

ANNUAL REPORT
September 2015 to September 2016

### **EXECUTIVE SUMMARY**

The Lanark County Situation Table Project began in September 2015. It is a risk-intervention model consisting of two main parts: a situation table that brings front-line, human-service providers together to identify and intervene in situations of acutely elevated risk, as well as the development of a community plan for safety and well-being that will aim to identify local prevalent risks and develop strategies to mitigate them. The project was launched through a partnership between the Perth PSB, Lanark County OPP and Smiths Falls Police Service with a Proceeds of Crime Grant. Since then it has garnered local financial and in-kind support, as well as another Proceeds of Crime grant for Phase II (the community safety plan).

As of September 2016, 20 agencies were represented at the situation table and 57 referrals have been brought forward using a four-filter process that ensures privacy protection and is recommended by the Ministry of Community Safety and Correctional Services and the Ontario Information Privacy Commissioner. Administrative support, including training and procedure development, is provided by the stand-alone coordinator position through the Perth Police Services Board. The situation table using a Risk-Tracking Database provided by the ministry to track statistics in a de-identified format for referrals, which helps to identify prevalent local risks, vulnerable populations and systemic gaps.

The situation table began meeting on Dec. 9, 2015 and meets twice monthly. Of the 57 referrals since that time until the end of September, 14 were rejected. Males and females were fairly evenly split and no referrals had been made for anyone under age 16, except as part of family referrals. The OPP have been the lead referring agency (65%), but have not led any interventions. Probation and Parole, Lanark County Mental Health and Lanark, Leeds, Grenville Addiction and Mental Health have been the top agencies to take a lead in interventions. Sixteen of the 20 agencies at the table have played a role in an intervention, either as a lead or assisting agency, and two peripheral agencies were part of interventions. Agencies dealing with mental health and addictions have been part of almost 40 per cent of all interventions, followed by services involving the justice system, police and victims. In terms of risk factors, addictions, mental health, negative/criminal behaviour and basic needs (such as poverty and housing) are the leading issues, with suicide/self-harm and parenting issues also figuring prominently. The majority (72 per cent) of situations that proceeded to filter four were concluded by risks being lowered through connection to services or supports. The rest were concluded when connections could not be made for various reasons or risk was lowered through no action of the situation table. In one case services were refused and another was identified as a systemic issue. Five referrals have been reintroduced in the time period.

One of the goals of the project is to identify system issues or service gaps as part of the community plan for safety and well-being process. As part of the data collection completed through the situation table and discussions, some issues have been flagged, as well as prevalent risk factors and vulnerable populations. Some of these include identifying root causes of mental health and addictions, as well as rural transportation, housing for hard-to-place individuals (transitional/supportive), poverty, developing coordinated communication/response to the fentanyl issue, a lack of local Indigenous services, the need for chronic pain management services to combat addictions, and better capabilities to track suicides. The Lanark County Situation Table conducted a survey in Spring 2016 to gather information from partners and agencies about their roles, as well as to identify risk factors or local issues encountered with their clients barriers they have encountered that hinder their ability to fulfill their mandate, suggestions about addressing barriers, and suggestions about services that they would like to see locally that are urgently needed and currently lacking. Sixty-seven responses were received. Part of the information collected was used in a report generated by the Lanark County Situation Table for consultants working with Lanark County to conduct a rural transportation study.

As part of the situation table process Lanark County OPP has been tracking pre- and post-referral calls for service for individuals they have referred. The results so far have shown a drop in calls, which translates into cost savings for municipalities.

Collaboration has been a key part of the success of the Lanark County Situation Table and has resulted in many local agencies learning more about each other's roles and being able to better service clients. Training and mentoring has also been an important part of the process, with specific training days held along with one-on-one consultations and the distribution of online training modules and ministry-sanctioned support documents. The coordinator actively participates in provincial teleconferences with Community Safety Services and the Community of Practice, which is made up by other situation tables in Ontario. Information and resources about the Lanark County model have been shared widely across the province, and it has been found to be particularly compelling for other rural communities. Many presentations about the Lanark County Situation Table have been provided to a wide range of audiences, as well as participation in numerous networking events.

Proceeds of Crime grants have funded the launch of the situation table and the community plan for safety and well-being process. The coordinator has garnered financial and in-kind support from local municipalities and police services boards, community policing and advisory committees, and has applied for other community grants. Long-term support for the coordination of the situation table beyond the life of provincial grants will be sought.

Process for situation table operations have been fine-tuned based on feedback solicited by the coordinator from the participating agencies. This will be ongoing.

For Phase II of the project, the community plan for safety and well-being, networking continues and work is underway to create a steering committee to guide the process of developing strategies to combat the prevalent risk factors and systemic issues in our community. The plan will ultimately be presented to partners, municipalities and police services boards for endorsement and action.

Several benefits of the Lanark County Situation Table Project can already be seen. The situation table provides immediate help to those identified as being at acutely elevated risk. It has had an effect on calls for emergency service and the model presents an opportunity to develop a community safety plan that will benefit the entire community and give a collective voice to the community's needs.

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### INTRODUCTION

The Lanark County Situation Table Project officially began in September 2015. It has two main components: the creation of a situation table and the development of a community plan for safety and well-being for Lanark County and Smiths Falls. The philosophy behind the model is to identify the root causes of crime and social disorder and to work to prevent or mitigate them.

The purpose of this document is to provide community partners, police services boards/community policing advisory committees and local municipal councils with an overview of activities from September 2015 to September 2016. This report will provide background (including key terminology and an explanation of process), situation table results from December to the end of September, identified systemic issues, calls for service and cost savings, collaboration, sustainability, agency feedback and community safety planning progress.

This project has been made possible by grants from the Ministry of Community Safety and Correctional Services, contributions from local municipalities and police services boards/community policing advisory committees, and in-kind support. The Proceeds of Crime/Front-Line Policing Grant launched the project in 2015/2016 and a second grant is supporting Phase II in 2016/2017. Thanks also to the Perth Police Services Board and Lanark County OPP for taking the lead in establishing this model for Lanark County, and to the many partner agencies and their representatives who have embraced the concept and stepped up to help form the situation table that is now working to help people at risk across Lanark County and Smiths Falls.

### **Background**

The risk-intervention model that is currently being adopted in Ontario found its roots in Glasgow, Scotland and made its way to Canada via Prince Albert, Saskatchewan, which was experiencing a wave of violent crime. The concept, as explained by Karyn McCluskey of the Violence Reduction Unit in Scotland, is basically that "crime is a public health issue." In other words, ensuring that a population enjoys the social determinants of health (income and income distribution, education, unemployment and job security, employment and working conditions, early childhood development, food insecurity, housing, social exclusion, social safety network, health services, Aboriginal status, gender, race, disability) can go a long way in addressing the root causes of crime. The more tools an individual has to succeed,

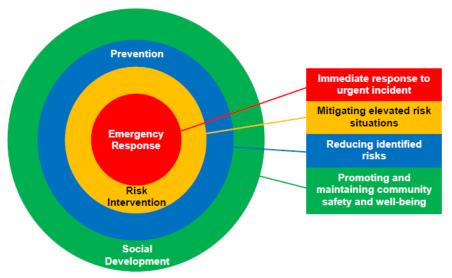


Figure 1: A Framework for Planning Community Safety and Well-being

the better the outcome for that individual.

In the context of Fig. 1, the idea behind risk intervention is to avoid triggering an emergency response (the red zone). The very best way to do this is through Social Development (the green zone), which involves promoting and maintaining community safety and well-being. When risks are identified, Prevention (the blue zone) comes into play. Sometimes numerous risks are encountered by an individual and he or she is deemed to be at an acutely elevated risk of harm (the

yellow zone) and steps need to be taken to intervene in order to mitigate the risks so that an emergency response is not triggered.

The Lanark County Situation Table is working to identify issues early on in order to help people to avoid crises and reduce criminal activity (yellow zone). Having appropriate supports in place (e.g. help for parenting, addictions and mental health) is a key factor in the process. The second phase of the project involves creating a community plan for safety and well-being, which can lead to the development of appropriate social programs where there are gaps in order to prevent risk factors.

### **Timeline**

The Ontario Association of Police Services Boards began introducing this risk intervention model in 2013 to its membership, including the Perth Police Services Board. The Perth PSB quickly saw the benefits and incorporated its principles into its 2014-2016 Business Plan, as did Lanark County OPP for the same time period. In 2015 the PSB was invited to participate in the Town of Perth's Strategic Plan 2022 update process, and took the opportunity to include the principles in a new "Protection of Persons" sector.

Early in 2015, Lanark County Detachment Commander Insp. Derek Needham engaged leadership of local agencies to determine interest in proceeding with a situation table in Lanark County. Lanark County OPP and the Perth PSB, partnering with the Smiths Falls Police Service, then applied for the first Proceeds of Crime Front-Line Policing Grant to launch the project. The grant was approved in August and a part-time coordinator (Stephanie Gray) was hired in September. Throughout the fall, the coordinator worked to establish formal procedures and documents, such as a charter, confidentiality agreements and referral forms. A training session for front-line representatives of the charter member agencies was conducted by the Community Safety Services sector of the Ministry of Community Safety and Correctional Services in November, and the first situation table meeting was held on Dec. 9, 2015.

Since then the situation table has grown to include 20 agencies. It meets twice per month and has had, as of Sept. 14, 2016, 57 referrals. Lanark County OPP and the Perth PSB applied for another Proceeds of Crime grant in order to proceed with Phase II of the project, which involves developing a community plan for safety and well-being and the creation and/or promotion of a resource guide for front-line workers. That grant was approved in August 2016 and work is now underway.

### What is the Situation Table?

The situation table is a risk-intervention model that brings front-line, acute-care, human-service agencies together to provide wrap-around support for individuals who meet a defined threshold of "acutely elevated risk." This means, essentially, they are at imminent risk of harming themselves or someone else. There are currently representatives from 20 local agencies working in a privacy-protective manner to rapidly connect these individuals to appropriate services. Coordination support is provided through the Perth Police Services Board with the stand-alone coordinator position. The situation table has been meeting twice monthly since December 9, 2015. Part of its work involves identifying vulnerable populations, tracking prevalent local risk factors in a de-identified format (no personal information is collected/retained by the situation table), and identifying systemic gaps.

The Ministry of Community Safety and Correctional Services provides a Risk-Tracking Database (RTD), which is an Excel spreadsheet available for use by situation tables in Ontario. It consists of 103 risk factors and 26 study flags. The risk factors encompass a wide range of categories, such as addictions (alcohol, drugs, gambling), mental health (suicide, self-

harm), physical health, criminal involvement, criminal victimization, violence (emotional, physical, sexual), parenting, truancy, basic needs, housing, poverty, antisocial/negative behaviour, gangs, and more. The study flags include such topics as acquired brain injury, disabilities (cognitive, developmental), domestic violence, fire safety, hoarding, homelessness, human trafficking, homicidal ideation, social media, transportation, geographic isolation, and more. Lanark County will soon receive training on a new, enhanced online RTD system that will improve tracking features and report generation, which will be very helpful for longer-term trend analysis and community safety planning.

The following agencies are represented at the Situation Table as of September 2016:

- Catholic District School Board of Eastern Ontario
- Change Health Care Inc.
- Family and Children's Services of Lanark, Leeds and Grenville
- Lanark County Interval House
- Lanark County Mental Health
- Lanark County OPP
- Lanark County Paramedic Services
- Lanark County Social Services
- Lanark County Victim Services
- Lanark, Leeds, Grenville Addiction and Mental Health
- Leeds, Grenville, Lanark District Health Unit
- Ministry of Children and Youth Services (Probation)
- Ontario Disability Support Program
- Open Doors for Lanark Children and Youth
- Perth and Smiths Falls District Hospital
- Perth Police Services Board (for coordination support)
- Lanark County Probation and Parole
- Smiths Falls Police Service
- Thrive
- Transitional Aged Youth Program
- Upper Canada District School Board

The agencies at the situation table represent a variety of sectors that are, typically, human-service providers with a mandate to provide case management. This may include, for example, counselling for mental health or addictions, support for basic needs (financial, housing, disabilities, health-care), supports related to domestic violence and sexual assault, or programs directed by and through probation. School boards are represented for the early intervention capabilities they inherently have through their daily contact with students who may be at risk. Representatives from participating agencies identify situations involving individuals who are at an **acutely elevated risk** (see definition below) of harming themselves or others and refer them to the group for consideration.

The Lanark County Situation Table is not a case-management tool, nor is it a venue for self-referrals. Referrals are made by core participating agencies following a **four-filter process** (see below), which helps to determine whether the referral meets the threshold for acutely elevated risk. It operates in accordance with guidelines provided by the Ministry of Community Safety and Correction Services and the Information Privacy Commission of Ontario. If an individual meets

the threshold of acutely elevated risk, relevant agencies coordinate a rapid intervention with appropriate supports in an effort to prevent a crisis.

### **Acutely Elevated Risk**

The Lanark County Situation Table uses the following definition of acutely elevated risk:

"Acutely elevated risk" is a reference to any situation impinging on individuals, families, groups or places where circumstances indicate an extremely high probability of the occurrence of victimization from crime or social disorder. Left untended, such situations would likely result in serious harm or lead to the situation worsening to the point where a more formal and intrusive intervention is required, such as targeted enforcement and/or other emergency responses.

The "acute" nature of these situations is an indicator that threatening circumstances have accumulated to the point where a crisis is imminent, new circumstances have contributed to severely increased chances of victimization, and/or any effort to mitigate victimizations requires a multi-agency response.

Objective and standardized criteria for acutely elevated risk do not exist owing to the complexity and uniqueness of each situation. Therefore professionals sitting at the Lanark County Situation Table are required to rely on their combined experience and professional judgment to discriminate whether any given situation merits the designation "acutely elevated risk."

### **Four Filter Process**

The Lanark County Situation Table using the following procedure to assess referrals. This was developed based on best practices from other operating situation tables/risk-intervention models:

### Filter One: Agency Screening Prior to Introduction to the Situation Table

- Agency screens a situation and determines the risk factors are beyond its scope/mandate to mitigate the elevated risk and all traditional inter-agency approaches have been excluded for consideration or exhausted.
- Each agency must organize its own screening process.
- As part of this determination, it should be reasonable for the disclosing agency to believe that the individual is at significant risk of serious bodily harm or poses a significant risk of serious bodily harm to others, that the disclosing agency is unable to reduce the risk without disclosing personal information or personal health information, and that disclosing the information to one or more specific agencies will reduce or eliminate the risk posed to, or by, the individual.

### Filter Two: De-identified Discussion at the Situation Table

- Agency presents the situation to the Situation Table discussion in a de-identified format.
- A de-identified record is created in the Situation Table database at this point using an anonymous entry number for follow-through with agencies.
- Members collectively decide if it meets the standard of acutely elevated risk factors across a range of service providers before any personal and confidential information is disclosed.
- If it does not meet the threshold, no personal and confidential information is disclosed and no further discussion takes place.

• If the consensus is that sharing information with the situation table is necessary to help prevent harm or inadequate care to an individual or the public, limited disclosure will be permitted.

### Filter Three: Limited Identifiable Information Shared

- If the agencies conclude that the above threshold is met, limited identifying information will be shared, only to the extent necessary to help determine who should continue to be part of the discussion.
- At this point the Situation Table is able to determine which agencies will be required to participate in a full intervention-planning discussion outside of the full table.
- All responsibility for record keeping related to actual case management remains with each agency that has a role.
   The Situation Table will not generate nor maintain any individualized or identifiable records.

### Filter Four: Full In-camera Discussion among Intervening Agencies Only

- Only identified agencies that have a direct role to play in an intervention will meet separately to discuss limited
  personal and confidential information that needs to be disclosed in order to inform the plan for addressing the
  acutely elevated risk factors.
- Discussion is still limited to only the information that is deemed necessary to assess the situation and to develop and implement an effective strategy to reduce or eliminate the risk, and each recipient agency should have the authority to collect the information.
- Sharing of information at this level proceeds within the allowances for care and for individual and community safety that apply to each profession.
- In all cases, obtaining consent to provide multi-sector services, and to permit any further sharing of personal and confidential information in support of such services, will be the first priority of the combined agencies responding to the situation.

### **Follow Up**

At subsequent meetings of the situation table, the lead agency at filter four reports back to the group regarding the conclusion of the intervention, for example, whether risk was lowered because an individual was connected to services or whether it should remain at acutely elevated risk due and further intervention needs to occur.

### **Community Plan for Safety and Well-being**

The next phase of the project, which commenced in September 2016, is to take preliminary research and what is learned through the situation table process as well as in partnership with a broad spectrum of community service agencies (i.e. justice, social services, mental health, addictions, education, health, government, private sector) to develop a community plan for safety and well-being. This collaborative process will take advantage of data collected through the situation table as well as by partner groups outside of that vehicle to confirm or develop action plans to address matters of safety and well-being.

### DISCUSSION

This section will provide an overview of the de-identified data collected as part of the situation table process, as well as identify systemic issues observed to date, provide information about the effect of the model on calls for service (police), collaboration efforts (training and mentoring), sustainability, feedback from agencies, and progress with the community plan for safety and well-being.

**Results** 

The following graphs represent information from 57 referrals made between Dec. 9, 2015 and Sept. 14, 2016 (a ninemonth period).

### Age Categories and Gender

To date, referrals to the situation table have been almost evenly split between males (29) and females (23). Four family referrals have taken place, as well as one "environmental" referral, which dealt specifically with risks related to concerns about fentanyl use in the Lanark, Leeds and Grenville region. As of Sept. 14, 2016 no individuals under the age of 12 had been referred, although some young children (infants and older) were part of the family referrals.

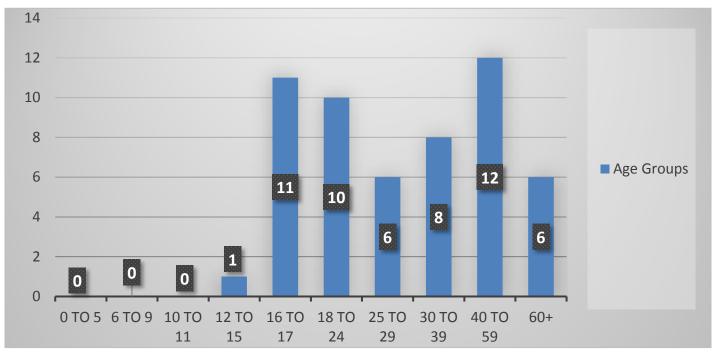


Figure 2: Referrals by Age Category

### **Referring Agencies**

Of the 57 referrals made so far, 14 were rejected. Reasons for the rejections were as follows:

- Eleven were deemed to be connected already to appropriate services with potential to mitigate risk.
- In two instances the originating agency had not exhausted all options to address the issue.
- One had already been connected to services and risk was mitigated.

As can be seen in the chart below, police are making the majority of the referrals to the situation table. This is not unusual, especially given the 24/7 nature of police response and their ability, through their specific record keeping, to flag escalations in calls for service. While police tend to make the most referrals, their involvement at the intervention stage is significantly lower as more appropriate or relevant service providers (e.g. mental health and/or addictions) are connected with the individuals.

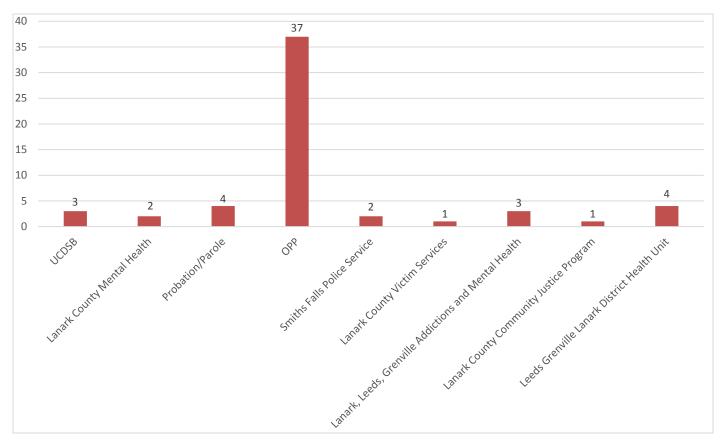


Figure 3: Referring (Originating) Agencies

### **Lead Agencies**

The chart below shows the agencies that have been named as the "leads" in the referrals that have proceeded to filter four. The lead agency is the point of contact for assisting agencies in the intervention and is the primary for reporting back to the situation table. Since a number of referrals have involved individuals who have probation orders, Lanark County Probation and Parole has played a very active role in several interventions. Lanark County Mental Health and Lanark Leeds Grenville Addictions and Mental Health are often called upon to play a lead role as well. To date, neither Lanark County OPP nor Smiths Falls Police Service has been a lead agency in an intervention, which is also not unusual and in keeping with an objective to reduce emergency response and police involvement.

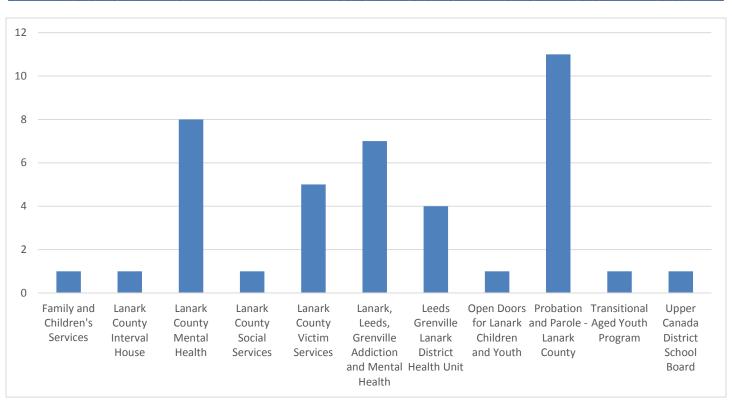


Figure 4: Lead Agencies at Filter Four

### **Intervening Agencies (Including Leads)**

The following chart demonstrates the range of services that have been involved in interventions to date, including those that have taken the lead. Sixteen out of the 20 agencies at the table have been involved in at least one of the 42 interventions, with Lanark County Mental Health and Lanark Leeds Grenville Addictions and Mental Health each being involved in more than half of them. This is not surprising, given the high incidence of mental health and addictions issues being flagged as risk factors in the situations. Two of the intervening agencies listed are not regular participants at the table, but were involved in referrals and interventions through one of the participating agencies. It should be noted that the OPP have only been involved in 13 interventions despite making 37 referrals (65 per cent). In some cases their involvement is due to a safety aspect, but is often because police have been the ones to establish a rapport with the individual involved. Smiths Falls Police have made two referrals and have been involved in filter four on six occasions.

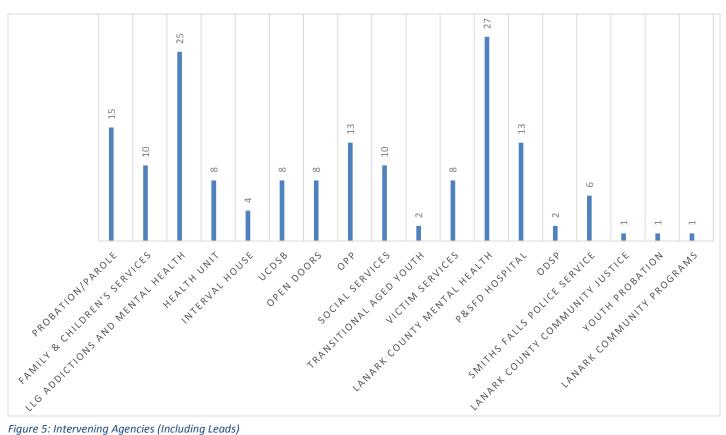


Figure 5: Intervening Agencies (Including Leads)

### **Intervening Agencies by Type**

The following chart represents the same information as above; however, the agencies that have participated in interventions are grouped by type as follows:

- "Mental Health/Counselling" consists of Lanark County Mental Health; Open Doors for Lanark Children and Youth; Transitional Aged Youth
- "Addiction" consists of Lanark, Leeds and Grenville Addictions and Mental Health
- "School" consists of the Upper Canada District School Board
- "Social Services/FCS" consists of Family & Children's Services, Lanark County Social Services, Lanark Community Programs and Ontario Disability Support Program
- "Justice/Victims" consists of Probation/Parole (youth and adult), Interval House, OPP, Lanark County Victim Services, Smiths Falls Police Service, Lanark County Community Justice
- "Health" consists of the Leeds Grenville Lanark District Health Unit and the Perth and Smiths Falls District Hospital

Shown this way, it can be seen that mental health and addictions together make up almost 40 per cent of the total, followed by services involving the justice system, police and victims. This is relevant when considering the risk factors that are also tracked.

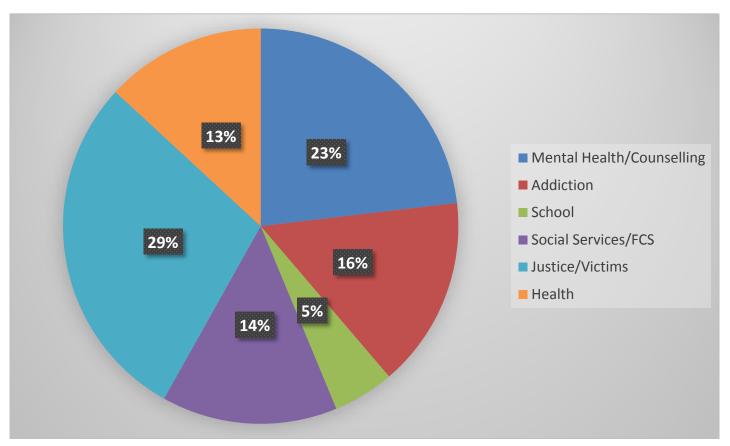


Figure 6: Intervening Agencies by Type

### Risk Factors by Type

The graph below represents a rough grouping of some of the major risk factor types found on the Risk-Tracking Database. The database contains 103 risk factors and 26 study flags. When a situation is referred to the table, the risk factors and study flags associated with it are documented on a de-identified spreadsheet provided by the Ministry of Community Safety and Correctional Services. Referrals must have multiple risk factors in order to be considered for acutely elevated risk. Tracking this helps to determine what agencies would most appropriately be involved at filter four. It also helps to identify local prevalent risks leading toward the community plan for safety and well-being.

As can be seen in the graph, mental health and addictions (alcohol/drugs) again top the list, followed by involvement in the justice system (criminal activity) and antisocial/negative behaviour and basic needs (poverty, housing issues). Parenting issues and suicide/self-harm also figure prominently in the graph. Transportation is under-represented on the graph because it was not tracked from the onset and was only added as a study flag a few months into the establishment of the situation table.

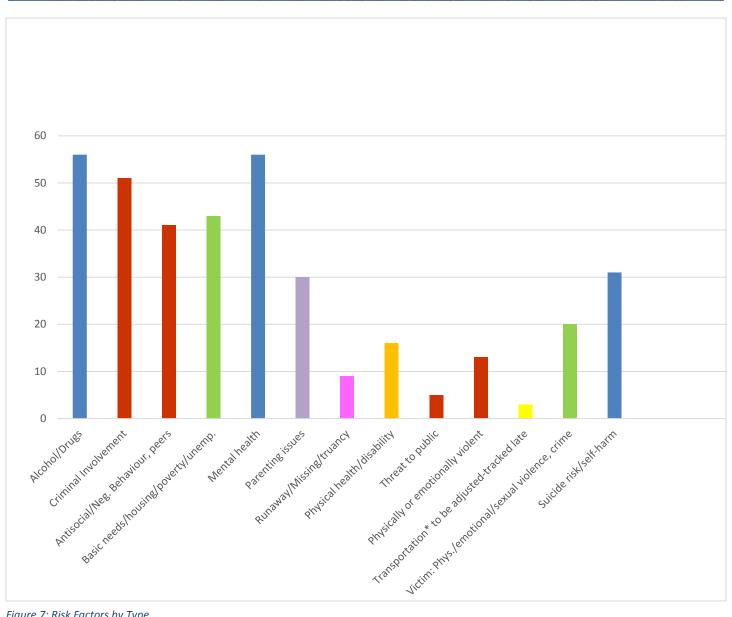


Figure 7: Risk Factors by Type

### **Situation Conclusions**

The majority (72 per cent) of situations that have proceeded to filter four were concluded by risk being lowered through connections to services or supports. In four cases connections were not made due to the individual leaving the area or because the person could not be found. In two cases the risk was lowered through no action of the situation table (e.g. connection was already made before the team made contact). In two cases, information about services was provided, but either a connection was not made or it was refused. One referral was "environmental" in type, in that it relates to the problem of increased fentanyl use in our communities. It was ultimately concluded as "still at acutely elevated risk – systemic issue" and will likely form part of the community plan for safety and well-being. Some risks, especially mental health, are cyclical in nature and will need longer-term analysis to determine how successful the conclusions have been.

As of Sept. 14, 2016, five referrals had been reintroduced to the situation table. In one case the individual couldn't be located the first time, but was connected to services after a second referral a few months later. In another instance the individual was rejected the first time because he was already connected to services, but was introduced a few months later as issues persisted and he was connected to services the second time. A third case was connected to services the first time, but was reintroduced due to different risks. That case was concluded when risk was lowered through no action of the situation table. In the last two instances, both were connected to services and risk lowered the first time, and reintroduced with new risk factors the second time (both have been concluded with connections to either services or personal supports). Reasons for rejected situations were described earlier, and three situations remained open at the time of writing of this report.

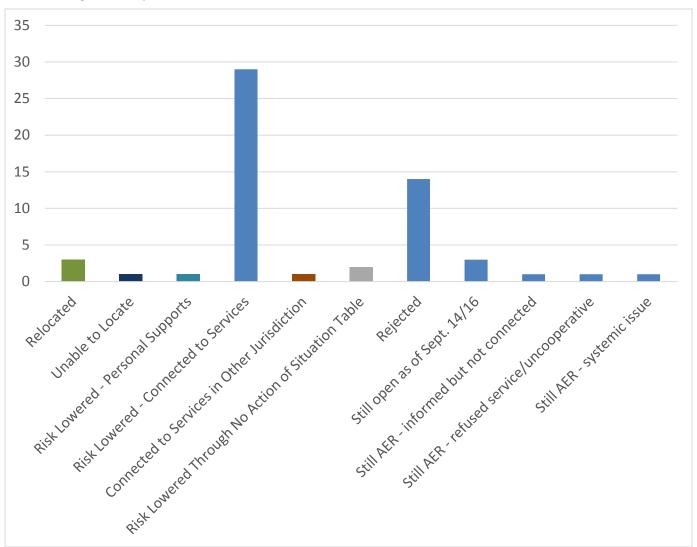


Figure 8: Situation Conclusions

### **Identified Systemic Issues to Date**

Identification of systemic issues – or service gaps – will take place with greater formality as part of the community plan for safety and well-being process, but collecting risk factor/study flag data and discussing issues as part of the situation

table process has already identified some prevalent risk factors, vulnerable populations and systemic issues/gaps. To date only one (the fentanyl issue) has been deemed a systemic issue as part of the Risk-Tracking Database.

As previously noted, mental health and addictions (alcohol/drugs) dominate the risk factors in the 57 referrals as of Sept. 14, 2016. Drilling down into the root causes of these issues is part of what the community safety planning process hopes to accomplish in order to identify where social programs and supports are needed to supplement/enhance the existing array of services in Lanark County and Smiths Falls.

In discussions at the situation table and with representatives, a number of issues have been raised that may ultimately be deemed systemic gaps. These include rural transportation, housing for hard-to-place individuals (transitional/supportive), poverty, a need for a coordinated communication/response to the fentanyl issue, a lack of local Indigenous services, the need for chronic pain management services to combat addictions, better capabilities to track suicides, and a need for a dedicated domestic violence courtroom.

When the Lanark County Situation Table formed, transportation was frequently mentioned in discussions about referrals as being a tremendous barrier to services in Lanark County and Smiths Falls, however the risk-tracking database did not have a mechanism for recording this at the time. In January, the ministry solicited feedback from operating situation tables regarding additional study flags to be added to the database. Our group submitted the following, which were accepted and are now part of the provincial database:

\*Transportation Issues: Insufficient/non-existent access to personal or public transportation in order to allow individual to access services or leave an undesirable situation

\*Geographical isolation: Residing in a remote location with limited access to transportation, services, Internet, neighbours; increased possibility of victimization or self-harm

In March and April of 2016, the Lanark County Situation Table circulated an online survey to its member agencies, other community groups, police services boards and local municipal councils to help gather information for the community plan for safety and well-being. It was requested that the survey be shared widely within agencies to capture responses from front-line workers. The survey was divided into three major sections: agency information, risk factors and barriers/systemic gaps.

Sixty-seven responses were received from various agencies. Question #15 listed a condensed version of the risk factors and study flags the Lanark County Situation Table tracks and asked agencies to identify which "<u>risk factors or local issues you encounter with your clients (check all that apply).</u>" Of those who returned the survey, 48 responded to question 15. Of those respondents, 83% indicated transportation was a risk factor or local issue. Transportation was among the topranking issues, along with alcohol abuse, mental health, health-related risks and poverty – all of which were higher than 80%. Geographic isolation scored 46%.

The survey also asked respondents to "please describe any barriers you have encountered that hinder your ability to fulfill your agency's mandate (e.g. funding, staff or other limited resources, limited service area/transportation, restrictive mandates, systemic gaps, etc.)." Thirty-six agencies responded to this question. Funding was cited as the biggest gap because it is needed to extend existing programs and services and/or to develop new programs or centres to serve a variety of age groups and those with mental health, addiction and disability issues. Funding is also needed to hire additional staff and to train existing staff to deliver services to help decrease or eliminate the current gaps in service.

Other issues identified include a need for more access to emergency social services, a lack of rural resources (urbancentric services), rural transportation, long waiting lists for a variety of services/age groups, limited access to local withdrawal management/detox services, problems related to stigma and discrimination, insufficient affordable housing, a lack of emergency funding and supports for homelessness, and high domestic violence rates.

The survey then asked respondents to "provide suggestions about how, in an ideal world, the barriers you have listed above could be addressed." More core or emergency/interim funding was a top suggestion, but others included improved training and education, more collaboration/grant applications with partners, access to a database of local services (this is being explored as part of Phase II of the Lanark County Situation Table project), changes to social assistance programs, more affordable housing, better rural transportation, and more prevention/proactivity.

Question 26 asked: "Is there a service or services you would like to see in Lanark County and Smiths Falls that you believe is urgently needed and currently lacking?" Thirty-five responses were received, including a detox/withdrawal centre, additional mental health services for a variety of conditions, youth services related to pregnancy, transportation services, male youth homeless shelters and housing for homeless youth, emergency housing/shelters, a centre for gender and sexual diversity, more affordable housing, more local Indigenous supports, more French-language supports, free drug/alcohol treatment for youth, increased life skills/employment readiness programs for youth, services for sexual offenders, support services for youth who have been victimized by gang activity and other victimization supports, specialized medical supports for high-risk children, increased home visits for isolated people.

In June 2016, the Lanark County Situation Table coordinated met with the consultants hired by Lanark County to prepare a rural transportation study (Public Transportation Solutions Study for Lanark County and the Town of Smiths Falls). The coordinator prepared a report using data collected from the aforementioned survey, as well as from the situation table process and in discussion with participating agencies, in order to provide a community safety perspective to the county's transportation study process.

### **Calls for Service – Cost Savings**

As part of the situation table process, Lanark County OPP is tracking the number of calls for service for individuals they have referred to the situation table (37 as of Sept. 14, 2016). Their data notes the number of calls for service for the individual pre- and post-referral, and preliminary data is showing a large reduction.

For example, one of the first individuals referred to the situation table had 32 calls for service with the OPP in a ninemonth period (during two of those months he was incarcerated). The calls, which were attended by officers, related to social disorder issues, such as alcohol, trouble with neighbours, trespassing and assault. This represents about \$10,000 in billing to a municipality. The individual was connected to addictions and mental health services, and since his referral in December 2015 up to early September 2016, only six calls for service have taken place and none since March 2016.

The following chart is a sampling of some of the referrals featuring higher-range calls for service along with their post-referral numbers up to early September.

Date Referred	CFS Prior to Referral to LCST	CFS Post Referral to LCST
13 January 2016	17 with OPP, 4 with SFPS	5 with OPP
27 January 2016	37 with OPP, 7 with other	Zero with OPP, Zero with SFPS
27 January 2016	67 with OPP (262 total occurrences with police since 2004)	10 with OPP, 1 with SFPS
24 Feb 2016	114 with OPP (total 134 with police since 2001)	5 with OPP
24 Feb 2016	60 with OPS, 12 with OPP (since 2012)	4 with OPP
09 Mar 2016	25 with OPP	Zero
23 Mar 2016	34 with OPP, 15 with SFPS, 4 with Brockville PS	9 with OPP
23 Mar 2016	20 with OPP	Zero with OPP
13 Apr 2016	25 with OPP	Zero with OPP
08 Jun 2016	119 with OPP	Zero with OPP
10 Aug 2016	52 with OPP, 16 with Brockville PS, 469 with SFPS, 9 with Lindsay PS, 1 with Espanola PS (531 occurrences with police since 1991)	4 with OPP, 2 on same day as Table

### **Collaboration**

Since the inception of the Lanark County Situation Table there has been, understandably, an emphasis on collaboration. The situation table began with representation from 15 local agencies. Including administrative support from the Perth Police Services Board for the stand-alone coordinator position, that number has grown to 21. Part of the growth has been because of continued efforts by the coordinator to ensure the most relevant services are represented at the table, but some agencies have been included at the suggestion of table representatives who have been aware of a particular program or service that could be of benefit in the discussions. Outreach will continue over time as other appropriate agencies are identified.

One of the requests of the original participating agencies was to compile a short summary of what each group does in the community. This has been updated and re-circulated over time. Thanks to the consistency of participating representatives at the table, a great level of trust has emerged as well as an understanding of each other's roles. This has helped to facilitate discussions and quickly determine assisting agencies in interventions. Anecdotally, it has also helped outside of the situation table as representatives have become more familiar with each other and agency roles; sometimes they are able to guide clients to an appropriate service before a situation escalates to acutely elevated risk and requires a referral.

Another important aspect of networking has been training and mentoring. One of the objectives of the first phase of the project was to provide appropriate support and training for service providers/community partners participating at the situation table. Dr. Hugh Russell, a subject matter expert on this risk-intervention model and community safety planning, presented a workshop for executive directors/managers and front-line workers on April 14, 2015. Community Safety Services personnel and other trainers presented a training day for situation table participants on Nov. 13, 2015 at which mock scenarios/interventions were presented. The coordinator has attended other training sessions (e.g. Ontario Working Group symposium, CSS teleconferences) and has relied on ministry-sanctioned support documents to generate training materials/protocols for agencies. Participation by partnering agencies has been very good. In addition, one-on-one meetings have been held between the coordinator and any new situation table representatives to orient them to the process. The coordinator has been available to provide additional documents, answer questions or make presentations to agencies as needed.

In Spring 2016, the coordinator was invited by the Community Safety Services branch to help review and provide feedback for a series of e-modules that have been developed through the Ministry of Community Safety and Correctional Services and Wilfred Laurier University. The e-modules now form part of the training for new situation table participants and cover topics including privacy and confidentiality, how to navigate the four-filter process and intervention strategies.

The coordinator has also actively participated in provincial teleconferences through CSS and the Community of Practice, and has consulted with and shared numerous resources with other communities that are starting their own situation tables. Several communities have duplicated our stand-alone coordination model. As well, the rural nature of Lanark County and Smiths Falls has presented risk factors, vulnerable populations, systemic issues and operational processes that vary from the more urban centres, and information sharing about these perspectives has been an asset to communities that are starting their own situation tables. Best practices continue to be shared with CSS and the Community of Practice. The coordinator and Lanark County OPP Insp. Derek Needham have been involved in several presentations about the Lanark County Situation Table, including the Zone 2 Ontario Association of Police Services Boards, Community Services Officer training for East Region, Lanark County Association of Police Services Boards and the Rotary Club of Perth.

Other networking activities to engage stakeholders have included attendance at LEAD training (Lanark County Police and Mental Health/Emergency Department/Ambulance Service/Diversion), Municipal Drug Strategy networking days, the Lanark Planning Council and the Lanark County Community Solutions on Homelessness forum. The coordinator is a member of the Truth and Reconciliation Working Group, which is a committee of the Lanark Planning Council. As well, the coordinator has been an active participant in Rural Forums on Domestic Violence, including a group researching possibilities around dedicated domestic violence court procedures. Presentations have been made to almost all local municipal councils, as well as Lanark County Council and to Perth Algonquin College students.

### **Sustainability**

Early in 2016 the coordinator worked with stakeholders, including local municipalities and police services boards and granting organizations, to fund the project into Year 2 and beyond. Several local municipalities and police services boards made financial and in-kind contributions to the project to fund it between the first and second Proceeds of Crime grants. Several local municipalities and police services boards made financial contributions and endorsed the risk intervention model in principle. Phase II of the project, which emphasizes the community plan for safety and well-being while maintaining situation table operations, is now in place. The coordinator continues to seek local funding

opportunities and to explore long-term options that will see continued coordination of the project. This is an aspect also being explored by the provincial Community of Practice (made up by representatives from other situation tables). A stand-alone position has received positive feedback in Lanark County from partners as it does not rely on an existing agency position to pick up the additional workload.

### **Feedback from Agencies**

As part of the first phase of the project, an objective was to solicit feedback from participating service providers/community partners regarding the situation table model. An initial feedback form was administered at the first situation table meeting to identify levels of trust and suggestions for operations. Anecdotal feedback (verbal) was also received from several agency participants and incorporated into processes. A second survey of agencies participating at the situation table was conducted and processes have been fine-tuned as needed. Outside of the situation table, the aforementioned agency survey has provided a great starting point for the community safety planning process, specifically related to prevalent local risks, vulnerable populations, systemic gaps and potential solutions.

### **Community Safety Planning Progress**

Phase II of the Lanark County Situation Table Project – development of a community plan for safety and well-being – will involve consultation with participating and peripheral agencies throughout Lanark County and Smiths Falls. Some of this has already started with such activities as the Truth and Reconciliation in Lanark County event on Sept. 27, 2016. The coordinator was involved with the working group of the Lanark Planning Council to facilitate this event, which drew about 100 participants. This is relevant to the project as a lack of local Indigenous services has been discussed as a possible systemic issue.

A steering committee will be developed to work to continue to identify risk factors and vulnerable populations. This will be supported with the data from the situation table risk-tracking database and the collective expertise of local partners. A plan will then be developed that includes strategies to help reduce or prevent the identified risks. Some examples might include developing strategies around finding housing for homeless youth or hard-to-place individuals; adding a community safety perspective to rural transportation solutions; identifying reasons for the prevalence of mental health issues and creating strategies or improving resources to prevent them; contribute to action plans to address addictions issues including fentanyl; improving education and reducing stigma around domestic violence and seeking solutions to the social/geographic isolation that sometimes contributes to it. Ultimately the community plan for safety and well-being will be presented to partners, municipalities and police services boards for endorsement. It will also serve as a vehicle to strengthen and support local lobbying efforts around these identified issues as it is understood many groups are already undertaking work on these systemic gaps.

### **CONCLUSION**

There are several anticipated benefits related to the Lanark County Situation Table Project. The situation table itself provides immediate help for those who are identified as being at acutely elevated risk. Already this risk-driven, collaborative community safety model has been endorsed in principle by several local municipalities and it has been included in the Town of Perth's Strategic Plan and the Perth Police Services Board's 2014-2016 Business Plan. Undoubtedly the principles will form part of the Perth PSB's next business plan. The situation table has already shown it has an effect on the number of calls for service, which translates into cost savings. Maintaining its operation in conjunction with a community plan for safety and well-being is expected to continue this trend and increase opportunities to free up or redirect emergency responders.

Creating a living document in the form of the community plan for safety and well-being that encourages continued collaboration with key agencies will help to identify and mitigate evolving risks and gaps that exist or may occur. Finally, the plan will also highlight systemic issues and the collaborative nature of the project will help strengthen our community's collective voice to help lobby for community needs.

To date the Lanark County Situation Table Project has met all of the objectives set out in the first Proceeds of Crime Grant and has garnered financial and in-kind support from additional sources. The coordinator looks forward to continuing to build and enhance collaborative relationships with the many excellent partners who are working every day to make life better for the citizens of Lanark County and the Town of Smiths Falls.