



Report To:	Manitoulin-Sudbury DSB Board
From:	Donna Moroso, Director of Integrated Social Services and Rhonda McCauley, Social Housing Program Supervisor
Date:	May 26, 2011
Re:	Supportive Housing Issue Report - A Housing First Approach

Report:

Purpose

The purpose of this report is to inform our DSB Board Members of pertinent information with respect to the Role of Service Managers as it pertains to Supportive Housing.

Background

In order to provide flexibility within the application/waitlist process that recognized local need, diversity and demographics of the local clientele the following amendments to the SHRA were legislated: "Changes to the Social Housing Reform Act, allowed regulations to be used to give Service Managers, Lead Agencies, or Supportive Housing Providers the ability to utilize specified waiting list criteria for a specified type of special needs housing. These applicants would be listed on a subsidiary waiting list."

Moreover, Service Managers were given flexibility from the Ministry of Municipal Affairs and Housing (MMAH) upon devolution through the Social Housing Reform Act (SHRA), to develop local eligibility rules only where prescribed by the province in regulation.

When a Service Manager does not develop a local policy, the Provincial Standard is used.

The Special Priority Category is mandated by Provincial Legislation as a priority ranking category on all Housing Providers' internal and centralized waiting lists. Victims of Family Violence are ranked above all other chronological applicants. A Victim of Family Violence is the only priority category used by the Manitoulin-Sudbury DSB.

Objectives

The primary object of the housing program is to supply safe, adequate and affordable housing to residents of our communities. Eligibility for Rent-Geared-to-Income housing is stipulated in the Social Housing Reform Act, and tenancy legislation is governed by the Residential Tenancies Act.

When reviewing the needs of our applicants, it is important to mention that within the current application process, there is not a vehicle embedded, that enables a true measure of the need for supportive services or supportive housing. In communities where senior only housing is offered, we may share the same applicants on both waiting lists. Given the proportionate amount of turnover within age-integrated buildings, many seniors find themselves utilizing DSB owned units as transitional units until Senior designated housing becomes available. Otherwise, tenancies are created with local Seniors many of which wish to remain in their home communities.

Tenants are required to be capable of maintaining independent living in their units, but may do so with any required supports so long as they are in place. These supports may include outside agencies such as CCAC, VON, Community Living, Office of the Public Guardian & Trustee, CNIB, Meals-on-Wheels, Red Cross, or Mental Health (alone or in combination).

We as a DSB, Service Manager and Housing Provider facilitate these agencies by providing dedicated laundry times, office space, and common room facilities to support their presence in our buildings.

Challenge

We currently have a stock of

- 288 rental units ranging in size from bachelor to 4 bedroom
- Apartments to single family dwellings.
- Service area is spread across 11 communities, and serves tenants of all ages and family type (single, family & senior).
- Of the 288 units, 3 are fully accessible units

Recently, our Local Health Integrated Networks (LHINs) have approached Service Managers and Housing Providers inquiring about our capacity and capability to assist with alleviating the pressures they are facing with respect to long-term care beds. We agree that many seniors who do not necessarily require full-time nursing care and could be better served by aging at home or aging in place with appropriate supportive services. Furthermore, seniors have a better response to treatment when they remain in their units and economically it makes sense to provide services in DSB units in order to avoid unnecessary health care costs. The following points outline some of the daily costs associated with care:

- \$833 for an acute care bed
- \$126 for a long-term care bed
- \$41 for support services at home
- \$13 for meal delivery

Without services provided by health care support agencies, the challenge for this DSB is an issue of capacity and of funding. Services must be provided to the population already housed in our units. By properly serving our current population additional pressure on the long-term care system can be avoided.

Issues:

- If the DSB is required to modify additional units to meet a tenants supportive housing needs, where would the funding come from for such modifications?
- There would need to be an ongoing commitment from agencies providing supportive housing services to ensure resources are available to meet the needs of tenants.
- If the supportive services are withdrawn or eligibility for services ceases, the DSB would be left with a tenant who may not be capable of living independently and may eventually be asked to terminate their residency because of their inability to live independently.
- Many tenants utilize DSB housing units as transition to Senior-dedicated housing.
- Our DSB only services a small percentage of the Senior population in communities.
- Manipulation of the waitlist to accommodate support service quotas does not work. It puts the DSB at risk of additional costs and loss of rent revenue depending on demand and marketability.

Housing is seriously under-stocked across the province, and waiting lists are only getting longer with our current economic climate. Removing units from areas to dedicate them to supportive services could impact the pressure on waiting applicants, causing them to remain longer on the waiting list. This would impact all applicants, including singles, families and seniors alike.

In municipalities who are fortunate enough to have Hospital Services, waiting lists continue to grow as our population ages, and people migrate to attain services. The DSB continues to struggle with issues pertaining to other supportive housing needs such as those residents who suffer from mental illness, addiction, or both.

Service Managers and Housing Providers alike have always worked efficiently with supportive agencies and various shelters, often going above and beyond to ensure that our tenants are receiving the services they need to maintain their independence.

In the coming months, the focus will drift from a Policy driven approach, to a people-centred approach given the passing of Bill 140 - Strong Communities through Affordable Housing Act, 2011. Since the announcement of the new Bill, Service

Managers and Housing Providers alike are refocusing on the needs of the tenants, and how we as Service Managers and Providers can attain the best outcome for the communities that we serve.

Table 1 illustrates the fundamental shift in the housing mandate.

Social Housing Reform Act	The Strong Communities Through Affordable Housing Act, 2011
<p>Purpose:</p> <ul style="list-style-type: none"> • To provide for the efficient and effective administration of housing programs by service managers. • Characteristics of the download of services to municipalities • Not conducive for progressive development but ideal for maintenance and risk mitigation 	<p>Purpose:</p> <ul style="list-style-type: none"> • To provide for community based planning and delivery of housing and homelessness services with general provincial oversight and policy direction; and • To provide flexibility for service managers and housing providers while retaining requirements with respect to housing programs that predate this Act and housing projects that are subject to those programs • Focus on flexibility for Service Managers and achieving positive outcomes for individuals and families

The challenge for the DSB will continue to be one of resources. As operating agreements expire and federal funding declines service managers will be responsible for the development of housing and homelessness plans. In the DSB context this commitment will extend to all member municipalities.

Conclusion

The Manitoulin-Sudbury DSB as a Social Housing Service Manager and Housing Provider is more than open to engage in discussion with our Local Health Integration Networks and Supportive Service Agencies to ensure the best possible outcome for our residents but we must be cautious with our approach.

The DSB is responsible to ensure that the provision of safe, adequate and affordable housing to the communities we serve continues for all in need.

Reference: [The Strong Communities through Affordable Housing Act](#)