

Notice of Meeting and Meeting Agenda Hospitals and Housing Committee

Wednesday, June 7, 2023	1:30 PM	6th Floor Boardroom
		625 Fisgard St.
		Victoria, BC V8W 1R7

K. Murdoch (Chair), J. Caradonna (Vice Chair), M. Alto, P. Brent, S. Brice, Z. de Vries, G. Holman, P. Jones, D. Kobayashi, C. McNeil-Smith, L. Szpak, C. Plant (Board Chair, ex officio)

The Capital Regional District strives to be a place where inclusion is paramount and all people are treated with dignity. We pledge to make our meetings a place where all feel welcome and respected.

1. Territorial Acknowledgement

2. Approval of Agenda

3. Adoption of Minutes

3.1. <u>23-383</u> Minutes of the May 3, 2023 Hospitals and Housing Committee Meeting

<u>Recommendation:</u> That the minutes of the Hospitals and Housing Committee meeting of May 3, 2023 be adopted as circulated.

Attachments: Minutes - May 3, 2023

4. Chair's Remarks

5. Presentations/Delegations

The public are welcome to attend CRD Board meetings in-person.

Delegations will have the option to participate electronically. Please complete the online application at www.crd.bc.ca/address no later than 4:30 pm two days before the meeting and staff will respond with details.

Alternatively, you may email your comments on an agenda item to the CRD Board at crdboard@crd.bc.ca.

6. Committee Business

6.1. <u>23-378</u> 2023 Minor Capital Projects and Equipment - Approval of Capital Bylaw

The Hospitals and Housing Committee recommends to the Capital Regional Hospital Recommendation: District Board: 1) That the recommended 2023 Minor Capital Projects totalling \$3,750,000 be approved and expensed from the 2023 requisition; 2) That the recommended 2023 equipment grants of \$30,000 to Mount St. Mary Hospital and \$2,925,000 to Island Health be approved and expensed from the 2023 requisition; 3) That Bylaw No. 417, "Capital Regional Hospital District Bylaw No. 187, 2023", be introduced and read a first, second and third time; and 4) That Bylaw No. 417 be adopted. Attachments: Staff Report: 2023 Minor Cap'l Projs & Equip't-Approval of Bylaw Appendix A: Island Health 2023 Minor Capital Project List Appendix B: Island Health 2023 Equipment List Appendix C: Bylaw No. 417 23-379 CRD Participation in a Regional Community Safety and Wellbeing Plan and Council The Hospitals and Housing Committee recommends to the Capital Regional District Recommendation: Board: That staff be directed to include \$50,000 in funding in the 2024 Provisional budget to support work towards establishing a Regional Community Safety and Wellbeing Plan and Council. Attachments: Staff Report: CRD Participation in a RCSWPC Appendix B: Community Health Network Summary Appendix C: Violence Prevention Accelerator Actions

7. Notice(s) of Motion

6.2.

 7.1.
 23-359
 Motion with Notice: Request for Island Health Presentation on Safe Supply (Director Holman)

 Recommendation:
 To request Island Health present to the Hospitals and Housing Committee regarding measures to scale up the safe supply of opioids and related toxic drugs, and the possible role of the Capital Regional District and local governments in supporting such

8. New Business

9. Adjournment

The next meeting is July 5, 2023.

measures.

To ensure quorum, please advise Tamara Pillipow (tpillipow@crd.bc.ca) if you or your alternate cannot attend.



Meeting Minutes

Hospitals and Housing Committee

Wednesday, May 3, 2023	1:30 PM	6th Floor Boardroom
		625 Fisgard St.
		Victoria, BC V8W 1R7

PRESENT

Directors: K. Murdoch (Chair), J. Caradonna (Vice Chair), M. Alto (1:32 pm), P. Brent (EP), S. Brice, Z. de Vries, C. Harder (for L. Szpak), G. Holman (EP) (1:36 pm), P. Jones, D. Kobayashi, C. McNeil-Smith

Staff: T. Robbins, Chief Administrative Officer; N. Chan, Chief Financial Officer; K. Lorette, General Manager, Planning and Protective Services; M. Barnes, Senior Manager, Health and Capital Planning Strategies; D. Elliott, Senior Manager, Regional Housing; R. Lachance, Senior Manager, Financial Services; K. Mah, Healthy Communities Planner, Health and Capital Planning Strategies; M. Lagoa, Deputy Corporate Officer; T. Pillipow, Committee Clerk (Recorder)

EP - Electronic Participation

Guest(s): L. Lee, KPMG; Dr. M. Benusic, Island Health; Dr. R. Gustafson, Island Health

Regrets: Directors L. Szpak, C. Plant

The meeting was called to order at 1:30 pm.

1. Territorial Acknowledgement

Director Caradonna provided a Territorial Acknowledgement.

2. Approval of Agenda

MOVED by Director McNeil-Smith, SECONDED by Director Brice, That the agenda for the May 3, 2023 Hospitals and Housing Committee meeting be approved. CARRIED

3. Adoption of Minutes

3.1. <u>23-181</u> Minutes of the April 5, 2023 Hospitals and Housing Committee Meeting MOVED by Director Kobayashi, SECONDED by Director Brice, That the minutes of the Hospitals and Housing Committee meeting of April 5, 2023

That the minutes of the Hospitals and Housing Committee meeting of April 5, 202 be adopted as circulated. CARRIED

4. Chair's Remarks

There were no Chair's remarks.

5. Presentations/Delegations

5.1.	<u>23-326</u>	Presentation: Lenora Lee, KPMG re CRHD and CRHC 2022 Audit Findings Reports
		L. Lee, KPMG presented the CRHD and CRHC 2022 Audit Findings Reports.

5.2. <u>23-325</u> Presentation: Dr. Mike Benusic, Island Health, Re: Clean Air Bylaw Island Health Annual Report to CRD

Dr. M. Benusic presented the Clean Air Bylaw Island Health Annual Report to CRD.

Discussion ensued on the following:

- statistics and health measures related to vaping
- the CRHC non-smoking policy including grandfathering clauses
- the youth engagement campaign
- bylaw enforcement and patrolling

5.3. <u>23-162</u> Presentation: Dr. Réka Gustafson, Island Health, Re: Decriminalization & CRD Clean Air Bylaw

Dr. R. Gustafson presented an update on Decriminalization & CRD Clean Air Bylaw.

Discussion ensued on the following:

- statistical data related to decriminalization
- establishing provision of safe supply
- the clean air bylaw related to drug use
- 5.4. <u>23-343</u> Delegation Christiane Sadeler; Resident of Central Saanich: Re: Agenda Item 7.1.: Motion with Notice: Regional Community Safety and Wellbeing Plan and Council (Director Plant)

C. Sadeler spoke to Item 7.1.

6. Committee Business

- 6.1. 23-232 Capital Regional Hospital District 2022 Audit Findings Report and Audited Financial Statements MOVED by Director Kobayashi, SECONDED by Director McNeil-Smith, The Hospitals and Housing Committee recommends to the Capital Regional Hospital District Board: That the Capital Regional Hospital District 2022 Audited Financial Statements be approved.

CARRIED

6.2.	<u>23-231</u>	Capital Region Housing Corporation 2022 Audit Findings Report and Audited Financial Statements
		MOVED by Director Kobayashi, SECONDED by Director McNeil-Smith, The Hospitals and Housing Committee recommends to the Capital Region Housing Corporation Board: That the Capital Region Housing Corporation 2022 Audited Financial Statements be approved. CARRIED
6.3.	<u>23-335</u>	Next Steps Related to Provincial Decriminalization of Controlled Substances
		K. Lorette presented Item 6.3. for information.
		Discussion ensued on the minimum distance requirements as stated under 2. (1) of amended CRD Bylaw 3962.
6.4.	<u>23-338</u>	Future Housing Partnerships Alternative Approval Process and Bylaw Amendments
		K. Lorette spoke to Item 6.4.
		Discussion ensued regarding what information is going to be forwarded to municipal councils.
		 MOVED by Director de Vries, SECONDED by Director Brice, The Hospitals and Housing Committee recommends to the Capital Regional District Board: 1. That Bylaw No. 4551, "Land Assembly, Housing and Land Banking Service Establishment Bylaw No. 1, 2010, Amendment Bylaw No. 2, 2023", be introduced, read a first, second, and third time; 2. That Bylaw No. 4552, "Land Assembly, Housing and Land Banking Loan Authorization Bylaw No. 3, 2023", be introduced, read a first, second, and third
		time; and, 3. That participating area approval for Bylaws No. 4551 and No. 4552 in the municipalities be obtained via council consent on behalf of electors, and by alternative approval process in the electoral areas, and if successful, that staff provide the bylaws to the Inspector of Municipalities for approval. CARRIED
6.5.	<u>23-318</u>	Previous Minutes of Other CRD Committees and Commissions for Information
		There was no recommendation. The following minutes were for information only: a) Regional Housing Trust Fund Commission minutes - May 26, 2021 b) Tenant Advisory Committee minutes - December 2, 2022

7. Notice(s) of Motion

7.1.	<u>23-322</u>	Motion with Notice: Regional Community Safety and Wellbeing Plan and Council (Director Plant)
		Discussion ensued on staff resources.
		MOVED by Director Caradonna, SECONDED by Director de Vries, The Hospitals and Housing Committee recommends to the Capital Regional District Board: That staff be directed to report back to the Hospitals and Housing Committee on the benefits and implications of participating in a regional Community Safety and Wellbeing Plan and Council for the Capital Region. CARRIED
7.2.	23-359	Notice of Motion: Request for Island Health Presentation on Safe Supply (Director Holman)
		Director Holman provided the following Notice of Motion for consideration at the next meeting of the Hospitals and Housing Committee.
		"To request Island Health present to the Hospitals and Housing Committee regarding measures to scale up the safe supply of opioids and related toxic drugs, and the possible role of the Capital Regional District and local governments in supporting such measures."
8. Nev	v Business	
		There was no new business.
9. Adj	ournment	
		MOVED by Director McNeil-Smith, SECONDED by Director de Vries, That the May 3, 2023 Hospitals and Housing Committee meeting be adjourned at 2:59 pm. CARRIED
CHAIR		

RECORDER



REPORT TO HOSPITALS AND HOUSING COMMITTEE MEETING OF WEDNESDAY, JUNE 07, 2023

SUBJECT 2023 Minor Capital Projects and Equipment – Approval of Capital Bylaw

ISSUE SUMMARY

Approval of a capital bylaw is required by the Capital Regional Hospital District (CRHD) Board to authorize funding of healthcare minor capital and equipment projects in the region.

BACKGROUND

Minor Capital Projects (MCPs) sustain the region's health infrastructure through additions and improvements to existing healthcare facilities (such as replacement of aging or failing building systems or components), renovations or upgrades to accommodate changes in service delivery and responding to technological advances. MCPs are valued between \$100,000 and \$2 million (M) and the CRHD contributes 40% towards the total cost of Island Health minor capital projects to a maximum of \$3.75M annually.

The 2023-2032 approved CRHD Capital Plan established funding of \$3.75M for Island Health 2023 MCPs and \$2.955M toward healthcare equipment purchases identified by Island Health (\$2.925M) and Mount St. Mary Hospital (\$30K). Staff has worked diligently with Island Health to finalize the list of 2023 MCPs and equipment purchases (Appendix A and B).

Approval of a capital expenditure bylaw is required by the CRHD Board to expend these funds (Appendix C). Schedule A of the bylaw (Appendix C) summarizes CRHD's contribution to MCPs and Equipment, in line with the approved 2023 CRHD Budget.

ALTERNATIVES

Alternative 1

The Hospitals and Housing Committee recommends to the Capital Regional Hospital District Board:

- 1) That the recommended 2023 Minor Capital Projects totalling \$3,750,000 be approved and expensed from the 2023 requisition;
- 2) That the recommended 2023 equipment grants of \$30,000 to Mount St. Mary Hospital and \$2,925,000 to Island Health be approved and expensed from the 2023 requisition;
- 3) That Bylaw No. 417, "Capital Regional Hospital District Bylaw No. 187, 2023", be introduced and read a first, second and third time; and
- 4) That Bylaw No. 417 be adopted.

Alternative 2

That the 2023 Minor Capital Projects and Equipment – Approval of Capital Bylaw report be referred back to staff for additional information.

IMPLICATIONS

Financial Implications

Providing annual funding for MCPs and equipment establishes a mechanism for the CRHD to invest in sustaining and upgrading the region's healthcare capital assets thereby enhancing

patient care and safety for residents. Through its funding commitment to Island Health's 2023 MCPs and equipment priorities, the CRHD supports the completion of previously approved projects and new priority projects. The 2023 CRHD budget was approved on March 15, 2023 and included \$2.955M for Capital Equipment Grants and a \$3.750M transfer to reserve to fund the 2023 MCP initiatives that will be cash-flowed over three years by Island Health.

CONCLUSION

The Board has identified a community need for appropriate health facilities and equipment. CRHD staff are working with Island Health to identify capital improvements and respond to funding requests for acute care, long term care and hospital equipment. Island Health's MCPs list represents the highest priority needs for the region's healthcare facilities. Staff of the Health and Capital Planning Strategies Division, working together with Island Health, has conducted due diligence for the 2023 MCPs and equipment projects.

The amended 2023-2032 CRHD Capital Plan and 2023 CRHD Operating Budget established funding for both previously approved and newly identified MCPs and, for the equipment priorities provided by Island Health and Mount St. Mary Hospital. Approval of a capital bylaw in the amount of \$6,705,000 is recommended.

RECOMMENDATIONS

The Hospitals and Housing Committee recommends to the Capital Regional Hospital District Board:

- 1) That the recommended 2023 Minor Capital Projects totalling \$3,750,000 be approved and expensed from the 2023 requisition;
- 2) That the recommended 2023 equipment grants of \$30,000 to Mount St. Mary Hospital and \$2,925,000 to Island Health be approved and expensed from the 2023 requisition;
- 3) That Bylaw No. 417, "Capital Regional Hospital District Bylaw No. 187, 2023", be introduced and read a first, second and third time; and
- 4) That Bylaw No. 417 be adopted.

Submitted by:	Michael Barnes, MPP, Senior Manager, Health & Capital Planning Strategies
Concurrence:	Kevin Lorette, P. Eng., MBA, General Manager, Planning & Protective Services
Concurrence:	Kristen Morley, J.D., General Manager, Corporate Services & Corporate Officer
Concurrence:	Nelson Chan, MBA, FCPA, FCMA, Chief Financial Officer
Concurrence:	Ted Robbins, B. Sc., C. Tech., Chief Administrative Officer

ATTACHMENTS

Appendix A: Island Health 2023 Minor Capital Project List Appendix B: Island Health 2023 Equipment List Appendix C: Bylaw No. 417, "Capital Regional Hospital District Capital Bylaw No. 187, 2023"

ISLAND HEALTH 2023/2024 MINOR CAPITAL PROJECT LIST

				Prior Years	
			Total Project		
Site	Portfolio	Project Name	Cost		

				Cash Flow					
				Prior Years		2023/24		2024/25	2025/26
			Total Project						
Site	Portfolio	Project Name	Cost		Annual	Island Health	CRHD	Annual	Annual
Previous Project Approvals				, ,					
Gorge Road Hospital	Facilities Management	GRH Fire Sprinkler System Replacement	1,427,487	453,264	274,223	164,534	109,689	350,000	350,000
Priory Long Term Care	Facilities Management	SI LTC Site Cooling	250,000	200,000	50,000	30,000	20,000		
Queen Alexandra Children's Hospital	Facilities Management	Pearkes Heating Plant Renewal	941,160	466,980	474,180	284,508	189,672		
Royal Jubilee Hospital	Medic'n Systems & Informatics	Pharmacy CIVA Pass-throughs replacement	170,240	133,000	37,240	22,344	14,896		
Royal Jubilee Hospital	WestShore/Urban Greater Vic Cm	Mental Health Capacity Expansion	682,000	519,000	163,000	97,800	65,200		
Royal Jubilee Hospital	Heart Health	LAB4 Heart Catheterization C-Arm	1,950,000	950,000	250,000	150,000	100,000	375,000	375,000
Royal Jubilee Hospital	Medic'n Systems & Informatics	Pharmacy negative pressure storage for hazardous drugs	310,000	55,000	255,000	153,000	102,000		
Seven Oaks Tertiary Mental Health	Facilities Management	SOMH Fire Alarm Replacement	652,074	215,690	136,384	81,830	54,554	150,000	150,000
Victoria General Hospital	Facilities Management	VGH Tower Nurse Station Upgrades	1,132,800	311,200	121,600	72,960	48,640	350,000	350,000
Victoria General Hospital	Facilities Management	VGH DHW Tanks and Heat Exchanger Renewal	872,960	\$654,880	218,080	130,848	87,232		
Victoria General Hospital	Facilities Management	Pneumatic Tube System Modernization and Refurbishment	361,460	260,940	100,520	60,312	40,208		
Victoria General Hospital	Facilities Management	VGH Infant Abduction System	454,300	380,000	74,300	44,580	29,720		
Victoria General Hospital	Facilities Management	VGH Concourse Skylights and Window Replacement	685,939	315,000	370,939	222,563	148,376		
Victoria General Hospital	Operations & Support Services	Nurse Call Upgrade	1,500,000	1,000,000	500,000	300,000	200,000		
Victoria General Hospital	Facilities Management	VGH DT Roof Repairs - Top Up	1,100,400	759,816	340,584	204,350	136,234		
Victoria General Hospital	General Support Services	Walk-in Refrigeration and Freezer Bank	310,000	156,250	153,750	92,250	61,500		
Victoria General Hospital	General Support Services	VGH Laundry E-Tech Rail Upgrade	456,200	371,000	85,200	51,120	34,080		
		Sub-Total	\$ 13,257,020	\$ 7,202,020	\$ 3,605,000	\$ 2,163,000	\$ 1,442,000	\$ 1,225,000	\$ 1,225,000

New Project Approvals								
Gorge Road Hospital	Facilities Management	GRH Fire Safety Panel Replacement	120,000	20,000	12,000	8,000	50,000	50,000
Hillside Seniors Centre	Sooke WstS SanP GIslds&Lab	Health Point Care Centre - exam room conversion	105,000	105,000	63,000	42,000		
Multi Sites (RJH - VGH - SPH)	Facilities Management	Site Wayfinding modernization	600,000	100,000	60,000	40,000	250,000	250,000
Multi Sites (RJH - VGH)	Medic'n Systems & Informatics	AcuDose Automated Dispensing Cabinet Replacement Phase 4	1,617,560	117,560	70,536	47,024	750,000	750,000
Multi Sites (RJH - VGH - SPH)	Facilities Management	VSL Site Safety Repairs	162,840	162,840	97,704	65,136		
Pandora Clinic	MHSU	Permanent OPS Inhalation Site	1,759,137	766,036	459,622	306,414	700,000	293,101
Priory Long Term Care	Legal Svcs Contracts & Priv	PRH Roadway Rehabilitation	275,000	275,000	165,000	110,000		
Royal Jubilee Hospital	Medic'n Systems & Informatics	Carousel replacement - RJH - 3rd of 3 units and installation	454,000	454,000	272,400	181,600		
Royal Jubilee Hospital	Victoria Acute Hospitals	RJH Auxiliary Morgue	200,000	200,000	120,000	80,000		
Royal Jubilee Hospital	Portfolio S	VGH PAC Move to Eagle Creek	850,000	150,000	90,000	60,000	350,000	350,000
Royal Jubilee Hospital	Facilities Management	RJH DT Chiller #3 refurbishment	450,000	50,000	30,000	20,000	200,000	200,000
Royal Jubilee Hospital	Victoria Acute Hospitals	RJH Emergency Dept. Renovation/Replacement	312,262	62,262	37,357	24,905	125,000	125,000
Royal Jubilee Hospital	MHSU	Pembroke Waiting Room	100,000	100,000	60,000	40,000		
Royal Jubilee Hospital	Facilities Management	RJH Reverse Osmosis System Replacement	770,000	100,000	60,000	40,000	350,000	320,000
Royal Jubilee Hospital	Tech Services & Virtual Care	Refresh RJH Firewall and IPS	376,200	76,200	45,720	30,480	150,000	150,000
Royal Jubilee Hospital	Facilities Management	RJH DDC/BAS Controls and Instrumentation Refurbishment	400,000	226,239	135,743	90,496	173,761	
Royal Jubilee Hospital	Facilities Management	RJH Domestic Water System Refurbishment	990,000	190,000	114,000	76,000	400,000	400,000
Royal Jubilee Hospital	Facilities Management	RJH DT Chiller #3 Refurbishment	450,000	150,000	90,000	60,000	150,000	150,000
Royal Jubilee Hospital	Facilities Management	RJH Emergency Department Flooring Replacement	250,000	250,000	150,000	100,000		
Royal Jubilee Hospital	Facilities Management	RJH MP Window Renewal	1,304,218	104,218	62,531	41,687	600,000	600,000
Royal Jubilee Hospital	Sooke WstS SanP GIslds&Lab	Lab Analyzer Installation Renovation	606,066	106,066	63,640	42,426	300,000	200,000
Saanich Peninsula Hospital	Facilities Management	SPH Remove Curtains and Add Doors to Bathrooms	280,250	280,250	168,150	112,100		
Victoria General Hospital	Facilities Management	VGH Cast Iron Plumbing System Replacement	1,500,000	450,000	270,000	180,000	500,000	550,000
Victoria General Hospital	Victoria Acute Hospitals	VGH High Acuity - ICU Major Build	369,389	369,389	221,634	147,756		
Victoria General Hospital	Facilities Management	DHW Piping Replacement	481,000	481,000	288,600	192,400		
Victoria General Hospital	General Support Services	Dish Machine Install and Dishroom Refresh	1,000,000	100,000	60,000	40,000	450,000	450,000
Victoria General Hospital	Facilities Management	VGH #1 Chiller Refurbishment	450,000	50,000	30,000	20,000	200,000	200,000

Appendix A

ISLAND HEALTH 2023/2024 MINOR CAPITAL PROJECT LIST

					Cash Flow					
					Prior Years		2023/24		2024/25	2025/26
Site	Portfolio	Project Name		Total Project Cost		Annual	Island Health	CRHD	Annual	Annual
Victoria General Hospital	Portfolio S	(Proj) OR Lights x10		1,250,000		50,000	30,000	20,000	600,000	600,000
Victoria General Hospital	Facilities Management	VGH Kitchen Floor Replacement		300,000		50,000	30,000	20,000	125,000	125,000
Victoria General Hospital	Facilities Management	VGH Bathroom Shower surrounds		300,000		50,000	30,000	20,000	125,000	125,000
Victoria General Hospital	Facilities Management	VGH Exterior Building Refresh		116,820		56,820	34,092	22,728	60,000	
Victoria General Hospital	Facilities Management	VGH Parapet Cap Flashing		117,999		67,119	40,271	26,848	50,880	
			Sub-Total	\$ 18,317,742	\$-	\$ 5,769,999	\$ 3,462,000	\$ 2,308,000	\$ 6,659,641	\$ 5,888,101
			Total	\$ 31,574,762	\$ 7,202,020	\$ 9,374,999	\$ 5,625,000	\$ 3,750,000	\$ 7,884,641	\$ 7,113,101

ISLAND HEALTH 2023- 2024 Recommended Approved Capital Equipment

Site	Program	Equipment Name
Aberdeen Hospital	Pharmacy	New Fridge for Aberdeen Pharmacy
Aberdeen Hospital	Long Term Care - VIHA	Ice Machine
Aberdeen Hospital	Comm Access Capacity & Trans	Community Respite Booking System
Aberdeen Hospital	SI Food Services	Tilting Skillet Braising Pan
Eric Martin Pavilion	MHSU SI Complex Community Care	Mental Wellness Day Program Dish Sanitizer
Glengarry Hospital	Long Term Care	Broda Recliners
Gorge Road Hospital	SI FMO	New FMO LTC Pickup Truck
Lady Minto/Gulf Islands Hospital	Saanich Gulf Islands	Patient Kitchen Ranges
Multiple Sites South Island	Urban Victoria	Replacement ActiVACs
Munro Centre (Island Ultrasound)	Medical Imaging	Ultrasound, Voluson E10, ECN61746, IUS 3, 2015
Priory	ESS South Island & Laundries	Garbage Compactor 27YD
Public Health Unit	Saanich / Western Communities	Bath Tub Replacement - West Shore ADP-Bathing Program
Public Health Unit	Public Health	PHU Pharmacy Fridge
Public Health Unit	Public Health	PHU Vaccine Fridge
Queen Alexandra Centre for Children's Health	Child Youth Family	Rabbit Up Mobile Stander
Royal Jubilee and Victoria General Hospitals	Surgical Svs - Perioperative	(Orth) Arthroscopy Telescopes and Cameras (RJH x 4, VGH x 6)
Royal Jubilee and Victoria General Hospitals	Surgical Svs - Perioperative	(ENT) Integrated Power Console (VGH x 1 and RJH x 1)
•	Distrib MultiMedia Syst	Multimedia Server Replacement
Royal Jubilee Hospital	2	TEE Echo Machine
Royal Jubilee Hospital	Clinical Operations - RJH Heart Health	
Royal Jubilee Hospital		Excimer Laser
Royal Jubilee Hospital	Laboratory Services	Maldi-TOF
Royal Jubilee Hospital	Surgical Svs-Ambulatory Care	EBUS scopes, US and bronchoscopes from Olympus
Royal Jubilee Hospital	Medic'n Systems & Informatics	Omnicenter - Dispensing Automation System Upgrade
Royal Jubilee Hospital	Surgical Svs - Perioperative	Bladder Scanner-PACU
Royal Jubilee Hospital	Surgical Svs-Ambulatory Care	Ultrasound Machine - RJH Pain Clinic
Royal Jubilee Hospital	Surgical Svs-Ambulatory Care	Urodynamic System
Royal Jubilee Hospital	Restorative Health	Bari Plinth
Royal Jubilee Hospital	Pharmacy	Replacement Autowrap
Royal Jubilee Hospital	Pharmacy	RJH Pharmacy - RFID Tray management system
Royal Jubilee Hospital	Clinical Operations - RJH	Locking medication storage for RJH ED
Royal Jubilee Hospital	Clinical Operations - RJH	CCTV in RJH med rooms
Royal Jubilee Hospital	Clinical Operations - RJH	Call Bells in Sunrooms RJH
Royal Jubilee Hospital	Clinical Operations - RJH	Hillrom P500 Replacement Airbed Mattress system
Royal Jubilee Hospital	Clinical Operations - RJH	HAU Specialty Bed Replacements
Royal Jubilee Hospital	Clinical Operations - RJH	Vein Viewer
Royal Jubilee Hospital	Clinical Operations - RJH	ENT Chair
Royal Jubilee Hospital	Clinical Operations - RJH	Phillips Cardiac Monitor
Royal Jubilee Hospital	Heart Health	Stress testing System
Royal Jubilee Hospital	Heart Health	Stress testing system
Royal Jubilee Hospital	Heart Health	Full stress testing system
Royal Jubilee Hospital	Heart Health	Stress testing Case System
Royal Jubilee Hospital	Heart Health	Echocardiography Ultrasound Machine - CVU
Royal Jubilee Hospital	Restorative Health	Cryoneurolysis - Emerge Stronger Campaign
Royal Jubilee Hospital	Surgical Svs - Perioperative	(Card) Minimal Access Instruments/instrument refurbishment /new
Royal Jubilee Hospital	Surgical Svs - Perioperative	(Plas) Micro Power
Royal Jubilee Hospital	Surgical Svs - Perioperative	T-Doc Database Capacity Units
Royal Jubilee Hospital	Surgical Svs - Perioperative	(Card) Battery Powered Sternal Saws x 9
Royal Jubilee Hospital	Surgical Svs-Ambulatory Care	UVA Hand and Foot Machine
•	•	

Royal Jubilee Hospital

Surgical Svs-Ambulatory Care

Stryker 1089 Eye Stretcher - Clinic 6

Appendix B

		Budget
	\$	9,890.38
	Ψ \$	9,230.88
	φ \$	9,230.00 102,457.50
	φ \$	31,276.50
	\$	6,596.11
	\$	5,392.50
	\$	52,000.00
	\$	28,174.00
	\$	35,590.50
	\$	99,500.00
	\$	48,532.50
am	\$	32,000.00
	\$	12,062.00 12,150.00
	\$ \$	5,821.20
′GH x 6)	ъ \$	235,113.00
	\$	67,298.40 111,965.00
	\$ \$	185,000.00
	э \$	250,000.00
	φ \$	269,625.00
	э \$	418,704.00
	\$	348,200.00
	\$	15,700.00
	\$	70,500.00
	\$	77,000.00
	\$	10,000.00
	\$	15,638.25
	\$	91,672.50
	\$	10,785.00
	\$	120,792.00
	\$	98,999.83
	\$	124,496.00
	\$	519,513.45
	\$	22,314.17
	\$	7,783.53
	\$	30,050.00
	\$	39,905.58
	\$	39,905.58
	\$	39,905.58
	\$	33,013.96
	\$	102,457.50
	\$	74,136.09
ent /new instrumentation	\$	98,359.20
	\$	202,758.00
	\$	18,789.63
	\$	94,638.38
	\$	19,607.13
	•	

8,083.36

\$

ISLAND HEALTH 2023- 2024 Recommended Approved Capital Equipment

Site	Program	Equipment Name
Royal Jubilee Hospital	SI Food Services	Dishmachine - Commercial Undercounter
Royal Jubilee Hospital	ESS South Island & Laundries	Garbage Compactor 30YD for RJH (D&T Buiding)
Royal Jubilee Hospital	Biomedical Engineering	Simulator, SpO2 module
Royal Jubilee Hospital	Biomedical Engineering	Xray Dose Meter
Royal Jubilee Hospital/Victoria General Hospital	Surgical Svs - Perioperative	(Supp) Mobile C-Arm x 2 VGH and x 2 RJH
Saanich Peninsula Hospital	Saanich Gulf Islands	Night Cupboard ADC
Saanich Peninsula Hospital	Saanich Gulf Islands	SPH OR Rapid Infuser
Saanich Peninsula Hospital	Heart Health	Cardiac Ultrasound Machine - Portable
Seven Oaks Tertiary Mental Health Facility	MHSU CI & Tertiary	Seven Oaks Freezer
Seven Oaks Tertiary Mental Health Facility	MHSU CI & Tertiary	Commercial dishwasher for Seven Oaks Tertiary MHSU
Summit Long-Term Care Home	Long Term Care	Brodas x 2
Victoria General Hospital	Clinical Operations - VGH	EEG Software Upgrades
Victoria General Hospital	Clinical Operations - VGH	Cast Cart
Victoria General Hospital	Surgical Svs-Ambulatory Care	Manometry Catheters and Digitrappers
Victoria General Hospital	Clinical Operations - VGH	Ice Machine for 5A South - Ortho/Trauma
Victoria General Hospital	Clinical Operations - VGH	Criticool Machine - NICU
Victoria General Hospital	Surgical Svs - Perioperative	(Neur) Microscope Computer
Victoria General Hospital	Clinical Operations - VGH	Cerebral Function Monitoring
Victoria General Hospital	Victoria Acute Hospitals Admin	Rapid AI Upgrade - Regional Brain Strategy
Victoria General Hospital	Laboratory Services	Biosafety Cabinet
Victoria General Hospital	Laboratory Services	Biosafety Cabinet
Victoria General Hospital	Medical Imaging	VGH BI Biopsy Unit
Victoria General Hospital	Laboratory Services	Hematology analyzer x 2
Victoria General Hospital	Heart Health	ECG Cart
Victoria General Hospital	Heart Health	ECG Cart
Victoria General Hospital	Surgical Svs - Perioperative	(Neur) Spine Navigation Instruments
Victoria General Hospital	Surgical Svs - Perioperative	(Gyne) Camera Head x 2
Victoria General Hospital	Surgical Svs - Perioperative	Container Wash Cart
Victoria General Hospital	Medical Imaging	VGH Mammo CAD Rm 2
Victoria General Hospital	Medical Imaging	VGH Technegas
Victoria General Hospital	Medical Imaging	VGH IR Ablation Unit
Victoria General Hospital	Medical Imaging	Ultrasound System, Voluson E10, ECNE61738, CFAU1, 2015
Victoria General Hospital	Protection Services	VGH CCTV Year 1 - Infrastructure Upgrade
Victoria General Hospital	Biomedical Engineering	Xray Dose Meter
Victoria General Hospital	Biomedical Engineering	Electrical Safety Analyzer
Victoria General Hospital	Biomedical Engineering	Battery Conditioner
Victoria Home Health	Public Health	Otoacoustic Emissions Equipment

Total Equipment Approved

	Budget				
\$	16,177.50				
\$	48,532.50				
\$	9,706.50				
\$	24,805.50				
\$	940,000.00				
\$	150,000.00				
\$	8,251.00				
\$	72,798.75				
\$	8,340.00				
\$	9,300.00				
\$	10,785.00				
\$	180,342.11				
\$	9,453.00				
\$	54,000.00				
\$	11,904.00				
\$	30,000.00				
\$	66,000.00				
\$	40,976.00				
\$	88,454.22				
\$	17,256.00				
\$	17,256.00				
\$	51,248.00				
\$	133,734.00				
\$	19,952.25				
\$	19,952.25				
\$	83,044.50				
\$	76,142.10				
\$	15,352.45				
\$	21,570.00				
\$	53,925.00				
\$	107,095.05				
\$	99,500.00				
\$	97,065.00				
\$	24,805.50				
\$	7,549.50				
\$	12,942.00				
\$	49,609.00				
	7,051,209				
-	· · · · · ·				

CAPITAL REGIONAL HOSPITAL DISTRICT BYLAW NO. 417

CAPITAL EXPENDITURE BYLAW NO. 187, 2023

WHEREAS the Board of the Capital Regional Hospital District proposes to expend money for the capital expenditures described in Schedule 'A' attached hereto and forming an integral part of this bylaw;

And whereas those capital expenditures have received the approval required under Section 23 of the *Hospital District Act*;

Now therefore the Board of the Capital Regional Hospital District enacts the following capital expenditure bylaw as required by Sections 32 of the *Hospital District Act*;

- 1. The Board hereby authorizes and approves the expenditure of money necessary to complete the capital expenditures as described in Schedule 'A' attached hereto totalling \$6,705,000.
- 2. The payment of the portion that the Capital Regional Hospital District is responsible for shall be funded through monies budgeted in the current year of operation.
- 3. The Board hereby delegates the necessary authority to the Treasurer of the Capital Regional Hospital District to settle the terms of the expenditure.
- 4. This Bylaw may be cited for all intents and purposes as the "Capital Regional Hospital District Capital Bylaw No. 187, 2023.

READ A FIRST TIME THIS	DAY OF	June	, 2023
READ A SECOND TIME THIS	DAY OF	June	, 2023
READ A THIRD TIME THIS	DAY OF	June	, 2023
ADOPTED THIS	DAY OF	June	, 2023

Chair

Corporate Officer

SCHEDULE 'A'

CAPITAL REGIONAL HOSPITAL DISTRICT BYLAW NO. 417 "CAPITAL REGIONAL HOSPITAL DISTRICT CAPITAL BYLAW NO. 187, 2023"

Name of Facility	Project or Equipment Description	Project Number	Amount covered by CRHD Bylaw	Amount covered by Province/ Island Health	Total Project or Equipment Cost
Island Health - South Island Health Facilities	2023 Minor Capital Projects	C187-23-XX	\$3,750,000	\$5,625,000	\$9,375,000
Island Health – South Island 2023 Equipment Grant	2023 Capital Equipment	N/A	\$2,925,000	\$4,126,209	\$7,051,209
Mount St. Mary Hospital – 2023 Equipment Grant	2023 Capital Equipment	N/A	\$30,000		\$30,000
		TOTAL	\$6,705,000	\$9,751,209	\$16,456,209



REPORT TO HOSPITALS AND HOUSING COMMITTEE MEETING OF WEDNESDAY, JUNE 07, 2023

<u>SUBJECT</u> CRD Participation in a Regional Community Safety and Wellbeing Plan and Council

ISSUE SUMMARY

This report outlines the benefits and implications of participating in a Regional Community Safety and Wellbeing Plan and Council (RCSWPC) for the capital region. The Capital Regional District (CRD) Healthy Communities Program under the Health and Capital Planning Strategies Division could be expanded to allow for participation in this project but would require additional resources.

BACKGROUND

On April 12, 2023, a delegation presented at the CRD Board meeting about violence prevention and the social determinants of health (Appendix A). They identified the potential convening role the CRD could play in work related to violence prevention and wellbeing. The following motion was referred to the Hospital and Housing Committee on May 3, 2023, and subsequently the motion was passed:

"That staff be directed to report back to the Hospitals and Housing Committee on the benefits and implications of participating in a Regional Community Safety and Wellbeing Plan and Council for the capital region."

Because the RCSWPC work is related to the social determinants of health, it would most closely align with the work being done in the Healthy Communities Program within the CRD. The Healthy Communities Program works on the social and structural determinants of health by coordinating the Community Health Network (CHN) (Appendix B) and developing public health bylaws. The CHN's work relies on knowledge translation and partnership development to identify and fill gaps in the community health landscape across the region. One goal area of the CHN is Healthy and Safe Environments for which a subgroup exists.

ALTERNATIVES

Alternative 1

The Hospitals and Housing Committee recommends to the Capital Regional District Board: That staff be directed to include \$50,000 in funding in the 2024 Provisional budget to support work towards establishing a Regional Community Safety and Wellbeing Plan and Council.

Alternative 2

That the CRD Participation in a Regional Community Safety and Wellbeing Plan and Council report be referred back to staff based on Hospitals and Housing Committee Direction.

IMPLICATIONS

Intergovernmental Implications

Violence prevention councils exist to bring communities together to address the root causes of violence. One prime example is the Region of Waterloo's Region Crime Prevention Council (WRCPC). The WRCPC has received core funding from the Region of Waterloo since 1994 to

generate greater public understanding of the root causes of crime, creating a deeper community commitment to prevention. They are not a direct service provider. Instead, they engage and connect citizens, decision makers and service providers through community engagement, knowledge mobilization and backbone support. The CRD could convene the municipalities and organizations involved in not only violence prevention, but community safety and wellbeing, to determine the viability of establishing a RCSWPC.

Social Implications

Much like there are social determinants of health, there are also social determinants of justice which closely align with the social determinants of health. The social determinants of justice are clear based on the shared characteristics of many of the people who are involved in our justice systems. The social determinants of justice include early abuse, systemic racism and discrimination, unequal access to resources, experiences of homelessness, lack of access to health resources and poor education. Communities that address these social determinants of justice in a holistic manner experience lower levels of violent crime.

A violence prevention presentation by Dr. Irvin Waller at Camosun College, which was open to elected officials in the CRD, on May 5, 2023 (Appendix C) identified the benefits of violence prevention and that taking a social determinants of justice approach can lead to a decrease in violent crime.

Financial Implications

To work towards developing a RCSWPC, staff will require resources to facilitate and convene two to three meetings with those involved in violence prevention in the region, all municipalities as well as a consultant to identify the current work in the region on violence prevention, gaps, and next steps towards establishing a RCSWPC.

The CRD currently has a Healthy Communities Planner position which is grant funded by Island Health. To support establishing a RCSWPC will require an addition \$50,000 to hire a consultant to support convening the regional stakeholders working in violence prevention and map out next steps toward establishing a RCSWPC.

Alignment with Board & Corporate Priorities

Social determinants of health and justice are woven throughout the goals of the CRD's 2023-2026 *Corporate Plan.* In particular, they are related to the following goals:

- 5f: "Support health through public health bylaws and education"
- 5g: "Facilitate knowledge mobilization & partnerships to support community health and healthy public policy"
- 5c: "regional response to homelessness"

Because the proposed approach to violence prevention is based on the social determinants of health and justice, work in this area will move us towards the goals of the CRD's 2023-2026 *Corporate Plan.*

Service Implications

Facilitating and convening stakeholders and municipalities to discuss the development of a RCSWPC will require some additional resources to hire a consultant but does not require a new service to be developed. Once these discussions and a report identifying next steps has been developed the information will be brought back to the Board with a recommendation outlining what resources would be required to implement the RCSWPC.

CONCLUSION

The work of supporting a RCSWPC most closely aligns with the CRD's Healthy Communities Program. In order to support this work, additional resources would need to be allocated in the 2024 Provisional budget.

RECOMMENDATION

The Hospitals and Housing Committee recommends to the Capital Regional District Board: That staff be directed to include \$50,000 in funding in the 2024 Provisional budget to support work towards establishing a Regional Community Safety and Wellbeing Plan and Council.

Submitted by:	Michael Barnes, MPP, Senior Manager, Health and Capital Planning Strategies
Concurrence:	Kevin Lorette, P. Eng., MBA, General Manager, Planning & Protective Services
Concurrence:	Ted Robbins, B. Sc., C. Tech., Chief Administrative Officer

ATTACHMENTS

- Appendix A: Towards a Community Safety and Wellbeing Plan and Council for the Capital Region
- Appendix B: Community Health Network Summary
- Appendix C: Violence Prevention Accelerator Actions (PowerPoint)

Community Health Network Summary

The Capital Regional District Community Health Network (CRD CHN) brings together a wide range of non-profit, government, education and health organizations to work on social and structural determinants of health and wellness in our region. Through this network, we identify gaps in the community health and wellness landscape by engaging with the community directly. Once a gap is identified, the Network supports partnership development and research to create programs that will fill that gap and create healthier communities across the CRD.

The CRD CHN is continually reviewing and expanding membership to ensure it is reflective of the demographics of our region and the areas we wish to focus on. At present our membership includes:

- Government of BC
- Island Health
- Power To Be
- Victoria Foundation
- Take a Hike Foundation
- Royal BC Museum
- Sooke Region Community Health
 Network
- Rainbow Health Coop
- Foodshare Network
- United Way of Southern Vancouver Island
- Salt Spring Health Advancement
 Network
- University of Victoria
- Community Social Planning Council
- Together Against Poverty
- Greater Victoria Alliance for Literacy
- Alliance to End Homelessness in the Capital Region
- City of Victoria
- Mental Health Recovery Partners
- Rick Hansen Foundation
- Victoria Native Friendship Centre
- Canadian Mental Health Association
- Cool Aid
- Intercultural Association

- Southern Gulf Island Community Resource Centre
- Capital Bike
- North Park Neighbourhood
 Association
- Building Resilient Neighbourhoods
- Power To Be
- Greater Victoria Public Library
- Royal Roads University
- Capital Bike
- Seniors Serving Seniors
- Disability Resource Centre
- Human Nature Counselling
- School District 62
- Songhees Nation
- Foundry
- Quadra Village Community Centre
- Central Saanich
- Sidney
- Esquimalt
- BC Healthy Communities
- University of Victoria
- Community Social Planning Council
- Saanich
- Colwood
- Sooke

How to Halve Violent Crime Before 2030: Accelerator Actions Needed Now (SDG16.1-2, 5.2)

Irvin Waller, Ph.D.

Author, Science and Secrets of Ending Violent Crime

iwaller@uottawa.ca www.irvinwaller.org Twitter@irvinwaller



To halve violent crime before 2030 requires accelerators to make the change and investment in what is proven

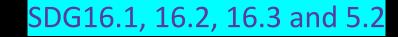
Accelerators to make the change	Toronto	Canada
A. Violence reduction units		
B. Professional development and training for prevention	SCIENCE	and SECRETS of
C. Data and tools to measure outcomes, epidemiology	EN	
D. Raising awareness of solutions	EN	DING
Sustained investment in programs proven to work		LENT
1. Outreach to Young Men	VIU	
(street workers, hospital emergency, mentoring, mediation)		TINE
2. Attitude, Emotional Control and Achievement		
(SNAP, life skills, help to complete school,)		
3. Changing Culture in Schools, Universities and Colleges		
(Bystander intervention, 4th R, anti-bully)		
4. Family and Parenting Support and Preschool	IRVIN	WALLER
(Headstart, Triple P, Functional Family, Multi-systemic),		
5. Jobs and Training		
Total to Halve Violent Crime Before 2030	\$100 million	\$2 billion



In 2015. world leaders committed to significant reductions in homicides and violence against women and children by 2030

Set measurable targets and change to achieve them Invest for results to achieve outcomes Monitor performance and network

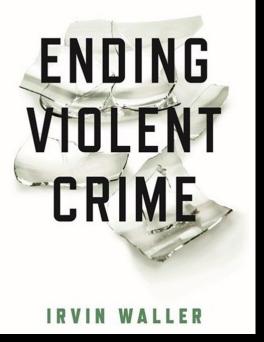








and SECRETS of



Solid science confirms violence is preventable

- Consensus on what works crimesolutions.gov, WHO ...
- Focused prevention reduces violence by 50% within a few years
- General prevention (e.g. social safety net) also reduces violence ullet

International guidelines show essentials for successful action

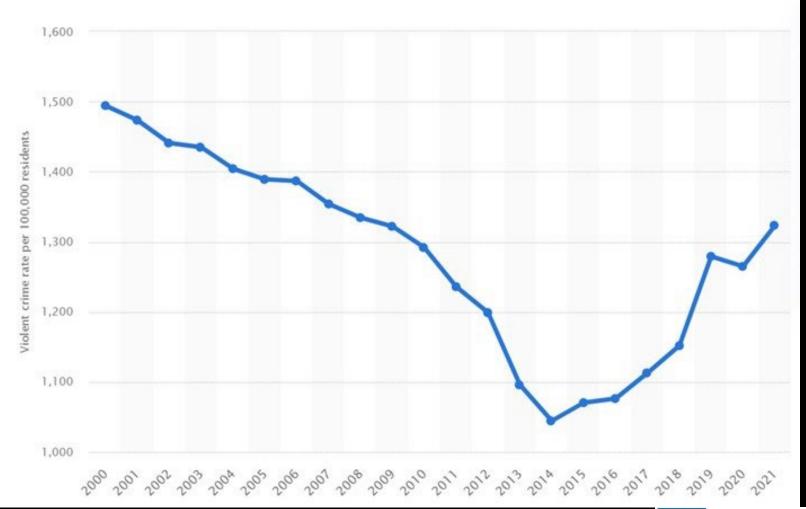
- Office to diagnose, plan, evaluate and mobilise key sectors
- Sustained and adequate investment
- Learning from cities that succeed

Secrets of getting buy in

- Training decision makers and practitioners and providing tools
- Making case for saving lives and stopping trauma
- Investing adequately and sustainably

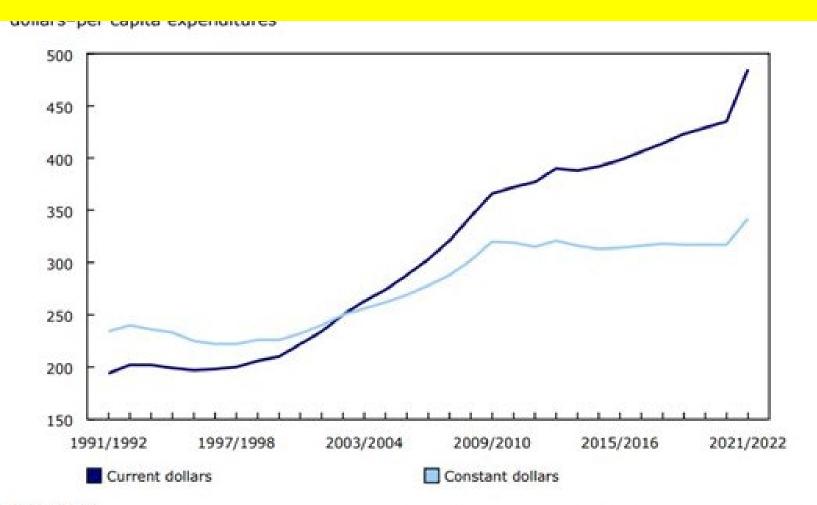


Violent crime recorded by police in Canada from 2000 -2021 rate per 100,000 residents





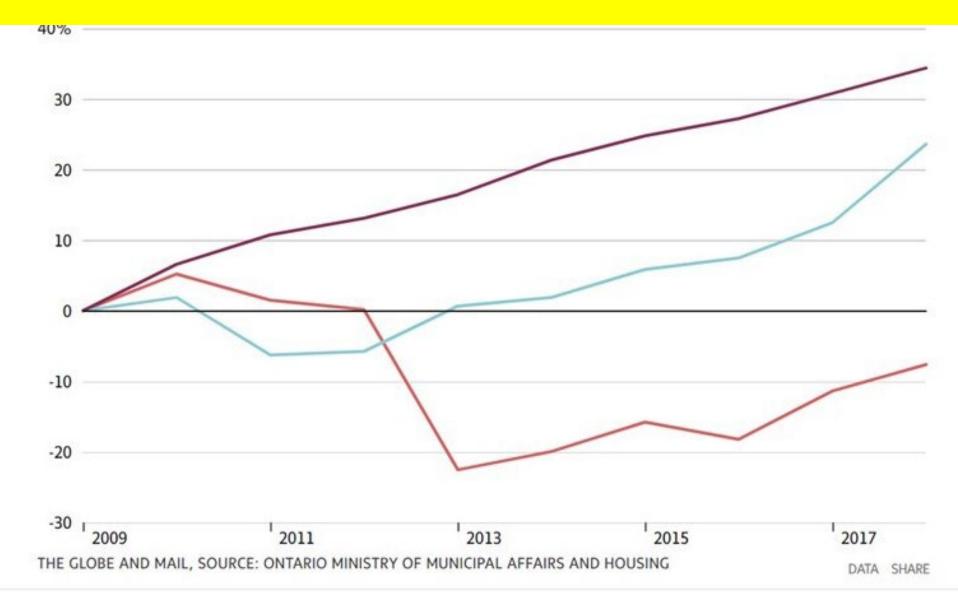
Expenditures on policing per capita, current and constant dollars 1988/89-2021/2022



... not applicable

Note(s): Current dollars express the cost of items in terms of the year in which the expenditure occurs. Constant dollars are adjusted (by inflation or deflation) to show changes in the purchasing power of the dollar. The Consumer Price Index was used to calculate constant dollars over a the Police Administration Survey being an annual survey, the 2020 cycle was cancelled. Therefore, there are no data associated associated based on July 1, 2021 estimates from Statistics Canada's Centre for Demography. While data on police personnel are based

In Ontario, municipal spending on housing and social/family services have not kept up with policing



Evidence shows more police and incarceration are reaction to, not prevention of, violence as illustrated by two international comparisons

Population	8 million		2.7 million	
	New York City	London, England	Chicago	Toronto
Police officers	38,000	31,000	13,000	5,500
Incarceration rate*	443	132	564	107
Homicides **	436	130	781	70
Homicide rate	5.5	1.6	27.9	2.5

*. Incarceration rate per 100,000 for the US state of the city https://www.prisonpolicy.org/ and National rate for Canada for Toronto and England

and Wales for London https://www.prisonstudies.org/

** Estimates on 20201227 https://www.thecity.nyc/2020/12/21/22189682/why-are-

shootings-up-in-new-york-city-in-2020-nypd; https://www.bbc.com/news/uk-england-

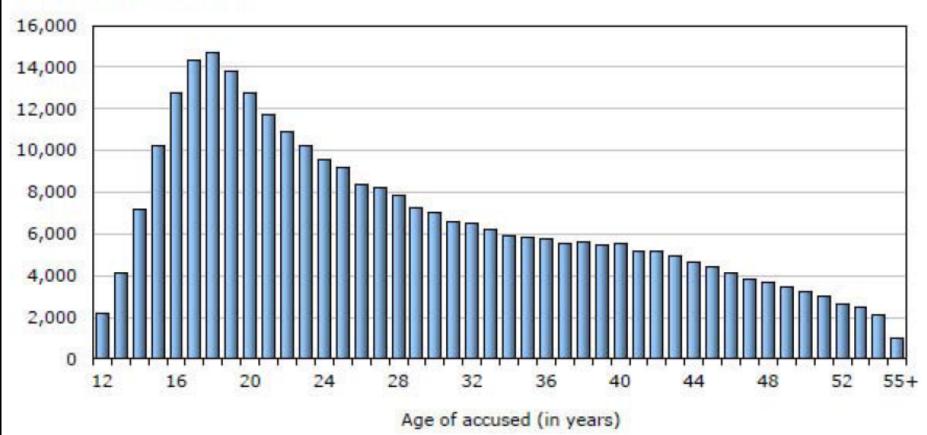
london-54452247; https://heyjackass.com/;

https://data.torontopolice.on.ca/pages/homicide;

www.irv



Chart 15 Persons accused of crime, by age, Canada, 2010



rate per 100,000 population

Note: Includes persons who were formally charged by police (or recommended for charging) as well as those who were a means other than the formal laying of a charge (e.g. diversion programs).

Source: Statistics Canada, Canadian Centre for Justice Statistics, Uniform Crime Reporting Survey.

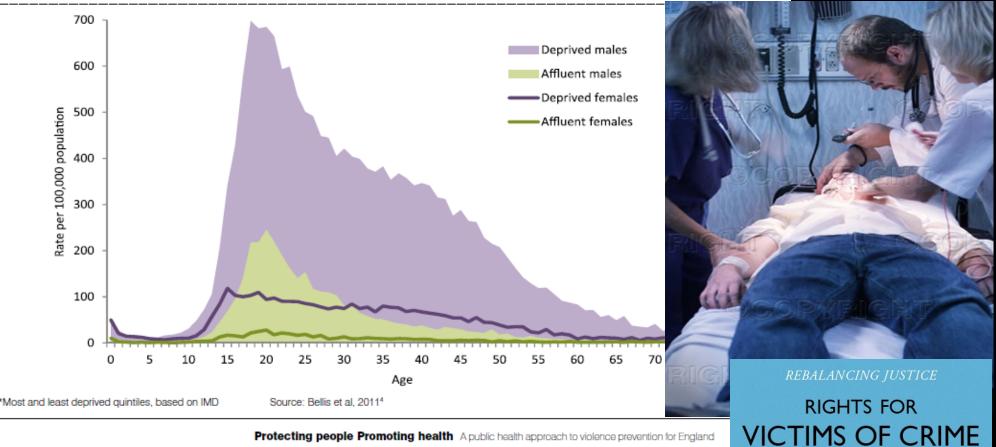


50% less violence by 2030

Too many crime victims and too much pain and harm to victims

Males from deprived areas five times as likely to be admitted for violence to hospital as males from non-deprived areas (UK)

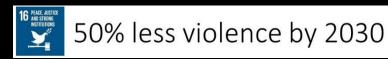
Figu



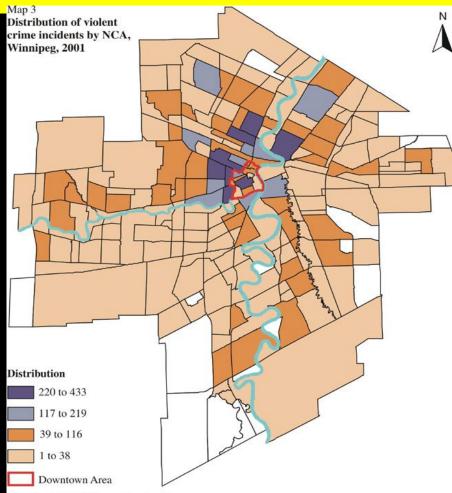
Irvin Waller

According to longitudinal studies, Causes of youth offending more persistently 6% of families account for 50% of offending

- Born into a family in relative poverty and inadequate housing;
- Brought up with inconsistent and uncaring parenting; A witness of intra-familial violence;
- Limited social and cognitive abilities;
- Presenting behavioural problems in primary school;
- Excluded from, or dropping-out of, school;
- Frequently unemployed and with relatively limited income;
- Living with a culture of violence



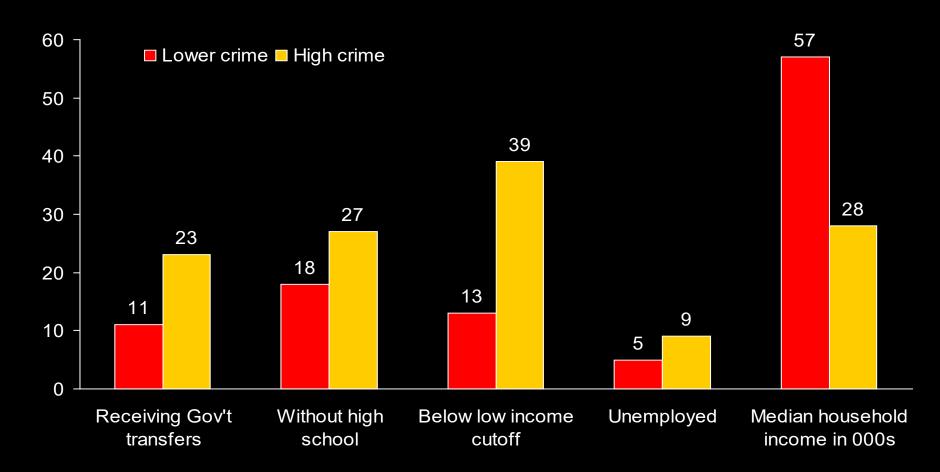
Distribution of violent crime recorded by police by neighborhood in Winnipeg in 2001



Based on 9,727 violent crime incidents. Source: Statistics Canada, 2001 UCR2. Map source: R. Fitzgerald, M. Wisener and J. Savoie, 2004, Neighbourhood Characteristics and Justice Research Paper Series, 4, Statistics Canada Catalogue no. 85-561-MWE.

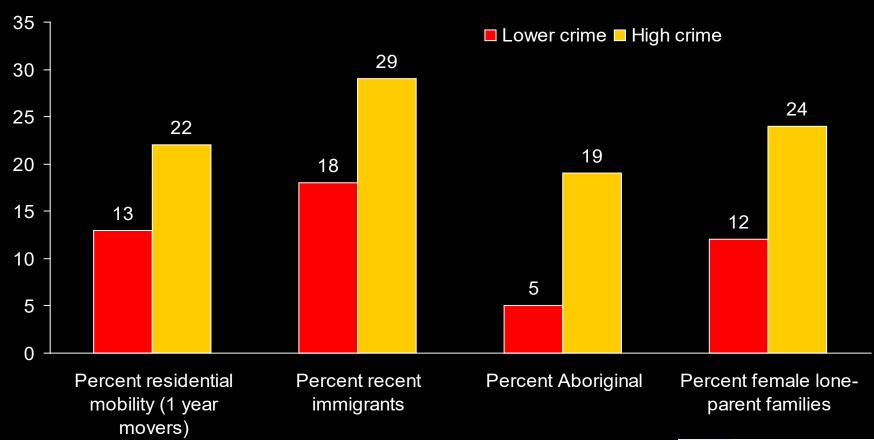


Percent socio-economic characteristics in n'hoods with high and lower violent crime





Percent socio-economic characteristics in n'hoods with high and lower violent crime





Large scale data sets confirm social, situational and location of crime

5% of youth account for 55% of offences

• Longitudinal studies confirm 5% risk factors such as relative poverty, ineffective parenting and dropping out of school

4% of victims account for 44% of victimisation

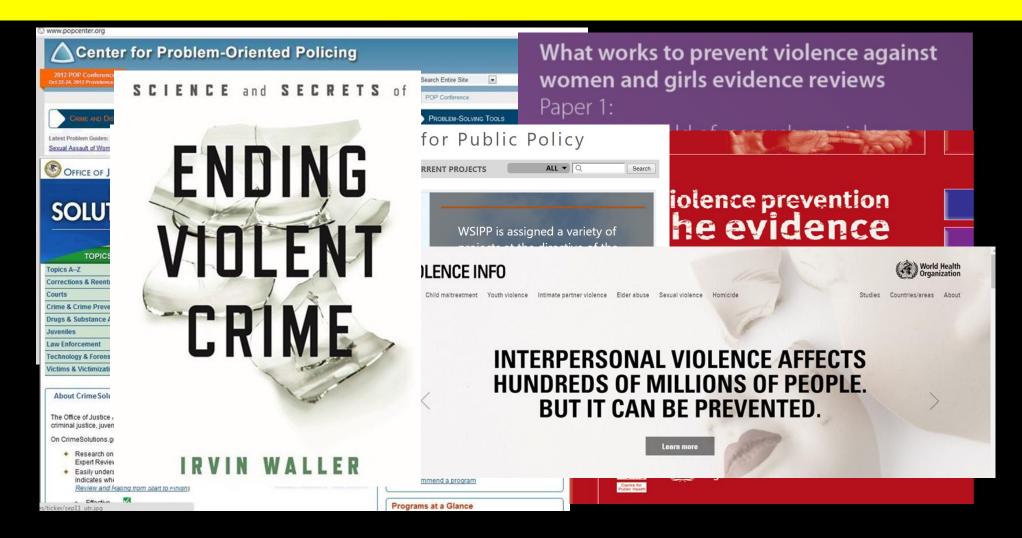
 Victimisation studies confirm 4% risk life routines such as violent associates, vulnerable to opportunity, close to offenders

Hot spot locations for drugs and other offences

 Police statistics confirm that hotspots concentrate offenders and victims geographically



Today, we have **"solid violence prevention science"** on what reduces crime. We have multiple government/academic sources that identify the same proven solutions, but we are not using them



Successful pre-crime prevention

Outreach to youth – eg Youth Inclusion Program

- Example funded by YJB
- Focus on the 50 most at risk youth
 - aged 13-16 in each of 70 of the most difficult neighborhoods.
 - 10 hours a week of activities, including sports, training in information technology, mentoring and help with literacy and numeracy issues
- Results confirmed by the scientific evaluation
 - 65% reduction in youth arrests
 - 30% reduction in youth removed from schools
 - 16% reduction in overall crime.
- Costs
 - Equals cost of taking a young offender through the youth justice system for one offence (ie 50 to 1 + more effective)





Effectiveness



Hospital-Based Violence Intervention (HAVI) to address the revolving door of victims of violence in hospital emergency rooms.

- The victims arrive at the hospital with injuries caused by the violence.
- Trauma experts know that people who present with injuries often need more than stitches to heal the ailments.
- A growing number of hospitals and healthcare providers are adopting hospitalbased violence intervention (HAVI) programs.





SNAP[®] (Stop Now And Plan) is an evidence-based, genderresponsive, cognitive-behavioral and family-oriented

helps children think before they act, while learning more appropriate ways to calm themselves when upset or frustrated.

333% THE REDUCTION OF CRIME AFTER SNAP PROGRAM

\$147,423 TOTAL SAVINGS PER BOY

75% VS 68% CHILDREN WHO WILL RE-OFFEND WITHOUT INTERVENTION VS. CHILDREN WHO WILL NOT HAVE A CRIMINAL RECORD BY AGE 19 BECAUSE OF SNAP



PER 100 BOYS IN SNAP PROGRAM

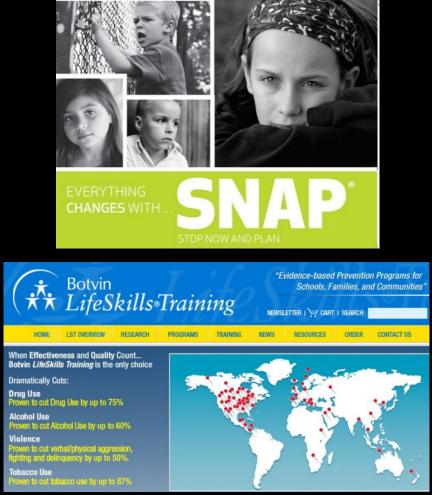
\$4,000

AND HIS OR HER FAMILY TO PARTICIPATE IN SNAP

92% AND 95%

BOYS AND GIRLS WHO HAVE NO CRIMINAL OFFENCES AFTER SNAP AT AGE 15

\$17 - \$32 BENEFIT TO COST RATIO





Solving problems in difficult places by investing in positive parenting, public health nurses, and enriched child care prevents crime



Parenting now comes with an instruction manual!

Whether you're a parent, a practitioner or an organisation that works with parents, the international award winning Triple P – Positive Parenting Program[®], backed by over 25 years of clinically proven, world wide research, has the answers to your parenting questions and needs. How do we know? Because we've listened to and worked with thousands of parents and professionals across the world. We have the knowledge and evidence to prove that Triple P works for many different families, in



Small changes, big differences.



 Beiginin
 Singapore

 Canada
 Switzerland

 Germany
 United Kingdom

 Hong Kong
 United States

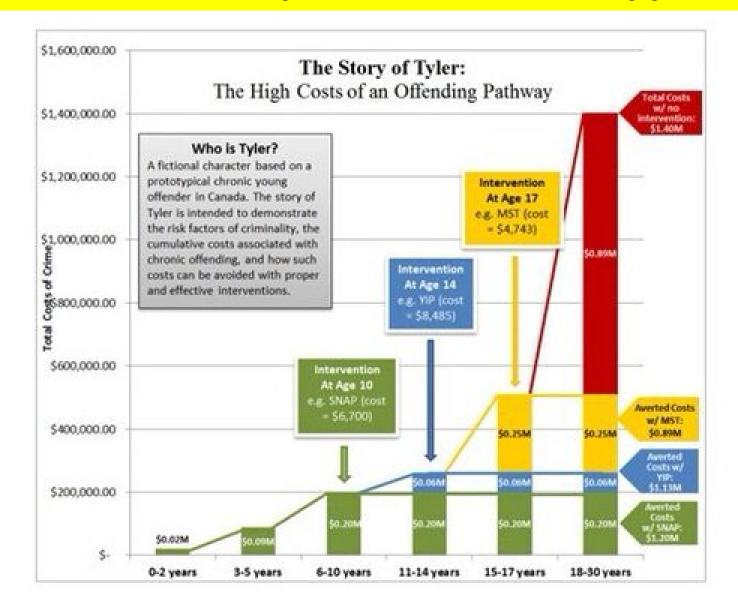
 Netherlands
 Other

The High/Scope Perry Preschool Study Through Age 40

Summary, Conclusions, and Frequently Asked Questions



Public Safety Canada Website shows significant savings from investments that stop crime before it happens

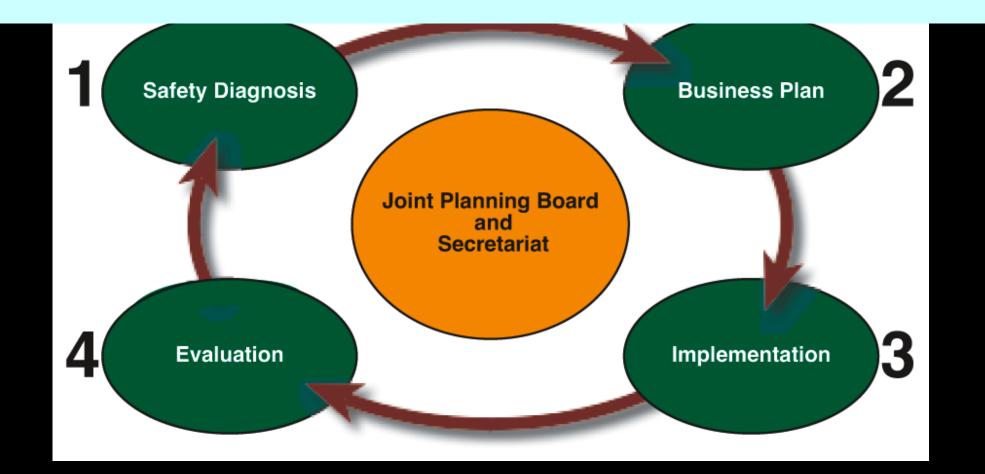


Safety Monitor Tool 1: Key Evidence based Programs Prevention tackling causes Engage and support young males 1 Contraction **M** Support positive parenting and early childhood 3 Strengthen anti-violence social norms Mitigate financial stress 5 Trauma therapy Use "logic model" but avoid solutions proven ineffective 6 Using police smartly ÷ T Reduce harmful effects of the justice process Focusing on alcohol P Focusing on firearms and knives 3 〕 Orienting to solving problems and hot spots 4 \bigcirc Focussing deterrence – caution discrimination 5 +

Avoid policing strategies proven ineffective 6

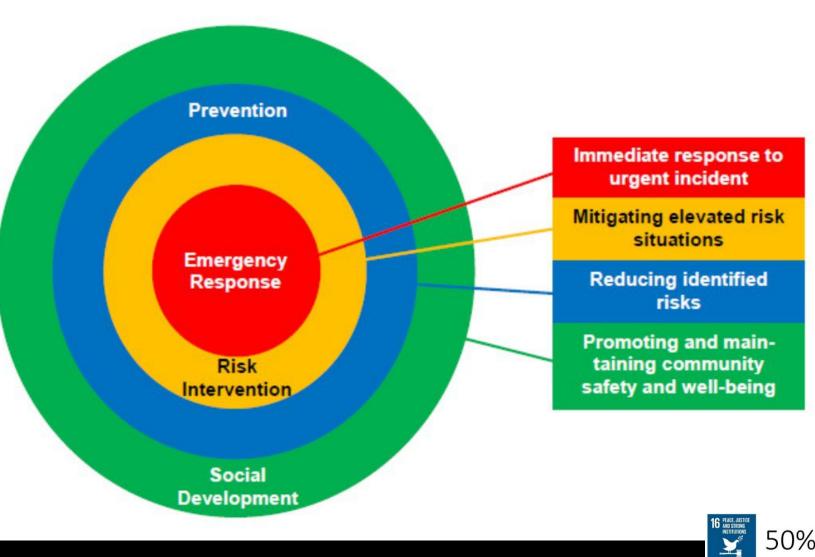


Multi-sector governance to tackle multiple risk factors





*Ontario charts community safety and well-being

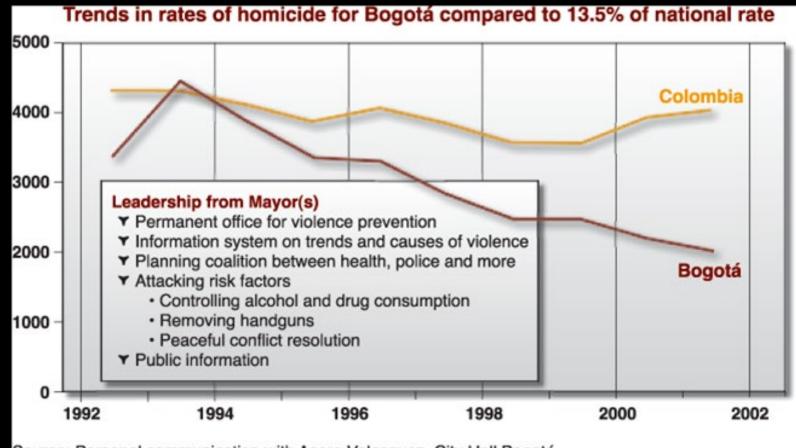


Safety Monitor Tool 2: Essentials for successful implementation

*	1	Does city have an office for violence prevention?	
	2	Has city undertaken plan to diagnose, plan, implement and evaluate?	
	3	Has city explored proven strategies and logic models (see list of prevention tackling causes and using police smartly)?	
	4	Is city mobilising sectors able to tackle causes?	
self)	5	Is city investing new sustained funding to tackle causes? - equivalent to 10% of police and health responder budgets?	
2	6	Has city trained officials in prevention planning and achievement?	
50	7	Has city engaged public, women, minorities in interventions and awareness?	
ŤŤ;	8	Is city benefitting from socio-economic reforms likely to impact violence?	
	9	Is the city monitoring outcome data, from police, hospital admissions, surveys by age, gender and race?	
Ф	10	Has city set measurable targets for performance indicators and outcomes for 2025 and 2030?	



What did the Mayors of Bogotá do to reduce homicides



Source: Personal communication with Acero Velasquez, City Hall Bogotá



Glasgow Violence Reduction Unit diagnosed and targeted what was proven to have worked to achieve 50% les violence within 3 years



* Offending for length of engagement prior to signing up to CIRV vs offending after signing up



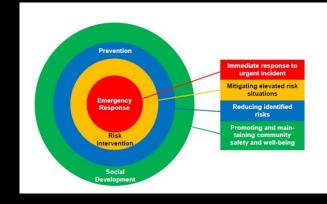
27

What is the Mayor of London doing to reduce violence

Office for Violence Reduction Youth mentors for all, reducing poverty and racism, and more Cognitive behavioral therapy, neighborhood, school completion

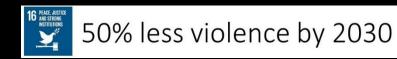
https://youtu.be/sLw21vvMzAE





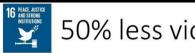
What is the Mayor of Toronto doing to reduce violence

Community Safety Plan required by Police Act Developing Office for Violence Reduction Projects to tackle trauma, drug overdoses and homelessness



What is the Mayor of Newark doing to stop spike in homicides in his city

Office for Violence Prevention and Trauma Community street team, hospital intervention Ordinance to establish office with 5% of police budget and similar in grants



How can we change to saving lives, stopping trauma, and decreasing fear by tackling causes?

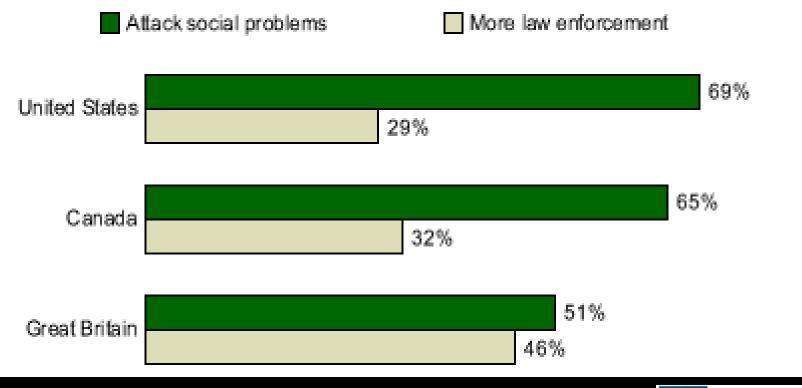
Most Canadians have confidence in police, but not so much in courts and corrections - many have reticence for reporting, and, reporting decreases confidence – GSS

Canadians are divided equally on support or lack of support for defunding the police and redirecting these funds to other local government services – IPSOS 2020



Preferred Approach to Solve Crime

Which of the following approaches to lowering the crime rate in the United States comes closer to your own view -- do you think more money and effort should go to attacking the social and economic problems that lead to crime through better education and job training (or) more money and effort should go to deterring crime by improving law enforcement with more prisons, police, and judges?





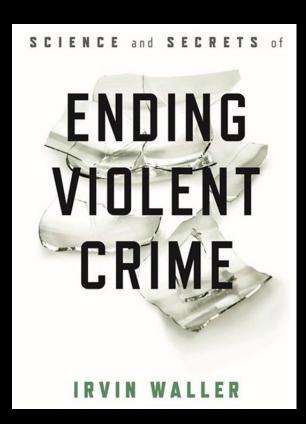
Resources available for awareness and change to reduce violent crime

1. Local groups of mothers of offenders and victims Andrea Magalhaes

Moms Demand Action against Gun Violence

2. Science and Secrets of Ending Violent Crime for decision makers in their local offices and during elections

- <u>Upstream effective solutions (equivalent of 10% of CJS);</u>
- <u>Petition read in parliament;</u>
- Editorials like in Toronto Star Opeds by Bradley and Waller;
- Action briefs and training from Canadian Municipal Network for Crime Prevention
- 3. E-Market achievability of ending violent crime :
- <u>Halving Violent Crime Before 2030 (2 mins Canadian version soon)</u>
- Adverse childhood experiences (2 mins)
- TEDx talk on Smarter Crime Control (14 mins)





To halve violent crime before 2030 requires accelerators to make the change and investment in what is proven

Accelerators to make the change	Toronto	Canada	
A. Violence reduction units			
B. Professional development and training for prevention	SCIENCE and SECRETS of		
C. Data and tools to measure outcomes, epidemiology	EN		
D. Raising awareness of solutions	EN	DING	
Sustained investment in programs proven to work		LENT	
1. Outreach to Young Men	VIU		
(street workers, hospital emergency, mentoring, mediation)			
2. Attitude, Emotional Control and Achievement	CRIME		
(SNAP, life skills, help to complete school,)			
3. Changing Culture in Schools, Universities and Colleges			
(Bystander intervention, 4th R, anti-bully)			
4. Family and Parenting Support and Preschool	IRVIN	WALLER	
(Headstart, Triple P, Functional Family, Multi-systemic),			
5. Jobs and Training			
Total to Halve Violent Crime Before 2030	\$100 million	\$2 billion	

ENDING VIOLENT CRIME

For the harm done by the offender, he is responsible For the harm done because we do not use the best knowledge when that is available to us, we are responsible



Smarter A GUIDE TO A SAFER FUTURE FOR CITIZENS, COMMUNITIES, AND POLITICIANS

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