

Community Safety and Well-being Planning

TO: LEEDS AND GRENVILLE SERVICE PROVIDERS

BY: STEPHANIE GRAY AND JANE TORRANCE, CONSULTANTS



Agenda

- Welcome & Introductions
- Overview of Community Safety Planning
- Leeds and Grenville Plan Components/Key Milestones
- Risks Identified through Preliminary Research
- Facilitated Group Activity: Asset Mapping; Risk and Gap Identification
- Report Back and Group Discussion
- Next Steps
- Concluding remarks

Who We Are

Stephanie Gray

- 20 years Communications Consulting (Stephanie Gray Communications), including public relations for County of Lanark; college instructor
- 2015-Present: Coordinator, Lanark County Situation Table and Community Plan for Safety & Well-being
- 2010-2015: Member/Chair, Perth Police Services Board (Zone 2 Chair 2014-15)

Jane Torrance

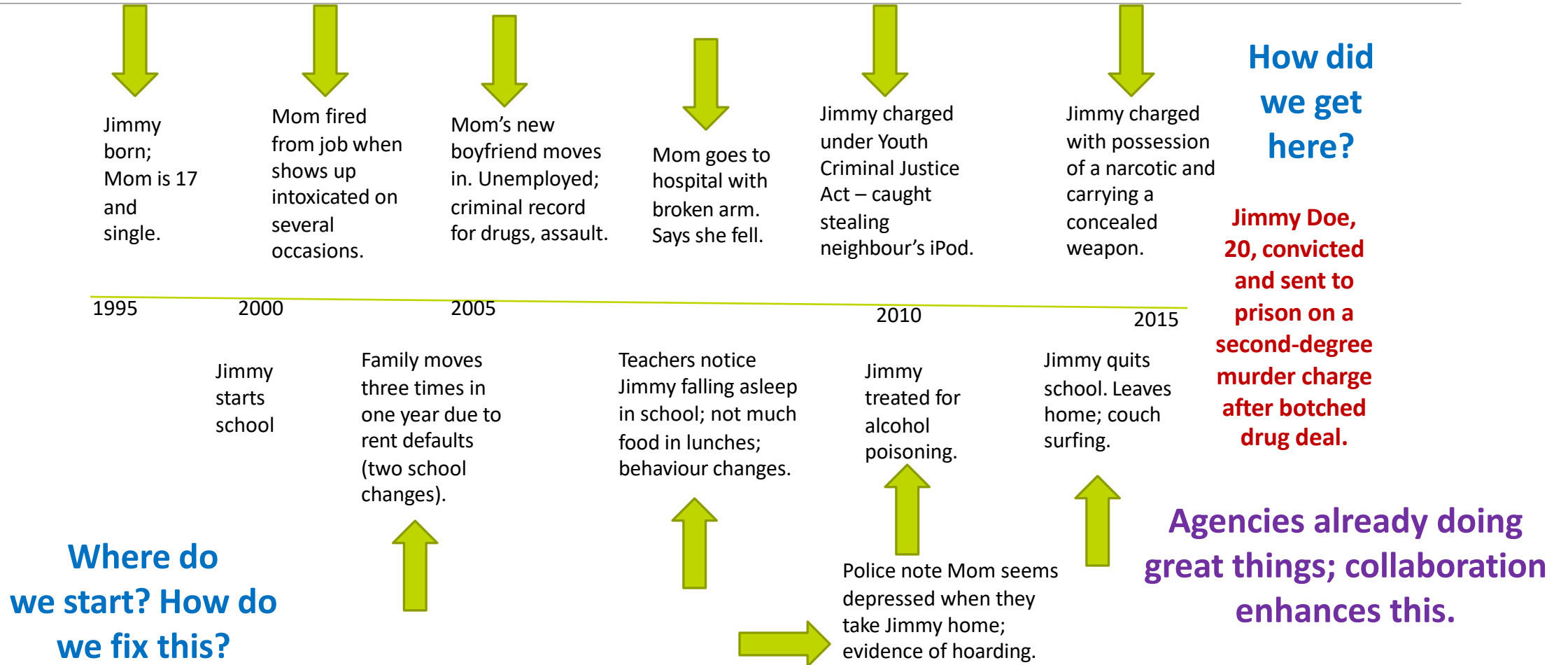
- 2018-present BIG THINKING Consulting Services; Acting Regional Director United Way East Ontario
- 10 years Community Coordinator, Lanark County Planning Council for Children, Youth and Families
- 3 term Councillor, Mississippi Mills; 1 term Lanark County Council; 8 years Member, Mississippi Mills Police Service Board

“Crime is a public health issue”

Karyn McCluskey, Violence Reduction Unit, Scotland

- Concept based on model developed in Glasgow, Scotland – adopted by Prince Albert, Saskatchewan
- Consider social determinants of health; the more tools an individual has to succeed, the better the outcome
- Identify issues early on to avoid crisis; reduce risk of criminal activity (address costs of policing)
- Have appropriate supports in place (parenting, addictions, mental health)
- <https://www.cbc.ca/news/canada/ottawa/glasgow-violence-crime-ottawa-police-1.5338102>

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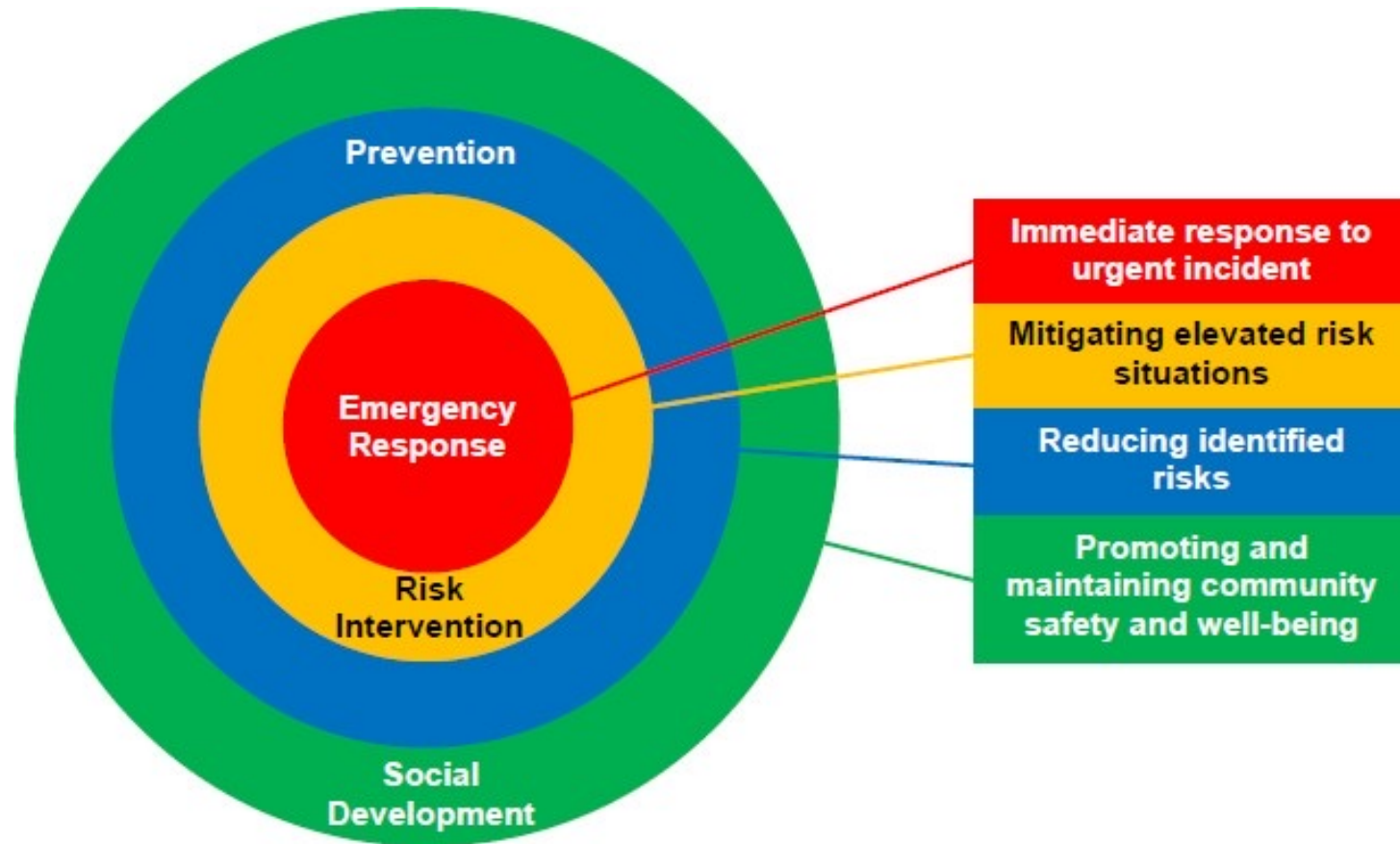


Ontario Working Group

on Collaborative, Risk-driven Community Safety

- Comprised of four Ontario police services in early 2013
- New ways of dealing with crime, victimization, social disorder, social and health issues
- Latest research and best practices to reduce harm and victimization
- Guidance for practitioners
- Dr. Hugh Russell (OACP work) and Norman Taylor (Saskatchewan model) – hired by OWG in 2013 for technical guidance
- Framework for community safety planning

Four Levels of Intervention



Why are we here?

CSWB Plan: Provincial Legislation

- Legislative amendments to current *Police Services Act* mandate municipalities to prepare and adopt a plan by July 1, 2021
- Act outlines requirements for advisory committee, consultation, establishing priority risks
- Must show outcomes and measurables with strategies to meet them
- Monitoring, evaluating, reporting requirements may be outlined in regulations at a later date
- Publishing regulation: Internet within 30 days of adoption with a printed copy available for viewing
- Framework for planning provided by the Ministry

Critical Success Factors

- Strength based
- Risk focused
- Awareness and understanding
- Highest level commitment
- Effective partnerships
- Evidence and evaluation
- Cultural responsiveness

Strength based

Presume community is full of assets that can be mobilized to achieve safety and well-being.

- Identify the assets (asset inventory)
- Individuals, families, community groups in marginalized neighbourhoods who want to contribute
- Agencies/organizations with mandates, resources, info and workers to contribute

Risk focused

Identify risk, threats or hazards to safety and well-being and apply to all zones. Collect data from:

- Focus on risks, not incidents
- Target circumstances, people and places most vulnerable to risk
- “Why” is something happening
- Seek data and experiences from community and partners
- Look for trends and patterns

Awareness and understanding

- Understand role in making community safe and healthy
- Collaborate
- Promote awareness and understanding purpose and benefits of planning
- Examine social issues and inequalities that create risk in the first place

Highest level commitment

- Have councils make a public stand for safety and well-being
- Community-wide initiative requiring dedication
- Commitment from local political leaders, agency/organization heads

Effective partnerships

- Plan is only as effective as partnerships and multi-sector collaboration
- Complex issues requiring comprehensive sustainable solutions
- Communication between service providers
- Cooperation between agencies and organizations
- Coordination for joint planning to achieve mutual objectives
- Collaboration for mutual gains or outcomes
- Convergence (possible, e.g. through restructuring, shared services/staff)

Evidence and evaluation

- Identify priority risks:
 - Stats Canada
 - Police and crime data
 - Employment
 - Educational attainment rates
 - Social services
 - Health care
- Identify gaps – research evidence-based response
- Collect data to evaluate upon implementation

Cultural responsiveness



- Interact with and respond to the needs of diverse groups
- Respond to specific inequities
- Consider elements of diversity in planning:

Ethnicity
Gender identity and sexual orientation
Religion
Socioeconomic status
Education

Age
Disability
Citizenship status
Regional location
Language

Components Progress

Completion of Milestone #1

- ✓ Identify a local champion who will gain commitment from local government; obtain multi-sectoral buy-in, to communicate effectively with potential partners; engage the community
- ✓ Establish a multi-sectoral advisory committee that will map community assets and identify gaps in service for prioritized risks
- ✓ Communication Materials prepared and press-releases issued

Milestone 1 - Engagement

Advisory Committee:

Mayor Robin Jones; Mayor Nancy Peckford; Staff Sergeant Josh Kingsley, OPP Leeds; Acting Inspector Nancy Graves, OPP Grenville; Mayor Doug Malanka, PSB; Megan Cumming, Kemptville Stress Relief; Alison Tutak, Social Services; Marg Fancy, EKIOC; Trish Buote, United Way; Michele Bellows, Rideau Community Health Services; Elaine Murkin, LGL Health Unit; Wendy Embleton, Kemptville Community Association; Rev. Nancy McLeod, Ecumenical Ministerial; Ron Ferguson – UCDSB; Directeur Jean Cloutier, French Catholic School Board; Charlene Catchpole, Interval House; Beth Kent, Children's Mental Health; Jean Francois Thibodeau, French Public School Board; Erin Lee Marcotte, FCSLLG; Marty Crapper, Country Road CHC; Shawn Souder, Mental Health LLG; Bill Montgomery, UCDSB Indigenous Rep; Donna Easter, Westport Senior Rep

Components Progress

Completion of Milestone #2

- ✓ Surveys - 100
- ✓ Interviews with key stakeholders - 17
- ✓ Data review
- ✓ Conduct local research to support identification of risks

Milestone 2 – Preliminary Risks Identified

- Collaboration of partners (siloed approach, lack of communication)
- Alcohol and drugs (abuse, harm caused by)
- Mental health (suspected, affecting others, grief/trauma, social isolation)
- Poverty and unemployment
- Transportation
- Housing and homelessness
- Domestic violence, victim of violence, human trafficking
- Health – nutrition and food security
- Rural inclusion (Brockville-centric)
- Population-specific Risks
 - Youth
 - Seniors
 - Indigenous Families

Group Activity

Join one of the
10 breakout
rooms as listed
by risk area

20 minutes
x 3 rounds

Assets: How are you currently working to help mitigate these risks?

Gaps: Where does work need to be done to help mitigate these risks?

Evaluation: How can success be measured?

1. Join a break-out room (named by risk area) to discuss.
2. Assign a scribe to record your responses being sure to include agency name in assets in the Google document provided
3. Collectively highlight the most significant strategy that can be reported back
4. Join a second breakout room and repeat.

Report Back and Group Discussion

For each risk area,
what strategy
would have the
most impact

Scribes to report
back

Working towards Milestone #3

Final Report

- Continued data collection/analysis
- Draft report for Advisory Committee Meeting – May 21
- Revisions based on feedback
- Submit final report to UCLG June 2
- Adoption by Counties Council on June 24
- Submission to Province

Questions?

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