



# **Beaverton Supportive Housing Project - Public Information Session Feedback Summary Report**

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Date prepared: November 12, 2020

## **Introduction**

The Beaverton Supportive Housing Project is intended to expand housing options for those experiencing homelessness in Durham, especially in the north, and to improve access to a range of health and social services for the local community.

The Region will be launching a competitive process to identify an operator to run the supportive housing facility and will partner with service providers to run services that would be used by both the residents and the broader community.

To shape the project, the Region sought public input on the community's priorities in terms of the additional social services to be offered as part of a service hub. This report summarizes feedback from the public gathered through an online survey and via a virtual public information session.

## **Process**

An online survey via [www.yourvoice.durham.ca](http://www.yourvoice.durham.ca) was posted from September 30 to October 29. A total of 45 people completed the survey.

A virtual public information session was held on October 29, which was open for any interested participant to register and provide input to a panel of Durham Region staff, including: Chief Administrative Officer Elaine Baxter-Trahair, Commissioner of Social Services Stella Danos-Papaconstantinou, Director of Housing Alan Robins, and Director - Business Services, Jenni Demanuele. A total of 11 individuals and two organizations addressed the panel. A total of 115 people tuned in to watch the live stream.

## Support Services needed in Beaverton

Based on combined feedback from both the survey and the information session, several services emerged as clear local priorities. The Region's intended ask was for community input related to needed social services in Beaverton. From the feedback received, mental health and addiction support was among the highest relevant priorities. However, the community raised a number of other priorities, such as primary health care, and emergency services, especially policing. Similarly, the community also feels it needs greater support for economic development and more entertainment and/or recreational amenities.

## Public Information Session

While the intent of the session was to gather input on needed social services, participants shared questions and concerns about the project itself. Overall, there is concern about how supportive housing could work in Beaverton. This did help shine a light on some of the more pressing service needs of all Beaverton residents. It also demonstrated some general misunderstandings about the project itself. Below are key themes raised during the session, along with the Region's response.

### Project size

Community members are concerned that 50 supportive housing units is too large for Beaverton and that it would "overwhelm" the downtown area. A participant said that there are no existing projects of that size in a rural community. There is concern that Beaverton does not have enough services to meet the needs of this added population. It was noted that there are sometimes public disturbances around the methadone clinic. The feeling is that having more people needing support services in the community, is likely to increase these disturbances.

**Region response:** Homelessness exists everywhere and small communities across Ontario and Canada struggle to get needed services to help. The Region has an opportunity to make a difference, which other municipalities may see as a model in the future. With a 50-unit building, we can bring services right to the doorstep of those in a rural community who need them. It gives us the scale to create a permanent hub of supports that have long been needed in Beaverton.

This hub will be for everyone in the community. Since one in five people in Canada will experience a mental health problem<sup>1</sup>, we know there are people in Beaverton right now who may not be homeless but who need support. Such services can improve the quality of life for anyone currently lacking needed resources and services.

It is also important to note that residents will move into the supportive housing units gradually over time. This will ensure neither Beaverton, nor staff of the support services are overwhelmed. It will allow for everyone to get settled in slowly and ensure that the

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<sup>1</sup> Source: <https://cmha.ca/fast-facts-about-mental-illness>

support services are meeting the needs of residents. Not every tenant will have the same level of needs. Some will need more support services than others who will be more independent. Through the intake process, there will be a balance to ensure we have enough capacity to deliver effective supports based on individual needs.

### **Security and emergency services**

Many participants expressed concern that due to mental health and addiction challenges, people experiencing homelessness would pose a public safety threat to the surrounding area and nearby seniors, and that there are inadequate policing services available to respond.

One participant contended that the facility is not viable in Beaverton because it would need to have a psychiatric nurse, crisis intervention specialist, Nurse Practitioner, case manager, addictions counsellor, all available to be dispatched immediately for an escalating situation. They cited that currently, in some cases, it can take an hour before police arrive on scene.

**Region response:** Residents of supportive housing benefit from access to quality on-site staff support around the clock, which helps to prevent situations from evolving into crises. The Region continues to work closely with police and paramedic services about the needs of the community, identify proactive measures to address potential issues and monitor the needs of this site.

It is important to resist making assumptions about those who will live here and their impact on the delivery of emergency services.

The service model will help individuals with various aspects of their lives, providing the opportunity to strengthen life skills and build rapport and relationships with on-site staff. These relationships help people feel safe and supported, which can help reduce or eliminate mental health crises.

As noted by Addiction and Mental Health Ontario: “The stability of a home and availability of support services when needed are the foundation for better health. They are also the foundation of a more efficient and cost-effective healthcare system because research demonstrates that people are less likely to use hospitals and other costly emergency services.”<sup>2</sup>

It is also important to not discriminate or make assumptions about the reasons for someone being homeless. Their privacy should be respected. Over time, homelessness has been criminalized. We need to collectively do a better job at recognizing vulnerability through meeting support needs with compassion, not judgement and discrimination.

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<sup>2</sup> <https://amho.ca/our-work/supportive-housing/> accessed Nov 1, 2020

### **Medical and mental health services**

There is concern that there is no hospital nor urgent care facility in the immediate vicinity and a challenge in getting paramedics out to the rural community. The loss of a local family doctor has created even more demand for primary healthcare services. Others also noted that there is no lab, X-ray or walk-in clinic available in town. Mental health services are also lacking.

**Region response:** This input reinforces the Region's understanding that improving access mental health and addictions counselling will be a top priority for the community hub. These support services will be accessible to all residents. Since one in five people in Canada will experience a mental health problem, we know there are people in Beaverton right now who may not be homeless but who need help. Such services can improve the quality of life for anyone currently lacking needed resources/supports.

As noted above, these services can help prevent health emergencies. The Region is committed to putting in place services and supports that will ensure success.

While medical services are a provincial responsibility, the Region is working with the Ontario Health Team on ways to help recruit a family doctor to serve the community.

### **Transit and transportation**

Participants expressed concern that the region's on-demand transit system is inadequate for the needs of the community, with only north-south routes and sometimes long waits. It was noted there are no taxicab services and that without a vehicle it is difficult to get around the community and access things like the grocery store.

**Region response:** Although public transit may not be as convenient as having access to a reliable vehicle, it does serve the needs of many people. Supportive housing residents will not only have access to the on-demand transit system but will also be supported accessing this service by on-site staff.

### **Reporting and assessing success, and sharing information with the community**

Several participants wanted to know how and when the program would be reviewed to determine if it is working out. There was also a question regarding how the community will be informed if someone with a history of violence moved into the housing project.

**Region response:** The Beaverton Supportive Housing Project will be a part of the community and it is important that there be ongoing, open lines of communication. The creation of the Community Liaison Group will provide community members, the Region, operators and housing residents with a place to provide input and share information.

In addition, monitoring and evaluating success along the way is being built into the process. The Region will perform all due diligence to ensure that the operator and service providers are meeting expectations, effectively addressing resident needs and

achieving the goals of the supportive housing program. The Region commits to reporting progress back to Council and the public.

In terms of information about specific people, the Region has a responsibility to protect the privacy of all its citizens. Currently, housed individuals do not have access to private information about their new neighbours. The same goes for any resident moving into supportive housing. People considered at high risk of violence would not be a good fit for this housing.

### **Economic opportunity, social interaction, social inclusion**

Several participants were concerned about Beaverton's lack of recreational amenities, training/learning opportunities and job prospects that would allow the residents to succeed. Participants felt strongly that although food and other support services will be on site, residents would need other entertainment, amenities and opportunities to succeed in getting back on their feet and integrating into the community.

**Region response:** Social inclusion is a critical piece to the success of the project. The 24/7 support model involves meeting health and social needs on-site including recreational/community activities. Relationships will be formed within the residence and will be an important part of the tenant's life.

As clients' needs change, their need for supportive housing may change as well. This can be accommodated by providing other benefits that promote individual housing choices. For example, someone that is ready and wants to attend a training program somewhere else in the Region or even somewhere else in Ontario may be supported with a portable housing benefit that would allow them to move closer to the training facility.

### **North vs. south Durham**

Some residents believe that the facility represents Oshawa "shipping problems north" and taking people away from their support networks. Other said it may violate human rights to have people experiencing homelessness in Oshawa move to Beaverton. Another suggested that people in south Oshawa were intentionally trying to move homeless people into north Durham.

**Region response:** It is well understood that while it may be harder to see in rural areas, homelessness exists in the form of people couch surfing, living in barns, or in the rough within wooded areas. More than 100 people in north Durham have reached out to the Region's homelessness support system so far this year. The COVID-19 pandemic has also exacerbated the situation and caused more individuals to identify themselves as needing help.

Like anyone else, people experiencing homelessness have the right to live in a community of their choosing. Potential new residents will have the choice to live in Beaverton, and only if they are also an appropriate fit, will they be offered a unit in this building.

Project plans have evolved based on the community's feedback. The Region will prioritize local people who are a good fit for supportive housing.

### **Financial sustainability**

Some residents thought that debt had been incurred to build the project, while others were concerned that public funding could be cut at some point in the future.

**Region's response:** CAO Baxter-Trahair noted that the capital cost of the project is being fully funded by federal, provincial and regional sources. No debt has been incurred. The federal and provincial government are primary funders of homelessness programs through local service system managers. As a service system manager, the Region is committed to eliminating homelessness and ensuring everyone has a roof over their head.

### **Community involvement**

Participants expressed frustration that the community was not more directly involved prior to the project being approved by Regional Council. Some said there is local knowledge that will benefit the Region. Others said that they wanted more details about the project and that some information had changed over time.

**Region's response:** Local professionals have been involved in shaping this project from the outset. Early on, the Region formed the Supportive Housing Advisory Committee that includes: Durham Mental Health Services, Brock Community Health Centre, North House, Ontario Health Teams, Cornerstone Community Association, operators of the In-and-Out of the Crisis (IOTC) program and those with lived experience. All of them have been integral in helping ensure this program will be a success, both for residents and for the community as a whole.

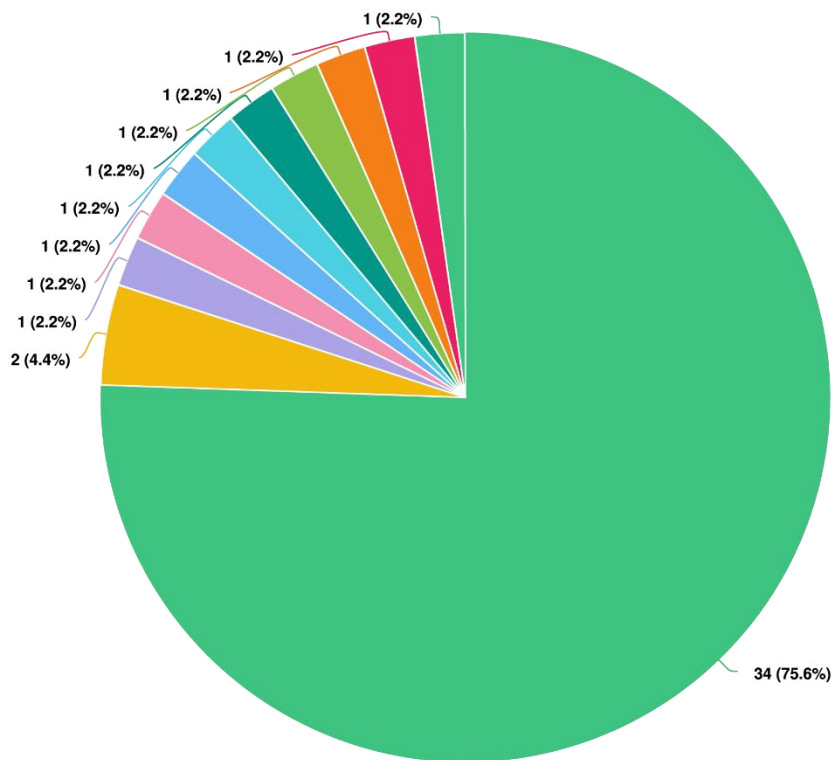
The Region has also been listening to community concerns. It has adjusted the project, for example, to give north Durham residents priority for the housing, and engaging a third party to do an independent review of the project.

Working with the community going forward is a priority and a key factor for it to be a success for Beaverton and the supportive housing residents. The Region is convening a community liaison group to provide an ongoing, permanent link and platform for connecting with the community. Typically, this would be spearheaded by the housing operator, but the Region is initiating this group now to improve communication.

## Online survey response

In all, 45 people completed the online survey, of which 42 were over the age of 35. Seventy-eight per cent of respondents came from Beaverton postal codes while the remainders came from elsewhere in Durham.

Q12 | What is your postal code?



### Question options

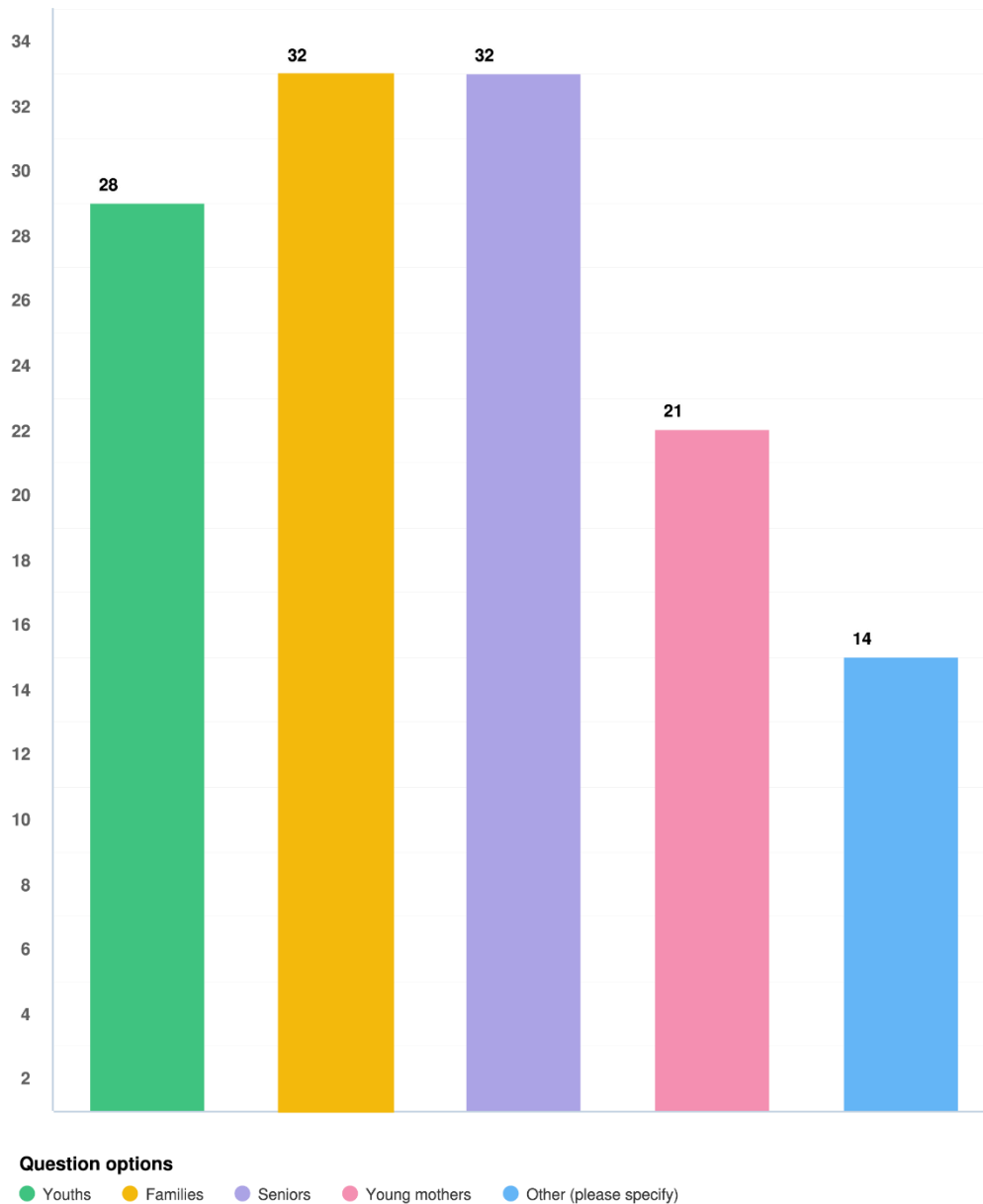
- Courtice, ON, L1E0E7
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 ● Oshawa, ON, L1H1K9
 ● Cannington, ON, L0E1E0
- Oshawa, ON, L1G5M7
 ● Whitby, ON, L1R3C7
 ● Pickering, ON, L1X2G4
 ● Beaverton, ON, L0K0A4
- Sunderland, ON, L0C1H0
 ● Brechin, ON, L0K1B0
 ● Beaverton, ON, L0K1A0

Mandatory Question (45 response(s))  
Question type: Region Question

## Who needs services in north Durham?

Services for seniors and families were considered the highest priority, with 32 of 45 respondents saying that north Durham would benefit from services for these two groups. Youth services followed, with 28 people saying this is a group in need of services.

**Q2** Do you think north Durham would benefit from services for: (select all that apply).



Mandatory Question (45 response(s))  
Question type: Checkbox Question

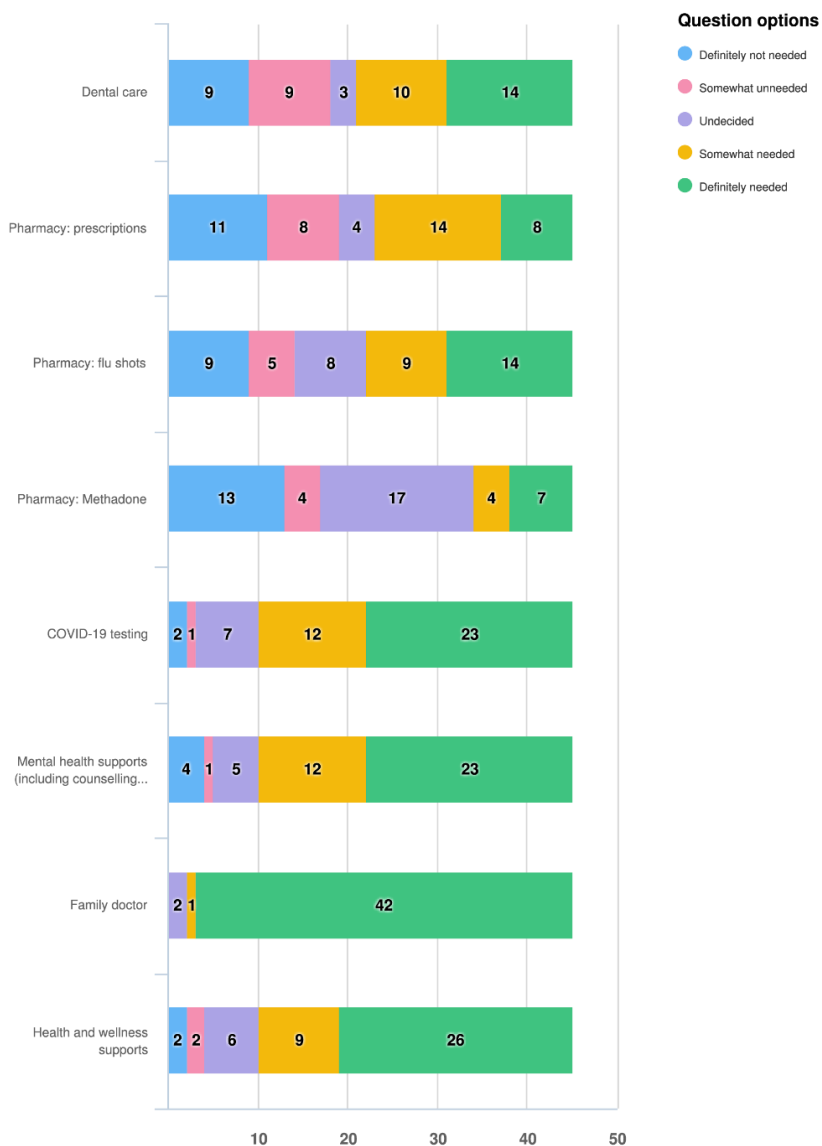


## Health services

The services of a family doctor and mental health support were overwhelmingly the top two choices for type of medical supports needed in the community. Overwhelmingly, survey respondents said that a family doctor is definitely needed (42).

Mental health followed closely behind with 35 respondents saying it is somewhat or definitely needed. Health and wellness supports, and COVID-19, each also had 35 respondents say services are somewhat or definitely needed. Dental care, pharmacy for prescriptions and flu shots each had around 23 to 24 respondents say they were somewhat or definitely needed.

**Q3** Please share your input on the health-caresupports listed below.

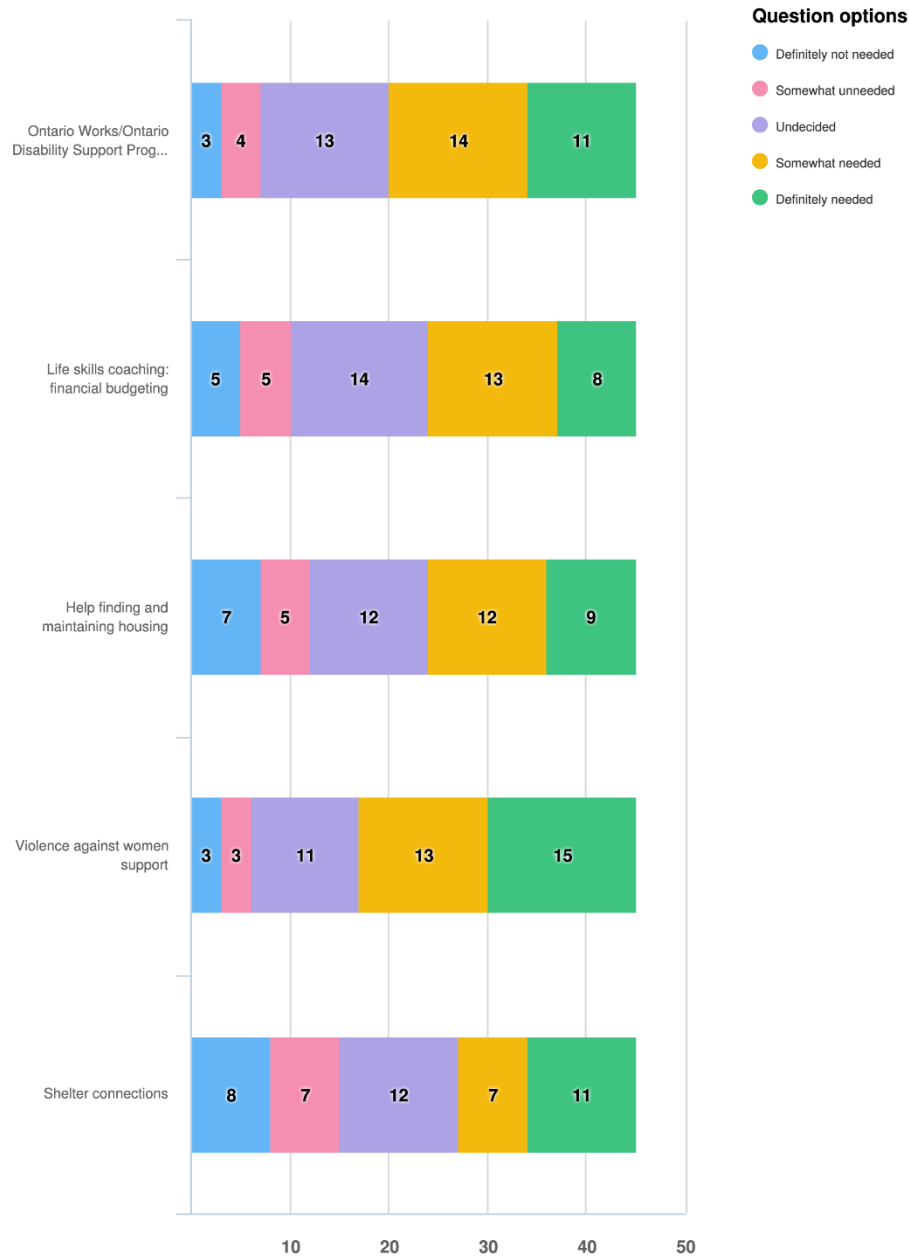


Mandatory Question (45 response(s))  
Question type: Likert Question

## Community services

There was less consensus on community services like Ontario Works/ODSP, life skills coaching, housing help, violence against women supports, and shelter connections. In general, about half of the people, or close to half, thought each of these is important, with the highest number of respondents (28) saying that support for violence against women is somewhat or definitely needed. Twenty-one (21) said life skills coaching is somewhat or definitely needed.

**Q5** Please share your input on the community services listed below.



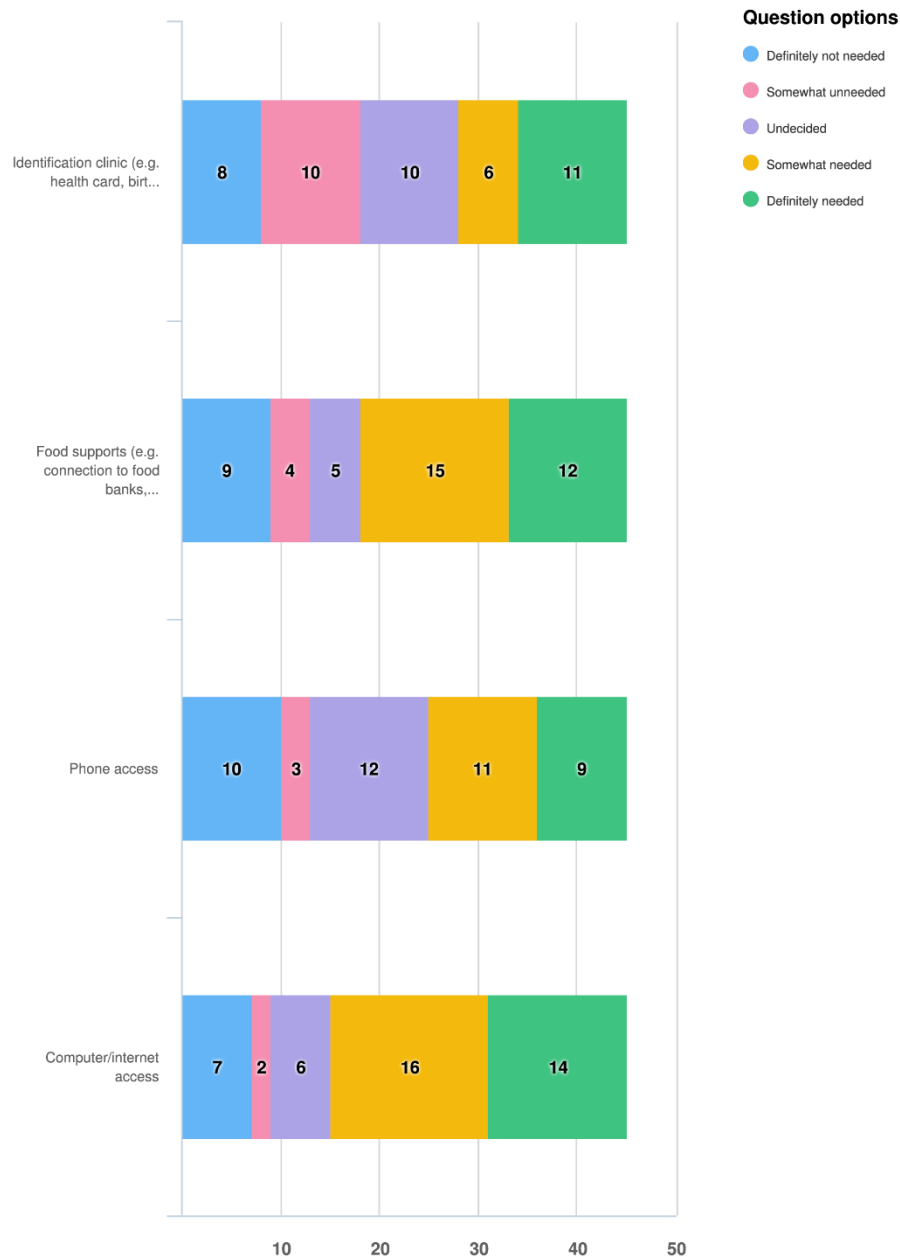
Mandatory Question (45 response(s))

Question type: Likert Question

## Practical support services

In terms of practical supports—like ID services (health card/birth certificate), food support, phone access and computer/internet services—30 of 45 respondents said that internet service is somewhat or definitely needed; and 27 of 45 said that food supports are needed in the community.

**Q7** Please share your input on the practical services listed below.



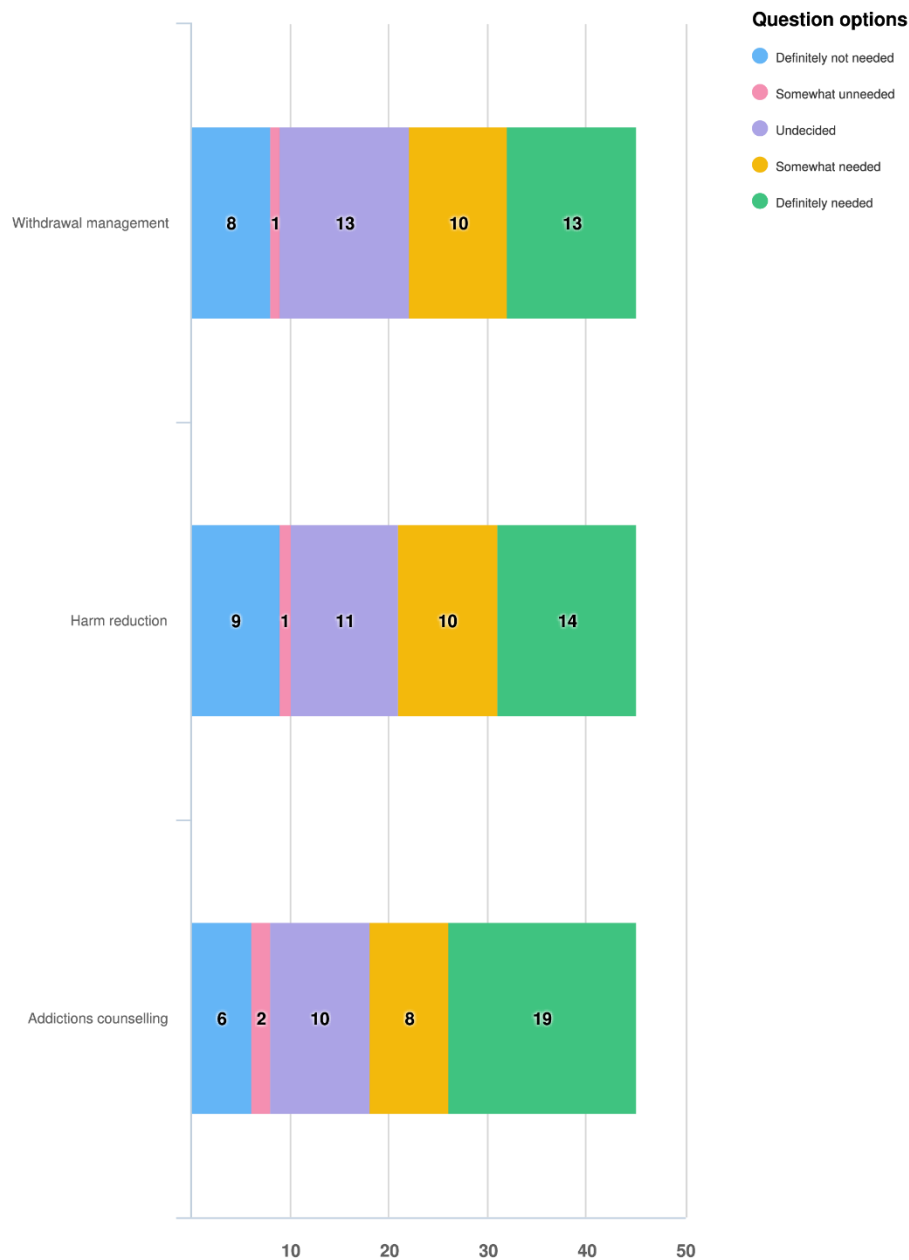
Mandatory Question (45 response(s))

Question type: Likert Question

## Addiction services

Most survey respondents said addictions counselling is somewhat or definitely needed, followed closely by harm reduction and withdrawal management.

**Q9** Please share your input on the addictions supports listed below.



Mandatory Question (45 response(s))  
Question type: Likert Question

**Other services**

Respondents listed a range of other general services that are needed in the community:

- Police services (stated numerous times)
- Trauma counselling
- Parks
- Grocery store (in downtown area)
- Public transit
- Retail
- Recreation/fitness facility/sports facilities for families/children
- Employment
- Mobile public health clinic
- Women's centre

## Appendix 1: Questions and answers

### Resident questions from Virtual Information Session

For full transparency, the questions listed below are word-for-word what community members asked during the session.

**1. What will be done to improve the medical accessibility to medical services in our town?**

Our goal is to improve access to medical services either virtually or onsite, as part of the project, which will include support services for both residents and the Beaverton community. While medical services are outside of the Region's authority, staff are working with the Ontario Health Teams and others to look for solutions.

**2. How safe will the residents in nearby Lakeview Manor long-term care home and Gillespie Gardens, which is right next door, these buildings are in very close proximity to the suggested supportive housing building ... What additional police and supports will be in place for security for this?**

Residents of supportive housing benefit from access to onsite professional staff support around the clock, which helps significantly in preventing crises or other situations. In fact, research has shown that there is no evidence that supportive housing leads to increased crime rates.<sup>3</sup>

Noted by the Centre for Addiction and Mental Health, "People with mental illness are more likely to be victims of violence than perpetrators of violence. We all know people with serious mental illness do become entangled in the criminal justice system, often because care and supports are inadequate in the community. We should see this as a major failure of our systems of care."<sup>4</sup>

Residents will only be provided the option of living in Beaverton based on whether the setting is a good fit for them and the community. It is also important not to discriminate or make assumptions about the reasons for someone being homeless. It does not necessarily make them a threat to the housed population.

As part of the planning, the Region is working closely with police and paramedics to discuss services and community safety.

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<sup>3</sup> <https://yesinmybackyard.ca/research-and-policy/>; The Impact of Supportive Housing on Neighborhood Crime Rates (2002) George Galster, Kathryn Pettit, Anna Santiago, and Peter Tatian, Journal of Urban Affairs, Volume 24, Number 3, pages 289-315

<sup>4</sup> <https://www.camh.ca/en/camh-news-and-stories/common-myths-about-mental-illness> Myth #5

- 3. Please explain how you will ensure that the new supportive housing tenants will be set up for success and integrated into the community of Beaverton in a way to ensure their dignity and to foster and perpetuate the quiet retirement community that exists today.**

A home is the first step to a better life. This project will provide urgently needed housing and then provide residents with a range of support services, ranging from meals and counselling to income support and life skills programs. These supports are intended to help them get back on their feet and on the path to a more stable life.

- 4. When there are destructive incidents – vandalism, theft and collateral damages as a result of the close proximity to our senior residences, our most vulnerable people in our community – who exactly is going to be liable and assume costs for those collateral damages?**

Residents of supportive housing benefit from access to onsite professional staff support around the clock, which helps significantly in preventing crises or other situations. In fact, research has shown that there is no evidence that supportive housing leads to increased crime rates.

It is also important to not make assumptions about the reasons for someone being homeless. It does not necessarily make them a threat to the housed population. The Human Rights organization, HomeComing, cites that, “the most common mental illnesses, such as depression and severe anxiety, tend to cause people to be more introverted and isolated than anything else...Representatives of Toronto’s Police Service report that supportive housing in their division rarely generates complaints from neighbours...a common theme in media stories is that they are about people who were not receiving support. It is this very ‘support gap’ that supportive housing fills.”<sup>5</sup>

Residents of supportive housing are also independent and held to the same accountabilities as all members of the community.

- 5. Have you done a risk assessment for our senior residences?**

Residents of supportive housing benefit from access to onsite staff support around the clock, which helps to prevent situations from evolving into crises. As well, research has shown that those living in supportive housing are less likely to need emergency services, including police intervention, and there is no evidence to that supportive housing leads to increased crime rates.

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<sup>5</sup> <https://yesinmybackyard.ca/for-neighbours/questions-about-supportive-and-transitional-housing/>

**6. Who's going to pay for the additional staff and security measures? And is there a line in your budget to cover these additional costs?**

The supportive housing program will be sufficiently staffed to meet the needs of each resident.

Research has shown that there is no evidence that supportive housing leads to increased crime rates. However, as always, the Region continues to work closely with police and paramedic services about the needs of the community, to proactively manage and monitor local needs.

**7. While there are about 125 North Durham clients on the By-Name List, only about 10% qualify for supportive housing under your priority 1 and 2 categories, so what is the justification to move 35 residents from South Durham to Beaverton and away from the strong volunteer network, their professional services, and their families in a pandemic? We know today that there are about 50 homeless settled in Beaverton who are couch surfing and many of these people will be eligible for a home in this facility—actually I don't know how many, I'm wondering how many of these people will be eligible for a home in this facility?**

Residents of north Durham will get priority. It is far too early to say how many people that will be. Residents will be matched based on the kind of support they need, if the setting is appropriate for them, and if they want to live there.

**8. Will it become a facility for 100 people who are looking for shelters?**

No. With staff on site round the clock, only the residents of the supportive housing unit will be living in the Beaverton housing development.

**9. One assumes a project of this size and effect will have regular assessment reviews to determine its success or failure. I want to know how often these reviews are scheduled and for how many years to come? I want to know if the reviews include the project's impact on the community and I want to know what the determining factors are - and timeline - to conclude success or failure of this project?**

Monitoring and evaluating the program will be built into the process. The Region will perform all due diligence to ensure that the operator and service providers are meeting expectations, effectively addressing resident needs and achieving the goals of the supportive housing program. The Region commits to reporting progress back to Council, the committee and the public.

All programs that receive homelessness funding have quarterly financial and data reporting requirements. We also follow up on any complaints and complete full program reviews every two years.



The creation of the Community Liaison Group will also provide community members, the Region, operators and housing residents with a place to provide input and share information.

**10. Please define ‘North Durham.’ Yesterday, we heard that it was north of Highway 7; that would include Scugog, Uxbridge and Brock Townships.**

That is right. North Durham is comprised of the Townships of Brock, Scugog and Uxbridge.

**11. What Ontario laws, regional regulations or guidelines allow you folks to so obviously encourage south Durham’s homeless, especially from the Oshawa area, to move to a small rural town by purposely establishing everything they need in Beaverton 60 kilometers away?**

We want people to live in the community of their choice, just like every other resident in Durham. The Region’s housing initiatives are driven by *At Home in Durham, the Durham Housing Plan*. We have a goal to end homelessness in the region by 2024, and the Beaverton initiative expands housing options and offer supports to those who need them, to stay housed for the long term.

Where the residents come from to live in Beaverton will be based on assessment and choice, with those from north Durham given priority. Residents will be matched based on the kind of support they need, if the setting is appropriate for them, and if they want to live there.

**12. Please explain how these specialized services [such as a psychiatric nurse, a crisis intervention specialist, a nurse practitioner, an addictions counsellor, a case manager] will be dispatched to Beaverton within 15 to 20 minutes of an incident that is escalating and requires intervention?**

The Beaverton housing development includes 24/7 support. A variety of services will be coordinated for residents based on their individual needs. When people have a comfortable home with access to services they need, they feel safe and life is more manageable.

A coordinated service model involves a team of professionals that can include psychiatric nurses, personal support workers, mental health/addictions professionals and/or case managers. Because these professionals will be working in concert with the residents every day and sharing information, they can be proactive in managing a situation, so the likelihood of such incidents are minimal.

The service model will help individuals with various aspects of their lives, providing the opportunity to strengthen life skills and build rapport and relationships with on-

site staff. These relationships help people feel safe and supported, which can help reduce or eliminate mental health crises.

**13. How does Durham Region plan to attract [medical care and specialized services staff] to Beaverton away from areas where their practices are more viable?**

There are agencies in north Durham now who provide important, specialized services within the north Durham community. We have heard from them that having a community hub to operate from in Beaverton would be a great help. We will partner with service providers to offer the needed supports to the residents. Some services, such as medical care, may need to be provided virtually or over the phone. Our goal to ensure a full range of supports is available to residents and the community as a whole.

**14. Ultimately, who is going to pay for all this?**

This project is being funded by all levels of government: federal, provincial and municipal. The Region understands it is making a long-term commitment, and budget will be allocated for the long term.

**15. Why not take advantage of the local expertise that we have, the council, why not take advantage of the residents here that are more than generous and agree that we would like to help. Why not consult with us?**

From the outset of the planning for this initiative, the Region has in fact been working with a number of local experts. Early on, we formed the Supportive Housing Advisory Committee that includes, Durham Mental Health Services, Brock Community Health Centre, North House, Ontario Health Teams, Cornerstone Community Association, operators of the In-and-Out of the Crisis (IOTC) program and those with lived experience. They have all been integral in helping shape this project to ensure it will be a success, both for residents and for the community as a whole.

Working with the community going forward continues to be a priority. We know there are more caring and skilled individuals in Beaverton who we hope will be a part of building bridges and ensuring this initiative is a benefit and success for everyone. The Region is working with the Township of Brock to form a Community Liaison Committee that will provide an ongoing, permanent link and platform for connecting with the community.

**16. How will information about the successes and failures of this project be shared with the community and the Region?**

The Beaverton Supportive Housing Project will be a part of the community and it is important that there be ongoing, open lines of communication. The Community

Liaison Committee will provide community members, the Region, operators and housing residents with a place to provide input and share information.

In addition, monitoring and evaluating success along the way is being built into the process. The Region will perform all due diligence to ensure that the operator and service providers are meeting expectations, effectively addressing resident needs and achieving the goals of the supportive housing program. The Region commits to reporting progress back to Council, the committee and the public.

**17. How will information be communicated to the community members of Beaverton and surrounding areas about residents of the supportive housing project? For example, if there are residents that have a history of violence, how will we be notified and how will members of the community be protected?**

The Region's responsibility is to protect the privacy of all citizens and residents. Information about specific people and residents will not be shared with the public.

It is important to remember that housed individuals do not have access to private information about their neighbours. The same goes for any resident moving into supportive housing. People considered at high risk of violence would not be a good fit for this housing.

In addition, we must be careful not to discriminate or make assumptions about the reasons for someone being homeless. It does not necessarily make them a threat to the housed community. In fact, very few criminal acts are committed by those with mental illness. As mentioned earlier and noted by the Centre for Addiction and Mental Health, "People with mental illness are more likely to be victims of violence than perpetrators of violence."

**18. How will the policies and services and structures related to the physical and social environment change as the community ages?**

This building is no different than any other rental building. The landlord has a duty to accommodate for all accessibility needs not just those related to aging. As well, in-house recreational activities will support resident engagement and wellbeing.

**19. Beaverton offers few recreational opportunities and even fewer employment or skills training opportunities nearby, so please explain how you would plan to overcome these program deficits to provide personal development opportunities that will help the homeless regain their lives. And have you included a budget for these activities? How will this development support the wellbeing in relation to social inclusion?"**

Supportive housing not only gives people a home, it also provides supports and services needed so they can get back on their feet. The Region is looking at what social services, including employment supports and skills training opportunities, we

can bring to this initiative. The feedback from the community has been important while we prepare to reach out to contract agencies to ensure residents are set up for success.

As clients' needs change, their need for supportive housing may change as well. This can be accommodated by providing other benefits that promote individual housing choices. For example, someone that is ready and wants to attend a training program or employment somewhere else in the Region or even somewhere else in Ontario may be supported with a portable housing benefit that would allow them to move closer to the training facility or job.

There will be daily programming offered to residents to help strengthen life skills and manage daily responsibilities. Many of the residents will come from situations where they were homeless, unsafe or were at-risk in some way. Due to this, significant supports and services will focus on re-gaining self-confidence, trust and hope. Longer-term goals will include vocational skills training and/or employment readiness workshops. Social Services currently has virtual programs of this nature that can be provided on-site at the Beaverton residence.

**20. How do we, the residents and businesses of Beaverton, trust Durham Region to deliver a successful project that meets the needs of our homeless, our businesses, and our residents?**

Supporting people in Durham is our business. The Region of Durham has acted as the Housing Service System manager for 20 years. During this time, we have directly managed over 1,200 units, facilitated the development of over 600 new units, sustained over 4,000 units in community housing and secured funding to provide housing benefits to hundreds of households. Although there is a lot of work still to be done to meet the goals identified by Durham residents through the Durham Housing Plan, we are committed to reaching those goals.

From the outset of the planning for this initiative, the Region formed the Supportive Housing Advisory Committee that includes, Durham Mental Health Services, Brock Community Health Centre, North House, Ontario Health Teams, Cornerstone Community Association, operators of the In-and-Out of the Crises (IOTC) program and those with lived experience. They have been integral in helping shape this project to ensure it will be a success, both for residents and for the community as a whole.

We are committed to building housing and a community hub that services the entire community to help fill gaps in this area. We are also working to form a Community Liaison Committee. We hope the members of the Beaverton business community, professionals and residents will be a part of this committee to provide ongoing input and share information, while building bridges and ensuring it will bring the greatest benefits possible.

As with many supportive housing projects, it is not uncommon to face community resistance. However, it has been demonstrated time and again that once up and running, fears are not realized, and the residents become valued members of the community.

**21. Come post pandemic, in an effort to reduce that debt load that the Region will no doubt have incurred, will Durham Region be cutting back on those services established as part of the housing project? ... If so, what protocols will be put in place to ensure continued support for the health and safety of the community as a whole?**

The pandemic has made this housing project more important than ever. All levels of government are accelerating housing projects, specifically through modular development and increasing their commitments to get people housed. The Region is contributing to the capital cost of this project along with the federal and provincial governments. Ongoing support costs will be allocated from annual federal and provincial homelessness funding and building operating costs will be paid by the Region and offset by rental revenue.

Clear processes and protocols will be put in place before doors open at the new development to support the health and safety of residents and the community. This is standard practice for any housing initiative. We are working with community partners, including police and other first responders. The Region will also follow the recommendations in the OrgCode Consulting report to establish ongoing monitoring and evaluation of success along the way.