

A stylized map of the province of Ontario is centered on the page. The map is a solid blue color and is set against a background of a darker blue. The map is enclosed within a white rectangular border that has a dashed line on the right side. The text 'MPAC' is written in large, white, sans-serif capital letters across the middle of the map. Below 'MPAC', the words 'Property Assessment' are written in a smaller, white, sans-serif font, and 'in Ontario' is written in an even smaller, white, sans-serif font at the bottom.

MPAC

Property Assessment
in Ontario

How will my Property Assessment Impact my Taxes?





Ontario's Property Experts

5.5

MILLION

MPAC's database hosts information for over 5.5 million properties across Ontario.

37

BILLION

There was more than \$37 billion of new assessment captured in 2022.

3

TRILLION

Ontario's total property value exceeds \$3 trillion.



Ontario Government

Establishes the province's assessment and taxation laws, sets the valuation date and determines education tax rates.



MPAC

Calculates, captures and distributes assessments for all properties and buildings across Ontario.



Municipalities

Determine revenue requirements, set municipal tax rates and collect property taxes to pay for municipal services.



Property Owners

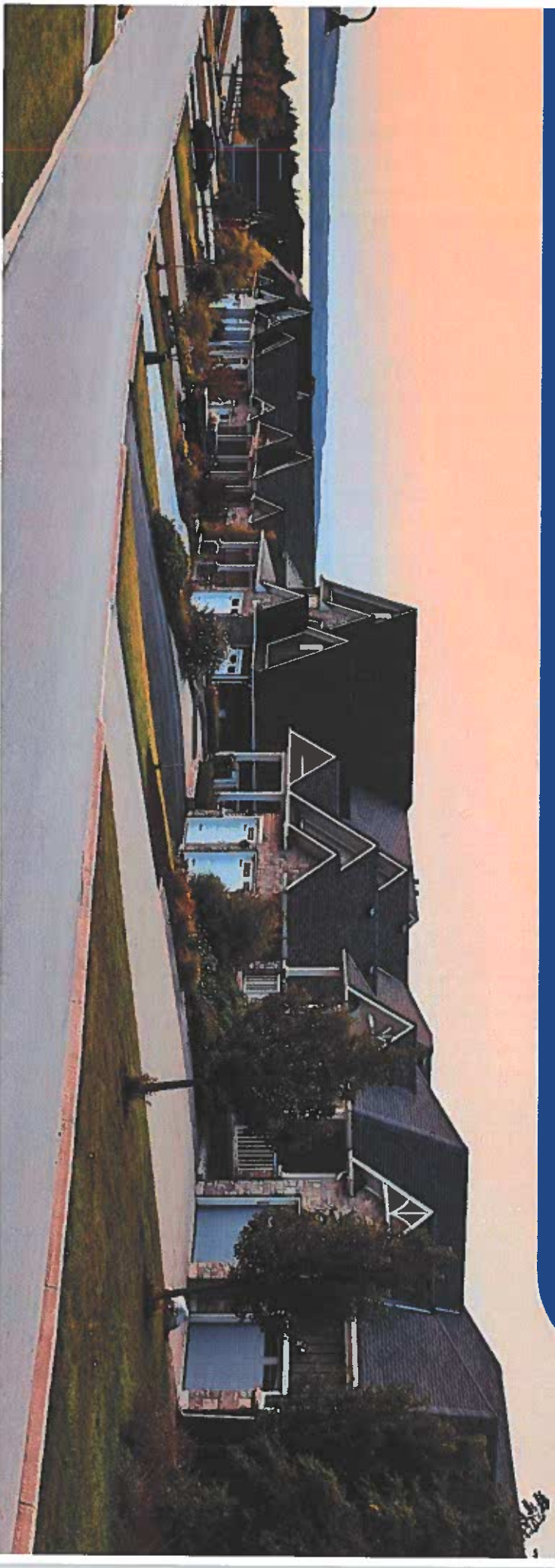
Pay property taxes for community services and education taxes to help fund elementary and secondary schools in Ontario.

A woman with long blonde hair, wearing a blue jacket, is standing outdoors. She is holding a clipboard and a pen, looking down at the clipboard. The background shows a red brick building and some greenery. A large blue circle is overlaid on the bottom right of the image, containing text.

MPAC conducts
property valuation
updates, referred to
as **reassessments**.

Assessment Update

Property values for the 2022 and 2023 Tax Years continue to be based on a **January 1, 2016 valuation date.**



Maintaining Ontario's Property Database



Provincial, Municipal and
Property Owner Support
& Guidance



New Assessment
Forecasting & Market
Analysis/Trends



Municipal Financial
Planning & Insights



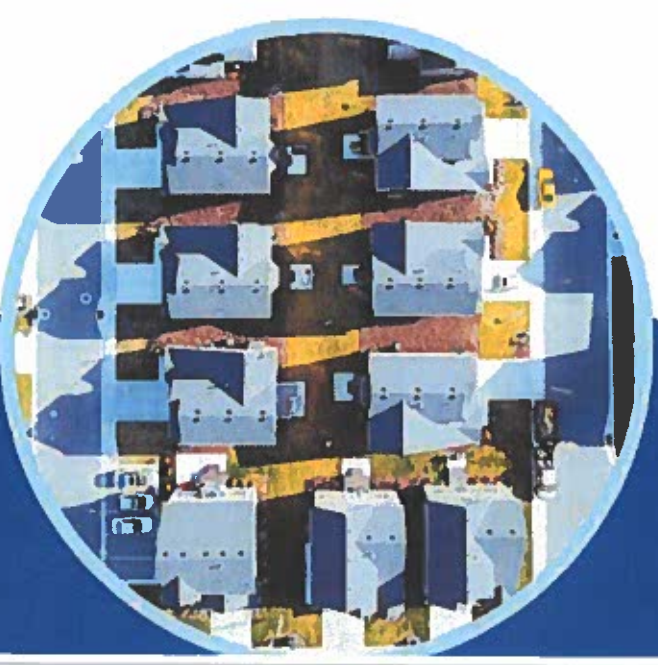
Vacancy and Tax
Applications for
Commercial, Business
& Residential



Requests for
Reconsideration &
Appeal Processing



Processing Severances
and Consolidations



MPAC's Role in The **Building** Permit Process

Municipalities rely on MPAC to take their building permits and plans and **turn them into assessment.**

Municipalities tax property owners **based on those assessments.**

The sooner MPAC delivers assessments, the faster municipalities realize **new revenue.**

An aerial photograph of a suburban neighborhood with many houses and trees. A rainbow is visible in the sky above the houses. The image is used as a background for a presentation slide.

What is Current Value Assessment? (CVA)

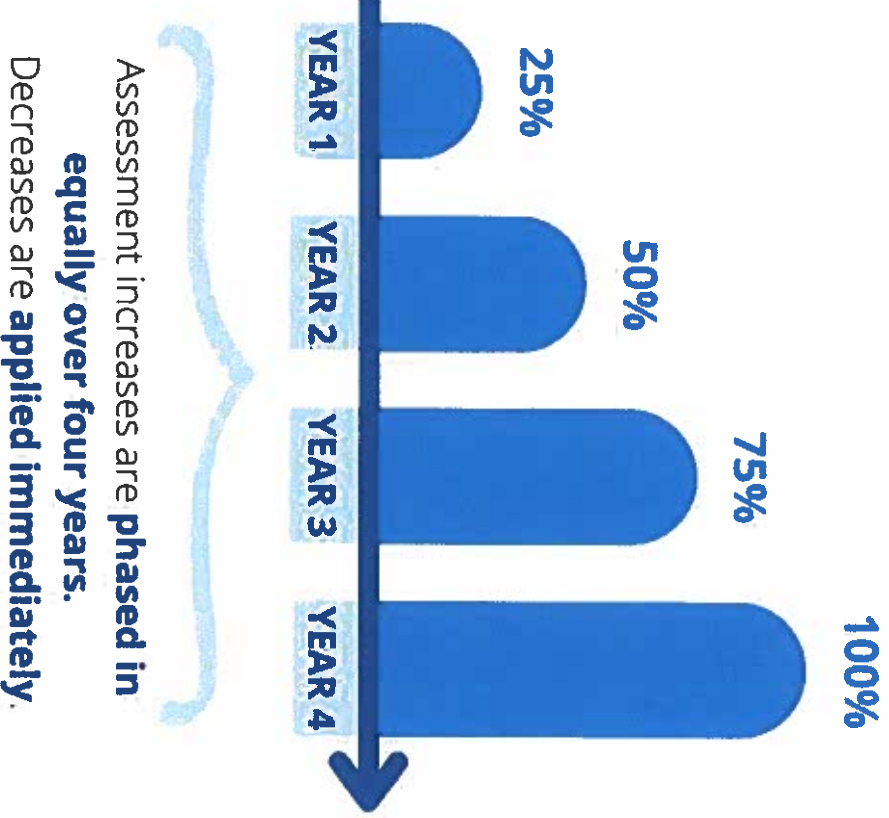
Current value is market
value **at a point in time**
(the legislated valuation
date)

The Assessment Cycle

Valuation Date
January 1, 20XX



Notices mailed



Resolving Assessment Concerns

1



Reflect on the
Current Value
Assessment

2



Visit MPAC's
AboutMyProperty.ca
to confirm details

3



View similar
properties and
their assessed
values

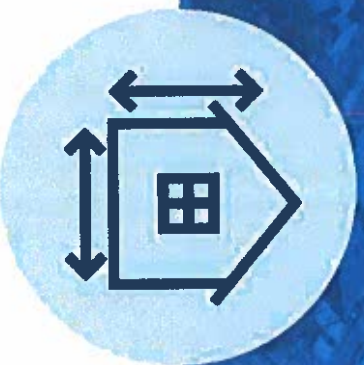
4



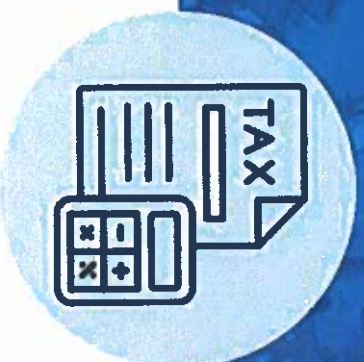
Submit a Request
for Reconsideration
if you disagree

Let's Talk **Property Taxes**

Each year, **municipalities** decide how much money they need to raise from property taxes **to pay for services** and **determine tax rates** based on that amount.



Your property's assessed value, provided by MPAC.



Municipal and education tax rates* for your property type.



Property taxes you pay.

*Education tax rates are set by the provincial government

THE RELATIONSHIP BETWEEN PROPERTY VALUE AND TAXES

PROPERTY ASSESSMENT CHANGE

IMPACT ON PROPERTY TAX

Your assessed value
**increases at the
same rate as other
in your property class**



NO CHANGE

Your assessed value
**change is lower
than the average
for your tax class**



DECREASE

Your assessed value
**increase is higher
than the average
for your property class**



INCREASE

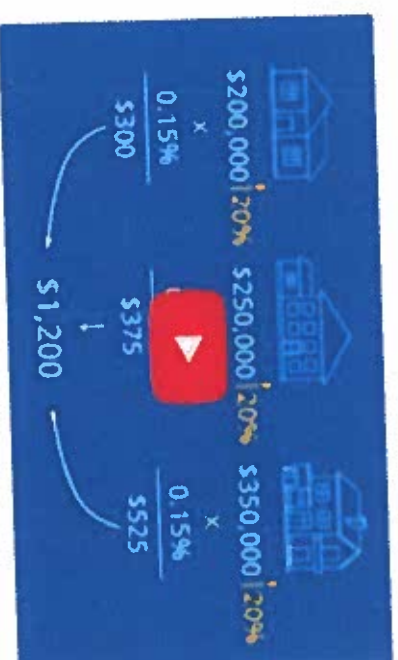
An increase in assessed value does not necessarily mean higher property taxes.

The most important factor is not how much your assessed value has changed, but how your assessed value has changed **relative to the average change for your property class in your municipality.**



This example assumes there is no change to the cost of services and that there are no changes in the distribution of taxes between property classes

Ready with Resources for You



MYTH

My property value has doubled. My property taxes will double.

FACT

There is no 1:1 relationship between the change in your assessed value and change in taxation.



Stay **Connected**,
Stay **Informed**

Subscribe to **Intouch**, our
municipal newsletter, follow us on
social media, and visit our Municipal
Resource Library on **mpac.ca**.





Your Municipal Contacts

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Laura Voltti
Regional Manager
Laura.voltti@mpac.ca
705-419-1085

Ministry of Natural Resources and
Forestry

Ministère des Richesses naturelles et des
Forêts

Policy Division

Division de la politique

Director's Office
Crown Forests and Lands Policy Branch
70 Foster Drive, 3rd Floor
Sault Ste. Marie, ON P6A 6V5

Bureau du directeur
Direction des politiques relatives aux forêts et
aux terres de la Couronne
70, rue Foster, 3^e étage
Sault Sainte Marie, ON P6A 6V5



February 24, 2023

Hello,

We are writing to let you know that the Ministry of Natural Resources and Forestry is proposing to make amendments to [Ontario Regulation 161/17](#) under the [Public Lands Act](#) regarding the use of floating accommodations and camping on water over public lands in Ontario. In addition, minor changes (listed below) are proposed for added clarity and consistency in the regulation.

The proposed changes are described in a regulation proposal notice that was posted on Ontario's Regulatory Registry and the Environmental Registry of Ontario (ERO) on February 24, 2023 (ERO number [019-6590](#)).

The proposed changes related to floating accommodations were informed by feedback received by the ministry in response to the March 2022 ERO bulletin titled, "Seeking input about the use of floating accommodations on waterways over Ontario's public lands" (ERO number [019-5119](#)).

We are proposing to amend Ontario Regulation 161/17 to clarify the types of camping units that can be used to camp on water over public land. It is proposed that the definition of 'camping unit' will be clarified to allow for camping on liveaboards and houseboats but will exclude floating accommodations, float homes and barges with residential units or camping facilities.

We are also proposing to change the conditions that must be met when camping on water over public lands in Ontario by:

- reducing the number of days that a person can camp on water over public land (per location, per calendar year) from 21 days to 7 days
- increasing the distance that a person camping on water must move their camping unit to be occupying a different location from 100 metres to 1 kilometre
- adding a new condition to prohibit camping on water within 300 metres of a developed shoreline, including any waterfront structure, dock, boathouse, erosion control structure, altered shoreline, boat launch and/or fill.

In addition, we are proposing to:

- harmonize the conditions for camping on public land so that residents and non-residents are required to follow the same conditions when camping on water over public lands or on public lands
- specify conditions for swim rafts, jumps, ramps for water sports, heat loops and water intake pipes
- clarify that camping on a road, trail, parking lot or boat launch is prohibited
- amend the regulation to add the following to the list of excluded public lands to which section 21.1 of the *Public Lands Act* and Ontario Regulation 161/17 do not apply:
 - lands subject to an agreement authorizing the use of those lands
 - lands subject to an authorization under the *Aggregate Resources Act*.

We encourage you to review the proposal notice (ERO number [019-6590](#)) and provide feedback through the ERO. The comment period for the proposal closes on **April 11, 2023**.

Online Information Sessions

We invite you to attend an online information session during which ministry staff will present an overview of the regulatory proposal and answer questions. Sessions will be held on the following dates:

Session 1 – Wednesday, March 8: 10:00 am to 11:30 am

Session 2 – Monday, March 20: 2:00 pm to 3:30 pm

If you wish to attend an online information session, please register by emailing public.lands@ontario.ca with the subject line “Regulatory Proposal Information Session” and indicate your preferred session date. You will receive a reply to your email with the session start/end times and information on how to join.

Sincerely,

Peter D. Henry, R.P.F.
Director, Crown Forests and Lands Policy Branch
Ministry of Natural Resources and Forestry

c: Pauline Desroches, Manager, Crown Lands Policy Section
Michelle Dano, Senior Program Advisor, Crown Lands Policy Section



#8(b)

Karine Pelletier <kpelletier@mcgarry.ca>

Governments of Canada and Ontario invest to bring high-speed internet to northern Ontario - Les gouvernements du Canada et de l'Ontario investissent ensemble pour doter le Nord de l'Ontario de l'Internet haute vitesse

1 message

Ontario's Broadband and Cellular Strategy (MOI) <broadband@ontario.ca>
To: "Ontario's Broadband and Cellular Strategy (MOI)" <broadband@ontario.ca>

Fri, Mar 3, 2023 at 3:58 PM

Good Afternoon,

The Honourable Kinga Surma, Minister of Infrastructure, has recently notified your Head of Council about recent high speed internet announcements.

These announcements relate to July 29, 2021 and April 19, 2022 news releases where Ontario and Canada announced their partnership to co-fund up to 64 high-speed internet projects across the province. The combined investment of \$1.3 billion would reach as many as 286,000 underserved homes and businesses.

We included the communities that would benefit from the investments and the number of homes and businesses that would receive high-speed internet access. Since then, we've made progress on firming up the project details with Canada and the lead applicants. The Ministry is now able to share additional information about these projects, including announcing the internet service providers that are leading the projects and the total funding commitment for each project.

We are notifying you about these additional announcements because one or more of the projects will occur within your municipality, providing homes and business that are currently underserved with high-speed internet access. Please see the news release (English/French) and the backgrounder (English/French) for the projects that will benefit your and other municipalities within your region.

The internet service providers will need to continue (or shortly begin) working with municipalities to obtain necessary permits and approvals to proceed with projects. To that end, we also continue our work with Infrastructure Ontario to support municipalities that may need to meet their obligations under the *Building Broadband Faster Act, 2021 (BBFA)* and *Getting Ontario Connected Act, 2022*, that include clear timelines and expectations for municipalities and other sectors to support these efforts. Our supports to municipalities include a Technical Assistance Team (TAT), established by Infrastructure Ontario, to assist with technical and administrative assistance for work required to deploy provincially funded projects and improve communications and coordination. The Team may be reached at TAT@infrastructureontario.ca.

Ontario has made significant progress on filling service gaps using a suite of initiatives. We are looking at all options on how best to bring faster service to all communities by the end of 2025.

Please contact broadband@ontario.ca if you have any questions about these projects.

Sincerely,

NEWS RELEASE

Governments of Canada and Ontario invest over \$61 million to bring high-speed internet access to more than 16,000 homes in Ontario

Rural communities to benefit from increased connectivity to high-speed internet

March 03, 2023

Infrastructure

All Canadians need reliable and affordable high-speed internet, no matter where they live. The governments of Canada and Ontario are taking action to bring high-speed internet access to unserved and underserved communities.

Today, both federal and provincial governments announced over \$61 million in combined funding for six projects by Bell Canada, the Northwestern Ontario Innovation Centre and Keewatinook Okimakanak. This investment will bring high-speed internet access to more than 16,000 homes in 47 rural Ontario communities and three First Nations communities in Northern Ontario.

The projects being announced today are part of an existing partnership between Ontario and Canada. On July 29, 2021, the governments announced a Canada-Ontario broadband partnership to support large-scale, fibre-based projects that will provide high-speed internet access to more than 280,000 households and businesses across the province. This historic agreement was made possible by a joint federal-provincial investment totalling more than \$1.2 billion.

On April 19, 2022, the governments announced an additional joint federal-provincial investment of more than \$56 million for six new projects that will bring reliable high-speed internet access to over 6,500 homes and businesses in Northern and Southwestern Ontario.

Today's announcement builds on the Government of Canada's progress toward ensuring that 98 per cent of Canadians have access to high-speed internet by 2026, and 100 per cent by 2030. The announcement also brings the Government of Ontario closer to achieving its goal of bringing reliable high-speed internet access to every community by the end of 2025.

Quick Facts

- Canada's Connectivity Strategy aims to provide all Canadians with access to internet speeds of at least 50 megabits per second (Mbps) download / 10 Mbps upload.
 - The Universal Broadband Fund is a \$3.225 billion investment by the Government of Canada designed to help provide high-speed internet access to 98 per cent of Canadians by 2026 and achieve the national target of 100 per cent access by 2030.
 - Today, 93.5 per cent of Canadian households have access to high-speed internet or are targeted to receive access through existing program commitments, compared to just 79 per cent in 2014.
 - On July 29, 2021, the governments of Canada and Ontario announced a Canada-Ontario broadband partnership. This agreement will bring high-speed internet access to more than 280,000 households across Ontario with a total investment of more than \$1.2 billion, co-funded equally by both levels of government.
 - The Ontario government is investing nearly \$4 billion to bring access to reliable high-speed internet to every community across the province by the end of 2025. This is the largest single investment in high-speed internet in any province, by any government in Canadian history.
 - As of February 2023, Ontario has finalized agreements totalling more than \$2.2 billion for nearly 200 high-speed internet and cellular projects across the province.
 - In 2021, Ontario passed the Supporting Broadband and Infrastructure Expansion Act, 2021 to help speed up construction of high-speed internet projects. To build upon this legislation, the Ontario government passed the Getting Ontario Connected Act, 2022, which further reduces barriers, duplication and delays.
-

Quotes

"We all know that internet is no longer a luxury in this day and age—it's a necessity. Having fast, reliable internet helps rural Canadians by levelling the playing field to access essential services like health care and education, participate in the digital economy, or simply connect with loved ones. Our government will continue to work side by side with our partners to achieve our connectivity targets and ensure every Canadian, no matter where they live, has access to high-speed internet."

**- The Honourable Gudie Hutchings
Minister of Rural Economic Development**

"High-speed internet service is essential to the success of everyone living and working in rural communities across Ontario. Today's investment will help create jobs, improve access to health care and online learning services, and keep people connected to their family, friends and loved ones. We will continue to make investments like these to help connect every Ontarian to the high-speed internet they need."

**- The Honourable Patty Hajdu
Minister of Indigenous Services and Minister responsible for the Federal
Economic Development Agency for Northern Ontario**

"Our government is making significant progress on our plan to bring reliable high-speed internet access to every community by the end of 2025. Through these projects, we are expanding high-speed internet access to more communities across Northern Ontario. In doing so, we are ensuring that people in these communities will have access to critical health services and will be able to learn and work online, participate in the agriculture sector, and connect with their loved ones."

**- The Honourable Kinga Surma
Ontario's Minister of Infrastructure**

"Through more than \$61 million in combined federal and provincial funding, we are expanding access to high-speed internet to over 16,000 homes and businesses across 47 rural Ontario communities and three First Nations communities in Northern Ontario. This will help build a stronger Ontario for families, workers and businesses and is part of our government's comprehensive plan to ensure that no community will be left behind in today's digital world."

- Kevin Holland
Member of Provincial Parliament for Thunder Bay-Atikokan

"We are proud to partner with the Government of Canada and the Province of Ontario to expand our all-fibre broadband network to even more communities in Ontario. Our fast and reliable internet connections help people in rural and remote communities stay connected at home and at work. Through our own fully funded investments and through partnerships like this, Bell continues to deliver on our goal of advancing how Canadians connect with each other and the world."

- Bruce Furlong
SVP Network, Bell Canada

"This announcement is the culmination of many years of work, consulting with municipalities, government, businesses and the telecom industry. The challenge has always been finding ways to make it economically viable to provide high-speed internet in rural locations. Despite the economic barrier, we must find ways to get our communities online with fast, reliable internet service, and that does not happen without the generous funding programs provided by our federal and provincial governments. Our rural communities deserve the same access to internet services as their urban counterparts, and this is a significant step in closing the digital divide. I couldn't be happier for these communities, their residents and businesses, and the region as a whole. This is a generational opportunity."

- Jeff Coull
Northwestern Ontario Innovation Centre

"Lac Seul First Nation has owned and operated its sustainable internet service provider, with an innovative and experienced technical team, for over 10 years. K-Net is pleased to partner with Lac Seul through this project by building on its community-owned infrastructure to upgrade broadband access throughout the First Nation."

- Jesse Fiddler
Director, Keewaytinook Okimakanak

Additional Resources

- [Governments of Canada and Ontario invest over \\$61 million to bring high-speed internet access to more than 16,000 homes in Ontario](#)
- [Universal Broadband Fund](#)
- [Backgrounder: Universal Broadband Fund and Telesat low Earth orbit capacity agreement](#)
- [Canada Infrastructure Bank](#)
- [High-Speed Access for All: Canada's Connectivity Strategy](#)
- [High-Speed Internet Access Dashboard](#)
- [National Broadband Internet Service Availability Map](#)
- [Ontario connects: making high-speed Internet accessible in every community](#)
- [Ontario Builds: our infrastructure plan](#)

Media Contacts

Government of Canada

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Press Secretary

Office of the Minister of Rural Economic Development

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Media Relations

Innovation, Science and Economic Development Canada

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Government of Ontario

Andrea Chiappetta

Press Secretary

Office of Ontario's Minister of Infrastructure

Andrea.Chiappetta@ontario.ca

Sofia Sousa-Dias

Communications Branch

Ontario Ministry of Infrastructure

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[Contact us](#)

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Governments of Canada and Ontario invest over \$61 million to bring high-speed internet access to more than 16,000 homes in Ontario

March 03, 2023

Infrastructure

On March 3, 2023, the governments of Canada and Ontario announced over \$61 million in combined federal and provincial funding for Bell Canada, the Northwestern Ontario Innovation Centre and Keewaytinook Okimakanak to bring high-speed internet access to more than 16,000 homes in rural Ontario.

The communities that will benefit from this project include:

Internet service provider	Communities
Bell Canada	Central Patricia, Ear Falls, Madsen, Pickle Lake
Bell Canada	Beardmore (Animbiigoo Zaagi'igan Anishinaabek), Charlton, Earlton, Englehart, Geraldton, Holtyre, Hornepayne, Iroquois Falls, Larder Lake, Latchford, Little Longlac, Longlac, Manitouwadge, Matheson, Monteith, Nellie Lake, Porquis Junction, Ramore, Thornloe, Tomstown, Val Gagné, Virginiatown
Bell Canada	Callander, East Ferris, Hornell Heights, Nipissing, Nipissing Beach, Nipissing Junction, Powassan, North Bay, Trout Creek
Celerity Telecom in partnership with Northwestern Ontario Innovation Centre	Ignace
K-Net in partnership with Keewaytinook Okimakanak	Frenchman's Head, Kejick Bay, Whitefish Bay
Tbaytel in partnership with Northwestern Ontario Innovation Centre	Amethyst Harbour, Gillies, Gorham, Hymers, Jelly, Kakabeka Falls, Millar, Moose Hill, O'Connor, Rosslyn Village, Wild Goose

Additional Resources

- Governments of Canada and Ontario invest over \$61 million to bring high-speed internet access to more than 16,000 homes in Ontario

Media Contacts

Government of Canada

#8 (c)

**Ministry of the Environment,
Conservation and Parks**

Environmental Assessment
Modernization Branch

135 St. Clair Avenue West
4th Floor
Toronto ON M4V 1P5

**Ministère de l'Environnement, de
la Protection de la nature et des Parcs**

Direction de la modernisation des processus
d'évaluation environnementale

135, avenue St. Clair Ouest
4^e étage
Toronto ON M4V 1P5

Ontario 

March 3, 2023

Good morning/afternoon,

Ontario is taking action to streamline and modernize its almost 50-year-old environmental assessment process that is too slow, unnecessarily burdensome and costly, to build Ontario while continuing to protect the environment. As part of this plan, we are making practical changes that would ensure strong environmental oversight while reducing delays to get shovels in the ground on projects that matter most to Ontario communities.

Today, on behalf of the Ministry of the Environment, Conservation and Parks, I am writing to let you know that the Municipal Class Environmental Assessment (EA) has been amended as part of the ministry's work on EA modernization.

Over the last three years, our modernization efforts have focused on ensuring strong environmental oversight while reducing delays on infrastructure projects that matter most to Ontario communities. This process includes considering input from stakeholders and Indigenous communities and streamlining requirements for low-risk municipal infrastructure projects, while maintaining strong environmental oversight and protection.

In 2019, the Ministry of the Environment, Conservation and Parks invited the proponents of class environmental assessments to review their assessment process and to propose changes to reduce duplication and better align assessment requirements with risk. We started consulting with municipalities, government agencies and Indigenous communities on the proposed amendments to the Municipal Class EA in 2020. I want to thank all who have offered feedback on the proposed amendments, through submitting comments, participating in webinars and correspondence. We have considered all comments received during the consultation, in addition to conducting our own analysis before the minister decided on the proposed amendments to the Municipal Class EA.

After careful consideration, the decision was made to approve many of the proposed amendments to the Municipal Class EA, including amendments proposed by the ministry. Various changes were made to the Municipal Class EA to update project schedules to better align the level of assessment with the environmental impact of the project. By looking at smarter, more modern ways of doing business, we're making sure important public services and infrastructure projects can get off the ground faster without unnecessary costs and delays.

Amendments to the Municipal Class Environmental Assessment
Page 2.

Based on input received from Indigenous communities and Ministry of Citizenship and Multiculturalism (formerly the Ministry of Tourism, Culture and Sport) regarding the need to ensure the protection of archaeological resources and burial sites, an archaeological screening process will be required for various project types that are now eligible for exemption. The exemption will be conditional on the completion and outcome of the screening. The archaeological screening process consists of three questions with links to various tools and criteria developed under the *Ontario Heritage Act*. Proponents must carry out the specified research and consultation to accurately respond to each question, including consultation with Indigenous Communities, municipal governments, and Ministry of Citizenship and Multiculturalism, and may require the assistance of a licensed archaeologist. A project that the screening process applies to would not be exempt unless the archaeological screening process is completed as required, project documentation maintained and all mitigation measures that are identified through the screening process are implemented.

Please see Appendix 1 of the Municipal Class EA for more information on the new archaeological screening process.

Detailed information on the approved amendments to the Municipal Class EA, including the Minister of the Environment, Conservation and Parks' reasons for making the amendments, can be found at: <https://ero.ontario.ca/notice/019-5069>. The changes are effective as of the date of posting on the Environmental Registry of Ontario, March 3, 2023.

Proponents authorized to proceed with projects through the Municipal Class EA are required to proceed in accordance with the transition provisions set out in the amended Municipal Class EA, as it came into effect on March 3, 2023. Municipalities should review the amended Municipal Class EA to determine the impact on their project.

If you have any questions, please contact Stephen Deneault, Project Officer, by e-mail at: Stephen.Deneault@ontario.ca and the Environmental Assessment Modernization Team at: EAModernization.MECP@ontario.ca.

Sincerely,



Annamaria Cross
Director, Environmental Assessment Modernization Branch
Ministry of the Environment, Conservation and Parks



Minutes of the Community Policing Committee held on Thursday, January 19th, 2023 at 7:00 p.m. in person in the meeting room or by phone.

1. Opening of the Meeting by the Chair of the Committee

The Chair called the meeting to order at 7:00 p.m. and welcomed those in attendance. Sergeant Daniel Senf joined the meeting at 7:10 p.m.

2. Roll Call: The Chair took a roll call

<u>Attendance:</u>	<u>Present</u>	<u>Absent</u>
Chair Bonita Culhane	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Co-Chair Wendy Weller	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Annie Toupin-Keft	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Bastiaan Koomans	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Merdy Armstrong	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mayor Stephen McLean	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Sergeant Daniel Senf
Clerk-Typist: Melanie Jensen
Members of the audience present: 4

Moved by Stephen McLean
Seconded by Bastiaan Koomans

01/2023
Absence

THAT the Chair agrees to grant a leave of absence to Member Annie Toupin-Keft and Wendy Weller for the Community Policing Committee Meeting of January 19th, 2023 due to appropriate advance notice submitted to the Clerk or Chair.

3. Adoption of the Agenda and Addendum:

Moved by Bastiaan Koomans
Seconded by Stephen McLean

02/2023
Adoption of Agenda

THAT the agenda for the January 19th, 2023, meeting of the Community Policing Committee be adopted.

Carried

4. **Disclosure of Pecuniary of Interest:** None

5. **Minutes of Previous Meetings:**

Moved by Stephen McLean
Seconded by Bastiaan Koomans

**03/2023
Previous Minutes**

THAT the minutes of the Meeting of the Community Policing held on September 1st, 2022 be adopted.

Carried

6. **Matters arising from the minutes:** None

7. **Deputations / Delegations :** None

8. **Correspondance, Information :** None

9. **Members Update Reports:** None

10. **New Business:**

- a) Members discussed events for the 2023 calendar. The Policing Committee will be having an informational session, safety Saturdays, safety awareness days, lots of fun and inviting things to do with the residents. Look for post monthly on what's happening for each month.

11. **a) Submitted Questions :** None

b) Audience Questions : None

12. **Closed Meeting:** None

13. **Adjournment:**

Moved by Bastiaan Koomans
Seconded by Stephen McLean

**04/2023
Adjournment**

That this meeting be adjourned at 8:39 p.m.

Carried


CHAIR Bonita Culhane



#1065

Minutes of a Recreation Committee Meeting held on Tuesday February 7th, 2023 at 7:00 p.m.

1. Opening of Meeting by the Committee Chair / Ouverture de la réunion par le/la Président(e) du comité:

The Chair called the meeting to order at 7:00 p.m. and welcomed those in attendance.

2. Roll Call / Appel nominal:

Attendance:

Present

Absent

Chair Councillor Bonita Culhane
Co-Chair Councillor John Truchon
Louanne Caza
Paulette Paquet
Mary Walsh
Mayor Stephen McLean

<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Clerk Typist: Melanie Jensen
Members of the Public: 4

3. Adoption of the Agenda and Addendum / Adoption de l'ordre du jour et de l'addenda.

Moved by Paulette Paquet
Seconded by Mary Walsh

**04/2023
Agenda**

THAT the agenda for the Recreation Committee Meeting held on February 7th, 2023 be adopted with additions of (f) Fitness room.

Carried

4. **Disclosure of Pecuniary Interest / Déclaration d'intérêts pécuniaires: None**

5. **Minutes of Previous Meetings / Procès-verbal des réunions précédentes :**

Moved by Mary Walsh

05/2023

Seconded by Paulette Paquet

Minutes

THAT the minutes of the Recreation Committee meeting held on January 3rd, 2023 be adopted.

Carried

6. **Matters arising from the minutes/Affaires découlant des procès-verbaux: None**

7. **Deputations / Delegations / Députations / Délégations : None**

8. **Correspondence, Information / Correspondance, Information: None**

9. **Members Update Reports / Rapports de mise à jour des membres :**

10. **New Business/ Nouvelles affaires:**

- a) **Inventory Update:** Chair Councillor Culhane said that the inventory was doing great. Just a few more things to do and inventory will be done.
- b) **Equipment in Storage:** Members discussed what can be done with the surplus hockey equipment.
- c) **Pickle ball schedule and responsibilities:** Chair Councillor Culhane said that all equipment was bought and is ready to set up and play. It was said that they will need to come up with rules and regulations for the sport and that it be posted in the gym. The schedules needs to be coordinated with the office.
- d) **Craft Classes for Saturdays:** members discussed a craft evening for valentines day set on Friday February 10th, 2023. More crafts to be announced.
- e) **March Break schedule for weeks activities:** Members discussed things to do on the March Break.
- f) **Fitness room:** Member Paulette Paquet has asked if the Seniors can use the Fitness room a few hours a week free of charge. Chair Councillor Culhane said she would bring it up to Council and get back to her with an answer.

11. a) **Submitted Questions / Questions soumises : None**

b) **Audience Questions / Questions de l'auditoire : None**

12. **Closed Meeting/ Réunion à huis clos: None**

13. Adjournment / Clôture de l'assemblée:

Moved by Paulette Paquet
Seconded by Mary Walsh

06/2023
Adjournment

THAT this meeting be adjourned at 7:27 p.m.



Chair – Councillor Bonita Culhane



#10(c)

Minutes of a Tourist Committee Meeting held on Wednesday, February 1st, 2023, at 7:00 p.m. in person or on the phone.

1. Opening of Meeting by the Committee Chair:

The Chair called the meeting to order at 7:00 p.m. and welcomed those in attendance.

2. Roll Call:

<u>Attendance:</u>	<u>Present</u>	<u>Absent</u>
Chair Councillor Francine Plante	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Co-Chair Councillor Wendy K. Weller	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Nyla Koomans	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Amanda St-Cyr	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Elaine Fic	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mayor Stephen McLean	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Clerk Typist: Melanie Jensen

Members of the public: 5

3. Adoption of the Agenda and Addendum

Moved by Amanda St-Cyr

04/2023

Seconded by Elaine Fic

Agenda

THAT the agenda for the Tourist Committee Meeting held on February 1st, 2023, be adopted.

Carried

4. Disclosure of Pecuniary Interest: None

5. Minutes of Previous Meetings

Moved by Nyla Koomans

05/2023

Seconded by Amanda St-Cyr

Minutes

THAT the minutes of the Tourist Committee Meeting held on January 11th, 2023 be adopted.

Carried

6. **Matters arising from the minutes: None**
7. **Deputations / Délégations: None**
8. **Correspondance, Information: None**
9. **Members Update Reports: None**
10. **New Business:**
 - a) Members discussed making a Welcome package for visitors and newcomers into McGarry. They put some ideas together for what they should have in the packages.
 - b) Chair Councillor Plante has looked into different sites for the making of the calendars.
 - c) Discussion took place about the grand opening and what the members can do at this event.
 - d) Member Nyla Koomans suggested having a slide show presentation of different aspects of the Township of McGarry put on a USB and loop on the TV at the Tourist Centre.
11.
 - a) **Submitted Questions: None**
 - b) **Audience Questions: None**
12. **Closed Meeting: None**
13. **Adjournment:**

Moved by Amanda St-Cyr
Seconded by Elaine Fic

06/2022
Adjournment

THAT this meeting be adjourned at 7:40 p.m.

Carried


Chair – Councillor Francine Plante



#10 (d)

Minutes of a Strategic Planning Committee Meeting held on Tuesday January 31st, 2023 at 7:00 p.m. in person in the meeting room or by phone.

1. Opening of Meeting by the Committee Chair:

The Chair called the meeting to order at 7:00 p.m. and welcomed those in attendance.

2. Roll Call:

<u>Attendance:</u>	<u>Present</u>	<u>Absent</u>
Chair Councillor Wendy K. Weller	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Co-Chair Councillor Bonita Culhane	<input checked="" type="checkbox"/>	<input type="checkbox"/>
John Gabourie	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Elaine Fic	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Taylor White	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Louanne Caza	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mayor Stephen McLean	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Member of the audience: 4

3. Adoption of the Agenda and Addendum:

Moved by Elaine Fic **01/2023**
Seconded by Taylor white **Agenda**

THAT the agenda for the Strategic Planning Committee Meeting held on January 31st, 2023 be adopted.

Carried

4. Disclosure of Pecuniary Interest: None

5. Minutes of Previous Meetings :

Moved by Bonita Culhane **02/2023**
Seconded by Elaine Fic **Minutes**

THAT the minutes of the Strategic Planning Committee Meeting held on October 25th, 2022 be adopted.

Carried

6. **Matters arising from the minutes: None**

7. **Deputations: None**

8. **Correspondence, Information: None**

9. **Members Update Reports:**

10. **New Business:**

- a) Members discussed the update on signage.
- b) Members discussed how the 3 communities can be connected by trails.
- c) Members discussed how to promote and advertise McGarry Township.
- d) Members discussed new goals and ideas for the committee to take on this term.
- e) Chair Councillor Weller discussed with her members grants for infrastructure.
- f) Chair Councillor Weller reported on her Conference at ROMA.

11. **a) Submitted questions: None**

b) Audience questions:

- A resident has concerns about the park located by the Community Centre as the playground is close to the road and the equipment looks all crowded around the tree. There is no space between the different apparatus was wondering if anything would be done about that when you're looking into parks.
- Another concern of a resident was that the playgrounds are not safe and need to be safe for our children to play in. the resident mentioned that if any child gets hurt that the Township is responsible for it.

12. **Adjournment:**

Moved by Bonita Culhane
Seconded by Louanne Caza

03/2023
Adjournment

THAT this meeting be adjourned at 8:01 p.m.

Carried



Chair – Wendy Weller

#10 (e)



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Virginiatown-Kearns Drinking Water System

2022 ANNUAL/SUMMARY REPORT

Prepared by the Ontario Clean Water Agency
on behalf of the Township of McGarry

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INTRODUCTION

Municipalities throughout Ontario have been required to comply with Ontario Regulation 170/03 made under the *Safe Drinking Water Act* (SDWA) since June 2003. The Act was enacted following recommendations made by Commissioner O'Conner after the Walkerton Inquiry. The Act's purpose is to protect human health through the control and regulation of drinking water systems. O. Reg. 170/03 regulates drinking water testing, use of licensed laboratories, treatment requirements and reporting requirements.

Section 11 of Regulation 170/03 requires the owner to produce an Annual Report. This report must include the following:

1. Description of system & chemical(s) used
2. Summary of any adverse water quality reports and corrective actions
3. Summary of all required testing
4. Description of any major expenses incurred to install, repair or replace equipment

This annual report must be completed by February 28th of each year.

Schedule 22 of the regulation also requires a Summary Report which must be presented & accepted by Council by March 31st of each year for the preceding calendar year.

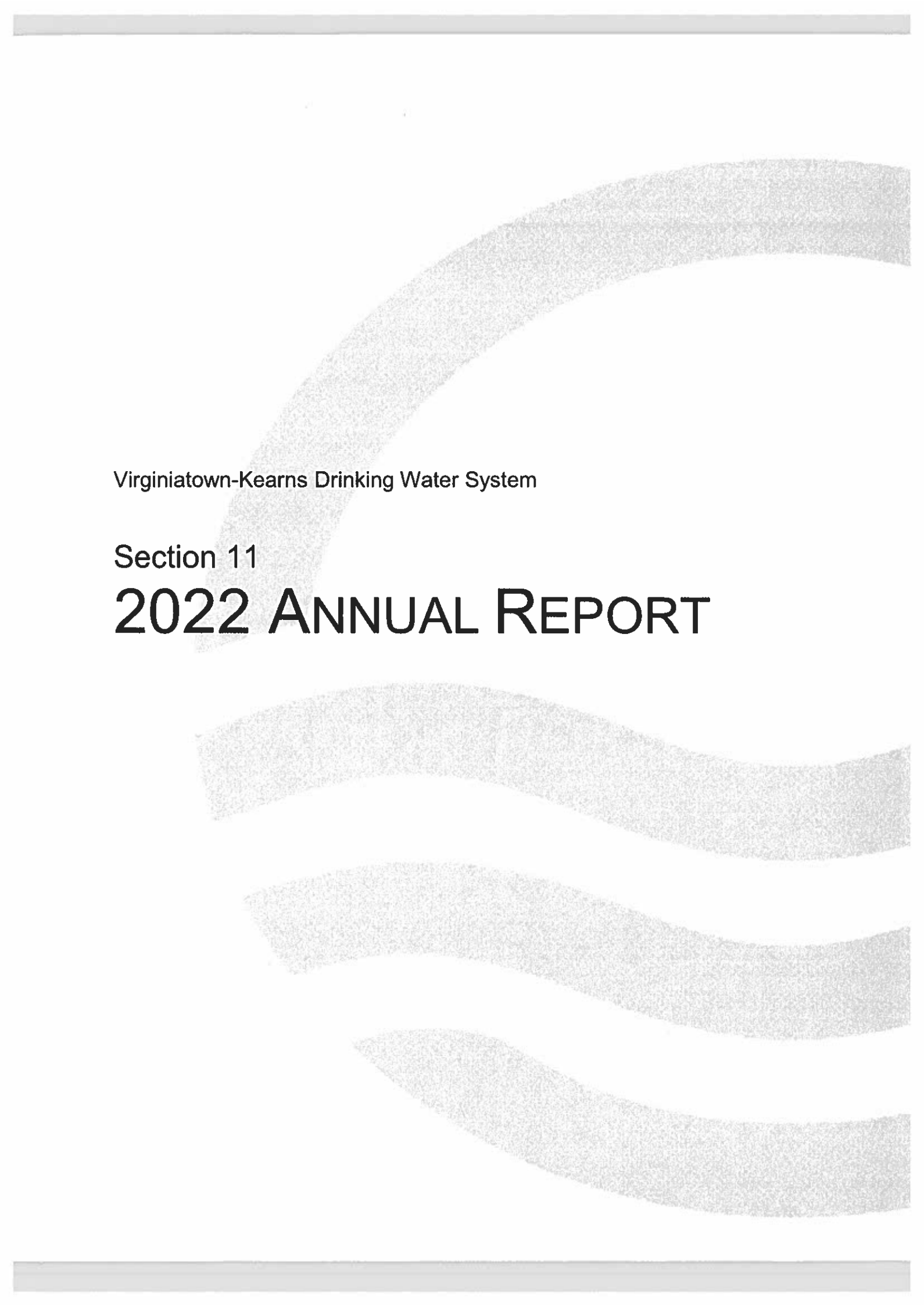
The report must list the requirements of the Act, its regulations, the system's Drinking Water Works Permit (DWWP), Municipal Drinking Water Licence (MDWL), Certificate of Approval (if applicable), and any regulatory requirement the system failed to meet during the reporting period. The report must also specify the duration of the failure, and for each failure referred to, describe the measures that were taken to correct the failure.

The *Safe Drinking Water Act* (2002) and the drinking water regulations can be viewed at the following website: <http://www.e-laws.gov.on.ca>.

To enable the Owner to assess the rated capacity of their system to meet existing and future planned water uses, the following information is also required in the report.

1. A summary of the quantities and flow rates of water supplied during the reporting period, including the monthly average and the maximum daily flows,
2. A comparison of the summary to the rated capacity and flow rates approved in the systems approval, drinking water works permit or municipal drinking water licence or a written agreement if the system is receiving all its water from another system under an agreement.

The reports have been prepared by the Ontario Clean Water Agency (OCWA) on behalf of the Owner and presented to council as the 2022 Annual/Summary Report.



Virginiatown-Kearns Drinking Water System

Section 11

2022 ANNUAL REPORT



Section 11 - ANNUAL REPORT

1.0 INTRODUCTION

Drinking-Water System Name:	Virginiatown-Kearns Drinking Water System
Drinking-Water System No.:	220000317
Drinking-Water System Owner:	The Corporation of the Township of McGarry
Drinking-Water System Category:	Large Municipal, Residential System
Period being reported:	January 1, 2022 to December 31, 2022

Does your Drinking Water System serve more than 10,000 people? No

Is your annual report available to the public at no charge on a web site on the Internet? No

Location where the report required under O. Reg. 170/03 Schedule 22 will be available for inspection.

McGarry Township Office
27 Webster Street,
Virginiatown Ontario P0K 1X0

Drinking Water Systems that receive drinking water from the Virginiatown-Kearns Drinking Water System

The Virginiatown-Kearns Drinking Water System provides all drinking water to the communities of Virginiatown, North Virginiatown and Kearns.

The Annual Report was not provided to any other Drinking Water System Owners.

The Ontario Clean Water Agency prepared the 2022 Annual/Summary Report for the Virginiatown-Kearns Drinking Water System and provided a copy to the system owner; the Township of McGarry. The Virginiatown-Kearns Drinking Water System is a stand-alone system that does not receive water from or send water to any other system.

Notification to system users that the Annual Report is available for viewing is accomplished through:

- Notice on the Town's website



2.0 VIRGINIATOWN DRINKING WATER SYSTEM (DWS No. 220000317)

The Virginiatown-Kearns Drinking Water System is owned by the Corporation of the Township of McGarry and operated by the Ontario Clean Water Agency (OCWA). The system consists of a Class 2 water distribution and supply subsystem. The Ontario Clean Water Agency (OCWA) is the accredited operating authority and is designated as the Overall Responsible Operator for both the water supply and water distribution facilities.

Raw Water Supply

The main building for the water treatment plant/pumphouse is located approximately 6 km northeast of the Virginiatown Community Centre and approximately 500 metres east of Cheminis Road. Groundwater is supplied to the plant from production Well No. 1 (Cheminis Well) which is situated within the plant and Well No. 2 (T3/91); a standby well which is located 10 metres east of the well house.

Well No.1 (Cheminis Well) was drilled in October 1994 to a depth of 26.2 metres. The well is “double-case” constructed which consists of a 300 mm diameter steel casing and is equipped with a vertical turbine pump assembly and fixed-rate control system to pump at a maximum rate of 1,420 L/minute. A magnetic flow meter is mounted on the 150 mm diameter discharge line from the well into the treatment process.

Well No. 2 (T3/91) was originally drilled in February 1991 and maintained as a test well. It was modified in December 2014 to service as a standby well. It is located approximately 10 m east of the well house and Well No. 1. It is drilled to a depth of 28.65 metres and equipped with a submersible deep well pump rated at 1,105 L/minute. It includes a newly installed pitless adaptor and 100 mm diameter discharge pipe that connects to the Well No. 1 discharge header at a point just before the flow meter located inside the plant.

The standby well is intended for use when production Well No.1 has been taken out of service for repair and maintenance, or in an emergency situation. The well can also be used periodically as required to ensure water quality; it is currently configured to operate once in every 60 tower filling cycles.

Water Treatment

The wells feed the water treatment system that has a maximum rated capacity of 2045 cubic meters per day (m³/d).

The groundwater is chlorinated using a sodium hypochlorite disinfection system, complete with a chemical feed panel consisting of duplicate chemical metering pumps (duty and standby), and a single 400 L storage tank with secondary spill containment and an outside fill line. Also integrated into the treatment process are off-site chlorine contact facilities. The first is a 6 km long by 200 mm diameter ductile iron forcemain (pipe) with no service connections that extends from the treatment plant to the elevated reservoir/tower.



Water Storage and Pumping Capabilities

The tower is located approximately 150 m to the west of the Virginiatown Community Centre at the intersection of Twenty-Seventh Avenue and Twenty-Seventh Street within the community of North Virginiatown. The tower has 1,300 cubic metres of usable volume for water storage. A free chlorine residual analyzer and a pressure transmitter both using a circular chart recorder are on-site and utilize the alarm communication device. An 8" Promag 50W magnetic flow meter was installed on the tower discharge line in June 2015 to continuously monitor the flow rate and daily volume of treated water directed to the distribution system. Piping for filling, discharging, draining, sampling and bypassing purposes are also housed within the elevated water storage.

Emergency Power

A 56 kW diesel engine generator set and its associated fuel storage and secondary spill containment is available at the pump house for standby power.

A 15 KW diesel generator is also available outside the water tower to provide emergency power in case of a power failure.

Distribution System

The distribution system serves an estimated population of approximately 600 people spread throughout the residential areas of Virginiatown, North Virginiatown and Kearns. The distribution system itself consists primarily of ten (10), eight (8), and six (6) inch ductile iron constructed water mains. The service life of the distribution system ranges from 60 years (for the North Virginiatown sector) to 80 years (for the Virginiatown sector). More recent watermain installations and repair sections are comprised of polyvinyl chloride (PVC) piping. There are 48 fire hydrants connected to the distribution system to aid in fire protection. Based on the number of service connections, the system is classified as a Large Municipal Residential Drinking Water System.

3.0 LIST OF WATER TREATMENT CHEMICALS USED OVER THE REPORTING PERIOD

Sodium Hypochlorite, used as a disinfectant, was the only chemical used at the Water Treatment Plant.

This chemical meets AWWA and NSF/ANSI standards.

4.0 SIGNIFICANT EXPENSES INCURRED IN THE DRINKING WATER SYSTEM

OCWA is committed to maintaining the assets of the drinking water system and sustains a program of scheduled inspection and maintenance activities using a computerized Work Management System (WMS).



Significant expenses incurred in the drinking water system include:

- Generator fuel tank replaced,
- SAI Global Quality and Environmental Management System (QEM) surveillance and re-accreditation audits. Accreditation achieved on October 18, 2022.

5.0 DETAILS ON NOTICES OF ADVERSE TEST RESULTS AND OTHER PROBLEMS REPORTED TO & SUBMITTED TO THE SPILLS ACTION CENTER

Based on information kept on record by OCWA, eleven (11) adverse water quality incidents were reported to the Ministry's Spills Action Centre in 2022.

Date	AWQI No.	Details
February 8, 2022	157790	<p>Loss of pressure due to a watermain break/repair (Category 2) on Dorfman Street at Connell Avenue. A hole occurred due to deterioration in a 6" CI watermain. The main was isolated on February 7th at 1400 hours and the repair occurred on February 8th at 0800 hours. The local Health Unit was notified and a precautionary boil water advisory (BWA) was issued for the affected area (6 houses and the Medical Center). The repair was done by replacing of 5 feet of pipe and using a repair band.</p> <p>A contractor was called to excavate and certified Town operator conducted the repair. OCWA's OIC oversaw the repair. All materials were disinfected and the area flushed until an acceptable chlorine residual was achieved (FCR = 0.40 mg/L). Repair was completed and the pressure was restored on February 8th at 1110 hours. Two sets of 3 bacteriological samples were collected (upstream, downstream and at the site of the break) on February 8th and 9th. Sample results indicated no total coliforms or <i>E.coli</i>. The BWA was lifted on February 10th at approx. 1430 hours.</p> <p>Incident resolved on February 11, 2022.</p>
April 10, 2022	158168	<p>Loss of pressure due to a Category 2 watermain break in the community of Kearns (intersection of Lynch Avenue and Highway 66). The main was isolated on April 10th and the repair occurred on April 11th at 0900 hours. The local Health Unit was notified and a precautionary BWA was issued for the affected area (60 homes) on April 10th.</p> <p>After the repair was complete the pressure was restored and the area was flushed until an acceptable chlorine residuals were achieved. Two sets of 3 bacteriological samples were collected (upstream, downstream and at the site of the break) on April 11th and 12th. Sample results indicated no total coliforms or <i>E.coli</i>. BWA was lifted on April 13, 2022 at 1530 hours (3:30 PM).</p> <p>Incident resolved on April 14, 2022.</p>



Date	AWQI No.	Details
April 15, 2022	158211	<p>Loss of pressure due to a Category 2 watermain break in the community of Kearns (intersection of Lynch Avenue and Highway 66). The main was isolated on April 15th at 1700 hours and the repair occurred the morning of April 16th. The local Health Unit was notified and a BWA was issued for the affected area (60 homes) on April 15th.</p> <p>After the repair was complete the pressure was restored and the area was flushed until acceptable chlorine residuals were achieved. Two sets of 3 bacteriological samples were collected (upstream, downstream and at the site of the break) on April 16th and 17th. Sample results indicated no total coliforms or <i>E.coli</i>. BWA was lifted on April 18, 2022 at approximately 1645 hours.</p> <p>Incident resolved on April 19, 2022.</p>
April 20, 2022	158236	<p>Category 2 watermain break at Reddick Avenue caused a loss of pressure to approximately 30 homes. Areas affected included: Reddick Avenue, Colville Street and Thompson Street. The 6" main had a hole caused by corrosion. The main was isolated prior to excavation. The local Health Unit was notified and a BWA was issued for the affected area.</p> <p>After the repair was complete with a repair band, the pressure was restored and the area was flushed until acceptable chlorine residuals were achieved. Two sets of 3 bacteriological samples were collected (upstream, downstream and at the site of the break) on April 21st and 22nd. Sample results indicated no total coliforms or <i>E.coli</i>. BWA was lifted on April 23, 2022 at approximately 1435 hours.</p> <p>Incident resolved on April 27, 2022.</p>
July 27, 2022	159322	<p>Category 2 watermain break on Hilltop Crescent caused a loss of pressure to approximately 8 homes. The main was isolated prior to excavation. The local Health Unit was notified and a precautionary BWA was issued for the affected area.</p> <p>After the repair was complete with a repair band, the pressure was restored and the area was flushed. Two sets of 3 bacteriological samples were collected (upstream, downstream and at the site of the break) on July 27th and 28th. Two (2) samples collected on July 27th had one total coliform present (21 Hilltop Cres. & 25 Hilltop Cres.). Five (5) re-samples were collected on July 28th and 29th and all results indicated zero total coliforms and zero <i>E.coli</i>. BWA was lifted on Saturday, July 30, 2022 at approximately 7:30 PM.</p> <p>Incident resolved on August 2, 2022.</p>



Date	AWQI No.	Details
July 28, 2022	159341	<p>Two (2) drinking water samples collected after a category 2 watermain on Hilltop Crescent each had one (1) total coliform present. One sample was collected at 21 Hilltop Crescent at 1728 hours (FCR = 2.2 mg/L). The second sample was collected at 25 Hilltop Crescent (FCR = 2.2 mg/L).</p> <p>A BWA was issued on July 27th for 8 homes affected by the watermain break. The BWA remained in place until 2 consecutive sets of 5 bacteriological samples had no detectable total coliforms or <i>E.coli</i>. BWA was lifted on Saturday, July 30, 2022 at approximately 0730 hours.</p> <p>Incident resolved on August 2, 2022 with AWQI 159322.</p>
August 1, 2022	159378	<p>A break occurred on the inlet pipe feeding the Virginiatown-Kearns water tower. Due to the location of the break, operators were unable to attend the break in a timely manner which led to a loss of pressure/water to the distribution system. The system experienced a loss of water for approximately 1.5 hours before operators were able to re-direct water to the distribution system.</p> <p>The Temiskaming Health Unit issued a precautionary boil water advisory for the entire distribution system until repairs are complete and two sets of 3 bacteriological sample results are acceptable. Distribution system flushed to purge air from the system once repairs were complete. All dead ends flushed a second time along with residual sampling. Two sets of bacterial samples were taken 24 hours apart at six locations throughout Virginiatown and Kearns. Both sets of samples came back with zero total coliforms and <i>E. coli</i>. The BWA was lifted August 5, 2022.</p> <p>Incident resolved on August 5, 2022.</p>
August 9, 2022	159479	<p>Category 2 watermain break on Lynch Avenue in Kearns caused a loss of pressure to approximately 20 homes. The main was isolated prior to excavation. The local Health Unit was notified and a precautionary BWA was issued for the affected area.</p> <p>After the repair was complete, the pressure was restored and the area was flushed until acceptable chlorine residuals was achieved (0.85 mg/L). Two sets of 3 bacteriological samples were collected (upstream, downstream and at the site of the break) on August 9th and August 10th. All results indicated zero total coliforms and <i>E.coli</i>. The BWA was lifted on August 11, 2022.</p> <p>Incident resolved on August 12, 2022.</p>
November 14, 2022	160659	<p>Category 2 watermain break at 15 Cockeram Street in the community of Virginiatown. The isolation of the break caused 35 homes on Connel Avenue, Cockeram Street, and Waite Avenue to be without pressure. The local Health Unit was notified and a precautionary BWA was issued for the affected area.</p>



Date	AWQI No.	Details
		<p>After the repair was complete, the pressure was restored and the area was flushed until acceptable chlorine residuals were achieved. Two sets of 3 bacteriological samples were collected (upstream, downstream and at the site of the break) on November 15th and 16th. Sample results indicated no total coliforms or <i>E.coli</i>. BWA was lifted on November 18th at approximately 0935 hours.</p> <p>Incident resolved on November 18, 2022.</p>
December 6, 2022	160899	<p>Category 2 watermain break on Kerr Crescent in the community of Virginiatown. The isolation of the break caused 45 homes on Waite Avenue (east of Munroe), Cockeram Street, and Hilltop Crescent to be without water.</p> <p>The Temiskaming Health Unit issued a Drinking Water Advisory (DWA) for the affected area due to concerns risen about the water entering the dig site. Possible arsenic contamination.</p> <p>The municipality provided all residences being affected with an alternate source of potable water.</p> <p>Due to the suspected chemical contamination of the surrounding water in and around the water main break, a metal scan of said water was performed by an accredited laboratory, as repairs could not be made under pressure and no proper air gap was created prior to isolation. Lab results returned positive for contamination (arsenic) and a Plan was developed for disinfection, decontamination and sampling in consultation with the MOH and MECP.</p> <p>All metal scans indicated no contamination and after 2 consecutive sets of 3 bacteriological sample results were acceptable, having zero total coliforms and <i>E. coli</i>, the DWA was lifted.</p> <p>Once the pipe could be tapped and flushed, a metal scan was sampled and tested. Results indicated no contamination.</p> <p>Incident resolved on December 22, 2022.</p>
December 11, 2022	160949	<p>One drinking water sample collected in response to a category 2 watermain on Kerr Crescent in the community of Virginiatown had one (1) total coliform present. The sample was collected at 5 Connell Avenue on December 11th at 1450 hours (FCR = 1.04 mg/L).</p> <p>A DWA/BWA is already in place for the 45 homes affected by the watermain break. The DWA/BWA remained in place until 2 consecutive sets of 3 bacteriological samples had no detectable total coliforms or <i>E.coli</i>.</p> <p>Incident resolved on December 22, 2022 with AWQI 160899.</p>



6.0 MICROBIOLOGICAL TESTING PERFORMED DURING THE REPORTING PERIOD

Summary of Microbiological Data

Sample Type	# of Samples	Range of <i>E. coli</i> Results (min to max)	Range of Total Coliform Results (min to max)	# of HPC Samples	Range of HPC Results (min to max)
Raw (production well)	52	0 to 0	0 to 0	N/A	N/A
Raw (standby well)	52	0 to 0	0 to 0	N/A	N/A
Treated	52	0 to 0	0 to 0	52	< 10 to 190
Distribution	104	0 to 0	0 to 0	52	< 10 to 90

Maximum Allowable Concentration (MAC) for *E. coli* = 0 Counts/100 mL

MAC for Total Coliforms = 0 Counts/100 mL

"<" denotes less than the laboratory's method detection limit.

Notes:

- One microbiological sample is collected and tested each week from the raw (each well) and treated water supply. A total of two microbiological samples are collected and tested each week from the Virginiatown-Kearns distribution system. At least 25% of the distribution samples must be tested for HPC bacteria.

Refer to [Appendix A](#) for a monthly summary of microbiological test results.

7.0 OPERATIONAL TESTING PERFORMED DURING THE REPORTING PERIOD

Summary of Raw Water Turbidity Data

Parameter	# of Samples	Range of Results (min to max)	Unit of Measure
Turbidity (production well)	25	0.14 to 0.37	NTU
Turbidity (standby well)	25	0.19 to 1.80	NTU

Note:

- Turbidity samples are required once every month.

Continuous Monitoring in the Treatment Process

Parameter	# of Samples	Range of Results (min to max)	Unit of Measure	Standard
Free Chlorine Residual	8760	0.00* to 2.00	mg/L	CT

Notes:

- For continuous monitors 8760 is used as the number of samples.
- CT is the concentration of chlorine in the water times the time of contact that the chlorine has with the water. It is used to demonstrate the level of disinfection treatment in the water. CT calculations are performed for the Virginiatown-Kearns drinking water system if the free chlorine residual level drops below 0.10 mg/L to ensure primary disinfection is achieved.



Virginiatown-Kearns Drinking Water System – 2022 Annual/Summary Report

- 3 * A free chlorine residual zero value on August 1st occurred due to a loss of water for approximately 1.5 hours when the inlet pipe from the well house to the tower broke and operators bypassed the tower to re-direct water to the distribution system in order to conduct the repair. A system-wide boil water advisory was in effect (AWQI 159378).

Summary of Chlorine Residual Data in the Distribution System

Parameter	# of Samples	Range of Results (min to max)	Unit of Measure	Standard
Free Chlorine Residual	364	0.24 to 2.30	mg/L	≥ 0.05

Note: A total of seven operational checks for chlorine residual in the distribution system are collected each week. Four (4) samples are tested one day and three (3) on a second day. The sample sets are collected at least 48-hours apart and samples collected on the same day are from different locations.

Refer to *Appendix B* for a monthly summary of the above operational data.

Summary of Nitrate & Nitrite Data (sampled at the plant's point of entry into the distribution every quarter)

Date of Sample	Nitrate Result Value	Nitrite Result Value	Unit of Measure	Exceedance
January 10	0.3	< 0.01	mg/L	No
April 11	0.1	< 0.01	mg/L	No
July 11	< 0.1	< 0.01	mg/L	No
October 11	< 0.1	< 0.01	mg/L	No

Maximum Allowable Concentration (MAC) for Nitrate = 10 mg/L

MAC for Nitrite = 1 mg/L

Summary of Total Trihalomethane Data (sampled in the distribution system every quarter)

Date of Sample	Result Value	Unit of Measure	Running Average	Exceedance
January 10	2	ug/L	1.70	No
April 11	1.6	ug/L		
July 11	1.7	ug/L		
October 11	1.5	ug/L		

Maximum Allowable Concentration (MAC) for Total Trihalomethanes = 100 ug/L (Four Quarter Running Average)

Summary of Total Haloacetic Acid Data (sampled in the distribution system every quarter)

Date of Sample	Result Value	Unit of Measure	Running Average	Exceedance
January 10	< 8	ug/L	8	No
April 11	< 8	ug/L		
July 11	< 8	ug/L		
October 11	< 8	ug/L		

Maximum Allowable Concentration (MAC) for Total Haloacetic Acid = 80 ug/L (Four Quarter Running Average)



Summary of Most Recent Lead Data under Schedule 15.1

(applicable to the following drinking water systems; large municipal residential systems, small, municipal residential systems, and non-municipal year-round residential systems)

The Virginiatown-Kearns Drinking Water System was eligible to follow the “Exemption from Plumbing Sampling” as described in section 15.1-5(9) and 15.1-5(10) of Schedule 15.1 of Ontario Regulation 170/03. The exemption applies to a drinking water system if, in two consecutive periods at reduced sampling, not more than 10% of all samples from plumbing exceed the maximum allowable concentration (MAC) of 10 ug/L for lead. As such, the system was required to test for total alkalinity and pH in two distribution sample collected during the periods of December 15 to April 15 (winter period) and June 15 to October 15 (summer period). This testing is required in every 12-month period with lead testing in every third 12-month period.

Lead samples were last collected in 2020 and results were well below the MAC. Two rounds of alkalinity and pH testing were carried out on March 7th and September 14th of 2022. Results are summarized in the table below.

Summary of Lead Data (sampled in the distribution system)

Date of Sample	# of Samples	Field pH (min to max)	Field Temperature (°C) (min to max)	Alkalinity (mg/L) (min to max)	Lead (ug/L) (min to max)
March 7	2	6.93 to 6.97	6.6 to 6.9	73 to 73	N/A
September 14	2	6.98 to 7.01	10.9 to 12.1	69 to 72	N/A

Note: Next lead sampling scheduled for 2023

Most Recent Schedule 23 Inorganic Data Tested at the Water Treatment Plant

Parameter	Result Value	Unit of Measure	MAC	MAC Exceedance	½ MAC Exceedance
Antimony	< 0.5	ug/L	6	No	No
Arsenic	< 1.0	ug/L	10	No	No
Barium	6.0	ug/L	1000	No	No
Boron	6.0	ug/L	5000	No	No
Cadmium	< 0.1	ug/L	5	No	No
Chromium	< 1.0	ug/L	50	No	No
Mercury	< 0.1	ug/L	1	No	No
Selenium	0.3	ug/L	50	No	No
Uranium	< 1.0	ug/L	20	No	No

Note: Sample required every 36 months (sample date = October 5, 2020). Next sampling scheduled for October 2023

Most Recent Schedule 24 Organic Data Tested at the Water Treatment Plant

Parameter	Result Value	Unit of Measure	MAC	MAC Exceedance	½ MAC Exceedance
Alachlor	< 0.327	ug/L	5	No	No
Atrazine + N-dealkylated metabolites	< 0.5	ug/L	5	No	No



Most Recent Schedule 24 Organic Data Tested at the Water Treatment Plant

Parameter	Result Value	Unit of Measure	MAC	MAC Exceedance	½ MAC Exceedance
Azinphos-methyl	< 0.245	ug/L	20	No	No
Benzene	< 0.1	ug/L	1	No	No
Benzo(a)pyrene	< 0.01	ug/L	0.01	No	No
Bromoxynil	< 0.113	ug/L	5	No	No
Carbaryl	< 1.0	ug/L	90	No	No
Carbofuran	< 2.0	ug/L	90	No	No
Carbon Tetrachloride	< 0.2	ug/L	2	No	No
Chlorpyrifos	< 0.245	ug/L	90	No	No
Diazinon	< 0.245	ug/L	20	No	No
Dicamba	< 0.099	ug/L	120	No	No
1,2-Dichlorobenzene	< 0.3	ug/L	200	No	No
1,4-Dichlorobenzene	< 0.3	ug/L	5	No	No
1,2-Dichloroethane	< 0.3	ug/L	5	No	No
1,1-Dichloroethylene (vinylidene chloride)	< 0.3	ug/L	14	No	No
Dichloromethane	< 1.0	ug/L	50	No	No
2,4-Dichlorophenol	< 0.2	ug/L	900	No	No
2,4-Dichlorophenoxy acetic acid (2,4-D)	< 0.424	ug/L	100	No	No
Diclofop-methyl	< 0.141	ug/L	9	No	No
Dimethoate	< 0.245	ug/L	20	No	No
Diquat	< 0.2	ug/L	70	No	No
Diuron	< 6.0	ug/L	150	No	No
Glyphosate	< 20.0	ug/L	280	No	No
Malathion	< 0.245	ug/L	190	No	No
Metolachlor	< 0.163	ug/L	50	No	No
Metribuzin	< 0.163	ug/L	80	No	No
Monochlorobenzene	< 0.5	ug/L	80	No	No
Paraquat	< 0.1	ug/L	10	No	No
Polychlorinated Biphenyls (PCBs)	< 0.08	ug/L	3	No	No
Pentachlorophenol	< 0.3	ug/L	60	No	No
Phorate	< 0.163	ug/L	2	No	No
Picloram	< 0.099	ug/L	190	No	No
Prometryne	< 0.082	ug/L	1	No	No
Simazine	< 0.245	ug/L	10	No	No
Terbufos	< 0.163	ug/L	1	No	No
Tetrachloroethylene	< 0.3	ug/L	10	No	No
2,3,4,6-Tetrachlorophenol	< 0.2	ug/L	100	No	No
Triallate	< 0.163	ug/L	230	No	No
Trichloroethylene	< 0.2	ug/L	5	No	No
2,4,6-Trichlorophenol	< 0.2	ug/L	5	No	No



Most Recent Schedule 24 Organic Data Tested at the Water Treatment Plant

Parameter	Result Value	Unit of Measure	MAC	MAC Exceedance	½ MAC Exceedance
2-methyl-4-chlorophenoxyacetic acid (MCPA)	< 7.07	ug/L	100	No	No
Trifluralin	< 0.163	ug/L	45	No	No
Vinyl Chloride	< 0.1	ug/L	1	No	No

Note: Sample required every 36 months (sample date = October 5, 2020). Next sampling scheduled for October 2023

Inorganic or Organic Test Results that Exceeded Half the Standard Prescribed in Schedule 2 of the Ontario Drinking Water Quality Standards.

No inorganic or organic parameter(s) listed in Schedule 23 and 24 of Ontario Regulation 170/03 exceeded half the standard found in Schedule 2 of the Ontario Drinking Water Standard (O. Reg. 169/03) during the reporting period.

Most Recent Sodium Data Sampled at the Water Treatment Plant

Date of Sample	# of Samples	Result Value	Unit of Measure	Standard	Exceedance
October 5, 2020	1	15.3	mg/L	20	No

Note: Sample required every 60 months. Next sampling scheduled for October 2025

Most Recent Fluoride Data Sampled at the Water Treatment Plant

Date of Sample	# of Samples	Result Value	Unit of Measure	Standard	Exceedance
October 5, 2020	1	< 0.05	mg/L	1.5	No

Note: Sample required every 60 months. Next sampling scheduled for October 2025

Additional Testing Performed in Accordance with an Approval, Order or Legal Instrument

No additional regulatory sampling and testing was required for the Virginiatown-Kearns Drinking Water System during the 2022 reporting period.



Virginiatown-Kearns Drinking Water System

Schedule 22

2022 SUMMARY REPORT

FOR MUNICIPALITIES



Schedule 22 - SUMMARY REPORTS FOR MUNICIPALITIES

1.0 INTRODUCTION

Drinking-Water System Name:	Virginiatown-Kearns Drinking Water System
Municipal Drinking Water Licence (MDWL) No.:	280-101-5 (issued November 9, 2020)
Drinking Water Work Permit (DWWP) No.:	279-201-5 (issued November 9, 2020)
Permit to Take Water (PTTW) No.:	8844-C6UQEY (issued September 16, 2021)
Period being reported:	January 1, 2022 to December 31, 2022

2.0 REQUIREMENTS THE SYSTEM FAILED TO MEET

According to information kept on record by OCWA, the Virginiatown-Kearns Drinking Water System failed to meet the following requirements during the 2022 reporting period:

Drinking Water Legislation	Requirement(s) the System Failed to Meet	Duration	Corrective Action(s)	Status
Section 16.2.8 of Schedule B of MDWL 280-101	<p>The owner was not maintaining the municipal wells in a manner to prevent the entry of surface water and other foreign materials.</p> <p>Section 16.2.8 of Schedule B of MDWL 280-101 requires that the operations manual(s) include "An inspection schedule for all wells associated with the drinking water system, including all production wells, standby wells, test wells and monitoring wells;</p> <p>There are four (4) observation wells in the vicinity of the production wells. The owner indicated there had been difficulties locating at least one of the observation wells and that the observation wells have not recently been inspected.</p>	Discovered: March 30, 2022	<p>On March 29th, OCWA met with the Township and they indicated that they wanted to get co-ordinates for the well.</p> <p>OCWA found information, including co-ordinates for the 4 observation wells on the Ministry's Water Well Information System and provided it to the Owner. The Owner with the help from OCWA tried to locate the wells and conduct an inspection. Two of the 4 wells could not be located due to inaccurate co-ordinates and very thick vegetation in the area of the wells.</p> <p>A report was prepared and submitted to the MECP Water Inspector, Scott Hanselman on July 28, 2022</p>	Complete
Safe Drinking Water Act- Section 31-1 (a) DWWP #280-	On July 27, 2022, a Category 2 watermain break occurred at 23 Hill Top Crescent resulting in loss of pressure to 8 residences (BWA was issued on July 27, 2022-AWQI	July 27 & 28, 2022	A training session to review the requirements of the Ministry's 2020 Watermain Disinfection procedure was held with OCWA operators on	Complete



<p>201- Schedule b; Section 2.3</p>	<p>#159322). During document review for this Category 2 watermain break, it was noted that no notes were made on the required post-repair flushing, such as flushing time, residuals during flushing and where the flushing had occurred. Even though residuals were taken with the Microbiological samples after the repairs were completed, there is no record to show that proper flushing occurred after the repairs were completed. Even though the documents provided for the watermain break indicate that the repair was disinfected with 1% sodium hypochlorite solution, proper flushing needs to occur to ensure that the discharged water is visibly free from discoloration and particulates and that an acceptable disinfectant concentration has been restored.</p> <p>The microbiological samples collected on July 27 and July 28, 2022 all had free chlorine residuals of 2.20 mg/L which indicates that the handheld chlorine residual reader was reading its max reading of 2.20 mg/L and couldn't read any higher. Also, samples collected on July 27, 2022 resulted in 1 total coliform being present in 2 samples, which may be an indication of improper flushing. On July 29, 2022, a handheld residual chlorine analyzer, which reads high range (free chlorine residuals over 2.20 mg/L), was provided to the operator and residuals read as high as 4.7 mg/L (while surrounding areas within the distribution read on average 1 mg/L).</p>		<p>December 9, 2022.</p> <p>Training was provide to the only certified Town operator on December 14, 2022.</p> <p>Training records were provided to MECF Inspector, Rachel Hamelin on December 15, 2022</p>	
<p>Schedule 27(5) 1-6 of O. Reg. 128(04)</p>	<p>Logbooks were not properly maintained and/or did not contain the required information. Upon reviewing the e-logs (electronic logbook), along with the facility round sheets, it was noted that on a few occasions, logbook entries were missing from operators for work being completed within the Virginiatown-Kearns WTP (such as</p>	<p>February 25, 2022, March 2-3, 2022, and August 12, 2022</p>	<p>The ERIS e-logbook app has created some technical challenges for operators making there entries after each shift. Updates to the app have improved entries.</p> <p>Training on Schedule 27 of O. Regulation 128/04 was done on September 23rd and</p>	<p>Complete</p>



	<p>February 25, 2022, March 2-3, 2022 and August 12, 2022). Logbook entries are to be clearly entered for every day an operator makes any adjustments, calibrations or maintenance on any parts of the WTP or distribution system. Also, entries are to clearly state the names of all operators on duty during the shift, which were missing in the entries.</p> <p>Logbook entries are to be clearly entered for every day an operator makes any adjustments, calibrations or maintenance on any parts of the WTP or distribution system. Also, entries are to clearly state the names of all operators on duty during the shift, which were missing in the entries. Failure to properly document any work or deviation in water treatment is a violation of Schedule 27(5) 1-6 of O. Reg. 128(04) which states: (5) An operator-in-charge or a person authorized by an operator-in-charge shall record the following information in the logs or other record-keeping mechanisms in respect of each operating shift:</p> <p>1 - The date, the time of day the shift began and ended and the number or designation of the shift.</p> <p>2 - The names of all operators on duty during the shift.</p> <p>3 - Any departures from normal operating procedures that occurred during the shift and the time they occurred.</p> <p>4 - Any special instructions that were given during the shift to depart from normal operating procedures and the person who gave the instructions.</p> <p>5 - Any unusual or abnormal conditions that were observed in the subsystem during the shift, any action that was taken and any conclusions drawn from the observations.</p> <p>6 - Any equipment that was taken out of service or ceased to operate during the shift and any action taken to maintain or repair</p>		<p>October 7th. Another session was held on December 9th with all staff.</p> <p>Training was provided to the only certified Town operator on December 14, 2022.</p> <p>Training records were provided to MECP Inspector, Rachel Hamelin on December 15, 2022.</p>	
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	equipment during the shift.			
PTTW #8844-C6UQEY	On May 9, 2022, a PTTW pump hours exceedance was reported to the Ministry for May 7 and May 8, 2022. As per PTTW #8844-C6UQEY, Well T3/91 can run for a maximum of 10 hours per day. On May 7, 2022, and May 8, 2022, the main production well was left in the off position, resulting in Well T3/91 to run for 11 hours and 10.25 hours respectively. Upon discovering that the main production well pump was off, the operator turned the pump back on and the wells resumed normal operation.	May 7 & 8, 2022	Well house stand-by well no. 2 allowable run time exceeded due to production well left in the 'off' position by Town operators from May 6th to May 8th. The stand-by well ran for approx. 11 hours on May 7th and 10 hours and 25 minutes on May 8th. OCWA's review of the trends discovered the exceedance.	Complete
Section 6-5(1) 10(l) of Schedule 6 of O. Reg. 170/03	<p>All continuous analyzers were not calibrated, maintained, and operated, in accordance with the manufacturer's instructions or the regulation. A review of the information provided for the inspection period including round sheets, logbook entries and continuous trends indicate that calibrations were not properly done on multiple occasions at the Virginiatown- Kearns WTP free chlorine analyzer. The instances were:</p> <p>-June 3, 2022, the operator took a handheld residual of 1.11 mg/L and calibrated the online analyzer to 1.13 mg/L.</p> <p>-July 28, 2022, the operator took a handheld residual of 3.00 mg/L and did not calibrate the analyzer (SCADA showed the free chlorine at 2.00 mg/L).</p> <p>-August 3, 2022, the operator took a handheld residual of 1.55 mg/L and calibrated the online analyzer to 1.60 mg/L.</p> <p>Failure to ensure that the treated, continuous free chlorine analyzer was calibrated correctly is a violation of Section 6-5(1) 10(l) of Schedule 6 of O. Reg. 170/03 which requires that the continuous monitoring equipment must be checked and calibrated as often as</p>	June 3, 2022, July 28, 2022, and August 3, 2022	<p>Operators received training on how to properly check and verify on-line analyzers using their hand-held unit.</p> <p>Training records were submitted to MECP Water Inspector Rachel Hamlin on September 9th.</p>	Complete



	necessary to ensure that the test results are within the following margin of error of 0.05 mg/L, if the concentrations usually measured by the equipment are less than or equal to 1.0 mg/L, and proportionally higher if the concentrations usually measured are greater than 1.0 mg/L.			
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It should be mentioned that, eleven (11) adverse water quality incidents were reported to the Ministry's Spills Action Center. Refer to Section 5.0 – *Details on Notices of Adverse Test Results and Other Problems Reported to & Submitted to the Spills Actions Center* on page 5 of this report for details.

3.0 SUMMARY OF FLOWS AND COMPARISON TO REGULATORY LIMITS

Flow Monitoring

MDWL No. 280-101 requires the owner to install a sufficient number of flow measuring devices to permit the continuous measurement and recording of:

- the flow rate and daily volume of treated water that flows from the treatment subsystem the distribution system, and
- the flow rate and daily volume of water that flows into the treatment subsystem.

The Virginiatown-Kearns drinking water system has a flow meter installed on the raw water header which was considered sufficient to satisfy the requirement of the licence since there was no water loss from processes between the raw source and the point of discharge of treated water at the water tower. Although this flow meter satisfied the flow monitoring requirements, a magnetic flow meter was installed on the discharge header of the North Virginiatown Elevated Storage Tank to continuously monitor the treated water entering the distribution system. These flow meters are calibrated on an annual basis as specified in the manufacturers' instructions

Water Usage

The following water usage tables summarize the quantities and flow rates of water taken and produced during the 2022 reporting period, including total monthly volumes, average monthly volumes, maximum monthly volumes, and maximum flow rates.



Virginiatown-Kearns Drinking Water System – 2022 Annual/Summary Report

Raw Water

2022 - Monthly Summary of Water Takings from the Source (Cheminis) Well No. 1 & Standby Well No. 2 (T3/91)

Regulated by Permit to Take Water (PTTW) # 1034-9UHP99, issued March 12, 2015 and PTTW # 8844-C6UQEY issued on September 16, 2021

Cheminis Well No. 1

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Total Volume (m ³)	14107	12254	18774	19993	17431	17230	23117	12864	8750	11601	14717	16687	187525
Average Volume (m ³ /d)	455	438	606	666	562	574	746	415	292	374	491	538	514
Maximum Volume (m ³ /d)	778	539	753	1299	819	662	1376	1609	372	592	792	1119	1609
PTTW - Maximum Allowable Volume (m ³ /day)	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045
Maximum Flow Rate (L/min)	1415	1411	1402	1402	1410	1415	1412	1345	1334	1367	1356	1335	1415
PTTW - Maximum Allowable Flow Rate (L/min)	1420	1420	1420	1420	1420	1420	1420	1420	1420	1420	1420	1420	1420

Standby Well T3/91 Well No. 2

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Total Volume (m ³)	243	280	352	387	2148	413	634	1062	206	281	210	332	6548
Average Volume (m ³ /d)	7.8	10.0	11.4	12.9	69.3	13.8	20.5	34.3	6.9	9.1	7.0	10.7	17.9
Maximum Volume (m ³ /d)	73	70	105	99	669	112	183	518	57	68	69	114	669
PTTW - Maximum Allowable Volume (m ³ /day)	1500	1500	1500	1500	1500	1500	1500	1500	1500	1500	1500	1500	1500
Maximum Flow Rate (L/min)	1101	1105	1097	1100	1098	1100	1267	1103	1095	1099	1101	1095	1267
PTTW - Maximum Allowable Flow Rate (L/min)	1105	1105	1105	1105	1105	1105	1105	1105	1105	1105	1105	1105	1105

Note: High flows on July 31st due to a broken inlet pipe from the well house to the water tower. This caused more frequent runs of Well 2 to maintain water in the tower.

Combined Water Taking (Well No. 1 and Well No. 2)

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Total Volume (m ³)	14350	12534	19126	20380	19579	17643	23751	13926	8956	11882	14927	17019	194073
Average Volume (m ³ /d)	463	448	617	679	632	588	766	449	299	383	498	549	532
Maximum Volume (m ³ /d)	778	541	755	1299	819	662	1449	2023	372	613	792	1124	2023
PTTW - Maximum Allowable Volume (m ³ /day)	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045

The system's Permit to Take Water #1034-9UHP99, allows the Township to withdraw water at the following rates:

Well No. 1 (Cheminis Well): 2,044.8 m³/day 1,420 L/minute

Well T3/91 No. 2 (Standby Well): 1,500 m³/day 1,105 L/minute

Total Combined Daily Volume: 2,044.8 m³/day

A review of the raw water flow data indicates that the system did not exceed the maximum allowable volumes during the reporting period. However, the flow rate was exceeded for Standby Well No. 2 on July 31st due to a broken inlet pipe to the water tower. This caused more frequent runs of the well to keep water in the tower.



Note: The standby well (Well No. 2) is allowed to run for a maximum of 10 hours per day and 140 days per year. The well operated for a total of 103 days in 2022 and exceeded its maximum allowable run time on May 7th and 8th when the production well was left in the “off” position. The well ran for approximately 11 hours on May 7th and 10 hours and 25 minutes on May 8th. The incidents were reported as a non-compliance to the MECP on May 9th.

Treated Water

2022 - Monthly Summary of Treated Water from the Water Tower to the Distribution System

Regulated by Municipal Drinking Water Licence (MDWL) #280-101 - Issue 5, dated November 9, 2020

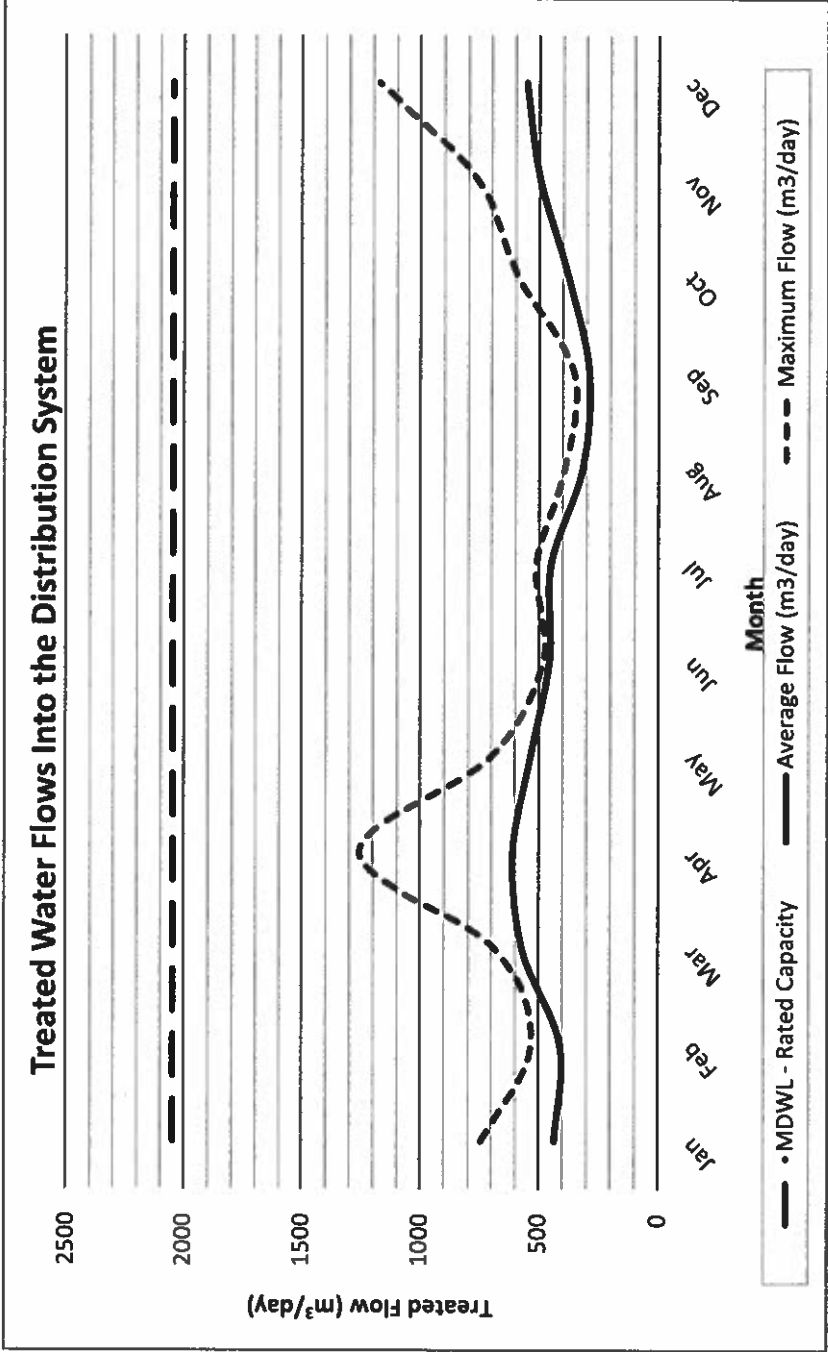
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
<i>Total Volume (m³)</i>	13462	11471	17665	18304	16581	13646	13920	9773	8641	11753	14918	17112	167244
<i>Average Volume (m³/d)</i>	434	410	570	610	535	455	449	315	288	379	497	552	458
<i>Maximum Volume (m³/d)</i>	745	530	685	1254	702	480	510	390	353	593	763	1172	1254
<i>MDWL - Rated Capacity (m³/day)</i>	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045

Schedule C, Section 1.0 (1.1) of MDWL No. 280-101 states that the maximum daily volume of treated water that flows from the treatment subsystem to the distribution system shall not exceed 2045 m³/day. The Virginiatown-Kearns DWS complied with this limit having a recorded maximum volume of 1254 m³ on April 20th which represents 61.3% of the rated capacity.

Figure 1 compares the average and maximum flow rates into the distribution system to the rated capacity of the system identified in the MDWL.

Figure 1: 2022 - Comparison of Treated Water Flows to the Rated Capacity

Average Flow (m ³ /day)	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Maximum Flow (m ³ /day)	434	410	570	610	535	455	449	315	288	379	497	552
MDWL - Rated Capacity	745	530	685	1254	702	480	510	390	353	593	763	1172
% Rated Capacity	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045
	36	26	33	61	34	23	25	19	17	29	37	57





Summary of System Performance

The following information is provided to enable the Owner to assess the capability of the system to meet existing and future water usage needs.

Rated Capacity of the Plant (MDWL)	2,045 m ³ /day	
Average Daily Flow for 2022	458 m ³ /day	22.4 % of the rated capacity
Maximum Daily Flow for 2022	1,254 m ³ /day	61.3 % of the rated capacity
Total Treated Water Produced in 2022	167,244 m ³	

Historical Flows

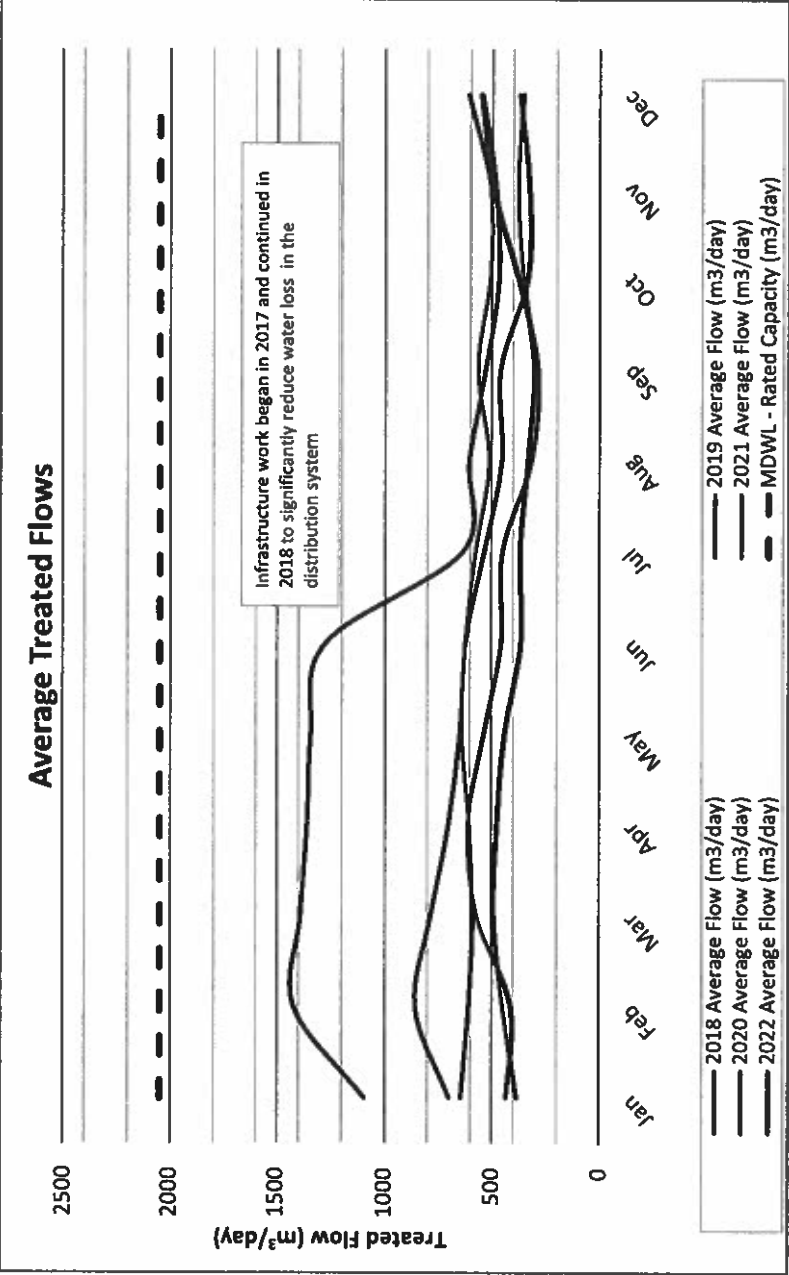
Virginiatown-Kearns Water Treatment Plant – Historical Flow Comparison

Year	Maximum Treated Flow (m ³ /d)	Average Daily Treated Flow (m ³ /d)	Average Day % of Rated Capacity (2045 m ³ /d)
2022	1,254	458	22.4%
2021	789	391	19.1%
2020	889	515	25.2%
2019	988	634	31.0%
2018	1875	941	46.0%

Figure 2 compares the average treated water flows from 2018 to 2022.

Figure 2: Virginiatown-Kearns Water Treatment System - Average Treated Water Tower Flows from 2018 to 2022

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2018 Average Flow (m ³ /day)	1094	1420	1390	1359	1342	1272	635	607	527	465	483	545
2019 Average Flow (m ³ /day)	701	856	785	704	650	624	575	513	565	509	509	610
2020 Average Flow (m ³ /day)	646	609	589	604	640	621	534	452	458	332	326	372
2021 Average Flow (m ³ /day)	385	448	492	476	440	365	369	332	303	355	378	355
2022 Average Flow (m ³ /day)	434	410	570	610	535	455	449	315	288	379	497	552
MDWL - Rated Capacity (m ³ /day)	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045	2045





CONCLUSION

The water quality data collected in 2022 demonstrates that the Virginiatown-Kearns drinking water system provided high quality drinking water to its users.

The system was able to operate within the water taking volumes of the permit to take water and in accordance with the rated capacity of the licence while meeting the community's demand for water use. Well No. 2 exceeded its allowable flow rate on July 31st due to a broken in let pipe between the well house and the water tower. This caused more frequent runs of well to maintain water in the tower.

All Adverse Water Quality Incidents were reported to the Ministry's Spills Action Center and the corrective actions were completed as required and any non-compliances that were identified were resolved as soon as possible.



APPENDIX A

Monthly Summary of Microbiological Test Results

**VIRGINIATOWN-KEARNS DRINKING WATER SYSTEM
2022 SUMMARY OF MICROBIOLOGICAL TEST RESULTS**

Facility Works Number: 229006317
 Facility Owner: Municipality: Township of McGarry
 Facility Classification: Water Distribution and Supply 2

RAW WATER	01/2022	02/2022	03/2022	04/2022	05/2022	06/2022	07/2022	08/2022	09/2022	10/2022	11/2022	12/2022	Total	Avg	Max	M
Well 1 (Cheminia) / Total Coliform: TC - cfu/100mL																
Count Lab	5	4	4	4	5	4	4	5	4	5	4	4	52			
Max Lab	0	0	0	0	0	0	0	0	0	0	0	0			0	
Mean Lab	0	0	0	0	0	0	0	0	0	0	0	0		0		
Min Lab	0	0	0	0	0	0	0	0	0	0	0	0				
Well 1 (Cheminia) / E. Coli: EC - cfu/100mL																
Count Lab	5	4	4	4	5	4	4	5	4	5	4	4	52			
Max Lab	0	0	0	0	0	0	0	0	0	0	0	0			0	
Mean Lab	0	0	0	0	0	0	0	0	0	0	0	0		0		
Min Lab	0	0	0	0	0	0	0	0	0	0	0	0				
Well 2 (Standby) / Total Coliform: TC - cfu/100mL																
Count Lab	5	4	4	4	5	4	4	5	4	5	4	4	52			
Max Lab	0	0	0	0	0	0	0	0	0	0	0	0			0	
Mean Lab	0	0	0	0	0	0	0	0	0	0	0	0		0		
Min Lab	0	0	0	0	0	0	0	0	0	0	0	0				
Well 2 (Standby) / E. Coli: EC - cfu/100mL																
Count Lab	5	4	4	4	5	4	4	5	4	5	4	4	52			
Max Lab	0	0	0	0	0	0	0	0	0	0	0	0			0	
Mean Lab	0	0	0	0	0	0	0	0	0	0	0	0		0		
Min Lab	0	0	0	0	0	0	0	0	0	0	0	0				
TREATED WATER	01/2022	02/2022	03/2022	04/2022	05/2022	06/2022	07/2022	08/2022	09/2022	10/2022	11/2022	12/2022	Total	Avg	Max	M
Treated Water (POE) / Total Coliform: TC - cfu/100mL																
Count Lab	5	4	4	4	5	4	4	5	4	5	4	4	52			
Max Lab	0	0	0	0	0	0	0	0	0	0	0	0			0	
Mean Lab	0	0	0	0	0	0	0	0	0	0	0	0		0		
Min Lab	0	0	0	0	0	0	0	0	0	0	0	0				
Treated Water (POE) / E. Coli: EC - cfu/100mL																
Count Lab	5	4	4	4	5	4	4	5	4	5	4	4	52			
Max Lab	0	0	0	0	0	0	0	0	0	0	0	0			0	
Mean Lab	0	0	0	0	0	0	0	0	0	0	0	0		0		
Min Lab	0	0	0	0	0	0	0	0	0	0	0	0				
Treated Water (POE) / HPC - cfu/mL																
Count Lab	5	4	4	4	5	4	4	5	4	5	4	4	52			
Max Lab	< 10	< 30	< 10	< 10	< 10	< 30	< 20	< 50	< 10	< 190	< 20	< 10			190	
Mean Lab	< 10	< 17.5	< 10	< 10	< 10	< 15	< 12.5	< 20	< 10	< 50	< 12.5	< 10		< 16.154		
Min Lab	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10				
DISTRIBUTION WATER	01/2022	02/2022	03/2022	04/2022	05/2022	06/2022	07/2022	08/2022	09/2022	10/2022	11/2022	12/2022	Total	Avg	Max	M
VT-3 (Bact) / Total Coliform: TC - cfu/100mL																
Count Lab	5	4	4	4	5	4	4	5	4	5	4	4	52			
Max Lab	0	0	0	0	0	0	0	0	0	0	0	0			0	
Mean Lab	0	0	0	0	0	0	0	0	0	0	0	0		0		
Min Lab	0	0	0	0	0	0	0	0	0	0	0	0				
VT-3 (Bact) / E. Coli: EC - cfu/100mL																
Count Lab	5	4	4	4	5	4	4	5	4	5	4	4	52			
Max Lab	0	0	0	0	0	0	0	0	0	0	0	0			0	
Mean Lab	0	0	0	0	0	0	0	0	0	0	0	0		0		
Min Lab	0	0	0	0	0	0	0	0	0	0	0	0				
VT-3 (Bact) / HPC - cfu/mL																
Count Lab	2	2	2	2	2	2	2	2	2	3	1	2	24			
Max Lab	< 40	< 20	< 10	< 10	< 10	< 10	< 20	< 10	< 20	< 10	< 10	< 10			40	
Mean Lab	< 25	< 15	< 10	< 10	< 10	< 10	< 15	< 10	< 15	< 10	< 10	< 10		< 12.5		
Min Lab	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10				
VT-4 (Bact) / Total Coliform: TC - cfu/100mL																
Count Lab	5	4	4	4	5	4	4	5	4	5	4	4	52			
Max Lab	0	0	0	0	0	0	0	0	0	0	0	0			0	
Mean Lab	0	0	0	0	0	0	0	0	0	0	0	0		0		
Min Lab	0	0	0	0	0	0	0	0	0	0	0	0				
VT-4 (Bact) / E. Coli: EC - cfu/100mL																
Count Lab	5	4	4	4	5	4	4	5	4	5	4	4	52			
Max Lab	0	0	0	0	0	0	0	0	0	0	0	0			0	
Mean Lab	0	0	0	0	0	0	0	0	0	0	0	0		0		
Min Lab	0	0	0	0	0	0	0	0	0	0	0	0				
VT-4 (Bact) / HPC - cfu/mL																
Count Lab	3	2	2	2	3	2	2	3	2	2	3	2	28			
Max Lab	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 40	< 90	< 10	< 10			90	
Mean Lab	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 25	< 50	< 10	< 10		< 13.929		
Min Lab	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10	< 10				



APPENDIX B

Monthly Summary of Operational Data

**VIRGINIATOWN-KEARNS DRINKING WATER SYSTEM
2022 SUMMARY OF OPERATIONAL RESULTS**

Facility Works Number: 220000317
Facility Owner: Municipality, Township of McGarry
Facility Classification: Water Distribution and Supply 2

RAW WATER	2022												Total	Avg	Max	Min
	01/2022	02/2022	03/2022	04/2022	05/2022	06/2022	07/2022	08/2022	09/2022	10/2022	11/2022	12/2022				
Well 1 (Chemins) / Turbidity - NTU																
Count IH	3	2	2	2	2	2	2	2	2	2	2	2	25			
Max IH	0.320	0.240	0.230	0.344	0.193	0.161	0.250	0.312	0.370	0.163	0.320	0.340			0.370	
Mean IH	0.290	0.238	0.205	0.331	0.193	0.149	0.235	0.284	0.310	0.161	0.300	0.305			0.250	
Min IH	0.250	0.236	0.180	0.317	0.192	0.137	0.220	0.215	0.250	0.158	0.280	0.270				0.137
Well 2 (Standby) / Turbidity - NTU																
Count IH	3	2	2	2	2	2	2	2	2	2	2	2	25			
Max IH	1.13	1.14	1.80	0.508	0.631	0.92	0.4	0.413	0.56	1.12	0.36	0.53			1.80	
Mean IH	0.807	0.666	1.65	0.497	0.415	0.724	0.39	0.364	0.42	0.814	0.355	0.45			0.636	
Min IH	0.470	0.191	1.500	0.485	0.199	0.527	0.380	0.315	0.260	0.507	0.350	0.370				0.191

TREATED WATER	2022												Total	Avg	Max	Min
	01/2022	02/2022	03/2022	04/2022	05/2022	06/2022	07/2022	08/2022	09/2022	10/2022	11/2022	12/2022				
Treated Water (POE) / CI Residual: Free (0.10 mg/L) - mg/L																
Max OL	1.943	1.214	1.173	1.281	1.856	1.293	2.000	2.000	1.415	1.378	1.446	1.628			2.000	
Mean OL	1.249	1.102	1.048	1.199	1.237	1.000	1.377	1.291	1.192	1.196	1.336	1.463			1.224	
Min OL	0.981	1.016	0.970	1.083	0.664	0.484	1.036	0.000	1.012	1.094	1.088	1.303				0.000

DISTRIBUTION WATER	2022												Total	Avg	Max	Min
	01/2022	02/2022	03/2022	04/2022	05/2022	06/2022	07/2022	08/2022	09/2022	10/2022	11/2022	12/2022				
Residual No. 1 / CI Residual: Free - mg/L																
Count IH	9	8	9	8	9	9	8	9	9	9	8	9	104			
Max IH	1.72	1.05	0.95	1.30	1.24	1.03	1.96	1.65	1.05	1.08	1.28	1.48			1.98	
Mean IH	1.05	0.874	0.772	1.03	1.017	0.792	1.307	1.102	0.787	0.867	1.05	1.264			0.99	
Min IH	0.75	0.59	0.6	0.81	0.88	0.5	0.87	0.78	0.24	0.25	0.81	0.95				0.24
Residual No. 2 / CI Residual: Free - mg/L																
Count IH	9	8	9	8	9	9	8	9	9	9	8	9	104			
Max IH	1.65	1	1.04	1.27	1.22	0.9	2.3	1.98	1.07	0.93	1.22	1.54			2.3	
Mean IH	1.08	0.846	0.89	1.061	1.026	0.694	1.126	1.166	0.818	0.804	0.991	1.301			0.983	
Min IH	0.68	0.65	0.72	0.78	0.91	0.48	0.83	0.76	0.31	0.62	0.71	1.12				0.31
Residual No. 3 / CI Residual: Free - mg/L																
Count IH	9	8	9	8	9	9	8	9	9	9	8	9	104			
Max IH	1.41	1.03	0.98	1.19	1.14	1.11	2.01	1.84	1.09	1.15	1.33	1.43			2.01	
Mean IH	1.002	0.889	0.847	1.096	1.049	0.767	1.162	1.118	0.959	0.951	1.128	1.261			1.017	
Min IH	0.74	0.76	0.61	0.99	0.89	0.52	0.86	0.72	0.84	0.83	1.02	0.98				0.52
Residual No. 4 / CI Residual: Free - mg/L																
Count IH	5	4	4	4	5	4	4	5	4	5	4	4	52			
Max IH	1.39	0.97	1.05	1.07	1.14	1.11	0.99	1.94	1.18	1.08	1.36	1.35			1.94	
Mean IH	0.998	0.84	0.873	1.013	1.064	0.908	0.813	1.116	0.843	0.994	1.205	1.21			1.001	
Min IH	0.75	0.76	0.66	0.9	1.01	0.76	0.78	0.72	0.29	0.82	1.04	1.07				0.29

Note:
Zero free chlorine residual on the treated water to the distribution system was caused when the pipe from the well house to the water tower broke and the tower was bypassed. A system-wide boil water advisory was in place at this time.

#101F



February 23, 2023

SENT VIA EMAIL ONLY

Hon. Doug Ford, Premier of Ontario
Legislative Assembly of Ontario
111 Wellesley St. W.
Toronto, ON M7A 1A2

Dear Premier Ford,

RE: Motion – Bill 42 Gender Affirming Healthcare Act

At its meeting held February 21, 2023, Council of The Corporation of The Town of Kirkland Lake ratified the following Motion:

*"Moved by: Mayor Stacy Wight
Seconded by: Councillor Casey Owens*

WHEREAS in the current state, medically necessary services are inaccessible to the majority of trans and gender diverse people in Ontario;

AND WHEREAS Gender affirming healthcare is recognized as medically necessary by the World Professional Association for Transgender Health and many other recognized medical institutions and organizations in Canada and around the world;

AND WHEREAS in November 2022, Bill 42 Gender Affirming Healthcare Act was introduced in the Ontario Legislature as an essential first step to improving the health and healthcare of transgender, non-binary, 2-Spirit and gender diverse people in Ontario;

AND WHEREAS if passed, this Bill will require the Ministry of Health to form an advisory committee to review the state of trans healthcare in Ontario and make recommendations to the Minister of Health for improving gender affirming care in Ontario;

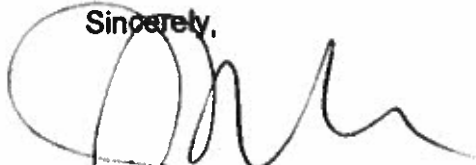
THEREFORE BE IT RESOLVED THAT Council for The Corporation of the Town of Kirkland Lake support the passing of Bill 42 - Gender Affirming Health Care Act;

AND FINALLY THAT a copy of this resolution be sent to Premier of Ontario, the Ontario Ministry of Health, the Ontario Ministry Social Services, MPP Cochrane-Timiskaming, MP Timmins-James Bay, the Federation of Northern Ontario Municipalities (FONOM), Kirkland & District Family Health Team, Ontario Health Chief Regional Officer for North East & North West, and all municipalities within the District of Timiskaming.

CARRIED"

Please do not hesitate to contact me if I can provide any additional clarification in this regard.

Sincerely,



Jennifer Montreuil
Municipal Clerk

cc. Hon. Sylvia Jones, Ontario Minister of Health and Long-Term Care
Hon. Merrilee Fullerton, Ontario Minister of Social Services
Brian Ktytor, Ontario Health Chief Regional Officer for North East & North West
John Vanthof, MPP Cochrane-Timiskaming
Charlie Angus, MP Timmins-James Bay
Federation of Northern Ontario Municipalities (FONOM)
Kirkland & District Family Health Team
Timiskaming District of Municipalities



Services de santé du

TIMISKAMING

Health Unit

Enhancing your health in so many ways.

Head Office:

247 Whitewood Avenue, Unit 43

PO Box 1090

New Liskeard, ON P0J 1P0

Tel.: 705-647-4305 Fax: 705-647-5779

Branch Offices:

Englehart Tel.: 705-544-2221 Fax: 705-544-8698

Kirkland Lake Tel.: 705-567-9355 Fax: 705-567-5476

www.timiskaminghu.com

February 24, 2023

District Municipalities
c/o Timiskaming Health Unit

Dear Head of Council/Chief Administrative Officer, Municipal Clerk,

Please find enclosed, an agreement with the Timiskaming Health Unit regarding ***Municipal Community Safety and Well-Being Plan (CSWBP)*** for the period of April 1, 2023 to March 31, 2024.

This agreement is in follow-up to October 2022 correspondence from DTSSAB to heads of council indicating that Timiskaming Health Unit would assume coordination of next steps for implementation of CSWBP in keeping with legislative requirements for municipalities.

After the development of the Timiskaming CSWBP, most municipalities resolved to adopt the plan and agreed in principle, to contribute toward a district-wide funding approach for resources to support implementation of the plan based on sample apportionment allocation.

As a CSWBP aims to ensure all residents in the community feel safe, has a sense of belonging and can meet their needs for education, healthcare, food, housing, income, and social and cultural expression, Timiskaming Health Unit is committed to providing backbone support for implementation of the plan to achieve desired outcomes in our catchment area.

To contribute to and gain from a district-wide funding approach to implementing the Timiskaming CSWBP, please fill out and sign the agreement at your earliest convenience and by March 24, 2023 and return to the attention of Rachelle Cote by email to coter@timiskaminghu.com or by fax at 705-647-5779.

Thank you for your interest in this community-based approach to address root causes of complex social issues through a collaborative approach to community safety and well-being.

If you have any questions, please refer to the links above or contact Amanda Mongeon, mongeona@timiskaminghu.com at the Timiskaming Health Unit, 1-866-747-4305.

Sincerely,

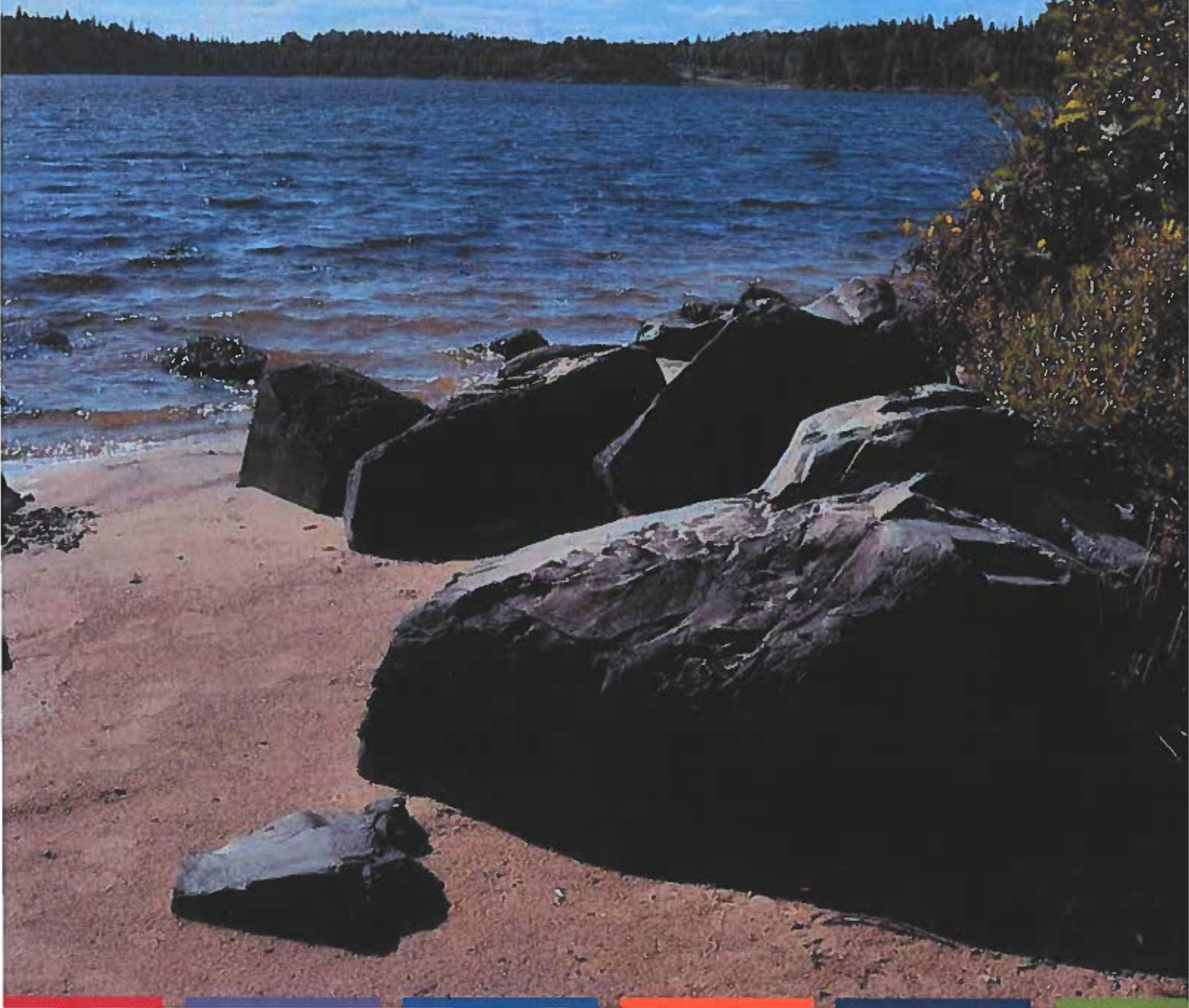
Dr. Glenn Corneil, B.Sc., M.D., C.C.F.P., F.C.F.P.
Acting Medical Officer of Health/CEO

Copy to: Mark Stewart, CAO, DTSSAB

#1069J

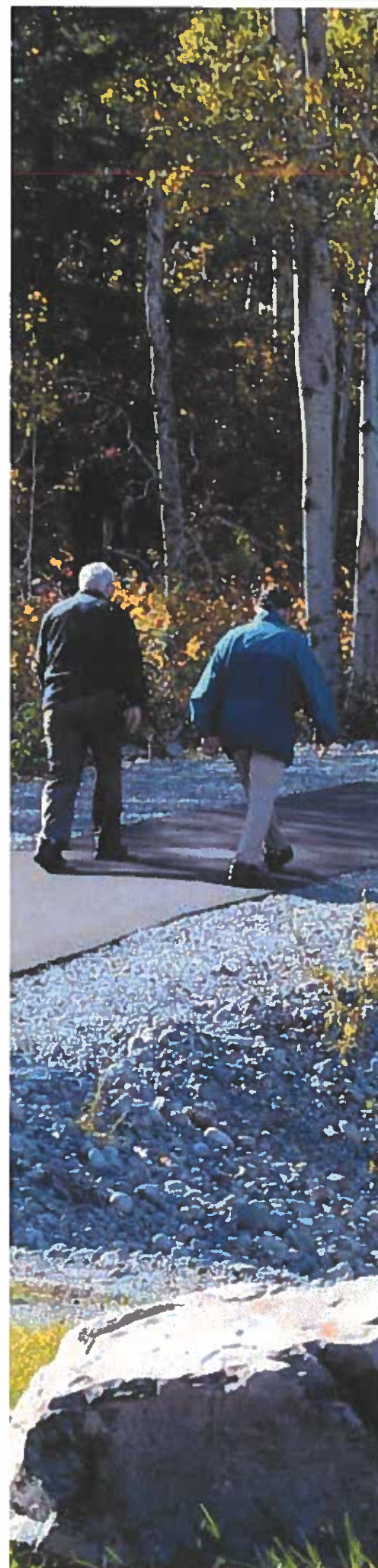
#10 (g)

Timiskaming District Community Safety and Well-Being Plan



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Executive Summary

Improving safety and well-being in the Timiskaming District requires a collaborative approach that will involve many community partners working together with the municipalities in the district, towards systems change that will benefit all residents of all the communities in the district. This Community Safety and Well-being (CSWB) Plan was developed for the intended use of all 23 municipalities in the Timiskaming District and the Municipality of Temagami, with the support and contribution of multiple agencies and organizations in the Timiskaming District, with direct input from the district's residents. It is the intent that all municipalities will accept and adopt this district CSWB plan and work collaboratively to achieve its goals. Within the CSWB Plan, the use of the "Timiskaming District" is inclusive of the Municipality of Temagami for the purposes of this initiative. First Nations are invited by the Ministry of the Solicitor General to create their own CSWB plans for their communities, however, the Timiskaming District welcomes the involvement of First Nations in the region, deferring to what each nation deems to best suit their communities' interests and needs.

There are 23 municipalities in the Timiskaming District in addition to the Municipality of Temagami with a collective population of approximately 31,000. With a land area of over 13,000 km², the district is sparsely populated, dominated by great forests, farmlands and lakes. Indigenous peoples have inhabited the land in the Timiskaming area for over 6,000 years, with Lake Temiskaming, the headwaters of the Ottawa River occupying an important place as a trading route between First Nations.

Timiskaming District's CSWB Plan consists of goals and supporting actions that fall within the four levels of intervention – social development, prevention, risk intervention, and incident response. A combination of research, a review of existing data and community reports, and input from system leaders and community stakeholders was used to identify where to focus collaborative efforts for the Timiskaming District's CSWB Plan. Through this process, six priority areas of focus were selected:

- I. Health & Well-being
- II. Housing
- III. Employment & Economy
- IV. Addressing Poverty
- V. Community Safety
- VI. Environment & Sustainability

Goals and activities have been developed for the six priority areas of focus. A Performance Measurement Framework (PMF) for the plan's goal outcomes has been developed and is critical as it will allow for the district's progress can be tracked and evaluated against the CSWB Plan.

To create effective governance of a district wide CSWB Plan, it is recommended that a Plan Lead is established to coordinate the plan's implementation. The Plan Lead could be one organization or a partnership of multiple organizations. The role of the Plan Lead would be the responsibility of organizing the necessary working groups for the implementation of the CSWB Plan and supporting the working groups' progress. This would require both leadership (e.g., CSWB Plan Chair) and coordination (e.g., CSWB Plan Implementation Coordinator) capacity from the Plan Lead. To do this, it is recommended that the Plan Lead would introduce a dedicated CSWB Plan resource role (full or part-time) to manage the implementation of the plan overseen by a senior leader in the organization acting as the CSWB Plan Chair. The necessary funds to support this added organizational capacity would be made possible through the municipalities by contributing the funding based on apportionments. This collective district funding approach is highly recommended, as should any municipality choose to pursue the implementation of a CSWB individually, it would be expected that they would ultimately incur greater relative costs while duplicating efforts and likely having difficulty achieving the same impact alone compared to the rest of the district.

The Plan Lead will need the active involvement and support of the municipalities, community partners and community engagement in order to successfully implement the plan. While the Plan Lead will provide a central, steering position, it will rely on participants of various working groups to design and implement relevant plan activities. Municipalities and partners will need to agree on a sufficient and realistic level of investment of resources (both fiscal and human resources) to reach the plan's goals and support the Plan Lead through a commitment to contributing these necessary inputs.

The CSWB Plan is meant to be a “living document” and should be updated by the Plan Lead and partners as they move forward with their allies and stakeholders in the work. This means that when monitoring the progress on the goal outcomes, the plan’s activities, performance measure indicators, targets and data sources should be revisited at appropriate time intervals (e.g., at the conclusion of year 1, year 3, year 5, etc.) to assess that they continue to be relevant and effective in the current community landscape. It also means that as the CSWB Plan rollouts and matures, there is the opportunity to expand the scope of goals and activities to include community risk sub-areas identified, but not currently prioritized in this first iteration. The CSWB Plan itself will be important for shared district planning between community partners and informing the community at large of the way forward. In addition, it is acknowledged that there is a role for all levels of government and targeted financial resource commitments from higher levels of government (e.g., Provincial and/or Federal) will be necessary to successfully fund certain activities to see the plan’s goals to fruition. Collectively, for the CSWB Plan to be a successful living document, it will serve to assist in improving the coordination of services, collaboration, information sharing, advocacy and partnerships among local government, agencies, and organizations, and ultimately improving the quality of life for Timiskaming District’s residents.

CSWB Plan Executive Overview

Priority Areas	I. Health & Well-Being	II. Housing	III. Employment & Economy
Sub-Areas	<ul style="list-style-type: none"> • Health services (promotion, primary, secondary, tertiary, LTC) • Mental health • Addictions and substance misuse • Aging safely & community paramedicine • Culture, recreation and physical activity 	<ul style="list-style-type: none"> • Affordable housing • Transitional and supportive housing • Shelters • Homelessness 	<ul style="list-style-type: none"> • Education, skills and training • Hiring and retention/ addressing vacancies • Income stability • Equitable/well-being economy • Broadband/digital inclusion
Target Group	<ul style="list-style-type: none"> • Health system providers • Culture and recreation providers • Administrators of places where people live, learn, work and play 	<ul style="list-style-type: none"> • Housing providers: public and private • Municipalities • Members of Parliament • Member of Provincial Parliament 	<ul style="list-style-type: none"> • Municipalities • Related provincial ministries
Goal Outcomes	<ul style="list-style-type: none"> • Ensure timely access to health services by increasing services and reducing wait times. • Ensure health services are equitable and accessible to all by removing identified barriers. • Reduce the number of individuals experiencing crises related to mental health and substance misuse in the community. • Increase access to quality and safe living arrangements at home for aging individuals, individuals with special or physical needs and caregivers. 	<ul style="list-style-type: none"> • Increase available and affordable housing options for community residents through greater market inventory and access to subsidized housing and housing benefits. • Create more pathways to housing through transitional and supportive housing options and services. • Serve community members experiencing homelessness through expanded shelter services. 	<ul style="list-style-type: none"> • Promote education, skills and training for local jobs to create career pathways for local workforce opportunities. • Reduce unemployment and underemployment by helping individuals apply for jobs and pursue opportunities that match their level of education and skills. • Reduce skilled job vacancies in the region by retaining post-secondary graduates as permanent residents and members of the local workforce.
Long Term Outcome	Increased Community Safety and Well-Being		

IV. Poverty	V. Community Safety	VI. Environment & Sustainability
<ul style="list-style-type: none"> • Social services • Childcare • Transportation • Food insecurity 	<ul style="list-style-type: none"> • Racism and discrimination • Gender based violence • Human trafficking • Road safety • Justice services 	<ul style="list-style-type: none"> • Environmental stewardship • Climate change
<ul style="list-style-type: none"> • Employers • Members of Parliament • Member of Provincial Parliament • Municipalities • Charitable & advocacy organizations targeting poverty and/or hunger-relief 	<ul style="list-style-type: none"> • General public • Local Ministry of Transportation Representatives • Municipalities • Local Institutions • Local Ministry of Community Safety & Correctional Services 	<ul style="list-style-type: none"> • General public • Business community • Municipalities
<ul style="list-style-type: none"> • Increase regional understanding of evidence-based strategies that address root causes of poverty such as basic income and living wages. • Improve availability of affordable public transportation throughout the region and increase the mobility for residents to work, shop, play and access services. • Reduce food insecurity experienced in the region. 	<ul style="list-style-type: none"> • Increase the public's perception of safety and belonging in their communities. • Improve road safety and reduce causal factors of roadway incidents. • Ensure access to affordable justice for all residents. 	<ul style="list-style-type: none"> • Foster a sense of community and community building around the natural environment in the region • Create plans for mitigating effects of climate change and adverse natural events in communities..
Increased Community Safety and Well-Being		

Message from the Steering Committee

This Community Safety and Well-Being (CSWB) Plan marks a milestone step on the journey to improve safety and well-being for all in the District of Timiskaming including the Municipality of Temagami. The plan aims to ensure action, recognizing a need to continuously monitor and remain responsive to the emerging needs of our communities and is the result of collaborative efforts among local organizations, municipalities, and the public.

We are grateful to all who shared their wisdom and knowledge to inform the plan including the many community members who responded to the community survey.

We would also like to acknowledge the CSWB Advisory Committee Members who, since July of 2021 have dedicated time and knowledge despite the impact of the COVID-19 pandemic and the resulting strain on organizations represented on the Advisory Committee. Their input has been instrumental in appreciating the needs and assets across diverse municipalities in Timiskaming and identifying what strengths and efforts to build on and what more can be done to address gaps. Their commitment to creating a CSWB Plan for Timiskaming and by Timiskaming is appreciated and recognized.

We would also like to recognize LBCG Consulting for Impact for their services in conducting data gathering and analysis, engaging stakeholders and facilitating rich dialogue to create this CSWB Plan. Recognition also goes to all municipalities who funded this collective and deliberate planning process.

The process of creating the plan resulted in a greater understanding of challenges and opportunities and strengthened relationships among partners. This is the beginning of a collective path towards improving safety and well-being in the Timiskaming District.



Chris Oslund
City Manager,
Temiskaming Shores



Bonnie Sackrider
Director of Community Services,
Kirkland Lake



Kerry Schubert-Mackey
Director of Community Health,
Temiskaming Health Unit



Mark Stewart
CAO, District of Timiskaming
Social Services Administration
Board

Community Safety and Well-Being

Improving safety and well-being in our community requires a comprehensive approach that includes improving the social determinants of health and working towards systems change. Factors such as poverty, unequal access to education, unemployment and underemployment, poor early childhood development, inadequate housing, crime, social exclusion, systemic discrimination (including systemic racism), and barriers to accessing health and social services increase the likelihood that communities will experience unsafe and unhealthy situations. Addressing the root causes of issues that negatively impact safety and well-being will maximize opportunities for all residents to thrive and sustain healthy and connected communities. By prioritizing equity across our work and addressing systemic discrimination we will help achieve our shared vision of inclusion, safety and connectedness for all residents in the community.

Community Safety and Well-Being Plans

Community Safety and Well-Being Plans are provincially legislated for municipalities in Ontario under the Comprehensive Ontario Police Services Act, 2019. Aligning with the Ontario Provincial Police (OPP) detachment areas, the Municipality of Temagami has been included within the scope of this regional CSWB Plan for the Timiskaming District. A multi-sectoral approach to community safety and well-being planning recognizes that more law enforcement is not the answer to complex social problems. A single organization or sector cannot tackle these complex and interconnected issues alone. The Timiskaming District's CSWB Plan focuses on how partners can work collaboratively across different sectors towards a shared commitment to making Timiskaming District a safer, more inclusive and connected community where all residents thrive.

Steering Committee

The development of this CSWB Plan was overseen by a Steering Committee comprised of senior leaders from the municipalities of Temiskaming Shores, Kirkland Lake, the Timiskaming Health Unit (THU) and the District of Timiskaming Social Services Administration Board (DTSSAB). The development of the CSWB Plan was led by a consulting team from LBCG Consulting for Impact. The DTSSAB managed the hiring of LBCG Consulting for Impact, funded by the district's municipal apportionments.

Advisory Committee

This Plan was developed with the support and contribution of multiple agencies and organizations in the Timiskaming District. Their involvement was greatly appreciated and critical to the development of the plan, and it will be critical to look to them and new partners in the community to continue to evolve and implement the plan.

- Blanche River Health
- CMHA Cochrane-Timiskaming
- District of Timiskaming Social Services Administration Board
- Keepers of the Circle
- Kirkland & District Family Health Team
- Kunuwanimano Child & Family Services
- North Eastern Ontario Family & Children's Service
- Northern College
- Ontario Provincial Police
- Pavilion Women's Shelter
- Salvation Army Temiskaming
- Temiskaming Hospital
- Temiskaming Métis Community Council
- Temiskaming South Community Living
- Timiskaming Health Unit
- Timiskaming Municipal Association

Community Background

Indigenous peoples have inhabited the land in the Timiskaming area for over 6,000 years. Lake Temiskaming, the headwaters of the Ottawa River, has always occupied an important place as a trading route between First Nations. A large territory surrounding Lake Temiskaming has traditionally been occupied by the Algonquin people. European settlers first arrived in the area when coureurs de bois explored and traded fur in what is now the Timiskaming District, in the 17th century. The first towns established in the area, New Liskeard and Haileybury on Lake Temiskaming were both established in the late 1890's, but at that time the only way to reach the towns was by canoe or by steamer up the lake in the summer, before mining and the arrival of railroads greatly stimulated development in the region in the early 1900s. Today, the Timiskaming District is home to several provincial parks that recognize these historic waterways.

Today there are 23 municipalities and three First Nations – Temagami First Nation, Matachewan First Nation and Beaverhouse First Nation – in the Timiskaming District, in addition to the Municipality of Temagami with a collective population of approximately 31,000¹. With a land area of over 13,000 km², the district is sparsely populated, dominated by great forests, farmlands and lakes.

Community Safety and Well-Being in the Timiskaming District

The Ministry of Solicitor General defines community safety and well-being as “the ideal state of a sustainable community where everyone is safe, has a sense of belonging, opportunities to participate, and where individuals and families are able to meet their needs for education, health care, food, housing, income, and social and cultural expression.” This emphasizes that community safety and well-being are more than just having our basic needs met and being free from crime. Rather, it encompasses the social determinants of health and many aspects of our social, physical, emotional and spiritual well-being.

National Factors Impacting Community Safety and Well-Being in the Timiskaming District

COVID-19 Pandemic

The global COVID-19 pandemic and the provincial state of emergency declared in March 2020 has created a unique environment and new challenges that Canadians collectively face as a nation. It has resulted in waves of widespread closures, job or wage losses and increased isolation, anxiety and uncertainty. Realities of the pandemic have introduced drastic changes in how we went about our daily lives for the past two years. Many of us would not have thought to still be managing the virus still to this day, and there will potentially be significant long-term impacts not yet understood that will have impacts on community well-being.

Opioid Crisis

Canadians saw the opioid overdose crisis worsening during the COVID-19 pandemic with many communities across Canada reporting record numbers of opioid-related deaths, emergency calls and hospitalizations. In the first 15 weeks of the COVID-19 pandemic in Ontario, 695 people died of a confirmed or suspected opioid related death, representing a 38% increase compared to the 15 weeks immediately preceding the pandemic.² An investigation of the district's corner cases suggests that the Timiskaming District is experiencing an opioid crisis through the presence of a high and increasing incidence of accidental overdose deaths in 2019/20 and 2020/21.³ Timiskaming District has high substance misuse rates with rates of hospitalizations attributed to opioid use at 27.2 per 100,000 versus 13.7 per 100,000 in Ontario⁴, yet there are gaps in available inpatient addictions services for residents of the district.

Labour Shortage

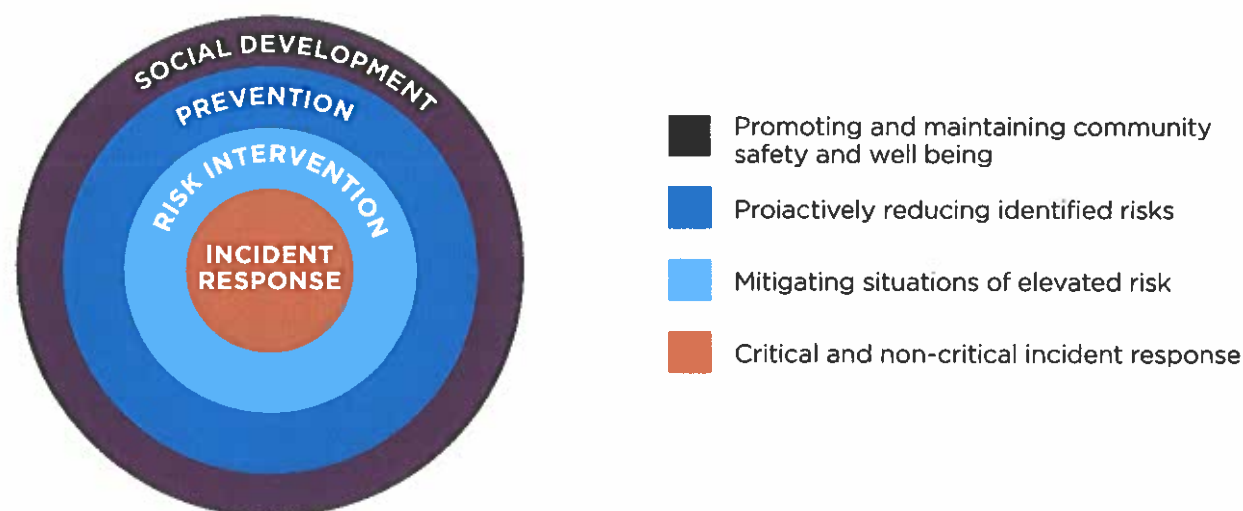
During the COVID-19 pandemic, Canada has seen a labour shortage take off. Across the country, there were 915,500 unfilled positions reported at the end of 2021, a 63% increase from 2020⁵. Jobs are also staying vacant for longer, with almost half of vacancies remaining unfilled for 60 days. Some of the hardest to fill occupations include servers, construction labourers and social workers. Hiring challenges are predicted to continue for the next five years until factors like the job market have stabilized after the en masse exiting of the labour force created by the retirement of the Baby Boomers and immigration returns to pre-pandemic levels.

Affordable Housing Shortage

Canada has been experiencing a prolonged heated real estate market, driving up prices across the country for homeownership and rentals. As homeownership is becoming a larger financial challenge for many households, more Canadians are renting than before. Research shows that in the last decade, Canada has been losing affordable rental units, far faster than new ones are being built, and it's forcing some renters out of the homes and communities they know. Rentals that were once considered affordable are seeing significant price increases. Between 2014 and 2019, rents bachelor, two- and three- bedroom apartments in large metropolitan areas across the country increased by nearly 20%.⁶ At the same time, incomes of Canadians remained largely unchanged. Two thirds of Canada's housing shortage is in Ontario. At the end of 2021, the average price for a house in Ontario was \$923,000 — triple what it was 10 years ago — while income rose just 38 per cent.⁷

Provincial Community Safety and Well-Being Planning Framework

The Ministry of the Solicitor General outlines a planning framework to support municipalities in developing a comprehensive approach to mitigate harm and promote safety and well-being. The framework outlines four levels of intervention:



Social Development: Addresses underlying causes of social issues through upstream approaches that promote and maintain individual and community wellness.



Prevention: Applies proactive strategies to known and identified risks that are likely to result in harm to individuals or communities if left unmitigated.



Risk Intervention: Identifies and response to situations of acutely elevated risk and mobilizes immediate interventions before an emergency or crisis-driven response is required.



Incident Response: Requires intervention by first responders such as police, paramedics, and other emergency-driven services.

Timiskaming District's CSWB Plan consists of strategic actions that fall within the four levels of intervention while focusing our collective efforts on social development and prevention. Ultimately, the goal is to reduce the need for incident response by addressing underlying issues.

Plan Guiding Principles

Four guiding principles are recommended to help the CSWB Plan's implementation and ultimate success. These are informed by best practices for community development initiatives.

- **Collective impact:** This form of collaboration brings people together in a structured way towards a common agenda and plan of action to address a complex social problem.⁸ The collective impact approach is characterized by five core elements that facilitate effective cross-sector collaboration and the resulting population-level impacts.
- **Social and environmental determinants of health:** The conditions in which people are born, grow, work, live and age influence their overall health and well-being. These conditions, known as the social determinants of health, include social and economic factors that can positively or negatively influence health outcomes.⁹ Likewise, several environmental factors and built environments influence the risk and experience of chronic disease. Recognizing that factors outside the control of individuals can influence their well-being impacts the types of preventive and upstream actions that are needed to influence population health.
- **Applying an equity lens:** Equity refers to fair, just and respectful treatment that recognizes and acknowledges the need to treat people differently depending on their needs and circumstances. It involves the removal of barriers to address historic and current disadvantages for under-represented and marginalized groups.
- **Anti-racism:** Anti-racism is a process of actively identifying and opposing racism. The goal of anti-racism is to challenge racism and actively change the policies, behaviours, and beliefs that perpetuate racist ideas and actions. Anti-racism is rooted in action. It is about taking steps to eliminate racism at the individual, institutional, and structural levels.

Larger descriptions of these guiding principles and their applications are expanded upon in the Appendix.

Identifying the Priority Areas of Focus

Community safety and well-being plans are broad and multi-faceted. They encompass many areas and intersect with many sectors. A combination of research, a review of existing data and community reports, and input from system leaders and community stakeholders was used to identify where to focus collaborative efforts for the Timiskaming District CSWB Plan.

Process

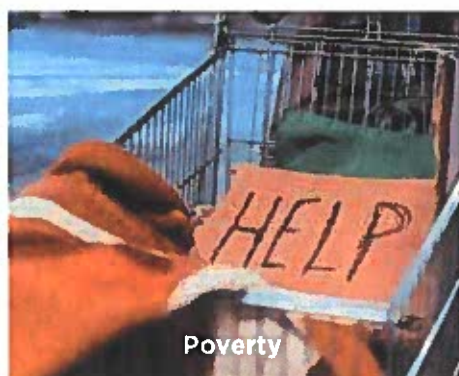
The CSWB Steering Committee identified key informants and stakeholder groups for inclusion in the CSWB Advisory Committee. The Advisory Committee membership included representative from sectors specified by the Ministry's requirements; Health and Mental Health Services, Educational Services, Community and Social Services, Children or Youth Services, Municipal and Police Services, in addition to other key stakeholders including Indigenous agencies, shelters and charitable organizations. The First Nations in the district were informed of the project and can participate as best suits their communities' interests at each stage of the plan, including the implementation.

Individual interviews were facilitated with each CSWB Advisory Committee member followed by a detailed review of relevant district studies, strategies and plans. The findings at this stage of the process were organized into a community scan that was used by the CSWB Advisory Committee in a half-day workshop to identify a preliminary shortlist of priority areas of focus to be investigated further.

The challenges present in Timiskaming District are interrelated and can create a positive feedback loop of negative consequences. This was explored with the CSWB Advisory Committee, as the relationship between various conditions, causes, core problems and effects/consequences were mapped. This helped affirm that the issues facing Timiskaming District were interconnected and that multiple priority areas of focus would be necessary to best address the factors that have the greatest impact on the community. While the CSWB framework focuses on risks, the goals identified in the plan will be successful by aligning with and building on the many assets and strengths that already exist in the Timiskaming District.

The shortlist of priority areas of focus was validated and honed in on through additional key stakeholder interviews, small group discussions and a District Community Safety and Well-being Survey. Over 500 Timiskaming District residents participated in the district survey. Building upon the additional information gathered, in a second workshop, the CSWB Advisory Committee was able to outline the six areas of focus prioritized in this plan:

- I. **Health & Well-Being**
- II. **Housing**
- III. **Employment & Economy**
- IV. **Poverty**
- V. **Community Safety**
- VI. **Environment & Sustainability**



Priority Areas of Focus

Each priority area of focus was further broken down into sub-areas of interest. In total, 25 sub-areas were identified. In this section, each area of focus and its respective sub-areas are described; identifying the community need, a snapshot of services and programs available and what gaps and/or other plans and strategies exist in the district to align with or enhance.

I. Health & Well-being



The health status of a population is commonly seen to be inversely related to the remoteness of its location.¹⁰ This experience can be illustrated through the poorer rates of health indicators for the population of the Timiskaming District when compared to the province. For instance, almost one in five (19%) of district residents aged 12+ perceive their overall health as fair or poor, almost twice the provincial population (11%).¹¹ Higher levels of obesity (37%) and diabetes (10%) are reported in the district as well as lower levels of regular weekly physical activity.¹² There are higher levels of hospitalizations in the district attributed to substance misuse, being twice the provincial rate for both alcohol (405.2 per 100,000) and opioid use (27.2 per 100,000).¹³

Five sub-areas of attention and improvement for individual and community health and well-being are explored below.

Health Services

It is important that within the Timiskaming District that residents have access to the full spectrum of health services from prevention to long-term care. In more rural areas, the delivery of health services can be a challenge due to the distances necessary to travel to reach health providers or the limited availability of providers in the area. The region has established an Ontario Health Team (OHT), the Équipe du Santé des Régions du Timiskaming Area Health Team. Introduced by the provincial government in 2019, OHTs are a new model of health care delivery, encouraging groups of health providers and organizations that, at maturity, will be clinically and fiscally accountable for delivering a full and coordinated continuum of care to a defined population. The Équipe du Santé des Régions du Timiskaming Area Health Team are moving forward with development and has identified two areas of focus related to older adults and mental health and substance use.

The main categories of health services are:

- Health promotion
- Primary care
- Secondary care
- Tertiary care
- Long term care

Health promotion helps individuals reduce the risk of illness and follow healthy lifestyles. These services are provided in a variety of ways and settings, led by the public health units. The Timiskaming District is served by the Timiskaming Health Unit, protecting the health of our communities by recommending policies, providing educational programs, conducting research and data collection, and identifying and breaking down health inequities. Health promotion is also often achieved at the primary care level too during patient interactions with physicians, nurses and health professionals.

Primary care is the doorway to health services, through the direct provision of first-contact services (by providers such as family physicians, nurse practitioners, pharmacists and telephone advice lines) in the identification and treatment

of illness and injury. Five Family Health Teams, the Mino M'shki-ki Indigenous Health Team and the Centre de Sante Communautaire du Témiskaming help provide primary care across the district. Primary care is important in the referrals to and the coordination with other levels of care (such as hospitals and specialist care). When individuals do not have convenient or timely access to primary care services, they often end up visiting their local Emergency Department seeking care. 14.5% of the district's residents don't have a regular healthcare provider,¹⁴ a persistent challenge in the context of a continued difficulty retaining health human resources in the district.

Secondary care is hospital care or when your primary care provider refers you to a specialist, who has more specific expertise in whatever health issue you are experiencing. Temiskaming Hospital and Blanche River Health provide secondary care to patients at three sites in Temiskaming Shores, Kirkland Lake and Englehart. There are three 24/7 Emergency Departments at these sites and visiting physician specialists. Specialists focus either on a specific system of the body or a particular disease or condition. Examples of specialists include cardiologists (heart disease), endocrinologists (hormone systems, including diabetes) and oncologists (cancer).

Tertiary care is when you are hospitalized and require a higher level of specialty care. Tertiary care requires highly specialized equipment and expertise for complicated treatments or procedures such as cardiac surgery, some forms of cancer treatment or paediatric (child) urgent care. Patients may have to travel outside of the Timiskaming District to Sudbury or southern Ontario hospitals for various tertiary care. Some tertiary care is delivered through satellite services at Temiskaming Hospital and Blanche River Health in the patient-care areas of Dialysis, Chemotherapy, Cardiac Rehabilitation and Virtual Critical Care through a partnership with Health Sciences North.

Long term care services help people live as independently and safely as possible when they can no longer perform everyday activities on their own. This is inclusive of home and community care in addition to facilities and nursing homes. People often need long-term care when they have a serious, ongoing health condition or disability. Long-term care is provided in different places by different caregivers, depending on a person's needs. Most long-term care is provided at home by unpaid family members and friends. It can also be given in a facility such as a nursing home or in the community, for example, in an adult day care centre. With the aging population, there is a building need for more long term care. Across the province, there is a shortage of long term beds at long term care facilities. Insufficient long term care beds in the district places strain on hospital services. One hospital reported 58% of funded beds being occupied by alternate level of care patients¹⁵ who would be more appropriately cared for in a long term care facility.

Mental Health

Mental health is important at every stage of life, from childhood and adolescence through adulthood as it affects how we think, feel and act. It influences how we handle stress, relate to others and make choices. Development of community well-being encompasses concepts of positive mental health including social capital and connectedness, as well as civic engagement and participation by residents in decisions affecting their lives.

The last decade has seen an increased commitment to improving mental health services and combating stigmas. There are national concerns about increasing levels of depression and anxiety within communities, which have only been exacerbated in recent years with stressors presented through the COVID-19 pandemic and increasing costs of living. In the Timiskaming District, 11.8% of residents aged 12+ perceive their mental health as fair or poor vs. 7.9% in Ontario.¹⁶ In the Timiskaming Community Safety and Well-being Survey, 68% felt that there are not sufficient mental health services in the Timiskaming District to serve the needs of the community.

The Canadian Mental Health Association (CMHA) Cochrane-Timiskaming branch and the North Eastern Ontario Family and Child Services (NEOFACS) lead the delivery of mental health services in the region to adults and children and youth respectively. NEOFACS has four sites in the Timiskaming district, each with four funded child and youth mental health worker positions. CMHA Cochrane-Timiskaming has three sites in the Timiskaming District, providing an array of outpatient supports and services and case management to support people with mental illnesses, concurrent

disorders (people living with a mental illness and an addiction/substance misuse) and dual diagnosis (developmental disability and serious mental illness) to access early intervention, intensive support, housing and peer supports. Partnerships help expand mental health services into the community. CMHA Cochrane-Timiskaming in partnership with the Timiskaming Hospital places a social worker in the Emergency Department to help reduce readmissions. A Mobile Crises Response Team (MCRT) is in development, led by the CMHA in partnership with the OPP. With a mix of OPP officers and CMHA crisis workers, the MCRT will improve crisis response services and mental health referrals during response calls.

Addictions and Substance Misuse

The Timiskaming District has high substance misuse rates, yet there are no inpatient addictions services currently available within the district. For those seeking withdrawal services, the closest options require to travel to facilities in Smooth Rock Falls or Timmins which are regularly at full capacity, presenting challenges for securing treatment beds for individuals in need. In the Timiskaming Community Safety and Well-being Survey, 60% felt that there are not sufficient addiction services in the Timiskaming District to serve the needs of the community.

The Timiskaming District Drug and Alcohol Strategy, co-chaired by the THU and the CMHA Cochrane-Timiskaming Branch, is working with many service agencies on ways to prevent and address harms associated with the continuum of substance use. The strategy is based on the pillars of prevention, harm reduction, treatment and enforcement, and includes an opioid early warning and response system. It will work to strengthen systems related to responding to and preventing overdoses and poisonings, recognizing and disrupting stigma and discrimination associated with substance use and addiction, enhancing pathways to substance use services and supports, and advocate for funding, resources, and public policy to address the root causes of substance use and substance use disorders.

The Timiskaming Opioid Poisoning Prevention Task Force, Timiskaming Substance Use Disorder Support Program Steering Committee and Change for Timiskaming are each independent community bodies that have organized in response to the Opioid Crisis and high levels of substance misuse present in the district. The Northeastern Recovery Centre was incorporated in September 2021 in pursuit of repurposing the former Pineger youth detainment facility in Kirkland Lake to be a new residential treatment centre to implement withdrawal management beds (medical and non-medical) and explore recovery housing options in the Timiskaming.

Aging Safely and Community Paramedicine

There is a need to accommodate the needs of the aging population, which continues to increase. It is estimated that by 2024, the number of people aged 65 and over will make up 20% of the nation's population.¹⁷ This growth in the aging population will continue to put added pressure on health and community service providers in the district to keep up with the increasing demand for services, where services are already limited. In the Timiskaming Community Safety and Well-being Survey, 85% agreed that their community needs additional seniors housing, assisted living and long term care residences to help people age safely in our communities. It is important to proactively plan and act to prepare older adults to take into account their various needs as they age, so that communities can enjoy a quality of life for all residents, regardless of their physical or mental capabilities.

Some municipalities produce Age-Friendly Community Plans to coordinate the development of communities that promote active and healthy aging. To guide municipalities, the Ontario Age-Friendly Communities Outreach Initiative developed the eight dimensions which make up an Age-Friendly community:

1. Outdoor Spaces and Public Buildings
2. Transportation
3. Housing
4. Social Participation
5. Respect and Social Inclusion

6. Civic Participation and Employment
7. Communication and Information
8. Community Support and Health Services

Age-Friendly Community Plans outline goals and objectives, often to achieve outcomes the eight dimensions to promote active aging within communities, remove barriers that prevent seniors from leading fulfilling lives, and allow seniors to age with dignity in a safe environment. While not all municipalities in the Timiskaming District produce Age-Friendly Community Plans, those that do exist can be leveraged to inform and guide district aging safety activities.

A Seniors Centre Without Walls (SCWW) program is delivered through Timiskaming Home Support in collaboration with the Timiskaming Health Unit. The SCWW program aims to reduce the feeling of loneliness and social isolation among homebound seniors and adults with physical disabilities aged 55+ in the Timiskaming region using a free conference call type platform to engage participants.¹⁸ An evaluation of the program in 2019 found a strong recognized value of the program from surveyed participants. Almost all participants (97%) indicated that they would choose to stay in the SCWW program and 84% of participants responded that they were happy with the program. Furthermore, two-thirds of participants felt like they belonged to a community because of the program (58%) or had something to look forward to and felt better because of the program (65%).

Community paramedicine is a relatively new and evolving healthcare model. It allows paramedics and emergency medical technicians (EMTs) to operate in expanded roles by assisting with public health and primary healthcare and preventive services to underserved populations in the community. Some rural patients lack access to primary care and use 9-1-1 and emergency medical services (EMS) to receive health care in non-emergency situations. This can create a burden for EMS personnel and health systems in rural areas. Community paramedics can work in a public health and primary care role to address the needs of rural residents in a more efficient and proactive way. Community paramedics generally focus on:

- Providing and connecting patients to primary care services
- Completing post-hospital follow-up care
- Integration with local public health agencies, home health agencies, health systems, and other providers
- Providing education and health promotion programs
- Providing services not available elsewhere in the community

Culture, Recreation and Physical Activity

The Timiskaming District is a mosaic of northern Ontario communities with a rich history overlaying a region of great outdoors and extensive waterways. The district is a destination for recreation and community events. This culture provides residents with a particular quality of life and is an attractive element in drawing new members to the district. Three-quarters of residents in the Timiskaming District report a somewhat strong or very strong sense of belonging to their local community.¹⁹ Maintaining vibrant communities is important to continue to attract businesses, residents, and visitors and foster a strong cultural sector. Participation and engagement with the arts, culture, and recreation benefit community well-being by contributing to better physical and mental health and community social dynamics. While access to culture, recreation and leisure opportunities are important for residents of all ages, it is particularly critical for the healthy development of children and youth.

Some municipalities create Cultural Plans and Recreation Plans to proactively monitor and support their communities' cultural, creative and leisure outlets. These plans outline objectives to develop robust, fun, and resilient communities through the social factors that encompass the environment in which people live, such as gathering places, arts, culture and heritage, food and entertainment, business and commerce. Cultural Plans recognize the unique cultural

groups found within communities, for example, the Francophone, First Nation, Métis, and Anglophone populations, and support the celebration of their cultural events and contributions to the social fabric of their communities. Likewise, Recreation Plans help to identify a community's recreation needs, and assists the municipality in determining future recreation service delivery, investment, and development, to guide and manage the direction of parks, trails, recreation and leisure services, programs, facilities and amenities. Existing Cultural Plans and Recreation Plans within the district can be leveraged to inform and guide district CSWB activities.

II. Housing



Housing is a large concern for residents of the Timiskaming District. There is a shortage of affordable and available housing across the district. Local industry booms (e.g., mining) periodically have placed added pressure on the housing market and affect prices as influxes of workers seek accommodations during their employment. More recently, a greater volume than normal of individuals and families were seen moving north from parts of southern Ontario during the pandemic as there was increased migration from urban centres. There is an imperative need for strategies that address affordable housing shortages experienced in Timiskaming District throughout the housing spectrum. Within this plan, four sub-areas within the housing spectrum for attention and improvement are explored below.

The Housing Spectrum



Source: Canada Mortgage and Housing Corporation

Affordable Housing

In Canada, housing is defined as affordable if it costs less than 30% of a household's before-tax income. Many people think the term "affordable housing" refers only to rental housing that is subsidized by the government. In reality, it's a very broad term that can include housing provided by the private, public and non-profit sectors. It also includes all forms of housing tenure: rental, ownership and co-operative ownership, as well as temporary and permanent housing. The percentage of residents in the district who spend 30% or more of their income on housing is 21%.²⁰ This is somewhat lower than the provincial rate (28%). This could be in part due to the substantially lower costs of housing in the district (median monthly shelter costs for rented dwellings in the district is \$691)²¹ than the provincial average, which is reflective of more urban areas. However, the district's median total income is less than the provincial median and the costs of housing are still a financial stretch for individuals who rely on social services and financial assistance like Ontario Works (OW) or Ontario Disability Support Program (ODSP). Currently, over one in five renters in the district, reside in subsidized housing.²² The DTSSAB has over 600 units across 34 locations in the district, however, there are still waitlists, most significantly for seniors. In the Timiskaming Community Safety and Well-being Survey, half of the participants (49%) felt that their community is not proactive enough in creating options to improve affordable housing.

Transitional and Supportive Housing

Transitional or supportive housing refers to a temporary type of supportive accommodation that is meant to bridge the gap from homelessness to permanent housing by offering structure, supervision, supports (for addictions, mental health or domestic violence for instance), life skills, and in some cases, education and training. It is more long term, service-intensive, and private than emergency shelters yet remains time limited typically to stays of three to six months. It is meant to provide a safe, supportive environment where residents can overcome trauma, begin to address the issues that led to homelessness or kept them homeless, and begin to rebuild their support network. Transitional housing can connect individuals with tailored resources for those who have difficulty maintaining housing like CMHA's rent subsidies for clients, or the DTSSAB's homeless prevention worker who works with at-risk tenants to try to prevent evictions. In the Timiskaming Community Safety and Well-being Survey, 67% agreed that their community needs additional transitional housing to help people reach permanent housing. There are limited transitional and supportive housing units in the Timiskaming District currently. Without these services, it is difficult for individuals to separate from unsafe or enabling environments when they can't secure new accommodations.

Emergency Shelters

Emergency shelters are places for people to live temporarily or access overnight shelter when they don't have a place to stay. They are used by individuals facing homelessness as a harm reduction model and to serve as hubs for relevant services and supports. Some emergency shelters are focused on those fleeing an abusive relationship, sexual abuse or domestic violence (i.e., women's shelters). This is the case of Pavilion Women's Centre, which is the only emergency housing currently available in the district. For all others experiencing various forms of homelessness (episodic, situational or chronic), they must be referred and provided transportation outside of the district in order to access emergency housing or shelter. In the Timiskaming Community Safety and Well-being Survey, 54% agreed that their community needs enhanced emergency shelter services to address homelessness in the community. To address this gap, Zack's Crib, a safe bed facility, that is presently in development in Temiskaming Shores.

Homelessness

Homelessness describes the situation of an individual, family or community without stable, safe, permanent and appropriate housing, or the immediate prospect, means and ability to acquire it. It can be the result of systemic or societal barriers, a lack of affordable and appropriate housing, the individual or household's financial, mental, cognitive, behavioural or physical challenges, and/or racism and discrimination. Most people do not choose to be homeless, and the experience is generally negative, unpleasant, unhealthy, unsafe, and distressing.

In September 2021, the DTSSAB completed their most recent Homelessness Enumeration. Baseline data is vital to understanding the challenges of homelessness and the extent of homelessness in the district. The Homelessness Enumeration identified 53 homeless individuals within the district. Additionally, two-thirds (62%) of Homeless Enumeration participants reported regularly staying with family and friends (e.g., couch surfing). This information demonstrates the presence of hidden homelessness in the district and the potential of several individuals not captured in the enumeration.

It is recognized that there is an overrepresentation of Indigenous peoples amongst Canadian homeless populations resulting from the legacy of trauma from colonization and displacement. In addition, numerous populations, such as youth, women, people with mental health and addictions issues, people impacted by violence, seniors, and members of LGBTQ2S communities are at greater risk of experiencing homelessness.

III. Employment & Economy



Education plays an important role in determining the health status of an individual, creating pathways to employment and greater income levels. This can also affect health by influencing social and psychological factors like greater perceived personal control.²³ The Timiskaming district has lower levels of education compared to the province. Currently, 18% of Timiskaming District's population between the ages of 25-64 years have less than a high school diploma, almost double the provincial average (10%)²⁴ : Four District School Boards serve the Anglophone and Francophone communities in Timiskaming in addition to Kiwetin Kikinamading (Timiskaming First Nation, Quebec) and private schools in the district. Two of the district's school boards have a lower percentage of students who graduate high school within five years of starting grade 9 than the provincial average (88%), with one school board reporting 71%.²⁵ While the percentage of the district's and province's population who have a high school diploma or GED as their highest level of education is equal (25%), the percentage of the population with a university degree in the district is a third of the provincial average of 32%.²⁶

Northern College is the post-secondary institution present in the district, with campuses in Haileybury and Kirkland Lake. The campuses include access centres for other institutions for Contact North and College Boreal. There is a history and a partnership between the college and the local industries, leading to curriculum and program development to align with the district's economic needs, for example, mining in the north and agriculture in the south. A partnership with Algoma University allows for various dual diploma and bachelor programs at Northern College. Employment Ontario's Employment Services are delivered on Northern College's campuses, providing support for students seeking employment and funding for adult learners to go back to school.

The sub-areas of addressing the challenges pertaining to hiring and retention of skilled workers and addressing vacancies in the district in addition to income stability were identified.

Hiring, Retention and Addressing Chronic Vacancies

Recruitment and retention are a challenge, particularly for the health human resources, with providers experiencing high turnover rates and chronic vacancies. This is only exacerbated by the national labour shortage experienced since the start of the COVID-19 pandemic.

Education is critical to enhancing local talent and creating a pipeline of residents who can fill job openings. If district residents can see the local demand for skilled professionals as career opportunities for themselves, and the pathways for them to pursue the appropriate education and training are made clear and accessible, then the need to recruit and retain employees from outside of the district may be able to be alleviated in the future. A challenge in this approach is that there is no university within the district to train health human resources (i.e., doctors, social workers, addictions and mental health) within the communities. Additionally, In the Timiskaming Community Safety and Well-being Survey, 32% felt that educational or training opportunities they are interested in are unaffordable.

Other factors also play an important role in supporting recruitment and retention. Appropriate housing options need to be readily available for recruited candidates and professionals who are moving to the district. Local housing shortages can cause employment contracts to collapse if successful job candidates are unable to find housing options once accepting offers or for candidates to decide to leave prematurely if desirable housing is not found in the long term. Additionally, a strong cultural sector helps to retain residents, attract talent, and support local entrepreneurship.

Income Security

Income security is one's ability to pay for their basic needs without fear of losing their income source. Factors such as lower minimum wage rates and temporary or casual employment can contribute to income insecurity. Precarious employment in Canada has increased by nearly 50% over the past two decades.²⁷ There are a few possible policy

options to increase the amount of income security in Canada. One option is increasing the minimum wage to a living wage. Basic income is another policy option to try to achieve income security. Basic income is different from other forms of social assistance in that it guarantees a minimum income level to individuals regardless of their employment status.

Unemployment is higher in the Timiskaming District, at 8.9% compared to 7.4% across the province.²⁸ A person's ability to find a job becomes increasingly difficult the longer that they remain unemployed, making it difficult to overcome poverty. In the longer term, they also tend to earn less once they find new jobs.

IV. Poverty



Nearly one out of every seven Canadians currently live in poverty.²⁹ Poverty is a widespread issue across the country and the world, but vulnerable groups such as people living with disabilities, single parents, elderly individuals, youth, and racialized communities are more susceptible. In Timiskaming, 17.5% of households live with low income and are often forced to make tough choices on how to spend their money.³⁰ In the Timiskaming Community Safety and Well-being Survey, 38% indicated that they have monthly concerns about having enough money to pay for housing/rent, food, clothing, utilities and/or other basic necessities. The effects of poverty can be expressed in different aspects of a person's life, including food security, health, and housing. Due to its sweeping impact on one's quality of life, the World Health Organization has declared poverty to be the single largest determinant of health. It is challenging to know how much poverty costs Canadians precisely but it is widely accepted that poverty is one of the biggest burdens on the economic, healthcare, and criminal justice systems in Canada. An estimate for Ontario places the cost of poverty between \$10.4 billion and \$13.1 billion for the government.³¹ Four sub-areas for addressing poverty are explored below.

Social Assistance

In Ontario, social assistance is delivered through two programs, Ontario Works (OW) and Ontario Disability Support Program (ODSP). These programs provide monthly financial assistance to help individuals and their dependents with living expenses including food and rent, health benefits and employment supports to help beneficiaries find and keep a job. Unfortunately, it is widely recognized that social assistance programs in Canada do not provide adequate support for individuals and families to meet their basic needs. For example, in 2012, 70% of households relying on social assistance were also food insecure and accounted for at least half of food bank users.³²

Childcare

In today's labour and economic climate, it can require that there are multiple household incomes to cover the costs of a family's basic needs. Parents rely on childcare to help them enter, re-enter, or remain in the workforce, but access to affordable, quality childcare is often a significant barrier for many. Costly out of pocket childcare options can rival lower-income salaries, prompting some families to have a parent leave the workforce to provide their own childcare. Mothers are more common than fathers to take time away from paid work to care for a child, which can exacerbate mothers' lifetime earnings gap. The province of Ontario and the federal government have signed a \$13.2-billion agreement to lower the cost of child care in the province to an average of \$10 a day by September 2025. Starting in April 2022, this agreement will start an immediate reduction in fees for licensed childcare centres will see fees reduced up to 25%. The implementation of affordable childcare will improve access to early learning and childcare programs for more families while helping working parents.

Transportation

The Timiskaming District is largely rural and remote with a population density of 2.3 people per square kilometre, less than a sixth of the provincial population density (14.8/km²).³³ This creates some barriers for residents, particularly around transportation and telecommunication services.

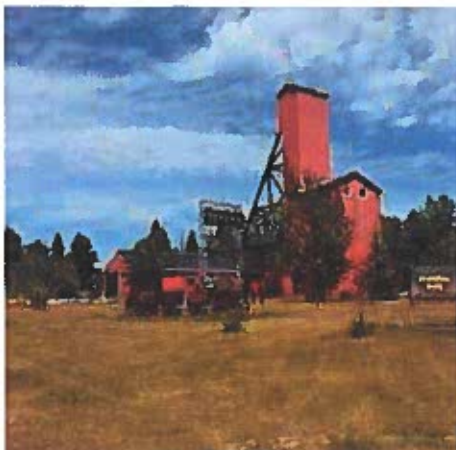
- Distance and inclement weather can make travel and accessing services more difficult.
- Distribution of community can lead to isolated residents, particularly seniors and those without reliable transportation.
- There is no district-wide access to reliable cell and high-speed internet service coverage in rural and remote areas.
- Many parts of the district do not have public transit operations, including urban areas like Kirkland Lake. Taxis are the main transit option, but for many lower-income families this is a costly mode of transportation to depend on.
- Not all of the district's population has at least one reliable method of transportation, i.e., own vehicle or bus pass and the availability of public transportation.
- Lower density development and the absence of public transit severely limits the walkability of neighbourhoods and residences.

Public transportation provides people with mobility and access to employment, community resources, medical care, and recreational opportunities across and within communities. It benefits those who choose to ride, as well as those who have no other choice. Many families experiencing low income do not own a personal vehicle and rely on methods of public transportation. The absence of public transportation networks in northern Ontario communities is an enormous challenge for those who either cannot afford or are unable to drive.

Food Insecurity

Food insecurity refers to inadequate or insecure access to food due to financial constraints. Food security is not only concerned with adequate quantities of food, but also with the quality of food available and accessible. This is important because food insecurity is not only associated with malnutrition as it relates to insufficient caloric intake but also as it relates to the higher intake of energy-dense, nutrient-poor foods, which are often also more affordable. Studies have shown that there are connections between food insecurity and obesity in adults and children.³⁴ Prices of groceries are more expensive in the north contributing to the experiences of food insecurity in the area. About 1 in 10 households in Timiskaming experiencing household food insecurity.³⁵

Additionally, food insecurity has been shown to negatively impact children's long-term physical and mental health, increasing their risk of conditions such as depression and asthma, and reducing their ability to succeed in school. Similarly, adults living with food insecurity are more likely to have overall poorer health, demonstrating higher occurrences of chronic conditions like depression, diabetes, and heart disease. Existing medical conditions are also more difficult to manage in food-insecure environments and frequently result in enlarged medical costs.³⁶ The Salvation Army operates food banks in Kirkland Lake and Temiskaming Shores and is a member of Feed Ontario. There is also the Haileybury Food Bank. While food banks help elevate the symptoms of food insecurity, they do not get at addressing the root causes.³⁷



V. Community Safety



Community members' perceptions of safety and acceptance are critical for strong community vibrancy. In the Timiskaming Community Safety and Well-being Survey, over one-third indicated that they feel somewhat unsafe in their community. Almost two-thirds (61%) of survey participants felt that over the last three years, they perceive that crime in their community has increased. For community safety, it is also important that accessibility is built into community environments, like street crossing signals for the visually impaired. Five sub-areas for improving community safety are explored below.

Racism and Discrimination

Every person in Ontario deserves to be free from racial discrimination and harassment. The elimination of discrimination and harassment through zero tolerance is important to foster community cohesion, safety and vibrancy. Furthermore, proactive identification and action in addressing systemic racism are critical to building an equitable society. In the Timiskaming Community Safety and Well-being Survey, two-thirds (64%) agreed that there are racist attitudes and/or behaviours present in their community. Awareness is a huge step in addressing racism and shows a commitment from the community towards an acknowledgement of the issue, which is a necessary step toward empowering those that are oppressed through racism. However, instances of racial discrimination and harassment can continue to persist when they are not addressed head-on due to societal aversions of the uncomfortable or difficult conversations involved in calling them out.

Respect, cultural competency and safety are important for local Indigenous Nations and Francophone populations. A Timiskaming District Indigenous Cultural-Linguistic Cultural Competency Framework was developed in partnership with the DTSSAB.

A history of systemic racial marginalization of First Nations and their peoples has manifested as continued inequitable outcomes at the community level where Indigenous peoples experience:

- Higher incidence of morbidity and mortality,
- Lower levels of educational attainment,
- Fewer economic opportunities,
- Higher levels of police intervention.

Gender-Based Violence

Gender-based violence refers to harmful acts directed at an individual based on their gender. It is rooted in gender inequality and disproportionately impacts women, girls, and Two-Spirit, trans, and non-binary people. It includes sexual, physical, mental, and economic forms of abuse inflicted in public or in private as well as threats of violence, coercion, and manipulation. While violence affects all people, some people are more at risk of experiencing violence because of various forms of oppression, such as racism, sexism, homophobia, transphobia and ableism. There is a greater incidence of gender-based violence in rural areas in addition to a nationally observed increase in domestic violence during the pandemic.

The Pavilion's Women's Shelter has 10 emergency shelter beds in Temiskaming Shores and a services office in Kirkland Lake for women experiencing homelessness due to violence against women (VAW). Pavilion provides various programs for women and families including childcare, education, victim counselling and a crisis support line in addition to providing public VAW training and education.

There isn't a local LGBTQ2S+ Pride in the Timiskaming District or as many services or resources for those with queer identities. These events and networks are important for members of the LGBTQ2S+ community for

placemaking, increased visibility and representation and connection to supports for vulnerable individuals.

Human Trafficking

In Canada, information from community members and police investigations suggests that those who are most likely to be trafficked are Canadian girls and women exploited for sexual purposes. Other higher at-risk populations include Indigenous women and girls, new immigrants, children in the child welfare system, persons living with disabilities, LGBTQ2 persons, and those struggling socially and/or financially. In addition, migrant workers may be at higher risk of exploitation and abuse due to language barriers, working in isolated/remote areas, lacking access to services and support, and/or correct information about their legal rights.

While human trafficking often takes place in large urban centres, it also occurs in smaller cities and communities. Over two-thirds of human trafficking incidents in Canada between 2009-2019 were reported in Ontario.³⁸ It is recognized that the presence of the Trans Canada Highway in the district presents risks of criminal activity associated with “drug corridors” and sex trafficking.

Road Safety

Increasing road safety in the Timiskaming district was identified as a top priority in the Timiskaming Community Safety and Well-being Survey. Impaired driving incidents in the district remain a concern as a significant factor in motor vehicle collisions and serious safety matters on the area's highways, waterways and trails. A 5-year review by the OPP Temiskaming Detachment found that levels of alcohol or drug-related driving incidents have remained persistent, even slightly increasing in the most recent years.³⁹ The local OPP detachments remain focused on the enforcement of the “Big Four” causal factors of serious incidents. The Big Four include impaired driving (alcohol and drug), speeding and aggressive driving, inattentive or distracted driving and lack of occupant restraints and safety equipment.

Justice Services

The safety and well-being of communities in the Timiskaming District is and will always be, a top priority for the Temiskaming and Kirkland Lake OPP Detachments that serve the district. The Ontario government released its most recent Ontario Mobilization and Engagement Model for Community Policing (OMEM) in 2010. Implementation of the model and what it looks like in practice is ongoing and continues to develop and evolve. OMEM emphasizes having all community members and human services agencies working with the police to keep neighbourhoods safer, more secure, and healthier.

The OPP is committed to tackling violent crime and curbing criminal activity by addressing the root causes of crime and complex social issues and focusing on social development, prevention and risk intervention. The Timiskaming District has seen higher crime rates than the province in the past five years.¹² The district's rates of sexual assault are greater than in the province, while there are also fewer specialized resources available for victims.

Over the past decade, police have increasingly been called to situations involving individuals who are facing mental health crises, addictions, homelessness and other complex social issues. Although police and emergency response are often the first points of contact in these situations, they are not necessarily equipped with the skills and training to respond to individuals with trauma or who are experiencing mental health crises. The Mobile Crises Response Team in development, led by the CMHA in partnership with the OPP will improve crisis response services and mental health referrals during response calls.

Canada's justice system serves to facilitate the timely and just resolution of legal issues. However, it has been recognized that there are barriers that exist within the system that can make it difficult for the most vulnerable populations of which it means to protect. Many offenders in the justice system can be people suffering from mental

health and addictions issues and are often homeless. “Affordable justice” is a mounting concern and priority to ensure for all Canadians. There are two dimensions to cost that individuals may incur within the justice system: the direct cost of the service that the client pays through service fees and the indirect costs that the client bears in order to access a service, such as travel costs, time off work, childcare costs, or costs to access online services. Additionally, unique barriers that different groups face when navigating the justice system can include access to translators and interpreters, having appropriate services for particular cultural groups, such as Indigenous families and recent immigrants, and accessibility measures for persons with disabilities, such as visual and hearing impairments. These challenges have the potential to limit access and to properly represent oneself in the justice system. A number of service models eliminate or reduce the direct cost of the service for clients by subsidizing service costs, implementing financial criteria for means-tests or removing service fees altogether.

VI. Environment and Sustainability



The availability and use of Canada's natural resources is a large contributor to many northern communities' well-being, of which the Timiskaming District is no exception. Many are drawn to the region due to the opportunities to enjoy the outdoors and the natural environment in their community, while the region also benefits from the natural resource economies. Many district residents are able to enjoy urban amenities while also having readily available outdoor recreation and remote backcountry access. This connection to natural resources fosters a heightened community relationship to the health and sustainability of the environment. The sub-areas of environmental stewardship and climate change were identified for the plan.

Environmental Stewardship

Environmental stewardship is the responsible use and protection of the environment. Examples of responsible use include limiting the harvest of natural resources. Examples of protection include conservation and the creation of national and provincial parks. Indigenous peoples in Canada have practiced principles of environmental stewardship since time immemorial. Impacts of human activity on the environment are important to manage including industries' ecological footprint, greenhouse gas emissions and climate change, and clean water. This sense of responsibility is a value that can be reflected through the choices of individuals, companies, communities, and government organizations, and shaped by unique environmental, social, and economic interests. In the Timiskaming Community Safety and Well-being Survey, 55% agreed that environmental pollution is a risk to their community.

Climate Change

Climate change can be a natural process where temperature, rainfall, wind and other elements vary over decades or more. Over the past millions of years, our world has been warmer and colder than it is now. But today we are experiencing unprecedented rapid warming from human activities, primarily due to burning fossil fuels that generate greenhouse gas emissions. We are already witnessing effects of climate change as in addition to unprecedented warmer temperatures experienced, other consequences of climate change seen include intense droughts, severe wildfires, flooding, catastrophic storms and declining biodiversity. In the Timiskaming Community Safety and Well-being Survey, 52% agreed that climate change is a risk to their community. The Government of Canada recently issued the Health of Canadians in a Changing Climate Report with nine key findings:⁴⁰

1. Climate change is already negatively impacting the health of Canadians.
2. Health risks will increase as warming continues, and the greater the warming, the greater the threats to health.
3. Some Canadians are affected more severely by climate change, as exposure and sensitivity to hazards and the ability to take protective measures varies across and within populations and communities.
4. The effects of climate change on health systems in Canada — for example, damage to health facilities and disruptions to health services and operations — are already evident and will increase in the absence of strong adaptation measures.

5. Efforts to prepare for climate change are known to reduce risks and protect health. We must take action now.
6. The health impacts of climate change on First Nations, Inuit, and Métis peoples are far-reaching, with disproportionate impacts on their communities, including food and water security and safety, air quality, infrastructure, personal safety, mental health and wellness, livelihoods, culture, and identity.
7. To successfully protect all Canadians from the health impacts of climate change, decision makers must pursue adaptation actions that are inclusive and equitable and consider the needs of racialized, marginalized, and low-income populations.
8. Increased efforts to reduce greenhouse gas emissions are required to help protect the health of Canadians.
9. Reducing greenhouse gas emissions can provide very large and immediate health co-benefits to Canadians.

Priority Areas Goals

18 goals are identified within this plan to direct strategic actions that will focus the district's collective efforts on social development and prevention. These goals were prioritized based on community need, anticipated impact, and local opportunities. Recognizing the large scope of community services, programs and development included in this plan, goals pertaining to all 25 sub-areas were not included in this first iteration of the CSWB plan. As the implementation of the CSWB Plan processes and the plan matures, there will be the opportunity to expand the goals encompassed by the plan and its Performance Measurement Framework.

Suggested corresponding activities to achieve the goal outcomes are provided. The activities ultimately pursued will be dependent on the resources available when implementing the plan and aligned with the assets and strengths present in the community at the time.

I. Health & Well-being



Goal Outcomes:

- I.1 Ensure timely access to health services by increasing services and reducing wait times.
- I.2 Ensure health services are equitable and accessible to all by removing identified barriers.
- I.3 Reduce the incidence of mental health and substance misuse crises in the community.
- I.4. Increase access to quality and safe living arrangements at home for aging individuals, individuals with special or physical needs, and caregivers.

Activities can include:

- I.1.A1 Build coalitions to attract and retain health professionals and services.
- I.1.A2 Where service gaps are identified increase focus on those gaps to address the lack of service by increasing the services and availability of those services.
- I.2.A1 Develop an equity, diversity and inclusion evaluation tool for health services to identify equity and accessibility barriers for all populations.
- I.3.A1 Build coalitions to expand mental health and addictions services.
- I.4.A1 Work with organizations to break down barriers to accessing home support services and encourage older adults to ask for help.

II. Housing



Goal Outcomes:

- II.1 Increase available and affordable housing options for community residents through greater market inventory and access to subsidized housing and housing benefits.
- II.2 Create more pathways to housing through transitional and supportive housing options and services.
- II.3 Serve community members experiencing homelessness through expanded shelter services.

Activities can include:

- II.1.A1 Create a district housing assessment tool to scope, measure and evaluate the status and availability of affordable housing in the area.
- II.1.A2 Work with municipalities to create targets and measures for their affordable housing plans.
- II.2.A1 Build coalitions to develop new social and supportive housing.
- II.3.A1 Support the development, launch and operations of new shelters in the region, starting with Zack's Crib.
- II.3.A2 Maintain and utilize the By Name List as a tool to prioritize those who are in need of housing.
- II.3.A3 Create a working group on housing that adheres to the Reaching Home goals, funding and principles.

III. Employment & Economy



Goal Outcomes:

- III.1** Promote education, skills, and training for local jobs to create career pathways for local workforce opportunities.
- III.2** Reduce unemployment and underemployment by helping individuals apply for jobs and pursue opportunities that match their level of education and skills.
- III.3** Reduce skilled job vacancies in the region by retaining post-secondary graduates as permanent residents and members of the local workforce.

Activities can include:

- III.1.A1** Complete a human resource gap analysis to understand and scope the region's human resource needs.
- III.1.A2** Create partnerships between employers and educators to create and promote career pathways for local workforce opportunities through featured education, skills, and training.
- III.2.A1** Promote and support the employment services in the region to increase engagement by those who are unemployed or underemployed.
- III.3.A1** Build coalitions to develop new recruitment and retention strategies for identified jobs with frequent long-term vacancies and high rates of turnover.
- III.3.A2** Create multicultural/language programs to help bring newcomers and international students into the local labour force.

IV. Addressing Poverty



Goal Outcomes:

- IV.1** Increase regional understanding of evidence-based strategies that address root causes of poverty such as basic income and living wages.
- IV.2** Improve availability of affordable public transportation throughout the region and increase the mobility for residents to work, shop, play and access services.
- IV.3** Reduce food insecurity experienced in the region.

Activities can include:

- IV.1.A1** Build anti-poverty coalitions and plans to address food insecurity, housing, and unemployment and increase understanding of poverty.
- IV.1.A2** Determine what businesses/services offer "affordable access" for vulnerable groups (reduced rate, enhanced service, subsidy etc.).
- IV.2.A1** Complete a public transportation assessment to understand where transportation gaps exist in the region.
- IV.2.A2** Build regional transportation coalitions to increase access and availability.

V. Community Safety



Goal Outcomes:

- V.1** Increase the public's perception of safety in their communities.
- V.2** Improve road safety and reduce causal factors of roadway accidents.
- V.3** Ensure access to affordable justice for all residents.

Activities can include:

- V.1.A1** Coordinate training and public awareness related to addressing racism.
- V.1.A2** Build coalitions for community cohesiveness by breaking down of barriers between populations and the building of trust and understanding while eliminating stereotypes and misconceptions.
- V.1.A3** Promote the adoption of organizational training policies and the participation of the public for cultural awareness, safety and competency training.
- V.1.A4** Support violence against women organizations in educating the public and increasing access to resources for victims of gender-based violence.
- V.1.A5** Increase community awareness and understanding of human trafficking through public education.
- V.2.A1** Public education to make roadways, waterways and trails safer.
- V.2.A2** Maintain proactive measures and enforcement of the "Big Four" causal factors of roadway accidents. (Impaired, speeding/aggressive driving, inattentive/distracted driving and lack of occupant restraint and safety equipment).
- V.3.A1** Promote and support legal services that eliminate or reduce the direct cost of the service for clients.

VI. Environment & Sustainability



Goal Outcomes:

- VI.1** Foster a sense of community and community building around the natural environment in the region
- VI.2** Create plans for mitigating effects of climate change and adverse natural events in communities.

Activities can include:

- VI.A1** Build coalitions for recreational, advocacy and educational activities around the natural environment in the region.
- VI.A2** Make space for the involvement of the Indigenous communities and their traditional knowledge and expertise in environmental planning for the region.
- VI.A3** Solicit the involvement of resource industries through commitments to environmental sustainability and reinvestments into the community.
- VI.A1** Build coalitions for the development of local climate action plan(s).

Moving Forward

Implementing the Plan

For the CSWB Plan's implementation, appropriate and achievable inputs and outputs will need to be affirmed by the municipalities, partners and community stakeholders. Then, the plan's collective stakeholders must then join in the commitment to implement them. Inputs comprise of financial, human, material and information resources dedicated to the initiative/program (e.g., grant funding, dedicated human and capital resources, agreed partnership, etc.). Outputs are direct products or services resulting from the implementation of the plan's activities (e.g., multisector collaboration, clients connected to service, development of a plan, completion of a program, etc.). While community buy-in, coordination and collaboration are important to make gains on the plan's goals, targeted financial resource commitments from senior levels of government to fund relevant strategic activities will need necessary to see the plan's goals to fruition.

Role of the Plan Leads, the Municipalities and Partners

The Timiskaming District has prepared a CSWB Plan for the 23 municipalities in the district and the Municipality of Temagami. This approach was pursued given the size of many of the municipalities in the district and the interconnectedness of communities as many residents regularly travel between them for services, employment, purchases and leisure. Additionally, many service providers span the entire district, benefiting from one collective plan. A district plan aligns with the principle of Collective Impact, that through a common agenda, shared measurement, mutually reinforcing activities, and communication the district should be more successful at creating change and impact for its communities.

To create effective governance of a district wide CSWB Plan, it is recommended that a Plan Lead is established. The Plan Lead could be one organization or a partnership of multiple organizations. The role of the Plan Lead would be the responsibility of organizing the necessary working groups for the implementation of the CSWB Plan and supporting the working groups' progress. This would require both leadership (e.g., CSWB Plan Chair) and coordination (e.g., CSWB Plan Implementation Coordinator) capacity from the Plan Lead. To do this, it is recommended that the Plan Lead would introduce a dedicated CSWB Plan resource role (full or part-time) to manage the implementation of the plan overseen by a senior leader in the organization acting as the CSWB Plan Chair. The necessary funds to support this added organizational capacity would be made possible through the municipalities by contributing the funding based on apportionments. This collective district funding approach is highly recommended, as should any municipality choose to pursue the implementation of a CSWB individually, it would be expected that they would ultimately incur greater relative costs while duplicating efforts and likely having difficulty achieving the same impact alone compared to the rest of the district.

An example of a CSWB Plan Lead would be the DTSSAB and/or the Timiskaming Health Unit. They are well situated for the role given their organizations' district-wide service mandate and the span and relevance of the scope of their work in relation to community safety and well-being. It would also be a natural continuation of their leadership in the development of the CSWB Plan as part of the Steering Committee.

The Plan Lead will need the active involvement and support of the municipalities, community partners and community engagement in order to successfully implement the plan. While the Plan Lead will provide a central, steering position, it will rely on participants of various working groups to design and implement relevant plan activities. For the implementation of the CSWB Plan, the role of the Plan Lead will primarily be the following areas below, supported by municipalities and community partners.

- 1. Advocacy**
 - a. Municipal endorsements
 - b. Supporting initiatives
 - c. Lobbying for initiatives
- 2. Convening**
 - a. Meeting with stakeholder groups
 - b. Brokering partnerships and committees
 - c. Organizing CSWB Plan working groups and supporting their development and process
- 3. Monitoring**
 - a. Data collection and reporting
 - b. Reviewing outcomes
 - c. Amplifying finding

Performance Measurement Framework

A Performance Measurement Framework (PMF) is important so that community progress can be tracked and evaluated against the CSWB plan. A PMF should correspond with the strategic priorities, as follows:

1. From the plan's strategies, list the identified outcomes, as well as the outputs once they are determined. It is important to measure both outputs and outcomes – output indicators show that planning partners are doing the activities they set out to do, and outcome indicators show that their activities and outputs are having the desired impact or benefit on the community or target group.
2. Develop key performance indicators;
 - a. Quantitative indicators – these are numeric or statistical measures that are often expressed in terms of unit of analysis (the number of, the frequency of, the percentage of, the ratio of, the variance with, etc.).
 - b. Qualitative indicators – qualitative indicators are judgment or perception measures. For example, this could include the level of satisfaction from program participants and other such feedback.
3. Record the baseline data; information captured initially to establish the starting level of information against which to measure the achievement of the outputs or outcomes.
4. Forecast the achievable targets; the "goal" used as a point of reference against which planning partners will measure and compare their actual results against.
5. Research available and current data sources; third party organizations that collect and provide data for distribution. Sources of information may include project staff, other agencies, organizations, participants and their families, members of the public and the media.
6. List the data collection methods; where, how and when planning partners will collect the information to document their indicators (i.e., survey, focus group).
7. Indicate data collection frequency; how often the performance information will be collected.
8. Identify who has responsibility; the person or persons who are responsible for providing and/or gathering the performance information and data.

A PMF for the plan has been started with the goal outcomes, indicators, data sources and reporting frequencies. The establishment of baseline data and future targets can be added in forthcoming evaluation iterations. Currently, all indicators are identified as being reviewed on an annual basis, but this can be tailored based on the speed and relevance at which different data sources are collected. Additional data sources may be identified at later dates and can be used to update the plan or improve indicator fidelity.

Performance Measurement Framework Table

I. Health and Well-being



Goal Outcomes	Indicators	Data Sources	Frequency
I.1. Ensure timely access to health services by increasing services and reducing wait times.	I.1.M1 Percentage of residents in THU catchment area who have a regular healthcare provider. I.1.M2 Average time spent in Emergency Departments by presenting patients. I.1.M3 Length of stay of inpatients designated as alternate level of care and average long-term care home waitlists.	<ul style="list-style-type: none"> • Statistics Canada • Health Quality Ontario • Public Health Ontario • THU • Temiskaming Hospital • Blanche River 	Annual
I.2. Ensure health services are equitable and accessible to all by removing identified barriers.	I.2.M1 A process of evaluating competency of Equity, Diversity and Inclusion is applied to all health services. I.2.M2 Number of actions directed at breaking down stigmas of mental health, addiction and disenfranchised individuals accessing services I.2.M3 Number of new services and service expansions for better access, such as but not limited to geography, service delivery model, technology, hours of operations.	<ul style="list-style-type: none"> • CMHA • NEOFACS • FHTs • CSCT • Temiskaming Hospital • Blanche River • Mino M'Shki-Ki 	Annual
I.3. Reduce the incidence of mental health and substance misuse crises in the community.	I.3.M1 Total capacity of community supports for MH&A services. I.3.M2 Incidence rate of MH&A visits to Emergency Departments. I.3.M3 Incidence rate of emergency calls for overdoses. I.3.M4 Incidence rate of fatal overdoses.	<ul style="list-style-type: none"> • Public Health Ontario • OPP • Office of the Coroner 	Annual
I.4. Increase access to quality and safe living arrangements at home for aging individuals, individuals with special or physical needs and caregivers.	I.4.M1 Number of home assessments completed by occupational therapists. I.4.M2 Number of older adults and caregivers assisted in identifying and removing hazards to living safely in the home.	<ul style="list-style-type: none"> • DTSSAB • Temiskaming Home Support • Ontario Health Community Care • Temiskaming Hospital • Blanch River 	Annual
Suggested Activities: I.1.A1 Build coalitions to attract and retain health professionals and services. I.1.A2 Where service gaps are identified increase focus on those gaps to address the lack of service by increasing the services and availability of those services. I.2.A1 Develop an equity, diversity and inclusion evaluation tool for health services to identify equity and accessibility barriers for all populations. I.3.A1 Build coalitions to expand mental health and addictions services. I.4.A1 Work with organizations to break down barriers to accessing home support services and encourage older adults to ask for help.			

II. Housing



Goal Outcomes	Indicators	Data Sources	Frequency
II.1 Increase available and affordable housing options for community residents through greater market inventory and access to subsidized housing and housing benefits.	II.1.M1 Number of housing development partnerships resulting in new builds II.1.M2 Community rental vacancy rates and average rental rates. II.1.M3 Percentage of households who spend >30% of income on shelter costs. II.1.M4 Average wait times for affordable housing applicants. II.1.M5 Number of seniors present on housing waitlist.	<ul style="list-style-type: none"> • DTSSAB • TMA • Statistics Canada 	Annual
II.2 Create more path ways to housing through transitional and supportive housing options and services.	II.2.M1 Number of individuals who are engaged in services designed to help obtain and/or retain housing. II.2.M2 Number of transitional housing units.	<ul style="list-style-type: none"> • DTSSAB • CMHA • Salvation Army 	Annual
II.3 Serve community members experiencing homelessness through expanded shelter services.	II.3.M1 Number of shelter beds. II.3.M2 Utilization of shelter services and average length of stay of shelter users.	<ul style="list-style-type: none"> • DTSSAB • Pavilion's Women's Centre • Zack's Crib • Timiskaming Home Support 	Annual
Suggested Activities: II.1.A1 Create a district housing assessment tool to scope, measure and evaluate the status and availability of affordable housing in the area. II.1.A2 Work with municipalities to create targets and measures for their affordable housing plans. II.2.A1 Build coalitions to develop new social and supportive housing. II.3.A1 Support the development, launch and operations of new shelters in the region, starting with Zack's Crib. II.3.A2 Utilise the By Name List, and keep current, as a tool to prioritise those who are in need of housing. II.3.A3 Create a working group on housing that adheres to the Reaching Home goals, funding and principles.			

III. Employment and Economy



Goal Outcomes	Indicators	Data Sources	Frequency
III.1 Promote education, skills and training for local jobs to create career pathways for local workforce opportunities.	III.1.M1 Rates of high school graduation and post-secondary education and training. III.1.M2 Number of local work placements filled that originate from employer/educator partnerships.	<ul style="list-style-type: none"> Statistics Canada Ontario Ministry of Education Northern College District School Boards TMA Enterprise Timiskaming 	Annual
III.2 Reduce unemployment and underemployment by helping individuals apply for jobs and pursue opportunities that match their level of education and skills.	III.2.M1 Rates of unemployment among residents. III.2.M2 Number of Ontario Works clients. III.2.M3 Percentage of labour force employed full-time. III.2.M4 Number of individuals who participate in employment services.	<ul style="list-style-type: none"> Statistics Canada DTSSAB Northern College 	Annual
III.3 Reduce skilled job vacancies in the region by retaining post-secondary graduates as permanent residents and members of the local workforce.	III.3.M1 Percentage of post-secondary students who receive an employment offer within the region within 1 year of graduating.	<ul style="list-style-type: none"> Northern College DTSSAB 	Annual
Suggested Activities: III.1.A1 Complete a human resource gap analysis to understand and scope the region's human resource needs. III.1.A2 Create partnerships between employers and educators to create and promote career pathways for local workforce opportunities through featured education, skills and training. III.2.A1 Promote and support the employment services in the region to increase engagement by those who are unemployed or underemployed. III.3.A1 Build coalitions to develop new recruitment and retention strategies for identified jobs with frequent long-term vacancies and high rates of turnover. III.3.A2 Create multicultural/language programs to help bring newcomers and international students into the local labour force.			

IV. Poverty



Goal Outcomes	Indicators	Data Sources	Frequency
IV.1 Increase regional understanding of evidence-based strategies that address root causes of poverty such as basic income and living wages.	IV.1.M1 After-tax median income of families. IV.1.M2 Percentage of persons on low income based on low-income cut-off (LICO).	<ul style="list-style-type: none"> • Statistics Canada 	Annual
IV.2 Improve availability of affordable public transportation throughout the region and increase the mobility for residents to work, shop, play and access services.	IV.2.M1 Number and frequency of public transportation services and routes in operation. IV.2.M2 Utilization of public transportation services. IV.2.M3 Number of transportation forms filled by ODSP and OW recipients.	<ul style="list-style-type: none"> • Municipalities • TMA 	Annual
IV.3 Reduce food insecurity experienced in the region.	IV.3.M1 Number of individuals accessing food assistance programs. IV.3.M2 Number of children relying on breakfast programs in schools or backpack programs. IV.3.M3 Percentage of households that are moderately or severely food insecure.	<ul style="list-style-type: none"> • Salvation Army • DTSSAB • Statistics Canada • THU • Canadian Red Cross 	Annual
Suggested Activities: IV.1.A1 Build anti-poverty coalitions and plans to address food insecurity, housing and unemployment and increase understanding of poverty. IV.1.A2 Determine what businesses/services offer "affordable access" for vulnerable groups (reduced rate, enhanced service, subsidy etc.). IV.2.A1 Complete a public transportation assessment to understand where transportation gaps exist in the region. IV.2.A2 Build regional transportation coalitions to increase access and availability.			

V. Community Safety



Goal Outcomes	Indicators	Data Sources	Frequency
V.1 Increase the public's perception of safety and belonging in their communities.	V.1.M1 Percentage of population who feel safe in their communities and residents' perception of the rate of crime in their communities. V.1.M2 Percentage of population experiencing discrimination in the past 5 years based on ethnocultural characteristics. V.1.M3 Police statistics of rates of victims of crimes.	<ul style="list-style-type: none"> • OPP • Statistics Canada • CSWB surveys • Timiskaming Vital Signs 	Annual
V.2 Improve road safety and reduce causal factors of roadway accidents.	V.2.M1 Number of collisions, injuries and fatalities in our communities involving motorized vehicles. V.2.M2 Number of impaired related motorized vehicle incidents.	<ul style="list-style-type: none"> • OPP 	Annual
V.3 Ensure access to affordable justice for all residents.	V.3.M1 Number of legal services that provide subsidized legal services for vulnerable clients.	<ul style="list-style-type: none"> • Legal Aid Ontario 	Annual

Suggested Activities:

- V.1.A1** Coordinate training and public awareness related to addressing racism.
- V.1.A2** Build coalitions for community cohesiveness by breaking down barriers between populations and building trust and understanding while eliminating stereotypes and misconceptions.
- V.1.A3** Promote the adoption of organizational training policies and the participation of the public for cultural awareness, safety and competency training.
- V.1.A4** Support violence against women organizations in educating the public and increasing access to resources for victims of gender-based violence.
- V.1.A5** Increase community awareness and understanding of human trafficking through public education.
- V.2.A1** Public education to make roadways, waterways and trails safer.
- V.2.A2** Maintain proactive measures and enforcement of the "Big Four" causal factors of roadway accidents. (Impaired, speeding/aggressive driving, inattentive/distracted driving and lack of occupant restraint and safety equipment).
- V.3.A1** Promote and support legal services that eliminate or reduce the direct cost of the service for clients.

VI. Environment and Sustainability



Goal Outcomes	Indicators	Data Sources	Frequency
VI.1 Foster a sense of community and community building around the natural environment in the region	VI.1.M1 Percentage of population that is satisfied with the opportunities to enjoy the outdoors and the natural environment in their community. VI.1.M2 Percentage of population that agrees that their community is proactive in protecting and stewarding the environment. VI.1.M3 Number of reported renewable energy or sustainable practices initiatives/policies in place.	<ul style="list-style-type: none"> • CSWB surveys • Timiskaming Vital Signs • Municipalities • Private Sector • Charlton Sustainability Hub 	Annual
VI.2 Create plans for community effects of climate change and adverse natural events.	VI.2.M1 Up to date Emergency Response Plans.	<ul style="list-style-type: none"> • Municipalities 	Annual
Suggested Activities: VI.1.A1 Build coalitions for recreational, advocacy and educational activities around the natural environment in the region. VI.1.A2 Make space for the involvement of the Indigenous communities and their traditional knowledge and expertise in environmental planning for the region. VI.1.A3 Solicit the involvement of resource industries through commitments to environmental sustainability and reinvestments into the community. VI.2.A1 Build coalitions for the development of local climate action plan(s).			

Appendixes

Plan Guiding Principles

Four guiding principles are recommended to help the CSWB Plan's implementation and ultimate success. These are informed by best practices for community development initiatives.

Collective Impact

A strategy of collective impact is important for the Plan to be successful. This form of collaboration brings people together in a structured way towards a common agenda and plan of action to address a complex social problem.⁴¹ The collective impact approach is characterized by five core elements that facilitate effective cross-sector collaboration and the resulting population-level impacts. The underlying elements of collective impact for the Plan include:

- **Common agenda:** All participants share a vision for change that includes a common understanding of the problem and a joint approach to solving the problem through agreed-upon actions.
- **Shared measurement:** All participants agree on how to measure and report on progress, with a shortlist of common indicators identified to drive learning and improvement.
- **Mutually reinforcing activities:** A diverse set of stakeholders, typically across sectors, coordinate a set of differentiated and mutually reinforcing activities.
- **Continuous communication:** All players are engaged in frequent, structured communication to build trust, assure mutual objectives and create common motivation.

Partnerships are critical to addressing community risk issues. Many community challenges cut across multiple sectors and government ministries, therefore coordination and activities by several community agencies will be needed to achieve the Plan's goals. The CSWB Plan actions will enhance partnerships within the community and increase inter-agency partnership. The support of agencies' senior leadership is critical, to empower staff to prioritize partnerships and sustain and build momentum for cross-agency initiatives when faced with competing priorities.

Social and environmental determinants of health

The conditions in which people are born, grow, work, live and age influence their overall health and well-being. These conditions, known as the social determinants of health, include social and economic factors that can positively or negatively influence health outcomes.⁴² The social determinants of health can include income, employment and working conditions, education and literacy, childhood experiences, physical environments, social supports and coping skills, healthy behaviours, access to health services, genetic dispositions, gender, culture and race/racism. Likewise, several environmental factors, such as outdoor and household air pollution, drinking water contamination, occupational exposure to hazardous materials and built environments that discourage physical activity, influence the risk and experience of chronic disease. Recognizing that factors outside the control of individuals can influence their well-being impacts the types of preventive and upstream actions that are needed to influence population health.

Applying An Equity Lens

Applying an equity lens is a consistent theme throughout the CSWB Plan. Equity refers to fair, just and respectful treatment that recognizes and acknowledges the need to treat people differently depending on their needs and circumstances. It involves the removal of barriers to address historic and current disadvantages for under-represented and marginalized groups. Marginalized populations face inequities in access and outcomes due to systemic barriers and historic disadvantages. This hinders their ability to feel safe and live to their full potential. As part of an equity lens, there will be consideration of anti-racist, anti-oppressive and culturally safe approaches to the work.

Anti-Racism

Anti-racism is a process of actively identifying and opposing racism. The goal of anti-racism is to challenge racism and actively change the policies, behaviours, and beliefs that perpetuate racist ideas and actions. Anti-racism is rooted in action. It is about taking steps to eliminate racism at the individual, institutional, and structural levels.

A history of systemic marginalization of Indigenous peoples has manifested as continued inequitable outcomes at the community level. Indigenous residents experience a higher incidence of morbidity and mortality, lower levels of educational attainment, and fewer economic opportunities.⁴³ These experiences require sustained proactive action and focus, which places Indigenous residents at risk of competing priorities and burnout when advocating for themselves. When talking about inequitable outcomes, it is important to recognize that Indigenous peoples in Canada are not another equity-seeking group, as they are the original inhabitants of this land and are in fact sovereign peoples.

In the CSWB Community Survey, 64% of participants agreed that there are racist attitudes and/or behaviours present in the Timiskaming Districts. While the survey profile has its limitations as is not a fully community-wide poll, the level of awareness of this issue and the ability to speak to this says a lot about the motivation of the sample of the community to address racism and its inherent impacts. Awareness is a huge step in addressing racism and shows a commitment from the community towards an acknowledgement of the issue, which is a necessary step towards empowering those that are oppressed through racism.

Key Industries In the District

The 1903 silver rush in Cobalt and the arrival of the railroad greatly stimulated the development of the rest of Northern Ontario. While most of the mines in Cobalt were depleted and shut down by the 1970's, there still is plenty of mining activity in the District to this day. In Kirkland Lake is the "Mile of Gold", a line of 7 major mines that yielded extraordinary wealth for over 80 years from one of the world's largest deposits of gold. With the more recent rise in the price of gold, companies are reopening mines that were mothballed for decades, offering many new jobs and sparking an economic recovery in the area. Northern College's Haileybury School of Mines strives to support the local industry by fostering a global network of leaders in mining and related technologies.

In the second half of the 19th century, the forestry industry around Lake Timiskaming was developed through the Ottawa riverway system. The Ottawa River and its tributaries provided access to large tracts of forest, and allowed timber to float long distances at a time when there was no road or rail system available. Forestry remains active in the region to this day, managed through the Timiskaming Forestry Alliance and with First Nations, municipalities and logging companies recently forming the Temagami Management Unit. While harvesting across northern Ontario was seen to be down by about 50% from its peak in the early years of the 2000s, harvest rates on the 'Timiskaming Forest' that encompasses much of the District have remained high.⁴⁴

The first settlers were attracted to the rich farmland in the clay belt of northeastern Ontario. Today, agriculture is still vital to the economy of the Timiskaming region. In 2005, farmers in the District reported a total of \$49.8 million in gross farm receipts which was the highest value of any District in northern Ontario.⁴⁵ Northern College's Haileybury Campus provides a number of specialized agricultural programs, connecting students directly with areas of the industry's growth.

Appendixes

What Community Safety and Well-being means to you?

Timiskaming District residents were asked, "What Community Safety and Well-being means to you?" Community responses taken from the Timiskaming District's CSWB Survey included:

Creating a space where everyone feels accepted and safe within their community; having those safe places to reach out to for assistance when needed.

Everyone participates in and benefits from community services/facilities.

Being able to go out into the community without fear of any type of violence or discrimination, then having a safe secure affordable place to return to.

Knowing where to go for help (and knowing that help is always available).

Having healthy, respectable and open conversations with our neighbours, families and friends. Looking out for each other's best interest and helping lend a hand to those around us, strangers and friends alike.

A community that has the resources and services to serve its community members in a timely fashion. A community where all citizens treat each other with respect. Community leaders who listen to its members.

The overall health, happiness, safety and ability to prosper within the area one lives.

Community Survey

Timiskaming District residents were asked, "What Community Safety and Well-being means to you?" Community responses taken from the Timiskaming District's CSWB Survey included:

The Survey has had 509 English and 10 French survey responses for a total of 519 participants.

The survey consisted of 11 pages, and a total of 50 total questions collecting information regarding:

- o Education
- o Employment
- o Housing
- o Recreation and Culture
- o Mental Health
- o Substance Use
- o Environment and Sustainability
- o Community Safety and Perceptions of Crime
- o Equity in the Community
- o Community Well-Being
- o Demographic Information

Survey Highlights: survey participants...

- Feel that educational or training opportunities are unaffordable (32% - question #6)
- Have concerns about having enough money to pay for housing/rent, food, clothing, utilities and/or other basic necessities (38% - question 11)
- Feel that their community is not proactive in creating options to improve affordable housing (49% - question 14)
- Agree that their community needs enhanced emergency shelter services to address homelessness in the community (54% - question #15)
- Agree that their community needs additional temporary/transitional housing to help people in crisis reach permanent housing (67% - question #16)
- Agree that their community needs additional seniors housing, assisted living and long term care residences to help people age safely in our communities (85% - question #17)
- Agree that climate change is a risk to their community (52% - question #22)
- Agree that environmental pollution is a risk to my community (55% - question #23)
- Feel that there are not sufficient mental health services in the Timiskaming District to serve the needs of the community (68% - question #27)
- Feel that there are not sufficient addiction services in the Timiskaming District to serve the needs of the community (60% - question #30)
- >1/3 feel somewhat unsafe in their community (37% - question #32)
- Feel that over the last three years, do you think crime in their community has increased (61% - question #35)
- Agree that there are racist attitudes and/or behaviours present in their community (64% - question #40)
- The top voted priority areas were: (question #43)
 1. Housing (14%)
 2. MH&A services (14%)
 3. Health services (13%)
 4. Road safety (10%)
 5. Employment service (9%)

Glossary of Acronyms

CMHA – Canadian Mental Health Association

EMS – Emergency Medical Services

EMTs – Emergency Medical Technicians

GED – General Educational Development (certified Canadian high school equivalency)

LTC – Long Term Care

LICO – Low-income cut-off

MCRT – Mobile Crises Response Team

NEOFACS – North Eastern Ontario Family and Child Services

ODSP – Ontario Disability Support Program

OMEM – Ontario Mobilization and Engagement Model for Community Policing

OPP – Ontario Provincial Police

OW – Ontario Works

PMF – Performance Measurement Framework

SCWW – Seniors Centre Without Walls

TPU – Timiskaming Health Unit

VAW – Violence Against Women

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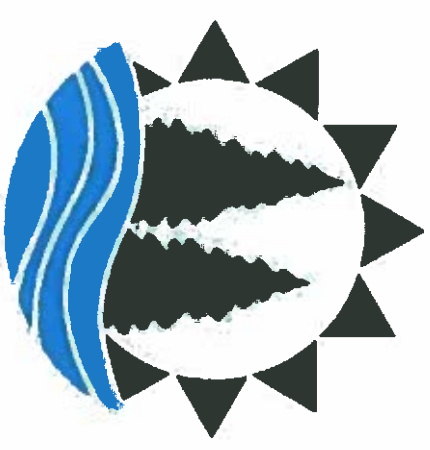
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The District of Timiskaming

Community Safety and Well-being (CSWB) Plan:
Plan Presentation
May 26th, 2022

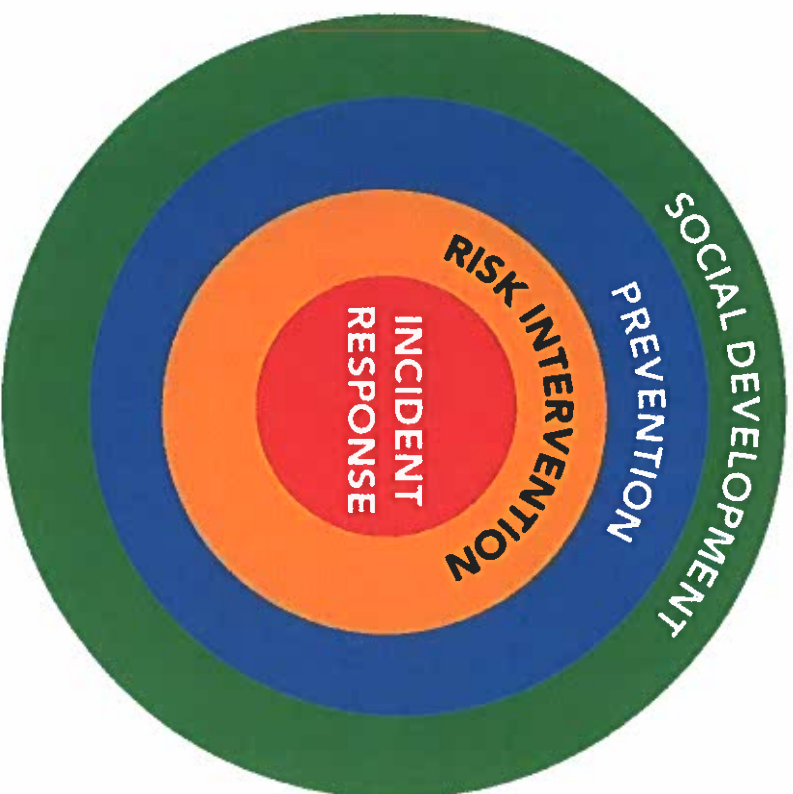


What's Included

Executive Summary <ul style="list-style-type: none">• Intent of the Plan• Plan Summary Table• Message from the Steering Committee
CSWB Background <ul style="list-style-type: none">• Purpose of a CSWB Plan• Provincial Framework• Guiding Principles• Plan's development process & Advisory Committee
The Plan & Implementation <ul style="list-style-type: none">• Priority Areas of Focus• Goals• Performance Measurement Framework• Implementing the Plan



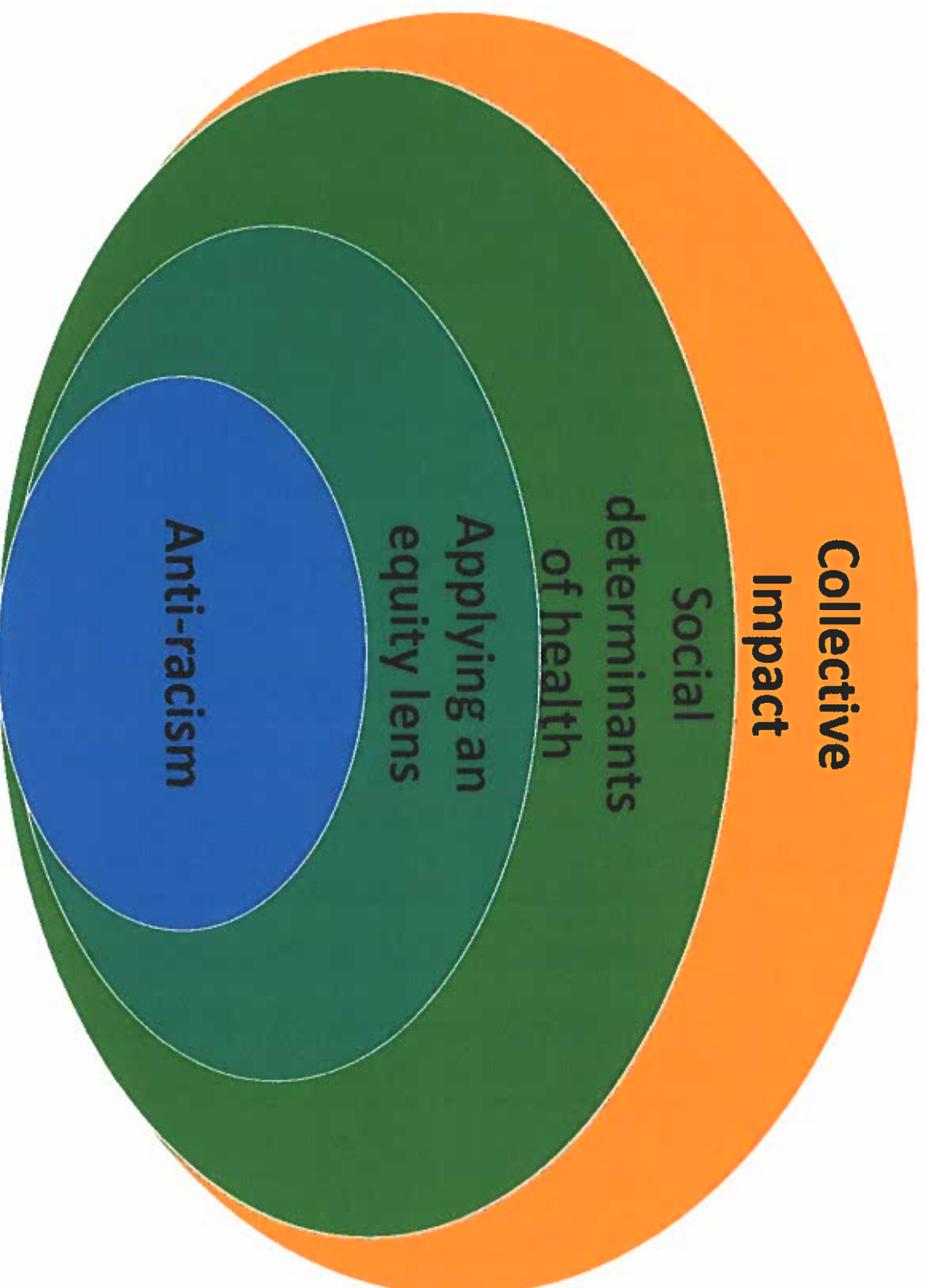
Ministry Framework



- Promoting and maintaining community safety and well-being
- Proactively reducing identified risks
- Mitigating situations of elevated risk
- Critical and non-critical incident response



Guiding Principles



Project Process

Establishment of the Steering Committee and an Advisory Committee

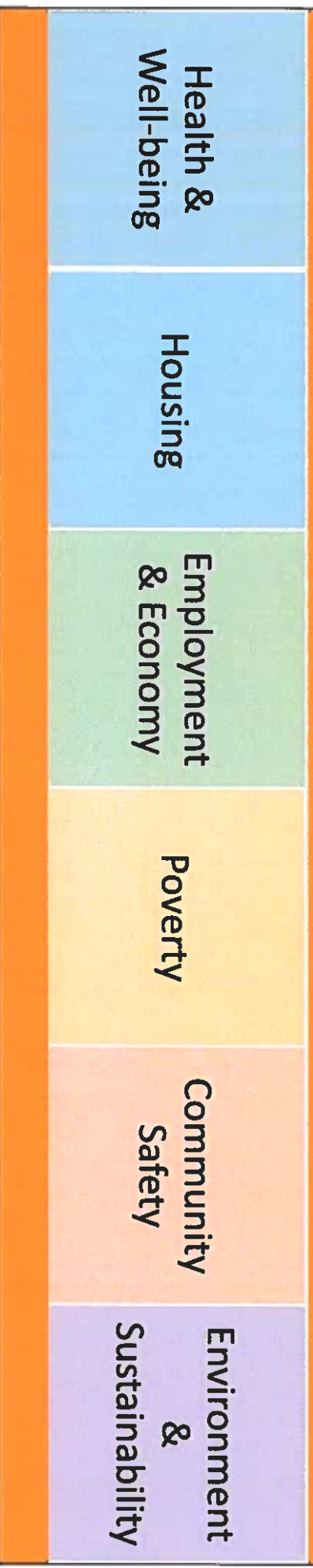
Engagement with the Key Stakeholders in the District

District Community Safety and Well-Being Online Survey

Two Half-day Workshops with the Advisory Committee

Review and acceptance of the Plan

Priority Areas of Focus



- 18 goals are identified within this plan to direct strategic actions that will focus the district's collective efforts for social development and prevention.
 - These goals were prioritized based on community need, impact, and local opportunities.
- Recognizing the large scope of community services, programs and development included in this plan, goals pertaining to all 25 sub-areas were not included in this first iteration of the CSWB plan.
 - As the implementation of the CSWB Plan progresses and the plan matures, there will be the opportunity to expand the goals encompassed by the plan and its Performance Measurement Framework.
- Suggested corresponding activities to achieve the goal outcomes are included in the plan. The activities ultimately pursued will be dependent on the resources available when implementing the plan and aligned with the assets and strengths present in the community at the time.
 - This will be part of the task of Implementation Working Groups to come.

Plan Goals

Priority Areas of Focus	Health & Well-being	Housing	Employment & Economy	Poverty	Community Safety	Environment & Sustainability
Goal Outcomes	<p>I.1 Ensure timely access to health services by increasing services and reducing wait times.</p> <p>I.2 Ensure health services are equitable and accessible to all by removing identified barriers.</p> <p>I.3 Reduce the incidence of mental health and substance misuse crises in the community.</p> <p>I.4. Increase access to quality and safe living arrangements at home for aging individuals, individuals with special or physical needs and caregivers.</p>					



Plan Goals

Priority Areas of Focus	Health & Well-being	Housing	Employment & Economy	Poverty	Community Safety	Environment & Sustainability
Goal Outcomes	<p>II.1 Increase available and affordable housing options for community residents through greater market inventory and access to subsidized housing and housing benefits.</p> <p>II.2 Create more pathways to housing through transitional and supportive housing options and services.</p> <p>II.3 Serve community members experiencing homelessness through expanded shelter services.</p>					

Plan Goals

Priority Areas of Focus	Health & Well-being	Housing	Employment & Economy	Poverty	Community Safety	Environment & Sustainability
Goal Outcomes	<p>III.1 Promote education, skills and training for local jobs to create career pathways for local workforce opportunities.</p> <p>III.2 Reduce unemployment and underemployment by helping individuals apply for jobs and pursue opportunities that match their level of education and skills.</p> <p>III.3 Reduce skilled job vacancies in the region by retaining post-secondary graduates as permanent residents and members of the local workforce.</p>					

Plan Goals

Priority Areas of Focus	Health & Well-being	Housing	Employment & Economy	Poverty	Community Safety	Environment & Sustainability
Goal Outcomes	IV.1 Increase regional understanding of evidence-based strategies that address root causes of poverty such as basic income and living wages. IV.2 Improve availability of affordable public transportation throughout the region and increase the mobility for residents to work, shop, play and access services. IV.3 Reduce food insecurity experienced in the region.					

Plan Goals

Priority Areas of Focus	Health & Well-being	Housing	Employment & Economy	Poverty	Community Safety	Environment & Sustainability
Goal Outcomes	V.1 Increase the public's perception of safety and belonging in their communities. V.2 Improve road safety and reduce causal factors of roadway accidents. V.3 Ensure access to affordable justice for all residents.					