key principles:



Community-engaged approach to identifying strengths, risks and opportunities for improved services and systemic reform to achieve better outcomes



Application of evidence-based and most promising practices derived from multiple human service disciplines



Collaboration among multiple partners to optimize efforts and resources and to identify and bridge gaps and/or duplications across all human services systems involved



Upholding individual privacy while also making the best use of multiple data sources and integrated analytics to identify high value opportunities for impact



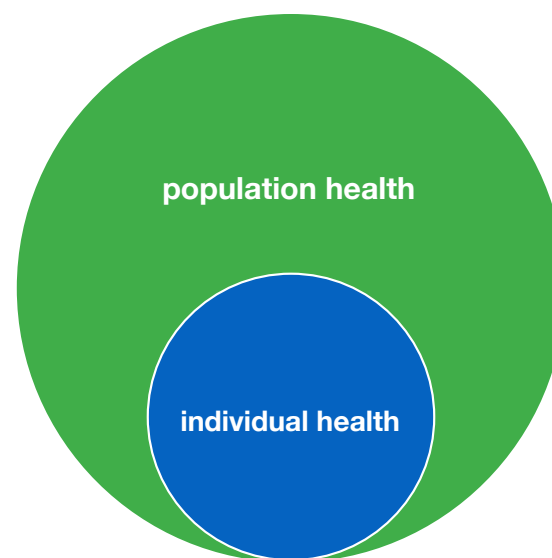
Strength-based approaches designed to build upon community cohesion and individual and family assets



Informed and guided by the lived experience of individuals and families whenever and wherever possible

The municipality has worked collectively with many partner organizations to gather data to inform the actions. As well, there have been several consultations on the various Calls to Action and individually to address specific priorities to create working groups to bring the actions to the forefront. Examples of such consultation include:

- PHSWB Panel (4 meetings)
- Large Community Consultations on Initial Priorities (3 consultations)
- CSWB Community Consultation (2)
- Seniors Advisory Panel (monthly)
- Homelessness Consultation (2 sessions plus individual feedback opportunities through the City's Over to You portal)
- Violence Threat Risk Assessment Steering Committee (monthly)
- Sudbury & District Restorative Justice (monthly)
- Trauma Event Systems Planning (monthly)
- Canadian Municipal Network on Crime Prevention (monthly)
- Ontario Municipal Social Services Association Dealing with CSWB (monthly)
- Homeless Network (monthly, weekly during COVID-19) individual presentations were made to the 16 Community Action Networks
- Age Friendly Working Group (monthly), etc...



The City owns some data associated with municipal service delivery, including homelessness and housing and have partnered extensively with community partners to share data. All of the meetings, the community consultations and data sharing helped to inform community priorities. We will create action tables where needed to implement activities to address gaps that partners identified. There are several strategies and tables currently in place, such as; Community Drug Strategy, Homelessness Network and Mental Health & Addictions Tables, therefore we do not want to overlap but will leverage work already ongoing to address the gaps and risks. The individual action tables will be accountable for determining indicators and outcomes as part of the City's living and breathing Plan.



Governance Structure

PHSWB Panel

Mayor and Council struck the governance structure for the development and implementation of the PHSWB Panel on February 4, 2019. The Panel is based on the presence of a system planning accountability. A copy of the Terms of Reference are found in the link below. Its major role has been to advise and assist Council in the development and implementation of an inclusive and diverse Greater Sudbury PHSWB Plan that meets the legislative requirements under the Safer Ontario Act, 2018, and that is in alignment with the City's strategic priorities.

<https://www.greatersudbury.ca/city-hall/get-involved/join-a-local-board-committee-or-advisory-panel/advisory-panels/population-health-safety-and-well-being-advisory-panel/>

<https://www.greatersudbury.ca/city-hall/reports-studies-policies-and-plans/report-pdfs/2019-2027-strategic-plan/>

Community Tables/Networks

The community has been working at community safety and well-being since 2014, and a number of working groups, tables and committees were already in place. The Panel has leveraged and continues to depend on the work of these many identified groups. As further foundational support, the Panel confirmed the need to sustain local, collaborative mechanisms for responding to risk and understanding risk data. Community Mobilization Sudbury is an example of one of these tables, which is an excellent community resource and which plays a critical role in addressing individual situations that are acutely elevated, and where the clients are at risk of harm to themselves or others. These tables and networks are the foundation of PHSWB work and will be carrying out the work identified in this Plan.

How the Plan Works

As stated early on, Greater Sudbury's table consists of executive leaders from a variety of sectors within community as required by the Ontario mandate. These community leaders play pivotal roles in how human health resources can be accessed and united to form collaborative responses.

They are familiar with and use an interdisciplinary approach to priorities and issues faced within the community and assist with bringing the issues back to the tables for which they belong or are accountable for to ensure effective and collective solutions are made to assist with safety and well-being. At times, leaders may be able to address some issues within their organizations without having to go to any partners for assistance but in many cases, a collaborative approach is necessary. Our partners and residents are a requirement for the success of the PHSWB Plan and many are grass root organizations that often identify the issues and bring them forward for a multi-approach response. All decisions brought forward are required to have an evidence based element, and the Panel will leverage the experts around the table (and outside of the table if needed) to address situations at hand. The Evidence is determined through a 'Data Consortium' that works to review data from our local hospital (Health Sciences North), Public Health Sudbury & Districts, police (Greater Sudbury Police Service), City, RMT, VTRA, Restorative Justice Cases, etc. All groups funnel information back up through the Panel for action, and collaboration will report annually to Mayor & Council. Other examples of tables/networks that currently exist and contribute to this Plan include:

- 16 Community Action Networks
- Mental Health & Addictions Table
- Systems Mental Health & Addiction Priority Table
- Suicide Safer Network, Homelessness Coalition
- Housing First Steering Committee, Community Advisory Board on Homelessness
- Community Drug Strategy
- Community Mobilization Steering Committee
- Mayor's Downtown Task Force, Ontario Health Virtual Infrastructure Initiative Committee
- Greater Sudbury Police Service Diversity Committee
- Seniors Advisory Panel to Mayor & Council

- Age Friendly Strategy Working Group
- Early Years Planning Network
- Violence Threat Risk Assessment (VTRA) Table
- Sudbury & District Restorative Justice Table
- Trauma Event Systems Planning Table
- Police Chief's Youth Advisory Council.

Specific to COVID-19, the following tables were created:

- Community Response for Vulnerable Older Adults Responding to COVID-19
- Community Response for Vulnerable Individuals Responding to COVID-19
- Emergency Systems Planning
- Incidence Management Teams
- Community Control Group
- Operations & Logistical Tables
- COVID-19 Sequencing & Vaccination Tables.

Using Statistics to Identify Risks

Statistics such as those found in the infographic below and throughout the PHSWB Plan, is just some ways that the Panel performs information gathering for risk identification for our Plan.



12.8%

**of population living
below the poverty line**

(based on the low-income measure, after tax)



1,005

new immigrants

(who immigrated between 2011-2016)



3.8%

**identify as non-white
visible minorities**



18.4%

of population are older adults

(aged 65+), 2.4% (aged 85+)



7,795

older adults living alone

(aged 65+), 1,305 (aged 85+)



41.5%

active volunteers

we could estimate 67,035 volunteers in CGS

Source for all above is 2016 Census, Statistics Canada

Source: Statistics Canada. Table 45-10-0039-01 Volunteer rate and average annual volunteer hours, by definition of volunteering and age group

City of Greater Sudbury Francophone Population by Neighbourhood

Neighbourhood	French Mother Tongue		French Spoken most often at home	
	Population	%	Population	%
Chelmsford	3,510	51.7%	2,385	35.2%
Rural Rayside Balfour	2,150	51.3%	1,480	35.2%
Azilda	2,190	47.7%	1,430	31.2%
Hanmer	2,680	43.7%	1,550	25.3%
Rural Valley East	1,675	42.1%	905	22.7%
Val Caron, Blezard Valley, McCrea Heights, Guilletville	2,695	41.9%	1,470	22.8%
Val Therese	3,100	40.1%	1,725	22.3%
Rural Onaping Falls	295	33.3%	165	18.6%
Flour Mill	2,550	28.6%	1,225	13.7%
NE Townships	125	26.6%	45	9.6%
Dowling	525	26.4%	260	13.1%
New Sudbury	5,935	25.8%	2,950	12.8%
Coniston	520	24.6%	175	8.3%
Falconbridge-Skead- Wahnapiatae	1,070	24.0%	430	9.7%
Minnow Lake	2,470	23.4%	985	9.3%
SE Townships	220	21.0%	75	7.1%
Garson	1,380	20.8%	565	8.5%
Donovan	890	16.9%	305	5.8%
Capreol	455	15.6%	155	5.3%
West End	1,195	14.8%	425	5.2%
Kingsmount-Downtown-Bell Park	965	14.7%	385	5.9%
Levack-Onaping	260	13.9%	75	4.0%
South End	2,465	13.6%	1,000	5.5%
Rural South End	480	12.7%	225	5.9%
Rural Walden	510	10.2%	160	3.2%
Naughton	85	9.3%	20	2.2%
Copper Cliff	200	8.1%	40	1.6%
Lively	345	7.2%	90	1.9%

Source: 2016 Census of Canada, Statistics Canada

Summary of Ranking of CGS Neighbourhoods for Community Hub Planning, can be found in below highlighting neighbourhoods with health equity challenges

Ranking of CGS Neighbourhoods for Community Hub Planning

Neighbourhood	Child Population (0 to 14)	Proportional Score ¹	Senior Population (Aged 65+)	Proportional Score ²	Population in Low Income	Proportional Score ³	Population with Aboriginal Identity	Proportional Score ⁴	Access to Transit ⁵	Deprivation Index ⁶	Number of Calls received to EMS (2013-2016)	Proportional Score ⁷	Overall Rankings ⁸
1 New Sudbury	3,390	100	5,515	100	3,145	93	2,205	100	0	100	16,976	100	85
2 South End	2,555	75	4,315	78	1,980	59	985	45	0	100	16,768	99	65
3 Flour Mill	1,290	38	1,550	28	3,365	100	1,355	61	0	100	5,739	34	52
4 Minnow Lake	1,785	53	1,895	34	1,610	48	1,045	47	0	100	5,554	33	45
5 West End	1,125	33	1,485	27	1,575	47	845	38	0	100	6,582	39	41
6 Kingsmount-Downtown-Bell Park	715	21	1,230	22	1,275	38	480	22	0	100	13,547	80	40
7 Chelmsford	1,095	32	1,320	24	900	27	725	33	50	100	2,629	15	40
8 Rural Rayside Balfour	685	20	615	11	245	7	525	24	100	100	1,454	9	39
9 Hanmer	1,195	35	805	15	535	16	700	32	25	100	2,318	14	34
10 Donovan	695	21	770	14	1,520	45	830	38	0	100	2,614	15	33
11 Garson	1,310	39	770	14	585	17	725	33	0	100	2,093	12	31
12 Capreol	495	15	535	10	310	9	185	8	50	100	2,499	15	30
13 Rural Walden	735	22	1,075	19	225	7	285	13	100	0	1,162	7	24
14 Rural Valley East	640	19	565	10	255	8	350	16	100	0	1,222	7	23
15 Falconbridge-Skead-Wahnapitae	660	19	705	13	290	9	445	20	75	0	3,448	20	22
16 Rural South End	590	17	660	12	180	5	190	9	100	0	1,005	6	21
17 Lively	885	26	755	14	225	7	300	14	75	0	2,103	12	21
18 Val Therese	1,485	44	1,125	20	295	9	705	32	25	0	1,833	11	20
19 Dowling	320	9	405	7	130	4	235	11	100	0	1,535	9	20
20 Copper Cliff	385	11	465	8	225	7	120	5	0	100	1,303	8	20
21 Levack-Onaping	300	9	375	7	255	8	240	11	100	0	847	5	20
22 Val Caron, Blezard Valley, McCrea Heights, Guilleville	1,190	35	950	17	430	13	480	22	25	0	2,848	17	18
23 Azilda	735	22	790	14	255	8	500	23	50	0	1,706	10	18
24 SE Townships	145	4	180	3	80	2	90	4	100	0	274	2	17
25 Rural Onaping Falls	105	3	145	3	45	1	60	3	100	0	547	3	16
26 Coniston	345	10	390	7	185	5	210	10	75	0	850	5	16
27 NE Townships	50	1	100	2	35	1	25	1	100	0	127	1	15
28 Naughton	150	4	145	3	20	1	90	4	75	0	188	1	13

Notes:

¹Score 0 to 100, where higher score indicates more children.

²Score 0 to 100, where higher score indicates more seniors.

³Low income based on the Low-income measure, after tax (LIM-AT). Score 0 to 100, where higher score indicates more low income.

⁴Score 0 to 100, where higher score indicates more individuals who identify as aboriginal.

⁵Access to transit is based on the frequency of transit service to the neighbourhood. Score 0 to 100, where higher score indicates less access to transit.

⁶The deprivation index considers: achievement of a high school diploma, the population/employment ratio, average income, individuals living alone, marital status of either separated, divorced, or widowed, and single-parent families. A Score of 100 indicates a high level of deprivation exists in the neighbourhood.

⁷Score 0 to 100, where higher score indicates more calls to EMS.

⁸The overall ranking is the average scores of all variables, where higher score indicates more vulnerability and higher need for a community hub.

Sources:

Child & Senior population, LIM-AT, Aboriginal Identity: 2016 Census of Canada, Statistics Canada

Deprivation Index: Institut national de santé publique du Québec (2006)

EMS Calls: Emergency Services, City of Greater Sudbury. Calls represent total # received between 2013-2016

Prepared by the Analytics & GIS Section, Community & Strategic Planning

15-Dec-17

Community Priorities

The PHSWB Advisory Panel, in consultation with community stakeholders, selected four priorities (Indigenous, Mental Health & Addictions, Housing and Compassionate City) to guide and direct the actions required. Within the PHSWB Plan, it will be a priority to establish a sustainable model of backbone support for Community Mobilization Sudbury (Rapid Mobilization Table - RMT), the Violence Threat Risk Assessment (VTRA) and Restorative Justice tables. As an integral component to the PHSWB planning, these tables continue to identify and collaboratively mitigate risk in Greater Sudbury, while collecting risk data in order to inform the PHSWB Panel.

The COVID-19 pandemic threw our city into a tailspin like the rest of the world. A number of agencies and services struggled to meet the needs of our most marginalized population, thus exaggerating current listed priorities around mental health, addictions, housing and homelessness during this pandemic. There were a number of community outbreaks within Greater Sudbury Housing, our homelessness sector and the community at large forcing an all hands on deck approach to keep our residents safe while meeting immediate needs.

Panel Membership Vote on Top Priorities

On September 23, 2020, the Panel voted on its first priority areas of focus, which were; Indigenous, Mental Health & Addictions, Housing and a Compassionate City. The PHSWB Plan will highlight community priorities, our calls to action, key indicators of actions and current, expected and potential outcomes of our actions.



Indigenous Relations

There is a sense of shared responsibility among elders, family, educators, staff and branches of local government to promote an open dialogue with the general community that will facilitate the preservation of Indigenous cultures and customs. Areas for improvement are; safe public spaces, inclusiveness, and meaningful employment opportunities. Emphasis on educational tools such as Indigenous teachings in school curricula, integration of symbolism in public spaces, and an increased usage of Indigenous languages are encouraged.

The City engaged members of the Ngo Dwe Waangizjig 'We Are One' Urban Indigenous Sacred Circle to advise on this area of the PHSWB Plan. The following has been included based on organizational responses;

The City is a non-Indigenous organization that is not able to address Indigenous issues without the advice of Indigenous partners. In order to effectively address these issues, the City must partner with Elders and local organizations such as; N'Swakamok Native Friendship Centre, Shkagamik-Kwe Health Centre, Nogdawindamin Family & Community Services, other Urban Indigenous Sacred Circle partners and two First Nation communities, to directly meet community needs. This would allow the City to offer culturally appropriate services and programs. Culture-based programs have been proven the most successful in addressing Urban Indigenous community needs, which then lead to positive impacts:

- We as a City recognize that we cannot create and offer culture-based programs, as Indigenous leadership is necessary to create, design and implement programs based in Indigenous knowledge and culture.

- Emphasis on educational tools such as Indigenous teachings in school curricula, integration of symbolism in public spaces, and an increased usage of Indigenous languages are encouraged.
- Community-wide awareness of Indigenous history is celebrated. It will be a community-wide effort to achieve reconciliation, and these efforts will help build a brighter future, preserving the importance of family and Indigenous culture.

Community Informed Calls to Action

- Coordinate strategies to ensure preservation/passing of Indigenous cultures/customs.
- Address Indigenous issues in a holistic way across all areas
- Create strategies to improve the integration of existing services with urban Indigenous community-based service providers to meaningfully address the unique needs of urban Indigenous communities.
- Services are ill equipped to address all emergencies, particularly mental health safety checks.
- Indigenous organizations must be meaningfully engaged in initial assessments of community risk. There are different approaches to assessing risk and subsequent crime prevention approaches (i.e. N'Swakamok may focus on holistic approaches to reflect Indigenous values, law and traditions, including the collective responsibility to strengthen the community).
- Indigenous communities understand well-being as multifaceted and linked to individual and collective physical, emotional, spiritual and social balance, therefore, collaboration with Indigenous organizations should not be limited to the 'Indigenous Relations' section, but included in housing and homelessness, health and public health, employment, and more.

- There needs to be more training, and cultural learnings as the City has jurisdiction in many areas of the community which has direct effects on Indigenous residents of Sudbury (i.e. housing and homelessness has a large impact on community safety and well-being). Therefore, commitment to address urban Indigenous needs and work with all Indigenous-lead organizations must be included at every part of the Plan that has direct impacts on Indigenous people.

Indicators

As a critical step in the performance indicators and analysis of the impact of the CSWB, it should include that disaggregated race- and identity-based data is collected and shared with Indigenous organizations to understand if the CSWB plan is effective in meeting the needs of the Indigenous community.

- per cent of schools integrating Indigenous-informed teachings and history into the school curricula
- per cent of community spaces designated to Indigenous youth
- per cent of Indigenous-related items demonstrating symbolism in public spaces

Outcomes

- Increase in schools integrating Indigenous-informed teachings and history into the school curriculums
- Increase of community spaces designated to Indigenous youth
- Increase of Indigenous symbolism in public spaces
- Percentage of non-Indigenous child protection services receiving training/education on Indigenous practices and history Integration of Indigenous practice



Mental Health and Addictions

Although 1 in 5 Canadians may experience mental illness, every member of our community is impacted by mental health. A holistic approach to mental health and addictions support includes; mental health promotion, illness prevention, harm reduction and treatment options. It extends across one's lifespan, ensuring effective, inclusive and accessible supports are available for all. Data from Sudbury's Rapid Mobilization Table (on page 28) highlights significant contribution of mental health and addictions on people's experience of risk and well-being in our community.

There are grim findings in the latest data outcome provided by the Community Drug Strategy around opioid deaths, Greater Sudbury has the highest number of deaths related to opioid overdoses in the province of Ontario. The following is a link to the latest local information: <https://www.phsd.ca/health-topics-programs/alcohol-drugs/community-drug-strategy/research/opioid-surveillance/>

Taking a collaborative and multi-sectoral approach to the identification of priorities and opportunities for action, the PHSWB Plan leverages existing initiatives and planning tables towards a streamlined, coordinated system of care for our community. One which is person-centered, inclusive, and responsive to ever-changing needs and opportunities.

Prior to COVID-19, health and social service systems were stretched, and a local agency, Sudbury & District Restorative Justice, took on the task of reviewing local gaps in services and programs within health and social services, and developed the following document which has now been shared at many tables. The goal of this work was to enable community partners to review the gaps and issues within the community and work together to address the current needs. A copy of this analysis can be found here: <https://docs.google.com/document/d/1ir>

- Housing options that include appropriate mental health and addictions supports for adults and youth
- Resources to support service navigation across the health and human service spectrum

- Collaborative models and approaches for responding to complex needs of children, youth and adults (i.e. situation tables)
- Enhanced, specialized supports to address complex needs locally, including; eating disorders, Rapid Action Addiction Medicine and addictions treatment services for children, youth and adults
- Reduce hospital readmissions for individuals with mental health and addiction issues
- Enhanced access to mental health supports for children, adolescents and youth
- Establish a proactive response to opioid use
- Wellness calls to improve social isolation
- Enhancing dementia care
- Preventable, upstream approaches towards harm reduction
- Build a Supervised Consumption Site/provide safe supply to support those using substances and that we know will reduce deaths/incidents

Indicators

- Percentage of mental health programs promoting awareness and education
- Number of programs promoting awareness and education, unique mental health impacts experienced by Lesbian, Gay, Bisexual, Transgender, Queer or Questioning and Two-Spirit (2SLGBTQ+) community members.
- Number of Indigenous mental health programs promoting awareness and education
- Number of Francophone mental health programs promoting awareness and education
- Number of Indigenous walk-in mental health care services available

- Number of awareness campaigns on harm reduction
- Number of awareness campaigns on alcohol addiction and Fetal Alcohol Syndrome
- Acute care admissions and interventions
- RMT metrics
- Mobile Crisis Rapid Response Team Results
- Number of opioid overdoses/deaths, <https://www.phsd.ca/health-topics-programs/alcohol-drugs/community-drug-strategy/research/opioid-surveillance/>
- Number of naloxone kits distributed
- Number of community drug alerts released to community
- Number of educational and awareness opportunities to decrease/address stigma around mental health which specifically addresses 2SLGBTQ+, racialized, and other community members who experience discrimination and marginalization

Outcomes

- Reduction in individuals of all ages requiring urgent/crisis mental health supports
- Increase in programs promoting mental health awareness
- Increased awareness of mental health impacts experienced by 2SLGBTQ+, racialized individuals, and other community members who experience discrimination and marginalization.
- Reduction in fatal and non-fatal overdoses
- Increase in traditional healer/elder walk-in mental health care
- Reduced death by suicide and increased awareness and education on suicide prevention

- Reduction in number of children and youth having to leave their community and their families because their needs can be met in their home community.
- Reduction in emergency room revisit rates and psychiatric patient admission rates
- Reduction in mental health police apprehensions

The infographic below highlights data captured at RMT. It includes a summary of the situations of elevated risk that were responded to by the RMT as well as the nature of risk factors/complexity experienced by those supported by RMT. It is one example of identified risk factors that were determined by multiple community agencies.

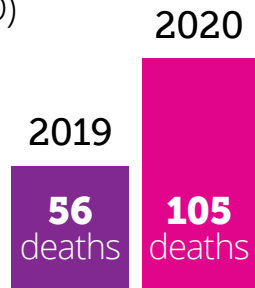


IMPACTS OF THE OPIOID CRISIS 2020



DEATHS

Public Health Sudbury & Districts
(PHSD)



Death rate per 100,000 people

Ontario: 16.4



PHSD: 52.4



PHSD has the highest rate of deaths related to opioids in the province of Ontario.



*2020 death statistics are preliminary

EMS CALLS

Greater Sudbury paramedics responded to **683** suspected opioid-related incidents.

EMERGENCY VISITS

Health Sciences North had **562** visits to the emergency department for suspected accidental overdoses.

NALOXONE

Agencies and pharmacies in Sudbury & Manitoulin districts distributed **22,568** doses of naloxone.

<https://www.phsd.ca/health-topics-programs/alcohol-drugs/community-drug-strategy/research/opioid-surveillance/>

Housing

Whether it is an affordability model to suit seniors on pension, increased support and assistance for first time homebuyers, transitional housing, or support for the homeless and/or precariously housed, there is a need for more affordable and appropriate housing. The City currently has 3,881 units in its portfolio. As of December 31, 2020, there were 1,033 households on the centralized wait list. Due to the pandemic, the number of households housed is half of what it is normally due to the fact that tenants were not moving and/or evictions could not be enforced (i.e. in 2019, 504 households were housed, while in 2020, 338 households were housed).

Homelessness continues to be on the City's radar especially during COVID-19. City and partners joined forces to bring Warming Centres to the local YMCA and the Sudbury Youth Action Centre while expanding hours with Centre De Sante's program at 199 Larch Street. The Mayor also called partners to form a Downtown Task Force to address social disorder in the area while assisting those individuals in need. A homeless community consultation was held in January 2021 receiving feedback from over 430+ residents and agencies.

Emergency Shelter for Past Three Years:

This infographic demonstrates the current situation specific to emergency shelter use. A noted decrease in people who used emergency shelter beds can be seen over the years. Reasons for the decline include a move by the Province in 2018-19 to place a moratorium on evictions for a time. There were delays with the landlord and tenants board, therefore fewer people becoming newly homeless. Also, due to the COVID-19 pandemic, fewer people were travelling between communities due to the shut down, and some people simply chose to live outdoors rather than stay in a shelter due to COVID-19 fears.

2018	2019	2020
831 people used emergency shelter bed	807 people used emergency shelter bed	782 people used emergency shelter bed
21,593 emergency shelter bed nights used in total	22,910 emergency shelter bed nights used in total	16,263 emergency shelter bed nights used in total



Rapid Mobilization Table Agency List (January 2020)

AGENCY	
Alzheimer Society	Monarch Recovery Services
Behavioural Supports Ontario (BSO)	NE LHIN Home & Community Care
Children's Aid Society - Sudbury Manitoulin (CAS)	NISA
City of Greater Sudbury	Nogdawindamin Family & Community Services
City of Greater Sudbury Paramedic Services	N'Swakamok Native Friendship Centre
CMHA Sudbury/Manitoulin	Ontario Aboriginal Housing Services
Conseil scolaire catholique du Nouvel-Ontario	Rainbow District School Board (RDSB)
Conseil scolaire public du grand-nord de l'Ontario	Reseau Access Network
Greater Sudbury Housing Corporation (GSHO)	SACY
Greater Sudbury Police Service	Shkagamik-Kwe Health Centre
Health Sciences North	Sudbury & Area Victim Services
Health Sciences North - Safe Beds Program	Sudbury Catholic District School Board
Homelessness Network (Intake)	Sudbury Community Service Centre
MCCSS - Ontario Disability Support Program	Sudbury Counselling Centre
MCCSS - Youth Probation	Sudbury District Nurse Practitioner Clinics
Ministry of the Attorney General - Office of Public Guardian & Trustee	Sudbury & District Restorative Justice
Ministry of the Solicitor General - Adult Probation and Parole	Compass/Boussole/Akii-Izhinoogan

Calls to Action

- Provide support for the development of affordable, sustainable, available and safe housing
- Coordinate efforts to reduce homelessness - development of a coordinated strategy to wrap services together with housing solutions to reduce the risk of homelessness in the City of Greater Sudbury
- Coordinate efforts to reduce homelessness in the City of Greater Sudbury through the development of a coordinated strategy to wrap services together with a phased housing approach that will better sustain an individual's progress out of homelessness

Indicators

- Percentage of city population living in inadequate housing
- Number of affordable houses available
- Percentage of income going towards rent/housing
- Number of homeless per 100 000 population
- Total number of households
- Persons per unit
- Vacancy rate
- Waiting list numbers

Outcomes

- Reduction in homelessness
- Stable, appropriate housing options
- Transitional and supportive options
- Reduced number of youth living in precarious housing arrangements

Compassionate City

“A compassionate city is an uncomfortable city! A city that is uncomfortable when anyone is homeless or hungry. Uncomfortable if every child is not loved and given rich opportunities to grow and thrive. Uncomfortable when as a community we don’t treat our neighbors as we would wish to be treated.”

Karen Armstrong, Founder of the global movement, The Charter for Compassion

A Compassionate City is a community that has an inclusive society and neighbourhoods. It needs to have programs, services and infrastructure that are welcoming, and supportive to all residents and newcomers. It has neighbourhoods that are safe, connected, accessible, green and playful. Panel Members are leading the call to officially have the City of Greater Sudbury deemed a ‘Compassionate City’. Partners are working collaboratively to build a City that is friendly and welcoming to all! During COVID-19, a need for kindness and compassion was identified and partners have been creating and posting uplifting messages for everyone to read and pay forward.

Calls to Action

- Create opportunities for openness and positive communication to increase compassion for others
- Develop and support community response to anti-racism initiatives by increasing knowledge and understanding about types of stigma
- Continue to identify and respond to social inequities and impacts to vulnerable/marginalized populations
- Create opportunities for decision makers, planners, community leaders to hear more directly from vulnerable and marginalized populations in order to be able to identify social inequities and understand their impact
- Use technology to identify and develop solutions for neighbourhoods that face amplified socio-economic challenges

- Promote an inclusive, open-minded and accepting community by empowering and educating people to break down barriers, recognizing that privilege held by those making the decisions is sometimes the barrier to that empowerment. This recognizes the need to recognize our privilege and that until we do we may be deciding on what is inclusive, what is open-minded and how we empower and educate all through a privilege lens – not truly impacting but in fact continuing to perpetuate.
- Promote Public Health Sudbury & District’s Allyship Campaign which includes workshops open to anyone, to increase awareness of equity and inclusion, and support diversity
- Leverage the work of the Sudbury Local Immigration Partnership to secure a more welcoming and open community for newcomers

Indicators

- Percentage of city population living below national poverty line
- Population demographics
- Percentage of population that are new immigrants
- Number of university students per 100 000 population
- Percentage of students completing primary education: survival rate
- Percentage of students completing secondary education: survival rate
- Measure of belongingness and well-being
- Education rates

Outcomes

- Increase in secondary and post-secondary graduates
- Increased percent of volunteers
- Adopt measure of well-being
- Age-friendly designation
- Ensure newly created public spaces are friendly and welcoming



How the Success and Impact of the PHSWB Plan will be Measured and Reported

We will:

- Seek out people's stories and perspectives in order to fully understand community data and the impact of our effects on community safety and well-being.
- Create multiple and flexible opportunities for people to share their stories and provide their input. We will honour the stories we hear, acknowledging their value alongside other forms of data and evidence.
- Apply an equity lens to the identification of risks and opportunities to improve community safety and well-being.
- Review community norms, policies and programs that impact different people in different ways. This plan will consider existing disparities in health and well-being among community members and seek to create opportunities for all to achieve their optimal health and wellness.
- Ensure goals and objectives are reflected in community and that community initiatives contribute to PHSWB and incorporate common outcome measures.
- All members will track and report related risk factors back to the PHWSB Panel which will be reported back to Mayor and Council annually through a formal Council report.

Path Moving Forward

The City of Greater Sudbury and partners are committed to collaboratively removing the barriers that negatively impact the health, safety and well-being of our community by putting this Plan into full action. Actions are inclusive of data obtained from health, social, police and other organizations. It will also allow us to measure and evaluate collective actions and ensure they are moving in an upstream proactive direction to improve overall population health at both an individual level and a community level.

Once the plan has been approved by Mayor & Council, it will be publicly posted on the City's website, and hard copies of the Plan will be made available to the public should anyone request one. This Plan will be revisited and revised according to the issues faced and actions taken on an ongoing basis as it is a living and breathing document, and will be formally updated and sent to the Office of the Solicitor General every four years as per *Section 151.1 of the Police Services Act*.



PHSWB Plan Community Contributors



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