

Safer Community Committee (SCC)
Meeting 4 - September 19, 2023
6:30 PM

Attendees

Members in attendance:

Meaghan C., Naureen Choudhry, Laurence DeWolfe, Nigel Fick, Derek Finkle, Emily Hill, Rebecca Ho, Aparna Kajenthira, Gillian Kolla, Ashley McPherson, Andrea Nickel, Jen Orenstein, Edward Speicher, Christiane Tetrault, Mike Wilson.

Advisors in attendance:

Sarah Ehrhardt, Angela Robertson.

Meeting support attendees:

Dana Granofsky (Facilitator), Julie Grgar (SCC Administrative Support), Amber Kroegel (BGM Strategy Group), Shannon Wiens (Convener).

Absent:

Katheryn Adams (Member), Scott McKean (Advisor), Kim O'Toole (Advisor), Mike Hayles (Advisor).

Welcome, Summaries Review, and Agenda

The Facilitator welcomed members of the Safer Community Committee (SCC) and shared the SCC's agenda for Meeting 4:

1. **Validating summaries of Meetings 2 and 3:** Provide feedback to ensure summaries reflect key discussion points, noting that these meeting summaries will be made public as part of SRCHC's commitment to transparently sharing the SCC process.
2. **Refining Terms of Reference:** Update membership in Terms of Reference based on attendance and to clarify the roles of different contributors.
3. **Drafting recommendations:** Building on preliminary recommendations from Meeting 3, solidify recommendations and refine with advisors to increase their actionability.
4. **Recommendations for Community Engagement:** Identify recommendations targeted to SRCHC's ongoing relationship and engagement with the community.
5. **Report outline:** Identify key themes and messages to highlight in the SCC's final report.

The Facilitator emphasized that while Meetings 1-3 largely focused on the exchange of ideas, Meeting 4 is about generating a concrete set of actionable items that carry the support of members. To help the SCC achieve this goal, the Facilitator shared two guiding questions:

1. What will help make the community safer? (What will effectively address the safety challenges the SCC has identified?)
2. What can we agree on? (What recommendations make the best use of the range of perspectives brought together at this table, and the power that comes from finding areas of commonality?)

The Facilitator reminded members that they could send ideas and comments in a private message if they felt more comfortable doing so than sharing in front of the group, while encouraging members to do so sparingly.

1. Validating summaries of Meetings 2 and 3

The Facilitator provided opportunity for members to share feedback on the summaries of Meetings 2 and 3, noting that the purpose of the summaries is not to act as meeting minutes, but to reflect all themes explored in the meeting and represent the range of perspectives shared. Members should send requests for edits promptly as the summaries will be posted publicly.

One member asked whether the presentation from the Leslieville Harm Reduction Coalition had been noted in the Meeting 3 summary. The Facilitator responded that the summary did note the presentation of the group's recommendations, while the Coalition's full petition and analysis of the respondents was made available as part of the SCC's pre-reading materials.

2. Terms of Reference Updates and SCC Membership

The Facilitator presented an updated membership structure for the SCC, to account for the different contributions and roles of participants. Specifically:

- The Terms of Reference will distinguish between voting members and advisors.
- Advisors are non-voting contributors who are participating in order to share relevant information to craft effective recommendations – including context on why certain requests previously made of SRCHC have not been implemented. Advisors will not be credited among report authors, and their formal endorsement is not required to determine final recommendations.
- Voting members are now comprised exclusively of individuals whose daily lives are affected by the safety of the neighbourhood, and include residents and members of local businesses and service organizations.

The Facilitator invited feedback from the SCC on these updates.

- One member noted that a key stakeholder group not represented at the SCC is SIS service users, and emphasized that their input is essential to ensuring the SCC's recommendations are effective.
- Two members expressed concern with grouping SRCHC Board members under the category of "community members" expressing that their mandate as Board members amounts to a conflict of interest.
 - One member responded that all SCC members have different perspectives and motivations that could be considered "conflicts of interest"; no member represents a truly neutral body.
 - A Board member noted that as a community health centre, SRCHC is required to have a Board that represents the community. Membership on the Board is limited to those who are from the community, and therefore Board members – like other community members – operate in the interest of the community. Additionally, the Board does not handle operational duties.
 - One of the SCC members who expressed concern thanked the SRCHC Board member for the explanation and deeper understanding, and asked for clarification on who handles operational duties. The Board member responded

that the senior leadership team runs the SRCHC as a whole, while different staff manage different programs.

- One member expressed concern that SRCHC's CEO and lead of SIS services were not present at this meeting. A SRCHC senior staff member clarified that they were present today representing SRCHC's senior leadership.

The Facilitator reminded the group that 100% of community residents who lived in the catchment area and stepped forward to participate were invited to be part of the SCC, and that will remain the case. No further discussion of membership would be had, and anyone who could not trust the process under these terms was invited to step off the Committee at that point. No one resigned.

3. Drafting recommendations

The Facilitator presented all of the potential solutions raised in Meeting 3 across the six thematic areas (presented below). The Facilitator invited feedback from the SCC on solutions that should be removed, added or revised, editing the draft recommendations on a shared screen as they were discussed. Advisors provided input on whether recommendations are actionable, for consideration of the SCC.

Theme: Nowhere to go

Safety risks identified by the SCC in meeting 2 arising from people having nowhere to go were:

- Lack of space for people experiencing homelessness
- Access to public washrooms for people experiencing homelessness
- Masturbation and sexual activity
- Garbage/defecation/urination
- Public access blocked

The SCC did not identify any solutions in this area in Meeting 3, but discussed a range of potential recommendations in Meeting 4. After wide-ranging and heated discussion, the following recommendations carried the support of the majority of SCC members:

- City of Toronto should create a drop-in centre in the east end to provide daytime access to amenities and a place to go during the day. Services are needed in the east of Toronto after a thoughtful conversation about an appropriate location.
- City of Toronto should expand access to public washrooms in our neighbourhood and all parts of the city, recognizing the shortage of public washrooms.
 - An immediate action would be to consider appropriate available locations for port-o-potties in the vicinity.
- South Riverdale CHC should expand the presence of street outreach workers to provide assistance to those in need. We strongly encourage coverage outside of HC operating hours. Expansion of community outreach could include the development of new metrics for measuring community safety.
- All orders of government to resolve homelessness crisis through expansion of supportive housing

Theme: Substance use and mental health

Safety risks identified by the SCC in meeting 2 arising from substance use and mental health were:

- Overdose
- Visible substance use
- Lack of training and experience interacting with people using substances
- Disordered behaviour, aggressive language, screaming, fighting

SCC members reviewed the solutions raised at meeting 3 and discussed whether to remove, add, or revise the suggestions on this list:

- Institute mobile units/alternate locations (such as in hospitals) to prevent concentration of need and minimize demand on the SRCHC.
- Relocate SIS further away from school
- Cease SIS operations at SRCHC, and all other bricks and mortar formats
- Ensure any alternative considers pathways to support people who wish to pursue sobriety
- Province to create strategy to address substance use crisis.
- SRCHC/TPH establish/amplify resources, training, and communication to businesses for how to 'survive together' and navigate difficult situations.
- Decriminalize substances
- Provide safe supply to undercut illicit selling of drugs

The Committee's debated the merits of decriminalization and safe supply, and the relevance of that discussion to the SCC's mandate; the preferred alternative to the current model and location of consumption and treatment services, and the capacity of the SCC to make such a determination; the importance of centering the safety of children in the discussion; the need for ongoing evaluation and learning of any policy change; whether the presence of the Health Centre attracts people who present a threat to the community or whether it serves people who are already there, and whether it is appropriate to assume people who present a threat to the community are clients of the Health Centre, among other topics. Some suggestions about the need for ongoing engagement with the community on the part of the Health Centre as a demonstration of accountability were noted for when the group discusses the theme of community engagement.

Ultimately, the majority of Committee members supported the following recommendations:

- SRCHC work with Toronto Public Health, provincial Ministry of Health officials, federal Health Canada officials, and medical experts to review the most suitable delivery setting and delivery model for supervised consumption services. The location(s) and delivery model should be determined based on robust evidence on agreed upon metrics by residents and community, stakeholders, government decision-makers and take into account proximity to schools and daycares
 - Ideas should be piloted and reviewed against the goals of: fewer overdose deaths, less public disorder, service usage, community complaints – with results fed through CLC to evaluate over time.
 - Ensure any alternative considers pathways to support people who wish to pursue evidence-based treatment to reach stability.

- South Riverdale CHC should seek additional funding to expand counselling services on site for people struggling with substance use.
- Relevant actors should seek partnerships and funding to expand safe consumption services including shelters, Toronto Community Housing buildings, community agencies and other settings.
- Province should create a strategy to address substance use crisis.
- SRCHC and TPH should establish and disseminate resources, training and communication to businesses on how to navigate difficult situations. This should be considered a necessary intervention at this moment, but insufficient in and of itself to solve issues.

There was a lack of agreement on whether the SCC should recommend that the provincial government fund safe supply and that the federal government decriminalize illicit substances. With some members in favour and others opposed, the Facilitator offered two options to the group:

1. These recommendations could be included in the report, with those opposed granted opportunity in the report to make a counter argument.
2. These recommendations could be excluded from the report's final recommendations, but referenced in the preamble as areas members could not come to consensus on.

Members expressed support for the second option.

The Committee determined that a fifth meeting would be required to develop recommendations. The Facilitator offered that members would be canvassed for their availability, and that the date would be selected based on what works for the majority. The Facilitator also noted this meeting will not revisit items that have been closed: wording can be refined, but the substantive meaning of recommendations already established by the SCC will not be changed.