

COMMUNITY PLAN FOR SAFETY AND WELL-BEING

***LANARK COUNTY
AND
THE TOWN OF SMITHS FALLS***

PROGRESS REPORT

2020



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OVERVIEW/BACKGROUND

The process to develop a Community Plan for Safety and Well-being for Lanark County and Smiths Falls began in late 2016. A Steering Committee with representation from the justice, community/youth, health care, social services/housing, victim services, education, Indigenous and local government sectors was established, and consultations and research began. The overall purpose of the plan is to examine assets in the community, assess gaps and develop strategies to enhance the community safety and well-being for residents of Lanark County and Smiths Falls. The development of the plan used frameworks created by the Ontario Working Group and suggested by the Ministry of Community Safety and Correctional Services (now Ministry of the Solicitor General) in order to be consistent with the new Police Services Act requirements.

Consultation included surveys, feedback from agencies through representation at the Lanark County Situation Table and a variety of committees and working groups, focus groups, interviews and statistics. The result was the identification of 12 priority risk areas: mental health, substance use, poverty, housing, transportation, health and well-being, domestic violence and sexual assault, youth and families, seniors, justice, Indigenous considerations and culture and diversity. Issues within each risk area were highlighted, as well as strategies to combat them in the areas of social programming, prevention, risk intervention and emergency response. Outcomes for each of these priority risk areas were established. Progress on the strategies and outcomes is outlined in this document.

In 2018/2019, the plan was adopted by the following municipalities:

Carleton Place
Drummond/North Elmsley
Lanark Highlands
Mississippi Mills
Montague
Perth
Smiths Falls
Tay Valley

It was adopted in principle by Lanark County Council in 2018.

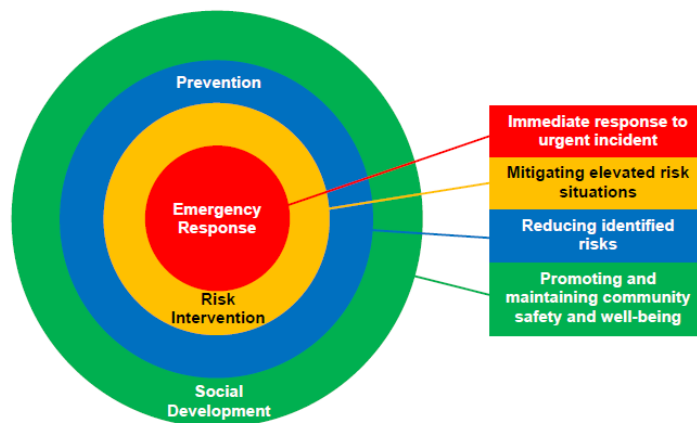
Advisory Committee Members as of December 2020 are as follows:

MEMBERS OF THE COMMUNITY SAFETY PLAN ADVISORY COMMITTEE		
SECTOR	AGENCY	REPRESENTATIVE
Justice	Lanark County OPP	Insp. Karuna Padiachi
	Smiths Falls Police Service	D/Ch. Rick Labelle
	Probation and Parole	Peggy MacLean
Community Organizations & Youth	United Way	Jane Torrance
	Youth	TBA
	Perth & District Community Foundation (Vital Signs)	Bruce Rigby

Health Care	Health Unit	Jennifer Adams/Cathy Del Mei
	Lanark County Mental Health	Rebecca Fromowitz
	LLG Addictions and Mental Health	Shawn Souder
	Rideau Community Health Services	Kelly Barry
Social Services (includes Housing)	Lanark County Social Services	Julie Golding
Victim Services	Lanark County Victim Services	Amber MacDonald
	Lanark County Interval House	Erin Lee
Education	UCDSB	Don Lewis
Cultural Groups	Indigenous	Larry McDermott
Local Government	Lanark County Council	John Fenik
	Town of Smiths Falls	Shawn Pankow
	Plan Coordinator	Stephanie Gray

This plan is a living/working document that will serve to guide the advisory committee and working groups for each risk area. The advisory committee meets to provide progress updates, with reporting to municipalities and stakeholders annually. The entire plan will be revisited starting in 2021.

The following pages are a summary of the updates and activities that have taken place up to the end of 2020 for the 12 risk areas in the four zones shown below. The Advisory Committee has a more detailed workplan outlining updates to activities. Each area has a team leader assigned, and several committees and organizations are already working on these and other strategies that support this plan. A few examples include the Successful Aging Advisory Committee, Lanark County Child and Youth Services Collaborative, Planet Youth Lanark County, the Sexual Assault Domestic Violence Advisory Committee, the Human Services Justice Coordinating Committee, the Community Pandemic Response Committee, United For All (United Way), Child and Youth Advocacy Centre Steering Committee, Lanark County Housing Coalition, poverty action and groups with ODSP/Ontario Works, and many more. Outreach to community partners is ongoing.



MENTAL HEALTH (ADULTS, CHILDREN AND YOUTH)

IDENTIFIED ISSUES

1. Wait times
2. Lack of awareness of services
3. After-hours gaps
4. Mental health worker as part of emergency response
5. Sector coordination to strengthen ties between services and improve pathways of care
6. Chronic underfunding of sector (need for more free mental health counselling)
7. Children's mental health (LHIN boundaries, tertiary facility support, after-hours gaps, custody issues/parental alienation, respite services for children and/or parents; extent of curriculum in schools re: mental health)
8. Hoarding

ACTIONS COMPLETED, ONGOING OR UNDERWAY	
Through community partners and 211, clarify and raise awareness about available mental wellness programs, especially when they are under-utilized.	✓
Identify and support local efforts to engage community in education about resiliency; parenting (talking to kids).	✓
Promote/enhance initiatives involving physical activity for mental wellness.	✓
Provide education for health-care providers (lunch and learns) around resources available to families/people at risk, possible prevention.	✓
Coordinate with partners to identify and expand existing services to ensure 24/7 access to emergency mental health services locally in order to de-emphasize need for funding.	✓
Establish more mental health service centres, especially in Perth.	✓
Improve wait lists for children's mental health.	✓
Develop/enhance employment programs for individuals experiencing mental illness.	✓
Help to promote use of after-hours crisis service (e.g. Kids HelpPhone, www.reachoutnow.ca , etc.).	✓
To enable earlier referrals to appropriate mental health services, have physicians routinely screen for mental health disorders; conduct questionnaire through obstetrics or doctors to reach high-risk families.	✓
Increase number of caseworkers designated for hoarding (as per Lanark County Mental Health presentation to Lanark County Council); work closely with municipalities/bylaw to encourage early tip offs so can help before it comes down to an eviction.	✓
Reduce transportation barriers for people seeking help, especially if they do not have a general practitioner and are not receiving funds through the Ontario Disability Support Program.	✓
Provide trauma-informed care training opportunities to agencies and first responders.	✓

Inventory Applied Suicide Intervention Skills Training (ASIST) trainers and training opportunities that are available and provide information to agencies; encourage more opportunities if necessary.	✓
Continue referrals to situation table/interventions.	✓
Provide wraparound services for families when identified as at risk.	✓
Have agencies identify and communicate needs in terms of best information from police when referrals are made to improve ability to perform services.	✓
Support efforts by the Lanark County OPP and Lanark County Mental Health to secure funding for a mental health nurse to work out of detachment.	✓
Support efforts by the Smiths Falls Police Service and Lanark County Mental Health to sustain the pilot project for mental health nurse support.	✓
ACTIONS REQUIRING UPDATES OR FOLLOW-UP	
Take inventory of mental-wellness/lifestyle programs available locally and in other communities and determine additional implementation possibilities (e.g. effective coping for families with family members who have mental illness, support groups for specific illnesses).	📌
Take inventory of current mental wellness curriculum and supports/programs available in schools; teach kids how to help each other and what to notice about friends; identify existing resiliency programs and early identification mechanisms and enhance where necessary. Support efforts by school boards to include community agencies in action plans to promote wellness in schools.	📌
Expand period of post-natal visits to help with parenting and mental wellness; early identification of issues.	📌
Provide education for public and relevant human-service agencies to provide early identification of individuals at high-risk of hoarding.	📌
Identify and/or implement more infant and children mental health programs that are easily accessible.	📌
Identify, develop and/or promote respite services for children with mental illness or children with parents with mental illness, for parents of children with mental illness, and for parents with children encountering mental illness that do not meet the complex needs threshold.	📌
Advocate for increased base funding for mental health services to alleviate non-crisis wait lists.	📌
Help to promote/raise awareness of pathways of care for high-risk presentations or after-hours children's mental health needs when the protocol is completed.	📌
Improve tracking of actual suicide statistics.	📌
Clarify what protocols are in place related to mental health and service providers, promote them and follow them (e.g. LEAD).	📌
For hoarding, offer longer-term mental health support when there has been an intervention.	📌
Greater availability of in-hospital treatment services for mentally ill children and adults.	📌

OUTCOMES	MEASURABLES	PROGRESS
Increased education, awareness and promotion of existing services/programs to reduce specific wait times and after-hours gaps, to clarify pathways of care, to support families with children who have mental illness, and to promote overall good mental health and well-being.	• Annual LEAD team training to address education and crisis response. • Emergency room diversion case managers are attached to receive direct referrals to emergency rooms to reduce repeat visits. (Average was 25%, now 4.8% once a referral is received.) • Analysis of post-treatment surveys collected by Lanark County Mental Health. • Use data from Connex Ontario to evaluate progress.	• LEAD postponed due to COVID, but ongoing • Update needed • Update needed • Update needed
Earlier intervention in mental health crises by having mental health workers as part of emergency response and screening mechanisms for earlier referrals by physicians.	• Analysis of requests for service (OPP and Lanark County Mental Health), after-the-fact referrals, individuals served, live calls with police where mental health nurse attends, diverted emergency department visits, apprehension rates, Form 1 rates, face-to-face visits with Lanark County Mental Health, officers trained, risk factors presented at situation table. • Collect data on benefits of Health IM app used by Smiths Falls Police Service.	• Completed through MCRT and data analysis (through grant-reporting and other processes) • Update needed
Advocacy for increased funding for areas of rapid growth for mental health sector and greater access to services.	• An increase in funding for Lanark County that represents the actual demographics for the region across both LHINS.	• Ongoing advocacy by LCMH
Increased/improved supports for families undergoing custody issues.	• Referrals to an established program.	• Update needed
Increased awareness, promotion and support of resiliency and mental health in partnership with school boards.	• The Lanark County Human Services and Justice Coordinating Committee is a link between mental health, school boards and police; Youthab receives referrals for transitional-aged youth and stats can be monitored. • Analyse wellness survey data from school boards to determine level of awareness of and use of services.	• Increased awareness of mental health supports have resulted from COVID; more virtual services • Update needed

Increased early intervention efforts and longer-term supports with caseworkers related to hoarding to support at-risk individuals.	The funding received by Lanark County Mental Health for hoarding will culminate in a research paper that will assess results of the program.	Update needed (paper completed)
Increased training completed on trauma-informed care and ASIST.	- Lanark County Mental Health offers this three or four times per year; Catholic District School Board of Eastern Ontario also offers sessions (baselines). - Number of police officers and agencies attending trauma-informed care workshops in Lanark County.	- ASIST continues to be offered; difficulties due to COVID 219 participants at 2019 training; planning underway for 2021
Continued referrals to situation table and wraparound supports for individuals and families who are at acutely elevated risk	Lanark County Situation Table statistics on demographics, risk factors and referral conclusions (risk lowered and connections to services).	Completed; see annual report

Team Leaders:

Rebecca Fromowitz (Lanark County Mental Health) and Shawn Souder (Lanark Leeds Grenville Addictions and Mental Health)

SUBSTANCE USE

OVERVIEW

IDENTIFIED ISSUES

1. Limited funding and understanding/acceptance of the philosophy for harm reduction
2. Reduce stigma
3. Lack of local withdrawal management/detox services (also women-specific services)
4. Education about Good Samaritan Law
5. Specialized addictions services for youth
6. Expanded therapeutic treatment court
7. Community response to opioid crisis
8. Legalization of cannabis
9. Increased number of addictions counsellors serving Lanark County

ACTIVITIES COMPLETED, ONGOING OR UNDERWAY	
Increase education/opportunities regarding chronic pain management within the medical community and the public. Support efforts of South East LHIN to address this when details are available.	✓
Advocate for increased engagement between the LHINs for future planning around addictions, mental health and primary care.	✓
Explore possibility of incorporating the Icelandic model and determine its applicability to Lanark County and Smiths Falls.	✓
Monitor increased LHIN funding and education for harm reduction programs, including additional methadone clinics, and explore any additional needs for programs to help people get off methadone.	✓
Expand or promote existing parenting programs for at-risk individuals.	✓
Support efforts to continue a drug treatment court, including funding for additional operating costs (e.g. transportation and urine testing equipment).	✓
Conduct a media campaign led by the health unit to increase the number of 911 calls when someone witnesses or suspects an overdose and to increase awareness of the importance of the 911 call in the preservation of life (including Good Samaritan Act). Activities include production of an educational video, broadcast and print advertising involving multiple agencies, social media promotion and bracelets reminding young people to call 911 if they need help. Utilize and build upon MOHLTC campaign.	✓
Continue to support enhanced efforts to educate about use of naloxone and make kits widely available (i.e. through increased distribution to community partners for those who fit the criteria).	✓
Enhance education for medical community, patients and public to help reduce stigma about addictions.	✓
Support efforts to improve provincial surveillance and data tracking related to opioid deaths.	✓

Develop and/or share education and prevention strategies related to legalization of cannabis.	✓
Inventory and promote existing programs related to addictions and substance abuse, e.g. SMART groups.	✓
Support efforts of the Perth & Smiths Falls District Hospital and health unit following their pilot study of the distribution of naloxone kits upon discharge from overdose as a continued harm-reduction measure.	✓
Continue to offer wraparound support to individuals/families experiencing substance abuse issues and who have been referred to the situation table as being at acutely elevated risk of harm.	✓
Advocate for increased funding to support more addictions counsellors/services.	✓
Determine need for overdose prevention sites.	✓
Continue to support efforts of local first responders seeking naloxone training.	✓
Support community plan for response to opioid crisis.	✓
ACTIONS REQUIRING UPDATES OR FOLLOW-UP	
Reduce risk of abuse by changing protocol of medication disposal being the responsibility of family when someone dies.	📌
Increase addictions and mental health supports in high schools.	📌
Collaborate with LHIN on opioid strategy; emphasize education for doctors to commit to principles of harm reduction and establish an oversight mechanism (e.g. tying to hospital privileges).	📌
Increase awareness for dentists of link between methadone use and dental problems; determine ways to provide dental help for clients experiencing issue.	📌
Support efforts to establish additional detox resources for the region, such as at-home detox that can be prescribed by a nurse practitioner (based on Cornwall Protocol), as well as medical detox and residential stabilization units to help clients with transition after detox.	📌
Support efforts by health unit under Community Opioid Response Plan to explore rapid-access clinics for suboxone.	📌

OUTCOMES	MEASURABLES	PROGRESS
Increased education, awareness and promotion of existing services and strategies related to opioids, chronic pain management and harm reduction (for medical community and general public) to increase understanding of harm reduction philosophy and to reduce stigma.	• Annual LEAD team training to address education and crisis response. • Health unit statistics on emergency room visits for opioid overdoses; safe needle exchange statistics; outreach regarding Good Samaritan Act. • Number of referrals to caseworker and counsellor with	• LEAD training ongoing (currently COVID restrictions) • Health Unit has stats • Change Health stats

	Change Health, which helps to divert from emergency rooms and clients receive primary care onsite.	
Improved engagement and coordination between LHINs for planning around addictions, mental health and primary care.	• Number of front-line addictions counsellors. • Improved connections with Change Health and primary care.	• LLGAMH funding received; staffing model has yet to be determined • Update needed
Analysis completed of possibilities related to implementing Icelandic model in Lanark County/Smiths Falls.	• Partner activities related to grants and coordination of project.	• Planet Youth Lanark County and CSWB Plan have cross-referenced each other during community presentations; PYLC working with health unit as part of prevention pillar. Project is underway.
Increased awareness and promotion of existing programs for addictions and substance abuse, such as Smart Works Program.	• Health unit statistics related to substance abuse (needles, safe inhalation equipment, safe injection, etc. through Smart Works program) • Health Unit can provide referral statistics for addictions programs.	• Health Unit can provide stats. Programs are continuing; expansion has taken place to respond to identified needs. Two new peer workers (mobile outreach – Perth, Lanark Highlands). • Health Unit stats
Increased withdrawal management/detox services for Lanark County/Smiths Falls.	• Referrals to new physician at North Lanark Community Health Centre.	• Update needed
Increased education around cannabis.	• Data related to Heads Up program; referrals received at agencies.	• No activity due to COVID
Increased education around calling 9-1-1 in overdose situations coupled with increased calls to 9-1-1.	• Statistics from Health Unit, Lanark County OPP and Smiths Falls Police Service regarding 9-1-1 calls	• Update needed
Expanded drug treatment court program	• Total number of referrals, acceptances and graduates from Therapeutic Drug Treatment Court; testimonials; pre- and	• LLGAMH has stats for new Therapeutic Justice Program

	post-tests (assessments) for court.	
Continued expansion of naloxone program and increased awareness.	Health Unit data on number of naloxone kits distributed and number of community agencies distributing kits.	Health Unit stats
Inventory of addiction services for youth (within schools and in the community).	Conduct follow-up survey to inventory services.	Update needed
Increase in specialized services for addictions that are accessible through schools.	Measurable presence of addictions services/information in schools; track number of referrals and/or participants in addictions programs.	Update needed
Continued referrals to situation table and wraparound services for individuals and families who are at acutely elevated risk.	Annual data from Lanark County Situation Table regarding referrals and services mobilized.	See annual report
Ongoing support for community plan for response to opioid crisis.	Health Unit annual review for program completed through Community Harm Reduction Steering Committee	Health unit will be revitalizing committee; will probably be called Harm Reduction Working Group under MDS

Rebecca Fromowitz (Lanark County Mental Health), Shawn Souder (Lanark Leeds Grenville Addictions and Mental Health) and Jennifer Adams/Cathy Del Mei (Leeds Grenville Lanark District Health Unit)

POVERTY

OVERVIEW

IDENTIFIED ISSUES

1. Change rural funding models (e.g. to address issues related to large rural service areas)
2. Ontario Disability Support Program – funding to have appropriate resources in place for clients; more accessibility (most vulnerable clients have less access to services)
3. Food insecurity
4. Wage gaps
5. Changes to social assistance rates
6. Increased opportunities to help people learn how to move out of poverty.

ACTIVITIES COMPLETED, ONGOING OR UNDERWAY	
Continue to identify and promote services already available in the community to assist low-income individuals and families at risk (e.g. Good Food boxes and other programs); support efforts to connect them to services (e.g. community navigator), identify service gaps and coordinate efforts to remedy them.	✓
Work with municipalities on any effort to lobby provincial government (e.g. through Eastern Ontario Wardens' Caucus) for better rural funding models or incentives (e.g. taxation models, carbon tax benefits), rural-centric mandates and/or additional satellite services to address geographic concerns.	✓
Advocate for continued support of and/or increased funding and resources for caseworkers to help clients navigate complex systems; increase awareness of how to ensure clients can access funds such as ODSP when appropriate.	✓
Enhance and encourage more creative collaboration with partners to explore rural solutions and create efficiencies and reduce overlapping services to free up additional resources.	✓
Support efforts to modify social assistance rates to meet Basic Income Pilot level and stop clawbacks related to self-employment.	✓
Support/promote efforts by partner agencies to continue to bring programs such as "Getting Ahead" to the community to help individuals to transition out of poverty; provide access to educational and financial learning services to help people move out of poverty.	✓
Work with partners to coordinate promotion and sustainability of existing programs related to food programs (meal provision, volunteer recruitment, etc.).	✓
Work with Lanark County Transit Advisory Group and support solutions related to creating opportunities for affordable rural transportation.	✓
Support efforts of Ontario Works and ODSP to alleviate identified gaps in their services.	✓
ACTIONS REQUIRING UPDATES OR FOLLOW-UP	
Support community efforts to teach children/families/individuals how to grow food; establish community gardens; teach people how to cook.	📌
Support efforts to provide more affordable and better-quality housing for mentally ill and socioeconomically disadvantaged individuals; improve wait lists.	📌

Advocate for increased core funding for food banks.	
Lobby for increased funding for core food programs.	
Monitor basic income pilot program and strategize local response/opportunities.	
Provide education to health service providers and/or recruit volunteer advocates who can help people fill out forms for ODSP.	
Establish an ODSP office in Carleton Place at least once per week.	
Lower utility bills for fixed-income seniors.	

OUTCOMES	MEASURABLES	PROGRESS
Inventory and promotion of services available for low-income individuals and families at risk with gaps identified, as well as greater collaboration between partners to free up resources and improve access.	Analysis of Lanark County Ontario Works/Ontario Disability Support Program data (numbers of people accessing); food bank usage statistics.	OW Staff refer as required. New website to identify resources available. COVID resource page on Lanark County website.
Increased opportunities to teach community how to grow food and to cook.	Statistics from The Table, Mills Community Support (now Carebridge) and health unit regarding program usage.	Pre-COVID many new initiatives started/underway, e.g. Veggie Challenge, community gardens, community wood oven project in Carleton Place, events with pot-lucks/ food sharing/BBQ, Forever Young program. Various meal programs/ delivery has been an emphasis throughout COVID and has been consolidated through health unit at http://www.foodcoregl.ca/events.html and COVID page on Lanark County website.
Advocacy for improved rural funding models or incentives that address rural concerns and large geographic areas.	- Number of grant applications made by local municipalities and corresponding results. - Information from Eastern Ontario Wardens' Caucus Annual Report re: rural economic development.	- Follow up needed - Advocacy continues, particularly in light of COVID.

Enhanced advocacy for clients navigating systems and improved education for service providers to improve consistency.	- Number of referrals through Community Navigator (if re-established). - Statistics from Ontario Works/Ontario Disability Support Program working group.	- Community Navigator program discontinued. Legal Clinic's Mental Health Outreach Project has streamlined referral system and provided education to community partners; also there is continuing work by advocates at The Table. - OW/ODSP working group re: advocacy, communication service delivery improvements or explanations. Pre-COVID was meeting every 3 months, regularly 5-8 clients involved at any one time.
Advocacy for modified social assistance rates and lower utility bills.	Feedback/statistics from anti-poverty groups on annual basis.	Follow up needed
Advocacy for increased core funding for food banks and core food programs.	Track letters/presentations by County and local municipalities to advocate; monitor results.	Follow up needed
Increased programs to help individuals transition out of poverty.	Number of participants in Getting Ahead program; number of times Bridges Out of Poverty offered and number of participants.	Getting Ahead-Bridges out of Poverty: 2 groups ran in 2018. Received \$100,000 to run groups for the next 5 years. 10 registered in each group, about 5 graduates. Groups are running in Smiths Falls Spring and Fall and in 2020 they hope to have the Spring group run in Perth. (Update needed due to COVID)
More established affordable and supportive housing opportunities for socioeconomically disadvantaged persons.	- Review of number of units available through Lanark County Housing Corporation and other providers. - Statistics from Lanark County Housing and Homelessness Survey (2018).	- Tiny Home launched August 2019 – update needed. Lanark County Social Services published 2018 Housing Study in October 2018 that identified priority areas and strategies and a schedule to increase the social housing supply. County recently released action plan update with increased portable housing benefit; new build in Carleton Place. Severe shortage of units during COVID. 2019 Lanark County Report Card available online

Reduced calls and interactions for subsidies.	• Data from Lanark County Housing regarding number of people waiting or accessing subsidies.	• 2019 Lanark County Report Card available online
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Team Leaders:

Jane Torrance (United Way Lanark County), John Fenik (Lanark County Warden/Perth Mayor), Julie Golding (Lanark County Social Services, Shawn Pankow (Smiths Falls Mayor)

HOUSING

IDENTIFIED ISSUES

1. End homelessness in Lanark County (youth and adults)
2. Supported and/or affordable housing hard-to-place individuals (e.g. addictions, offenders, transitional, pregnant teens, disabled individuals)
3. Access to emergency needs for victims
4. Reduce utility costs to increase affordability
5. Making landlords accountable for unsafe, substandard housing

ACTIVITIES COMPLETED, ONGOING OR UNDERWAY	
Support efforts through promotion and partners to establish partnerships with private market using subsidies; educate property owners on some of the opportunities available (e.g. higher asset levels) for social housing.	✓
Liaise with Lanark Consortium, Housing Coalition, Lanark County Social Services and other partners regarding their plans (e.g. 10-Year Housing and Homelessness Plan) and support where possible (see Priorities and Strategic Objectives outlined in Housing and Homelessness Plan).	✓
Explore opportunities and support partners in efforts to establish/ enhance/increase supported housing models for various vulnerable populations (e.g. mental health, addictions, offenders, disabled, youth at risk and victims of domestic violence).	✓
Support partners in efforts to establish second-stage housing model for vulnerable populations, such as victims of domestic violence and youth needing transitional support.	✓
Increase awareness of and enhance programs to support renovations that would improve energy efficiency for homeowners, thereby reducing utility costs (including wood) and preventing risk of homelessness.	✓
Strengthen advocacy efforts to help people experiencing unsafe, substandard housing; develop strategy to make landlords accountable for these situations.	✓
Inventory needs in vulnerable neighbourhoods (e.g. hostels, social housing) and augment wraparound supports in order to reduce risk of individuals losing housing; increase safety and efficiencies for workers by collaborating to visit at same time.	✓
Create or provide supports for males (offenders, addicted) in need of supportive housing to avoid sending out of the community.	✓
Inventory and promote availability to agencies/first responders of assistance for immediate emergency housing issues; emergency safe housing, e.g. hostel beds for overnight for people who cannot afford hotel. Support partners in efforts to find solutions for temporary emergency shelter needs.	✓
ACTIONS REQUIRING UPDATES OR FOLLOW-UP	
Provide education to landlords and other stakeholders to encourage sensitivity around cultural norms where larger family units live together.	📌
Support partners in identifying, implementing and/or promoting early intervention strategies for youth and Housing First models to reduce chronic homelessness.	📌

OUTCOMES	MEASURABLES	PROGRESS
Reduced rates of homelessness in Lanark County/Smiths Falls by working with partners and private sector.	Data from Lanark County Housing and Homelessness Survey (2018), Lanark County Social Housing reports, Cornerstone Landing (by name list) and Lanark County Interval House.	See Lanark County 2019 Housing and Homelessness Report Card. Follow up needed re by-name list.
Increased access to supported and affordable housing for vulnerable populations.	- Statistics from Lanark County Interval House, Mills Community Support and provincial Developmental Services data. - Monitor housing/ homelessness risk factor statistics at Lanark County Situation Table.	- Additional spaces have been created by Carebridge, Lanark County Interval House. Statistics available from Developmental Services. Ten additional spaces at Country Street. - See 2019 LCST Annual Report
Inventory and greater awareness of emergency supports and housing for victims/people in crisis while awaiting longer-term supports.	Annual updates/survey regarding knowledge of resources available; check with range of sources and planning tables.	County contract with Victim Services for emergency housing supports; see 2019 Lanark County Housing and Homelessness Report
Advocacy for reduced utility costs and increased awareness of programs for energy efficiency.	Number of applicants to County energy efficiency/home renovation programs.	See 2019 Lanark County Housing and Homelessness Report
Engaged landlords in improving unsafe, substandard housing and improved education on cultural norms.	Monitor local municipal data on complaints regarding property standards.	Follow up needed with municipal planning/by-law departments
Early intervention strategies developed to reduce chronic homelessness.	- Number of programs/ participants at youth centres and through other partners (Youth Collective Impact, etc.) - Data from Lanark County Housing Corporation Tenant Services worker re: referrals/interventions.	- Follow up needed - Tenant Service Worker (homelessness prevention) referrals/ interventions (outcomes) – working to develop a measure for this and for tracking the information

		through the use of a data collection tool. Housing Services to implement tracking system if provincial mandate for homeless by-name happens Jan. 1, 2021.
Inventory of needs in vulnerable neighbourhoods to improve wraparound supports.	• Data from police regarding vulnerable neighbourhoods (high calls for service). • Data from emergency departments regarding visits from vulnerable neighbourhoods.	• There is a provision at the Lanark County Situation Table for neighbourhood/ environmental referrals, which has been used to provide wraparound supports. • Referrals to situation table record the prevalent risk factors to be addressed.

Team Leaders:

Jane Torrance (Lanark County United Way), John Fenik (Lanark County Warden/Perth Mayor), Julie Golding (Lanark County Social Services), Amber MacDonald (Lanark County Victim Services), Shawn Pankow (Smiths Falls Mayor)

TRANSPORTATION

IDENTIFIED ISSUES

1. Affordable transportation

ACTIVITIES COMPLETED, ONGOING OR UNDERWAY	
Increase capacity for home visits for isolated people or facilitate technology for remote appointments.	✓
Explore possibility of reincarnating the “mobile bus” for clinic purposes (work with hospitals and other agencies to identify “hot spots” where a clinic may be used to reduce need for ER visits/transportation).	✓
ACTIONS REQUIRING UPDATES OR FOLLOW-UP	
Monitor the activities of the Transportation Advisory Group (or the Lanark County Transit Committee slated to replace it) and provide collaborative support for recommendations where appropriate/feasible.	📌
Work with Transportation Advisory Group/Transit Committee to inventory and/or promote existing services that may alleviate transportation issues, i.e. volunteer drivers, peer support transportation programs.	📌
Establish multi-agency community wellness clinics that rotates to a new community on a weekly basis (e.g. Perth, Smiths Falls, Carleton Place, Almonte, Lanark) or build upon existing hubs/community health centres that include access to services such as mental health, addictions, a doctor or nurse practitioner, Ontario Works/Ontario Disability Support Program, probation, an elder. Consider hours of operation that are not 8 a.m. to 4 p.m. Monday to Friday in order to increase accessibility.	📌
Clarify and communicate to agencies/referrers what gets funded by Ontario Works and Ontario Disability Support program for transportation and who can do the referral.	📌

OUTCOMES	MEASURABLES	PROGRESS
Increased awareness of affordable transportation options.	Number of interactions on Lanark County website (transportation section) and other media.	Follow up needed (some info posted on County website)
Increased access to affordable transportation.	Reports from Lanark County Transportation Steering Committee; community surveys.	Mandate changes increased access; but COVI
Established multi-agency rotating clinic to bring services to clients.	Number of clinics held annually; number of clients served.	Follow up needed
Increased wellness clinics, co-located services and home visits for isolated/vulnerable populations.	Number of referrals/visits conducted by Community Paramedic program.	Follow up needed

Team Leaders:

John Fenik (Lanark County Warden/Perth Mayor), Julie Golding (Lanark County Social Services), Shawn Pankow (Smiths Falls Mayor)

HEALTH & WELL-BEING

OVERVIEW

IDENTIFIED ISSUES

1. Enhancing community health care
2. Improved oral health supports for low-income individuals
3. Supports for individuals with developmental disabilities in crisis situations
4. Supports for Hep C/HIV
5. Individuals with chronic care needs facing isolation, caregiver burnout, lack of family support, domestic violence, sometimes challenges to connect people with family physicians
6. LHIN boundaries dictating service delivery
7. Reducing social isolation
8. Long-term care residents who are not 65 are sometimes unable to access services, but are not eligible for community access now that they live in a long-term care home

ACTIVITIES COMPLETED, ONGOING OR UNDERWAY	
Monitor and liaise with Developmental Service Services Service Provider Group and support local efforts to enhance delivery of developmental services where appropriate and feasible.	✓
Inventory need and support community efforts for doctor recruitment to alleviate challenge of connecting people with family physicians.	✓
Support Eastern Ontario Wardens' Caucus and municipal efforts to increase rural connectivity in order to facilitate service connection through technology.	✓
Inventory needs and improve accessibility, where necessary, to supports for clients under 65 (e.g. early strokes, early dementia, brain injury). Provide education to agencies/long-term care staff about services that are available to clients under age 65, even when in long-term care homes.	✓
Explore, with multi-agency partners, opportunities to become a trauma-informed community.	✓
Review all health planning from an equity lens.	✓
Establish multi-agency community wellness clinic that rotates to a new community on a weekly basis (e.g. Perth, Smiths Falls, Carleton Place, Almonte, Lanark) and includes access to services such as mental health, addictions, a doctor or nurse practitioner, Ontario Works/Ontario Disability Support Program, probation, an elder. Consider hours of operation that are not 8 a.m. to 4 p.m. Monday to Friday in order to increase accessibility.	✓
Support Lanark County Paramedic Service's Community Paramedic pilot program and explore increased collaboration and partnerships; support efforts for a common approach to the program no matter which LHIN is funding it.	✓
Increase awareness of services and sexual health clinics related to Hep C and HIV.	✓
Develop coordinated care plans in order to share complex stories between service providers and reduce numbers of admissions to hospital.	✓

ACTIONS REQUIRING UPDATES OR FOLLOW-UP	
Inventory and promote existing programs that may help to reduce social isolation; identify gaps in communities and demographics where additional programs/drop-ins could be beneficial.	
Continue to implement 211 communication strategy with United Way Lanark County, including promotion of 211 to local agencies and other social services providers in Lanark County and Smiths Falls to encourage them to enter/update their records (including any 24-hour contact information); promote 211 to police services boards and municipalities and outline effort to encourage appropriate use of 211 instead of 911 in effort to reduce unnecessary calls to 911 and, therefore, costs associated with calls for service; provide presentations to OPP and Smiths Falls Police Service and other agencies to encourage use of 211 to connect people to appropriate services. Encourage 211 and Health Line (for LHINs) to share information so agencies only have to provide updates once.	
Work on education/awareness with health service providers re: LHIN boundaries memorandum.	
Support enhancement of activities (through general practitioners, nurse practitioners, relevant agencies) to assist with early identification of isolation, caregiver burnout, lack of family support, domestic violence and referral to appropriate services.	
Develop or enhance volunteer recruitment and retention strategies to support agencies that rely on volunteers.	
Agencies create plan to share human resources in situations when a person with developmental disabilities is in crisis and cannot go home, but cannot reasonably stay in a hostel or hotel without supports.	
Identify complex-care individuals at ER and refer to appropriate agencies.	

OUTCOMES	MEASURABLES	PROGRESS
Increased access to services and supports for vulnerable populations/isolated individuals, including caregivers (e.g. multi-agency rotating clinic, community paramedic program), and earlier intervention mechanisms in place.	- Survey agencies regarding who is assessing caregiver burnout and what supports exist. - Monitor number of clinics/programs in place	- Need to determine who to ask and what to ask; health unit could be involved through Healthy Babies programs, special needs population and mental health. United Way Caregiver Strategy has been developed. - Follow up needed
Increased supports for individuals with developmental disabilities in crisis situations.	Track referrals and outcomes through Urgent Response process with Developmental Services Consolidated Information System and Developmental Services	Follow up needed

	multi-year planning process.	
Improved clarity regarding LHIN boundaries and service delivery and improved coordination around planning.	• Monitor activities of Collaborative Governance group	• Update needed re progress with Ontario Health Teams
Increased promotion and access to existing programs to reduce social isolation and additional gaps identified.	• Monitor number of programs available to reduce social isolation	• Update needed – a variety of programs are available and many options highlighted as part of COVID response, but also many programs shut down and increased social isolation
Improved understanding of and access to services for long-term care residents who are not 65.	• Survey or continue to monitor need to inform of alternatives	• Follow up (anticipated Ontario Health Teams response)
Advocacy for improved rural connectivity.	• Monitor actions through work of Lanark County Council.	• EOWC and AMO advocacy; federal/provincial/municipal/private sector project underway (EORN); Lanark County has supported Last Mile Project as well to improve local connectivity.
Increased awareness of service and sexual health clinics related to Hep C and HIV.	• Health Unit can provide data on Hep C and HIV clinic use and number of clients tested in community.	• Health Unit stats
Increased awareness of available social programs through resource such as 211.	• Survey agencies regarding use of 211; monitor hits on Health Line and 211.	• Follow up needed
Increased volunteer recruitment and retention to support agencies.	• Survey of agencies	• Follow up needed
Increased knowledge about benefits and procedures to become a trauma-informed community, leading to greater health and well-being.	• Survey of like-minded agencies to determine interest and progress on initiative.	• Follow up needed; suggestion to work through Ontario Health Teams; consider training on equity and trauma-informed as part of any agency training

Team Leaders:

Kelly Barry (Rideau Tay Health Link), Jennifer Adams/Cathy Del Mei (Lanark Leeds and Grenville District Health Unit)

DOMESTIC VIOLENCE AND SEXUAL ASSAULT

IDENTIFIED ISSUES

1. Address high rates of domestic violence in rural areas
2. How to deal with issue of women who don't call for help
3. Have Lanark County Social Services employees trained in DV so consistent info provided to victims navigating system.
4. Identify and remedy gaps in court processes in domestic violence cases.
5. Need for expanded Partner Assault Response (PAR) program.
6. Support for male victims of sexual and domestic violence

ACTIVITIES COMPLETED, ONGOING OR UNDERWAY	
Take a long-term approach to tackling domestic violence through embedding healthy relationship curriculum in schools (e.g. Grade 7/8) and other venues, such as youth centres. Promote education through formal and informal processes. Increase awareness of what domestic violence looks like and how to safely stop it (See it, Name it, Change it campaign). A long-term approach may help to address issue of women not calling. Support Beyond the Forums work to enhance education for specific groups, including after-school/at-risk groups, and curriculum for schools.	✓
Create training curriculum with a focus on service providers, politicians and businesses; continue to expand See it, Name it, Change it campaign; target locations where people wait.	✓
Continue to liaise with Beyond the Forums.	✓
Work with police to examine completed domestic violence cases from start to finish to determine gaps and possible improvements; work with courts to identify specific gaps in system and work to enhance/promote existing domestic violence program and Victim Witness Assistance Program.	✓
Follow up on recommendations from domestic violence focus group and discuss possible solutions with partners.	✓
Continue to conduct focus groups with survivors and include police in an effort to improve experiences; use survivor film (Lanark County Interval House) as an education tool.	✓
Inventory and promote any existing programs and/or collaborate with relevant agencies to determine capacity to develop a PAR-like program that would be offered more frequently, would allow for self-referrals and would alleviate transportation issues.	✓
Continue to support efforts to train Lanark County Social Services staff in domestic violence so consistent information provided to victims navigating system.	✓
Increase education opportunities around trauma-informed care, strangulation and domestic violence for agencies, first responders and health service providers.	✓
Increase opportunities for trauma-informed care training for first responders and agencies	✓
ACTIONS REQUIRING UPDATES OR FOLLOW-UP	
Advocate for Unified Family Court and designated Superior Court Judge for Lanark County	📌

Increase education and promote services to first responders, health service providers and agencies (e.g. Healthy Babies workers) for early identification of domestic violence and increased connection to services.	
Raise awareness around male sexual victimization and domestic violence to reduce stigma, dispel myths and improve responses.	
Work with police and Crown to explore domestic violence diversion campaign – e.g. everyone charged with domestic violence within a certain period of time goes to a program and then charges withdrawn.	
Raise awareness of available help for male sexual victimization and domestic violence; including safe housing options.	

OUTCOMES	MEASURABLES	PROGRESS
Create, promote and deliver healthy relationship curriculum and training and educational materials to begin to break intergenerational cycle of violence and consider various opportunities, such as festivals, events, faith groups and related conferences.	Track number of school and community visits provided by various agencies (e.g. Lanark County Victim Services and LINK program, OPP, Smiths Falls Police Service, Lanark County Interval House, etc.)	Presentations have been created or are underway. Update needed.
Increased awareness of existing programs through justice system for domestic violence victims and identify and remedy gaps in order to improve outcomes.	- Conduct surveys and focus groups with victims for follow up. - Track number of bail review requests and outcomes for women involved with Lanark County Interval House. - Monitor outcomes and changes in the regional review collaboration process as implemented by the OPP; track the number of Lanark County-based reviews and survey the committee on effective outcomes.	- Ongoing - Follow up needed - Completed; Victim Advocate process in place
Increased awareness of early indicators of domestic violence and earlier referrals to supports for victims.	- Track number of individuals at referring agencies who have received information related to supports for domestic violence (e.g. through distribution of brochures). - Track number of locations where educational materials are distributed and quantities distributed.	- Follow up needed - Follow up needed
Increased awareness and promotion of existing partner-	Track number of self-referrals to partner-assault programs.	Research beginning

assault programs/anger management and/or development of programs/campaigns to increase self-referrals by offenders or potential offenders.		
Continued domestic violence and trauma-informed care training for relevant agencies and service providers.	Track number of trainings provided and number of participants/participating agencies.	Training held in 2019; planned for 2021
Increased knowledge about benefits and procedures to become a trauma-informed community, leading to greater health and well-being.	Survey of like-minded agencies to determine interest and progress on initiatives.	Follow up needed
Increased awareness of issues around male sexual victimization to reduce stigma, and promotion of available services.	Monitor LCVS and SADV statistics on male victims reporting violence and sexual abuse.	Follow up needed

Team Leaders:

Erin Lee (Lanark County Interval House), Insp. Karuna Padiachi (Lanark County OPP), Amber MacDonald (Lanark County Victim Services)

YOUTH AND FAMILIES

IDENTIFIED ISSUES

1. Increased supports for youth through schools, including drug treatment/mental health counsellors in high schools
2. Work with youth and local post-secondary institutions to establish training that takes less time for jobs in high demand; particularly for those who want to stay in communities with supports
3. Sustainable funding for youth centres
4. Mitigating issues for families with custody issues/parental alienation
5. Inconsistency in delivery of Family and Children's Services programs due to large service area
6. Awareness of literacy programs
7. Supports for at-risk, low-income families; cutbacks for parenting programs
8. Establish a social planning council
9. Assist vulnerable youth with employment readiness

ACTIVITIES COMPLETED, ONGOING OR UNDERWAY	
Continue advocacy and collaboration through mechanisms such as the Lanark County Child and Youth Collaborative to determine existing programs, needs and opportunities for efficiencies and opportunities for funding. Encourage collaboration among businesses, service clubs and other non-profits; joint funding applications for collective impact.	✓
Work with Algonquin College, other post-secondary institutions and local employers to determine additional local program/training possibilities and local labour demands.	✓
Improve wait lists for children's mental health; more infant and children mental health programs that are easily accessible.	✓
Enhance support services for youth who are victims of bullying, harassment, sexual violence, dating violence and sexual exploitation; preferably housed in high schools to assist with accessing community services.	✓
Address localized substance use issues in schools; free drug/alcohol treatment for youth.	✓
Establish or enhance early identification efforts in schools and other agencies to get help for whole family in order to help children.	✓
Begin and/or continue to track circumstances when custody issues are a risk factor.	✓
Continue referrals to situation table/interventions.	✓
Through Lanark County Child and Youth Collaborative or a Social Planning Council, monitor the issue of school closures and the concept of small rural schools keeping children connected with their community and supports.	✓
Emergency safe housing – after hour/weekend-related (inventory what is available and share information with first responders/relevant agencies).	✓
ACTIONS REQUIRING UPDATES OR FOLLOW-UP	
Advocate for resources to reduce wait lists for children's hospital outpatient and addiction services.	📌
Establish or increase mental health supports specific to gender identity for youth.	📌

Establish a centre for sexual diversity.	
Establish child protection committees that include Family and Children's Services, education, police and health (nurses and doctors) for training in order to provide greater understanding of the system. Should consist of new employee training and another for managers to communicate issues and gaps.	
Research models and advocate for mandated longer-term post-natal visits to help identify risks and needs for families.	
Establish greater support for kin families (relatives who are looking after children who are not their own, e.g. grandparents).	
Enhance services for 16- to 17-year-old age range that are between mandates; funding supports for those not eligible for ODSP and not covered under FCS mandate.	
Assess need for and/or re-establish a home for pregnant teens supported and run by multiple agencies.	
Enhance life skills and employment readiness programs for youth who are beginning to deal with their barriers.	
Evaluate possibility of increased collaboration for youth centres in Lanark County and Smiths Falls to reduce costs and increase sustainability, including coordinated data collection and reporting of shared outcomes between youth centres.	
Establish a social planning council to collaborate/network on issues for all ages.	
Support Youth Collective Impact (Lanark Consortium) efforts to establish life skills programming.	
Support efforts of local youth centres to expand after-school program delivery across the county.	
Ensure care teams are working from a patient-centred approach when coming together to assist families in need.	
Educate and engage parents about opportunities available for family-focused activities (recreation, sports, arts, etc.)	
Determine availability of specialized medical supports for high-risk children and enhance where necessary.	
Determine funding sources/supports for youth with developmental disabilities who do not qualify for Developmental Services Ontario funding.	
Increase access (offices) for local service providers throughout the county, including after-school access for students who cannot be released from school without parental consent.	
Establish court-ordered preventive measures for families when custody issues are filed with the court, including a checklist to provide supports whether there is a need or not. Establish a multi-disciplinary team that could facilitate topics such as financial, legal and mental health.	
Education to reduce stigma against youth centres and clientele.	
Home visits by various service providers for isolated families/lack of affordable transportation (especially if service is a requirement by Family and Children's Services).	

Develop or increase/enhance respite programs and support groups for families, e.g. parenting programs; single parent respite support.	
Inventory and promote existing programs for youth to alleviate issue of children at home alone after school for longer periods; identify gaps if they exist.	
Increase awareness of supports available to assist families undergoing family breakdown through schools and in community to improve wraparound supports	
Seek collaboration with other agencies, such as school boards, to inventory and assess parenting needs/concerns/issues in the community.	
Determine safety resources for youth aged 16 to 18 that FCS does not support when home environments are not safe.	
Enhance and/or promote respite services.	

OUTCOMES	MEASURABLES	PROGRESS
Increased resources and access to (and/or promotion and education of existing ones) for children's hospital outpatient and addiction services, mental health supports related to gender identity for youth, supports/respite for families with high-needs children (including developmental disabilities), programs for pregnant teens, programs for life skills/employment readiness and needs; supports for victims of bullying and other violence/exploitation, awareness and availability of emergency safe housing.	- Track number of visits to Lanark County Victim Services worker embedded in high schools compared to current call-as-needed baseline. - Analyse survey data from school boards to determine if increased awareness of and access to services. - Number of youth who receive workforce-readiness/work skills training.	- Not yet in place - Follow up needed - Follow up needed
Increased collaboration and planning related to youth and families to improve funding opportunities, collective impact and earlier crisis intervention.	Number and scope of new partnerships between youth-serving organizations.	Some work done through YCI; follow up needed
Increased child advocacy through child protection initiatives related to system training for agencies, support for kin families, court-related prevention measures around custody, development of child advocacy centre.	Track referrals to child advocacy centre when developed	CYAC statistics

All community schools kept open or repurposed as community hubs.	Track number of rural schools being slated for closure and responses to the issue.	Not currently an issue
Earlier identification of parenting support needs through existing or expanded programs, along with enhanced promotion of existing programs.	Track number of referrals to programs in community.	Lanark County Situation Table Annual report shows family referrals for 2018 and 2019
Increased sustainability, efficiencies and shared programming for youth centres.	Number of new formal partnerships among youth centres and with other community organizations.	Follow up needed

Team Leaders:

Don Lewis (Upper Canada District School Board), Amber MacDonald (Lanark County Victim Services), Youth representative to be determined

SENIORS

IDENTIFIED ISSUES

1. Funding for community and primary health care to move towards prevention
2. Isolation/lack of family supports/caregiver respite
3. Elder abuse

ACTIVITIES COMPLETED, ONGOING OR UNDERWAY	
Advocacy and collaborative efforts to increase funding and the number of long-term care beds.	✓
Enhanced support for existing services to reduce waiting lists for seniors.	✓
Adequate funding to allow agencies to offer services proactively and to keep seniors out of crisis.	✓
Identify opportunities to enhance education and services to keep seniors at home longer (without increasing burden on caregivers).	✓
Increase education about available programs for seniors and navigating LHIN (formerly CCAC).	✓
Support efforts for a program of wellness checks (community paramedicine) or wellness clinics.	✓
Establish program of volunteers to conduct phone-call check-ins with isolated seniors/those with lack of family supports.	✓
Liaise with United Way and support efforts to bring senior vulnerability index to Lanark County in order to intervene earlier and flag issues, including (but not limited to) poverty and housing.	✓
Identify and implement ways to prevent or alleviate caregiver burnout (early intervention).	✓
Determine scope of staff recruitment and retention issues in long-term care homes and support partners in efforts to improve.	✓
Connect more seniors to financial literacy for seniors programs (e.g. after a spouse passes away).	✓
Continue referrals to situation table/interventions; connections with Health Links.	✓
Enhance advocacy for seniors navigating supports/long-term care (perhaps as part of vulnerability index).	✓
ACTIONS REQUIRING UPDATES OR FOLLOW-UP	
Increased funding for Breathe Well Live Well COPD program running in Perth and Smiths Falls.	📌
Take inventory of affordable social programming for seniors to reduce isolation and any affordable transportation to programs (ensuring transportation options adequately address mobility issues). Enhance and promote programs as needed.	📌
Improved funding for employment programs for older adults (e.g. New Directions program).	📌
Establish an elderly valuing program.	📌

Support efforts by Carebridge to reduce isolation for vulnerable seniors in Lanark County.	
Support and enhance efforts by community agencies and first responders to identify, prevent and reduce stigma around elder abuse.	
Encourage partner agencies to refer vulnerable seniors to existing programs (e.g. Carebridge project, Lanark Community Programs, Community and Primary Health Care, Lanark County Home Support Services) in order to reduce isolation and prevention escalation of crisis.	

OUTCOMES	MEASURABLES	PROGRESS
Advocacy and collaboration to address funding issues related to community and primary health care, including increased affordable long-term care beds and supports for seniors.	• Monitor activities of LHIN Collaborative Governance Group	• Update needed re Ontario Health Teams
Increased education around existing programs to reduce social isolation for seniors and enhancements where needed, including caregiver supports and elder abuse prevention initiatives.	• Monitor number of programs available to reduce social isolation. • Survey on the topic of caregiver burnout. • Statistics on attendance at elder abuse prevention programs by Lanark County Victim Services and partners.	• Update needed, particularly due to COVID • Update through SAAC • Update needed
Established program of wellness checks for seniors (community paramedicine) and early interventions for vulnerable seniors, including increased input from Geriatric Psychiatry Outreach Program at the Royal Ottawa with respect to community outreach to seniors and long-term care homes.	• Referrals through community paramedicine program. • Monitor referrals to Geriatric Psychiatry Outreach Program.	• Follow up needed • Follow up needed

Team Leaders:

Jane Torrance (Lanark County United Way), Amber MacDonald (Lanark County Victim Services)

JUSTICE

IDENTIFIED ISSUES

1. Youth released from custody with no housing
2. Inadequate courthouse facility
3. Police – helping people who refuse services offered
4. Programs for women offenders
5. Systemic discrimination of women, lack of true experience of justice for women
6. Limited resources for individuals on probation
7. Bail – supervision concerns
8. Gangs in rural areas/human trafficking
9. Access to prescriptions for health/mental health medications upon release from jail
10. Supports for individuals with developmental disabilities
11. Establish a Child Advocacy Centre

ACTIVITIES COMPLETED, ONGOING OR UNDERWAY	
Increase access to social supports, including general practitioners, for offenders in discharge planning to improve health and mental health (build capacity, increase number of probation officers for programming).	✓
Support partner efforts to develop a child advocacy centre for Lanark County and Smiths Falls.	✓
Meet with justice partners to review suggestions from survivors of domestic violence on how to improve experiences in justice system.	✓
Promote services available for victims of human trafficking and continue education to public, agencies and businesses about warning signs.	✓
Advocate for improved court facility in Lanark County (including CCTV courtrooms).	✓
Continue referrals to situation table and intervention efforts for those not accepting services (rapid intervention efforts).	✓
Enhance/promote existing court supports and system navigation services (i.e. VWAP).	✓
Encourage or enhance safety planning in the courthouse – volunteer in courtroom (circle of care – emotional support in courtroom, tours of courtroom).	✓
ACTIONS REQUIRING UPDATES OR FOLLOW-UP	
Establish or enhance existing supports for offenders who have been victims of violence (including sexual and domestic). Consider more programs similar to Men's Sheds.	📌
Advocate for Unified Family Court and a dedicated Superior Court judge for Lanark County.	📌
Enhance services (and accessibility to them) for sexual offenders, such as psychiatry, psychologists, and cognitive services.	📌
Establish support services for youth victimized by gang activity and other victimization supports; provide safety planning and supports and something specifically targeted to kids victimized by gang activity in the area and preventive in nature to start to address the gang issues.	📌

Ensure appropriate medication-related programs for offenders are set up upon discharge (confirm process in place and being followed).	
Promote the early resolution program through court.	
Improve connections to the Family Court Support Program to ensure awareness and availability.	
Implement/enhance door knocks and electronic monitoring as part of bail supervision.	
Support efforts to establish safe housing for offenders with supports.	
Emergency housing for youth with some type of supervision.	
Information sharing of offenders' discharge plan to appropriate services.	

OUTCOMES	MEASURABLES	PROGRESS
Increased education and/or enhancements around programs available to help male offenders who are victims of sexual assault or domestic violence.	• Inventory of programs available and number of program materials distributed. • Review annual reporting with stakeholders on activities in community.	• Follow up needed • Follow up needed
Improved program capacity for probation officers to increase access to supports for offenders in discharge planning to improve health and mental health.	• Track probation and parole funding for increases in staffing and/or programs to support offenders.	• Follow up needed
Advocacy for Unified Family Court, dedicated Superior Court Judge and improved courthouse facility in Lanark County.	• Track and monitor progress on these initiatives with stakeholders and local leadership.	• Follow up needed
Development of a child advocacy centre in Lanark County.	• Track progress on development of centre with stakeholders. • Number of referrals to Child Advocacy Centre.	• Completed • Statistics from CYAC
Improved experiences in justice system for victims of domestic violence and increased education around supports currently available.	• Lanark County Victim Services (when involved) and Victim Witness Assistance Program statistics regarding provision of services/information. • Survey of victims/survivors following justice system navigation. • Monitor number of hours available for court support for victims on an annual basis (LCIH in 2017/18 had 8.25 hours weekly).	• Compile stats from partners, including Victim Advocate • To be completed through Victim Advocate program • Compile hours through Court Support and Victim Advocate

Established supports for youths victimized by gang activity.	Track referrals to agencies by Smiths Falls Police and Lanark County OPP.	Follow up needed
Established supports for victims of human trafficking.	Track number of programs offered by Lanark County Victim Services and partners.	Follow up needed
Improved bail supervision.	- Track compliance enforcement statistics (Smiths Falls Police Service). - Track number of bail condition breaches by accused and nature of supervision through police and probation and parole.	- Follow up needed - Follow up needed
Improved awareness of and/or access to appropriate housing for youth (17 and under) released from custody.	Track number of youth released with no fixed address.	Follow up needed

Team Leaders:

Insp. Karuna Padiachi (Lanark County OPP), Deputy Chief Rick Labelle (Smiths Falls Police Service), Peggy MacLean (Adult Probation and Parole), Erin Lee (Lanark County Interval House)

INDIGENOUS HEALTH AND WELL-BEING

IDENTIFIED ISSUES

1. Lack of knowledge of shared history
2. Lack of local Indigenous services
3. Addressing Calls to Action from Truth and Reconciliation Commission
4. Missing and Murdered Indigenous Women

ACTIVITIES COMPLETED, ONGOING OR UNDERWAY	
Collaborate to identify existing Indigenous (and other cultural) services in the county, gaps and possible connections to external services. Promote and share information	✓
Work with school boards to build upon culturally responsive pedagogy is offered related to understanding Canada's past specific to Indigenous issues.	✓
Provide opportunities in community for anti-oppression/anti-racism training and to increase understanding of residential schools and intergenerational trauma.	✓
Increase awareness of Indigenous services available as part of situation table referrals.	✓
ACTIONS REQUIRING UPDATES OR FOLLOW-UP	
Work with community partners and municipalities to develop a strategy and work plan to implement Truth and Reconciliation Calls to Action that includes statements on appropriate protocols.	📌
Support OPP outreach efforts into Missing and Murdered Indigenous Women inquiry through information distribution.	📌
Ensure Indigenous-specific mental health services are available and accessible.	📌
Support work already happening on Indigenous mental health and the outdoors, and look for additional opportunities.	📌
Raise awareness about Indigenous system navigators for health care to include cultural considerations and protocol regarding youth in care and access to health-care services, for example.	📌
Support efforts of regional collaboration working on addressing issues around children/youth in care (coming here from North). Support shared training and advocacy efforts.	📌
A strategic trauma-reduction strategy must include Calls to Action.	📌

OUTCOMES	MEASURABLES	PROGRESS
Increased understanding of shared history between Indigenous people and those who came after.	Number of organizations that acknowledge Indigenous territory as part of their meeting protocol.	Survey needed
Completed strategy and work plan to implement Truth and Reconciliation Calls to Action	Strategy, work plan and protocols completed.	Follow up needed

and related protocols guided by the 10 principles of reconciliation.		
Increased awareness and promotion of existing supports for Indigenous services, and enhanced supports where necessary.	- Analyse survey data in schools to determine awareness of supports. - Track the number of Indigenous women accessing support services as a result of domestic violence (LCIH, VWAP, LCVS). - Track outcomes and engagement via survey with Indigenous women related to experience and process. - Remain engaged in related honourings and activities related to violence against Indigenous women and girls (Sisters in Spirit, NAD, Red Dress project, etc.)	- Follow up needed - Follow up needed - Follow up needed - Ongoing

Team Leader:

Larry McDermott (Indigenous Representative)

CULTURE AND DIVERSITY (LGBTQ, RACISM, RADICALIZATION)

IDENTIFIED ISSUES

1. Addressing stigma, discrimination, racism and bullying
2. Rise in violent extremism; radicalization
3. Increased French-language supports
4. Need for a centre for gender and sexual diversity
5. Supports for new Canadians

ACTIVITIES COMPLETED, ONGOING OR UNDERWAY	
Follow up on anti-oppression/anti-racism training for agencies to enable them to implement policies and practices into activities.	✓
Provide opportunities in community for anti-oppression/anti-racism training.	✓
Inventory and promote services available for new Canadians; connect with navigator to assist with system navigation for new Canadians.	✓
Conduct training/education to address stigma and discrimination and target specific audiences (general public, agencies, politicians, health service providers, parents (re: cultural considerations, gender), etc.).	✓
Increase awareness of cultural services available as part of situation table referrals.	✓
ACTIONS REQUIRING UPDATES OR FOLLOW-UP	
Work with school boards to determine where additional education supports may be needed to address racism.	📌
Explore opportunities/scope for a Centre for Gender and Sexual Diversity.	📌
Enhance education about root causes of radicalization; work with schools and faith groups for early identification and support provisions.	📌
Acquire and implement early-intervention strategies for agencies and organizations to detect radicalization and connect individuals to supports.	📌
Determine need and supply French-language services for mental health counselling and in violence against women sector for both women and children.	📌

OUTCOMES	MEASURABLES	PROGRESS
Increased anti-oppression/anti-racism, stigma/discrimination/anti-bullying activities with agencies and community.	- Track activities and events in schools/school boards, including programs by OPP and Smiths Falls Police Service. - Track educational opportunities across community-based agencies.	- Inclusive Voices launched; additional follow up needed - Training coming up in 2021. Inclusive Voices video series launched
Increased awareness of services available for new Canadians.	Track number of students registered for English as a	Follow up needed

	Second Language courses at TR Leger schools; number of programs offered.	
Increased awareness and enhancements for gender and sexual diversity supports.	• Monitor the number of public schools that have formed Gay Straight Alliance groups and how active the groups are. • Number of agencies that have participated in LGBTQ+ safer spaces training. • Number of agencies that are identified as LGBTQ+ safe spaces.	• Follow up needed • Follow up needed • Follow up needed
Increased awareness of French language services available.	• Monitor French-language speaking demographics to determine needs.	• Follow up needed

Team Leaders:

Erin Lee (Lanark County Interval House); Insp. Karuna Padiachi (Lanark County OPP)