



Community Wellness Centres and HUoS Update

Edmonton Police Commission

July 20, 2017

Superintendent D. Veitch
Coordinate Policing Division





The HUoS Project

In February 2013 the Heavy Users of Service (HUoS) Leadership Group was formed, consisting of representatives from 16 different service providers.

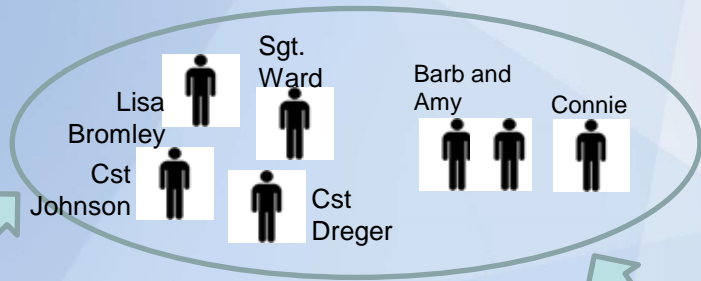
- Provincial Funding was provided for three years and funding has just been secured for an additional year (June 2018)
- Tripartite funding between CoE, REACH and EPS for Social Workers and Admin Assistant



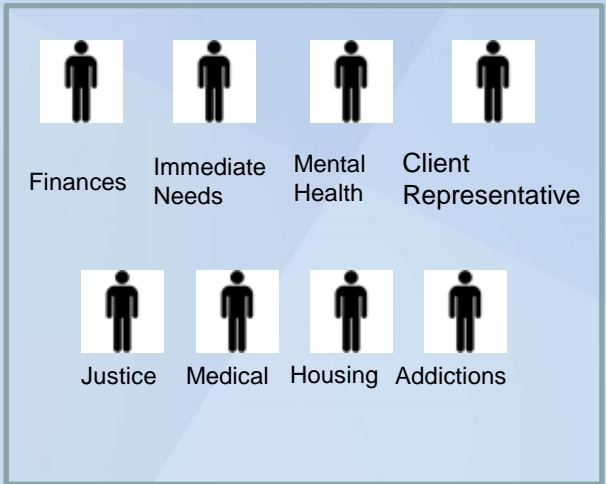


HUoS Integrated Case Development

Navigation and Coordination Centre



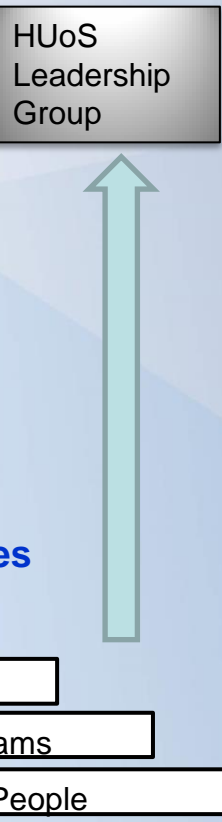
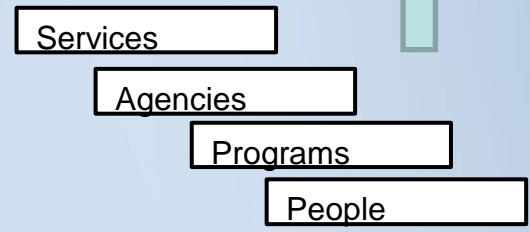
Case Development Table



Client



Delivery Resources





HUoS Client Status

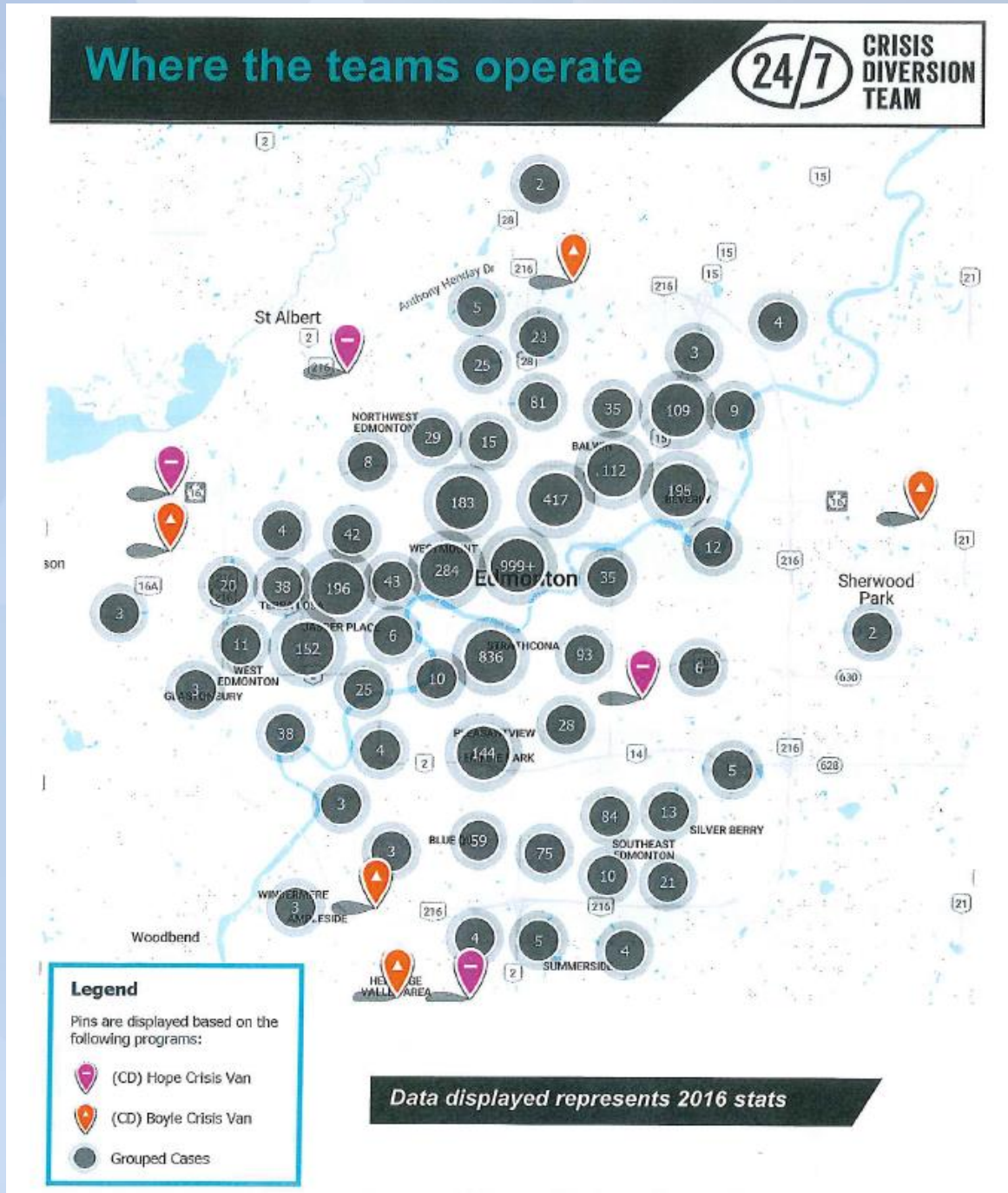
- 14 active clients with case plans in place.
- Each client has multiple tasks associated, such as Justice navigation, housing applications, income support, capacity assessments, injury treatment, etc.
- 8 are housed, 2 reside at Alberta Hospital, 1 on Hospital Ward
- *CH Weekly Win*: 15 years homeless, addiction issue, health challenges... just housed
- 6 HUoS Clients considered in *Maintenance Phase*



D Division
Intervention
Constable
2-3 HUoS
Clients



This map reflects where 24/7 Crisis Diversion has been making contact with street-involved people.





The Community Centre at Boyle Street

- Funding from Seniors and Housing (\$250K)
- Redesign, reimagine, rethink – BSCS
- Expand services offered through a co-location concept as a new collaborative approach
- Began Core Partners meeting in February 2017
- Warm response from communities – consultations and engagement ongoing
- Presupposes the availability of the Old ERC
 - Cost
 - Interest from other groups
 - Opinion



THE WELLNESS CENTRE WILL PROVIDE AN INTEGRATED CASE PLANNING MODEL, TO SUPPORT CLIENTS TO ACHIEVE BETTER OUTCOMES. IT WOULD BE BOTH COORDINATED AND COLLABORATIVE AND MOVE COMPLEX CLIENTS THROUGH THE VARIOUS AND OVERWHELMING BARRIERS IN ORDER TO ACCESS SERVICES AND SUPPORTS.

A coordinated and sustainably funded approach is required to adequately deliver core crisis services including transportation, counselling, intoxication, detox, and health services. To address current gaps in service and to provide a "no wrong door" approach to crisis service delivery, the Community Wellness Services initiative proposes an integrated model with providers adopting common platforms for information sharing, case management and client transitions between critical services to achieve better outcomes.

At the heart of the model is a health and social services hub for those individuals who are chronically homeless, addicted and/or with mental health issues. Agency partners and government service providers, including such ministries as Alberta Health Services, Alberta Indigenous Relations, and Alberta Human Services, would jointly deliver services, thus enabling greater connectivity. The hub would provide access to supports across a continuum of crisis and transitional services as well as permanent housing supports. With Indigenous Peoples and other vulnerable groups represented, essential to the model are services delivered in a culturally sensitive and trauma-informed manner.

Integrated Case Planning Hub

Proposal resulted from a group of service providers: Inner City Agency Dialogue

Three parts to the service delivery model:

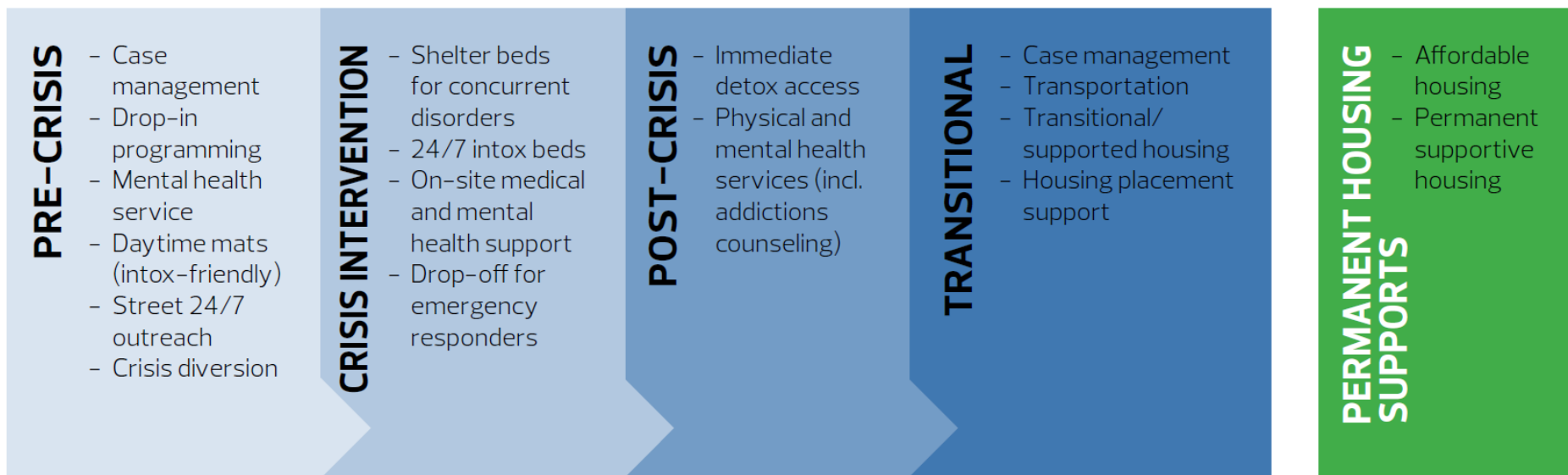
- 1) Integration and augmentation of existing services,
- 2) Pilot a co-located service hub, and
- 3) Permanent 24/7 co-located service hub



Community Wellness Services: For Vulnerable Persons w/ Complex Needs

- Based on developing an integrated case development model
- Envision a 24/7 co-located service hub: wrap-around services, transitional and supportive housing, improve assessment, triage and referral
- Narrowing focus on 300-600 street-involved people *“who suffer from chronic intoxication and mental illness, and addictions and have complex medical needs and are homeless”*
- Defining and addressing barriers and gaps

Figure 1. Continuum of crisis services



- Homeless Count 2016: 1,752 @70% chronic
- Shelter data 8,600 people in various stages of homelessness, broken into 3 categories: Transitional, Episodic, Chronic (70% high acuity)
- BSCS provides services and intake for 10,000-12,000 people per year

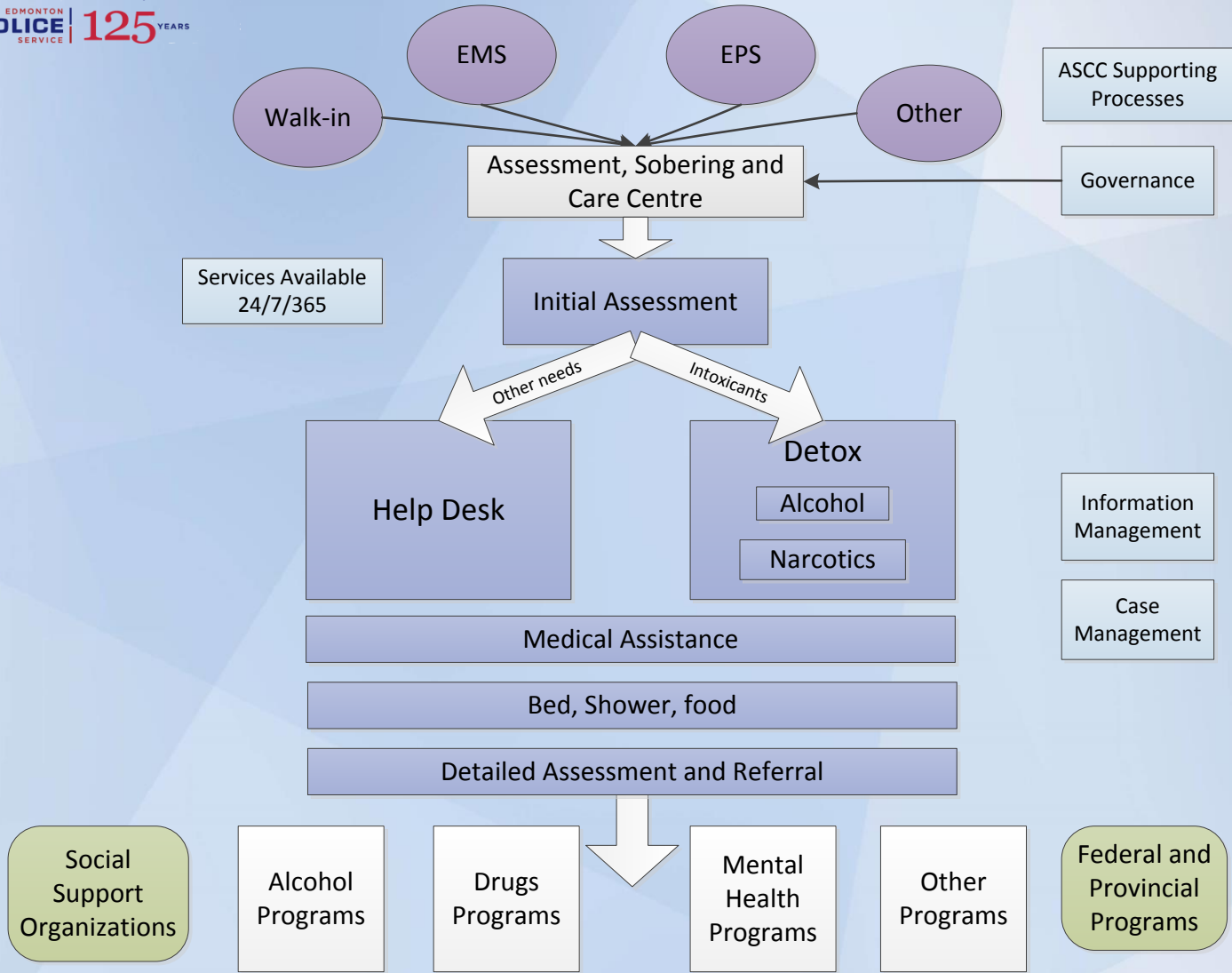


Integrated Case Planning Hub

- Terms of Reference completed
- Detailed Work Plan developed by REACH Edmonton:
Research includes:
 - Develop criteria and suitable/non-suitable areas for Hub
 - Clients service groupings (pre-crisis, crisis intervention, post crisis and transitional)
 - Identify and current capacity service gaps
 - Identify and evaluate integrated approaches for improved service delivery
 - Outline client and systems outcomes
 - Identify a shared client information system
 - Develop an appropriate Public Engagement Plan



Conceptualization of Integrated Case Planning Hub





The Mayors Motion in Council

The Administration will work with the Province, EPS and community stakeholders to prepare a shared “*Inner City Wellness Plan*”, aligned with current initiatives...

1. Develop a proposal for a community wellness centre, achieving:
 - a) reduce crime and social disorder;
 - b) optimize the use of policing and health care resources, in servicing vulnerable persons;
 - c) delivering a strategic approach to transition ‘clients’ into supportive housing, treatment and programs
2. Invite existing service providers to co-locate/consolidate into a renovated or purpose-built community wellness building
3. Examine P3 funding models



Wellness... a Theme Runs Through Here

