



LETHBRIDGE

COMMUNITY WELLBEING & SAFETY STRATEGY

Overview & Learnings

City of Lethbridge
Community Social Development

NOVEMBER 2019



TABLE OF CONTENTS

Issue	4
The Change Imperative	6
Lethbridge's Model & Opportunity	7
Ten Elements of the Lethbridge Model	8
1. Systems Mapping	9
2. Integrated Needs Assessment	10
3. Social Impact Audit	11
4. Community-Driven Wellbeing & Safety Strategy	12
5. Municipal Systems Planner	13
6. Community-Based Governance	14
7. Integrated Investment Framework	16
8. Systems Performance Management	18
9. Integrated Coordinated Access	19
10. Wellbeing Supports	20
Conclusion	22
References	23

Developed for City of Lethbridge by Turner Strategies and HelpSeeker



STATUS QUO IS NOT AN OPTION.

**WE ARE
COMPELLED TO
BE BOLD AND
STRATEGIC TO
LEAD THE WAY.**

WE HAVE THE RESOURCES AND KNOWLEDGE, AND WE ARE WELL ON OUR WAY TO HELP MAKE OUR COMMUNITIES GREAT FOR EVERYONE.

WE NEED TRANSFORMATIVE, SYSTEMS CHANGE.



ISSUE

The community of Lethbridge, and more broadly Alberta, is at a crossroads.

Social, safety and health issues are mounting and converging in ways that clearly demonstrate that on the one hand, the old way of doing business is not sustainable - on the other hand, there are innovative and established evidence-led solutions that must be scaled to support thriving families and communities.

Converging Factors affecting Lethbridge:



Addictions & Substance Use:

- » Busiest Supervised Consumption Site in Canada: Lethbridge's site averages 739 visits per day. October/November are on the rise again reaching an all time high. ¹
- » Highest Emergency Medical Services (EMS) response rate in the province. The rate of EMS responses (counts) to opioid related events were the highest in Alberta (491 / 100,000) in 2018. ²

Safety:

- » The Crime Severity Index increased 60.3% over the past 5 years (2014 - 98.96 vs 2018 - 158.68). ³
- » Theft increased by 97.5% in the past 5 years. ^{4,5}

Migration:

- » Lethbridge is a service hub driving migration to access support. ⁶
- » In part due to proximity to Blood Reserve 148, the largest in the country, Lethbridge saw a 40% increase in its Indigenous population in the last Census for members accessing education, health, and social services. ^{7,8}

Domestic Violence:

- » Domestic violence shelter use jumped by 32% in just one year (2017-2018). ⁹
- » The Lethbridge rate of police-reported violence against women incidents is 2.5 times that of the Alberta average. ¹⁰

Health & mortality:

- » Lethbridge mortality rates are 47% higher than the Alberta average. ¹¹ Much of this is driven by cardiovascular diseases exacerbated by lifestyle and risk factors.
- » The Blood Reserve reports that 51% of babies are born with prenatal substance exposure. ¹²

Homelessness:

- » The homeless count showed a 150% increase from 2016-18. ¹² A key driver has been migration from other nearby communities in Alberta to access services and housing.
- » Emergency shelter usage rates are high compared to other municipalities of the same size. ¹³



THE CHANGE IMPERATIVE

These issues are interrelated, yet our siloed and uncoordinated responses to them have created unnecessary inefficiencies, hampered progress, and undermined the hard work undertaken by our social service workers. Meanwhile we are spending millions of dollars as vulnerable people are bounced between expensive systems like police services, jails, hospitals, addiction recovery, and emergency shelters. These challenges bear an economic cost and quality of life impact for all of us.¹⁴

As the Mackinnon Report highlights, we need to act with urgency and courage with an eye for creative disruption of the status quo, if we are to achieve, “fundamental change, not incremental change...to transform the system into one which is more responsive to Albertans and meets the challenges and opportunities of the future.”¹⁵

Would there be enough resources and funding in our system to deal with challenges if we change how we do business? We have to....

In Lethbridge, we have mapped over



Our Social Impact Audit showed that over



Within the City of Lethbridge alone we had approximately



- all trying to achieve community wellbeing and safety.

We are spending tremendous time, effort, and money engaging stakeholders, creating layers of committees and subcommittees, each with their own strategy, and terms of reference. Although we try to communicate and collaborate, the current system inevitably creates natural barriers and limitations, due to the compartmentalisation of government, funding, and programming. Stakeholders are frustrated and confused with the current system; they see duplication and are tired of being engaged by different groups asking the same questions.

The fact that the tracking of outcomes and impact on the bulk of these funds is poor, non-existent, or at best lacking transparency poses a critical risk to our future in a time where social pressures are mounting and changing at breakneck speed.

LETHBRIDGE'S MODEL & OPPORTUNITY

The MacKinnon Report challenges us to “look beyond short-term quick fixes” p.4 - to dig deeper and explore innovative opportunities.

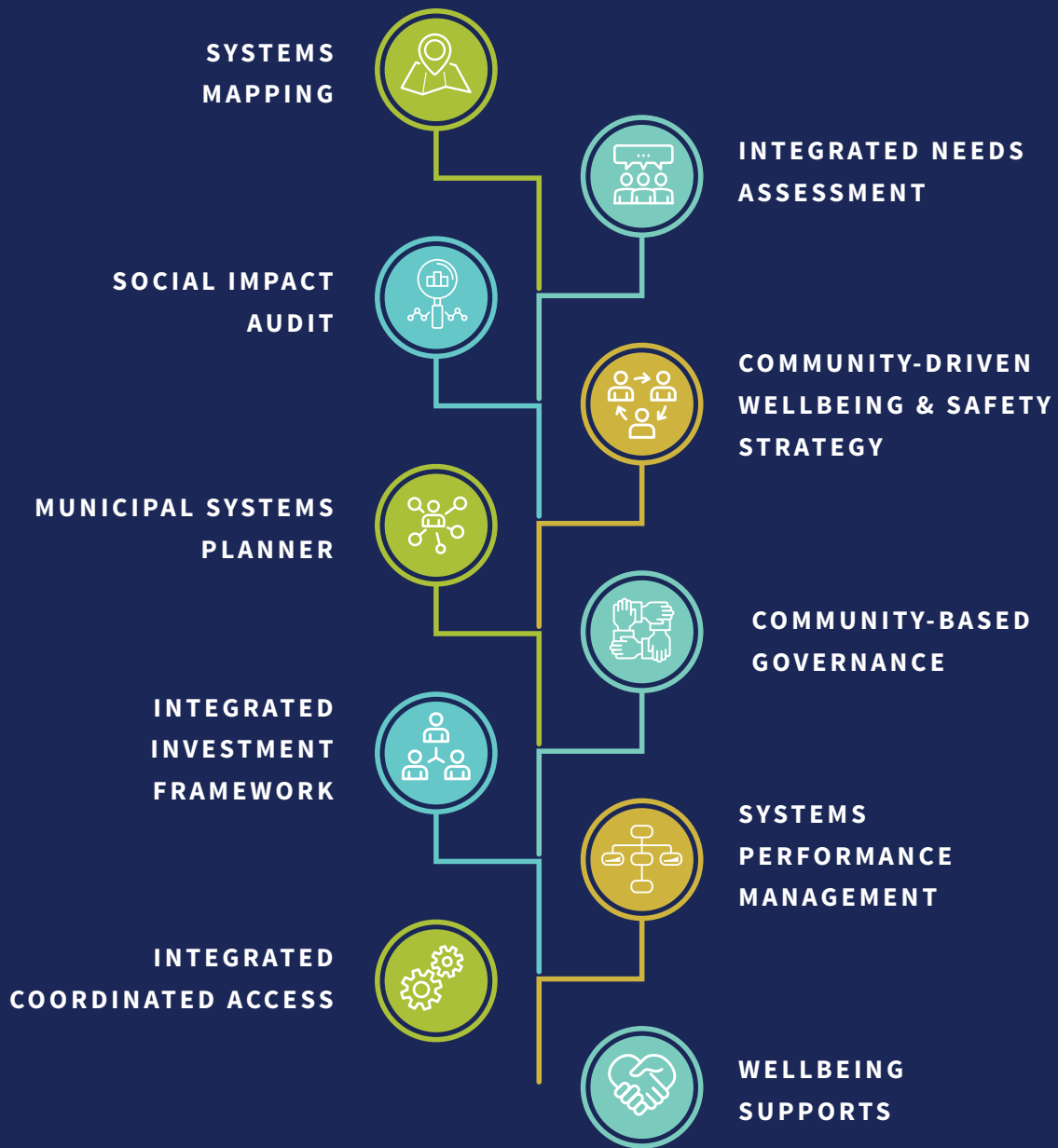
In April 2018, the City responded to community calls to leadership and took on a systems change effort by kickstarting the development of a Wellbeing and Safety Strategy to address these challenges in a comprehensive manner.

The City recognized however that it was only one of many key stakeholders needed to address interrelated issues. Other non-profit and private service providers, government and public system partners were required in a decision-making capacity to truly make a difference with tackling these social issues from a systems perspective.



This meant that a collaborative effort would be needed to develop and implement the new strategy with a focus on systems and policy change, rather than day-to-day crisis management. This included rolling out a slate of efforts to transform our approach, which is ongoing, yet already making an impact.

We are certain that through this approach Alberta can use resources more effectively: getting people back to work, keeping families together, and supporting our most vulnerable while maximizing efficiencies and impact are congruent, practical goals that we can support government to achieve.



TEN ELEMENTS OF THE LETHBRIDGE MODEL

The remainder of this report outlines our last 12 months of learning since we began this work to transform our approach to the current challenges. We are constantly learning and refining, but are seeing results and community support for this direction is resounding.



1. SYSTEMS MAPPING

Early on in the process, the community stakeholders realized some key information was missing that was essential to this work. As a community, we lacked the real-time information on what assets and resources were already available to build off; and we did not understand what demand there was for people needing these.

The City brought the key funders and service providers together to scope out this challenge. The group knew that without an accurate map of resources and how people interact with them, any investment and strategic planning decisions would be based on partial and inaccurate information.

WHAT IS IT?

Systems Mapping: comprehensive real-time inventory of community services with program-level occupancy/ capacity, service components, eligibility and prioritization criteria.

HelpSeeker: online platform used for systems mapping, systems navigation and information access.

Systems mapping is an essential step in rolling out a system planning approach to developing a community-wide initiative tackling wellbeing, safety, homelessness, or other complex issues. Systems mapping involves a series of activities that achieve a comprehensive view of a community's resources connected to the broader initiative being developed.

Systems mapping is about making sense of the local complexity in a methodical fashion, and having access to the information communities need in real-time to make better decisions at a policy, funding, and service-design level. In other words, to meaningfully transform systems, we need to have at minimum the most basic information about the services operating in a region:

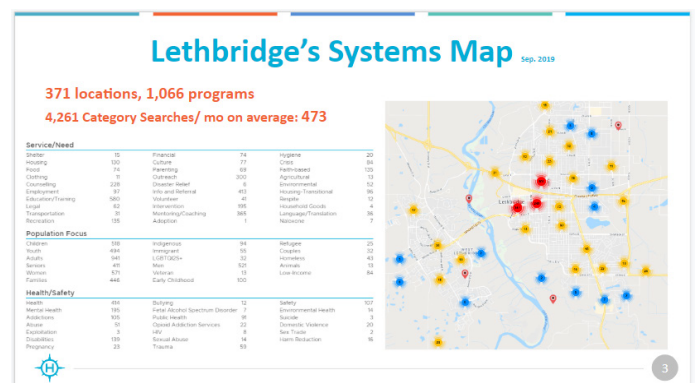
- » What services do they offer?
- » Who are they serving?
- » Who's funding them?
- » What capacity/occupancy they have?
- » What users say about them?
- » How are users accessing them?

HOW WE DID IT

To ensure a fulsome approach was implemented, the City and partner organizations (AHS, United Way, CMHA, Volunteer Lethridge, etc.) dedicated resources to fulsome Systems Mapping effort. This leveraged the HelpSeeker platform to inventory and analyze hundreds of services and benefits operating in Lethbridge.

From July to September 2018, HelpSeeker mapped 400 services; today, this number is at 1,500 and still growing. Many of these services were not known to the funders, and they had never had a real-time source of information on what local gaps and duplications were. This told them there is a much broader network of services than was known, to leverage for common goals.

Find out more: helpseeker.org





2. INTEGRATED NEEDS ASSESSMENT

From this initial effort, we knew that a fulsome analysis of the data available would be needed alongside comprehensive community engagement to discern our local priorities, gaps, and duplications. To this end, we worked to develop an Integrated Needs Assessment (INA) that looked at the key issues in our community from a holistic, yet in-depth perspective. This ensured no one issue or interest group controlled the agenda, and gave the community an evidence-based starting point to develop priorities.

WHAT IS IT?

Integrated Needs Assessment: a synthesis of data and community input used to determine its priorities, strategies and goals in an integrated manner rather than on an issue-by-issue basis to understand connections and feedback loops.

Detailed research examining current community trends, gaps, and strengths within the local social safety net is undertaken to provide context for understanding current social needs. A comprehensive INA includes thorough participation and engagement from community stakeholders in the form of focus groups, surveys, or interviews. Utilizing a systematic process, INA's assist with allocation of resources and evaluations of existing social strategies for various issues a community may have.

HOW WE DID IT

Significant community engagement ensure that over 2,000 citizens had their voice heard in this process" using diverse platforms including design labs, interviews, and online surveys. Using a combination of census variables, housing and homelessness data, Alberta Health Services statistics, and Service Provider and User interaction data from HelpSeeker, we were able to explore in depth the social and economic trends in Lethbridge. Community engagement in the form of Design/Solutions Labs ¹⁶ and an online survey added depth and context to the data. This helped systems leaders better understand real-time service duplication and gaps, user trends, feedback, demand, and sources of funding that exist in our community. With these analytics, we were able to develop recommendations to support an agile, data-driven approach to integrated systems planning for our community strategy.



Find out more: [**Lethbridge Community Wellbeing Needs Assessment Report**](#)



3. SOCIAL IMPACT AUDIT

Through the needs assessment process, we noted that a tremendous amount of activity was occurring in Lethbridge and millions of dollars were being invested in a myriad of programs, yet consultation participants noted they did not know where and how to get help when they needed it. This prompted us to go deeper and undertake a fulsome Social Impact Audit looking at the various financial sources coming into Lethbridge and how effective they were in supporting our community. We looked at all the funding sources coming into Lethbridge to do this including Children's Services, Justice, Alberta Health, AHS, etc. but also philanthropic dollars from United Way, Community Foundation and other donors.

WHAT IS IT?

Social Impact Audit: *Systematic approach to capture and analyze all funding sources at the service delivery level in a region, an assessment against Key Performance Indicators, and identification of overlap and gaps.*

A Social Impact Audit is the process by which programs and services are assessed in their effectiveness and efficiency through the analysis of the current investments and resources locally available to support individuals in need. A Social Impact Audit aims to help communities to analyse financial flows locally and identify service gaps, guide the implementation of innovative models of service delivery, and promote the coordination of resources available to individuals in.

HOW WE DID IT

Leveraging HelpSeeker's system map, Canadian Revenue Agency (CRA) data, funders' data, and the Integrated Needs Assessment, we developed:

- » A financial analysis of current social investments at the program-delivery (client) level to assess the best use of resources provincially to reinforce effective programs, and pinpoint underutilized or redundant programs.
- » A gap analysis with cross-referenced estimates of the programs and services available in the region dedicated to alleviate social issues, and real-time data on the demand for such services/programs to unveil population/needs with high demand but low supply of support.
- » A set of recommendations on better directions for best use of limited resources according to the community's needs.

Findings indicate in 2017, Lethbridge had

\$755 million in charity funding

coming into the social safety net.¹⁷ Most comes from GoA (80%) or other revenue (charitable giving, fundraising) (15%).

Find out more: [Lethbridge Social Impact Audit.](#)



4. COMMUNITY-DRIVEN WELLBEING & SAFETY STRATEGY

Once these research pieces were completed, we were ready to develop key priorities moving forward. The resulting Strategy was able to also connect the dots across more than 20 different strategies happening in our community, which were causing confusion and frustration as well. The Strategy sets out the framework for how all of us will work together regardless of sector, to achieve common priorities. This enables us to move forward together rather than of a department-by-department or organization-by-organization basis.

WHAT IS IT?

Wellbeing & Safety Strategy: *integrated frameworks that lays out common community priorities and advances funding and service blending to address vulnerable populations using evidence-based practices and strategies. This should identify shared Key Performance Indicators, procurement, and service standards consistency regardless of departments, funding streams, or ministries, etc. to achieve objectives.*

Lethbridge’s Community Wellbeing and Safety Strategy lays the framework for programs and services that support the health and wellbeing of all residents in our community.



HOW WE DID IT

It became very clear as the community engagement progressed that an intentional collective effort was needed across stakeholders working on social issues. Stakeholders strongly supported an effort to pull together the diverse efforts underway and ensure maximum impact. There was a significant alignment from the research conducted and stakeholder consultations for the development of a fulsome Community Wellbeing & Safety Strategy that would address high level priorities and help move community efforts in the same direction with clear accountabilities and timelines.

Find out more: [Lethbridge Community Wellbeing Strategic Plan](#)



5. MUNICIPAL SYSTEMS PLANNER

WHAT IS IT?

Systems Planner: acts as the backbone support to community efforts. It is a neutral, local organization that drives integration and coordination efforts amongst diverse stakeholders with agility and nimbleness to meet objectives. It has accountability for funding allocations, performance management, strategy development and implementation, in collaboration with service providers, other governments, and those with living/lived experience to maximize impact and reduce inefficiencies.

In Lethbridge, the City acts as the System Planner Organization and takes on day-to-day system operations and strategy work advancing the Wellbeing and Safety Plan. It aims to act swiftly in its strategic decision-making with data and community input to drive the decisions, while convening partners for collective action. In the context of Wellbeing and Safety planning, the ability to apply funds directly to develop and implement interventions, and make real-time decisions provides valuable advantage to the System Planner approach.

HOW WE DID IT

Through the process of mobilizing stakeholders to participate in CWSS development, it became apparent that the City's role is to act as convenor and support the coordination of diverse efforts to create and implement the Strategy. City Council responded to community recommendations by charging administration to act as the backbone support in partnership with key stakeholders.

Diverse stakeholder feedback was clear: the City needs to step up and take on the backbone coordination work on implementing the CWSS. To this end, the City's internal structure had to be reviewed and fully re-designed and restructured to support the needs of the community as well. Positions were re-written and skill-sets changed drastically from our traditional department to one focused on innovation, systems transformation, and data-driven decision-making.

This means the City is driving systems planning and integration, rather than delivering services directly. This means we convene and enable frontline services to do their best work, while leveraging the municipalities' role as being closest to communities, with elected official mandates and governance linked to all levels of government. This builds on an already existing infrastructure (legal, communications, capital, etc.) as a neutral convening body able to drive change.

THE CITY AS THE SYSTEMS PLANNER ORGANIZATION WILL:





6. COMMUNITY-BASED GOVERNANCE

A fully integrated approach should have mechanisms in place that bring key public and community decision makers together in an ongoing process to ensure efforts are effective, aligned, and mutually-reinforced towards shared objectives. This, in turn, aligns with efforts across frontline service delivery in respective organizations.

Communities are required to build an appropriate governance operating model to exercise proper leadership for the planning, implementation and ongoing management of any community wide strategy.

Within the City of Lethbridge alone we had approximately 15 initiatives, over 30 committees and 400+ committee members working on community wellbeing and safety. The new table enables us to disband and align these efforts with the CWSS to reduce unnecessary administrative barriers and duplication.

WHAT IS IT?

Community-based Governance: refers to a community ownership and co-creation of the mechanisms used to deliver oversight for outcomes monitoring and performance management, the coordination of diverse funding streams, and the development of local strategies to operationalize provincial direction. This will encourage leveraging of coordinated funding and efforts across the community, rather than solely on what the government directly funds.

In recognition of the need for cross-systems transformational change and a proactive approach, the community stakeholders recommended that a community-based governance model be developed with the City acting as the Systems Planner Organization to support CWSS implementation and:

- » Review and monitor trends at the systems levels to adjust strategic approach
- » Support streamlined communications to the community & key stakeholders
- » Advocacy/public relations to advance Lethbridge needs relevant to CWSS
- » Support enhanced funding/resource coordination to advance CWSS priorities

HOW WE DID IT

The determination of the governance model involved consultations and co-development with leaders from diverse stakeholder groups including philanthropy, education, health, social services, and Indigenous (on/off-reserve) willing to move the CWSS forward. It involved the establishment of a working group composed of various stakeholders focused on identifying the governance model that would work best for the community.

The City and local leaders have catalyzed the formation of a Community Wellbeing Integration Table as the new mechanism to advance systems planning and integration on wellbeing and safety advancing the CWSS. Membership will be made up of decision-makers critical to wellbeing and safety in Lethbridge from a variety of public system and community-based organizations: justice, health/mental health, children’s services, income support, Indigenous services, police, and the homeless-serving system. These representatives are leaders in system-level strategic roles engaged in areas relevant to community wellbeing and safety.



THE CWSS WILL PROVIDE THE BLUEPRINT TO ACHIEVE THIS COLLECTIVE
WILL IN PRACTICE. IT WILL BE DEVELOPED AND IMPLEMENTED BY
COMMUNITY, FOR COMMUNITY: TRULY, A BOAT IN WHICH EVERYONE
HOLDS AN OAR, AND PULLS IN THE SAME DIRECTION:

A LETHBRIDGE

WHERE

EVERYONE

BELONGS AND

THRIVES.



7. INTEGRATED INVESTMENT FRAMEWORK

A recent estimate put the Alberta social safety net at close to 9,000 organizations and over 40,000 programs. Data show Alberta charities alone had revenues of over \$35 billion in 2017, 72% of which came from various ministries of the Government of Alberta. Working on systems planning and integration, ways in which services are funded and delivered in the province lack transparency, consistency, and efficiency.

The fact that the tracking of outcomes and impact on the bulk of these funds is poor, non-existent, or at best lacking transparency poses a critical risk to Alberta’s future in a time where social pressures are mounting and changing at breakneck speed. Funds must be leveraged across other government levels, nonprofits, private sector, and voluntary sector to truly maximize social impact.

A critical look at the thousands of services at play is required to ask the hard questions: Who is this serving? To what end? Can we do it differently for better impact? Who is the ‘right’ investor in this area besides government? This means we need to ‘follow the money AND the impact’ to discern what needs to be scaled up or down, and what’s missing that should be introduced within current allocations.

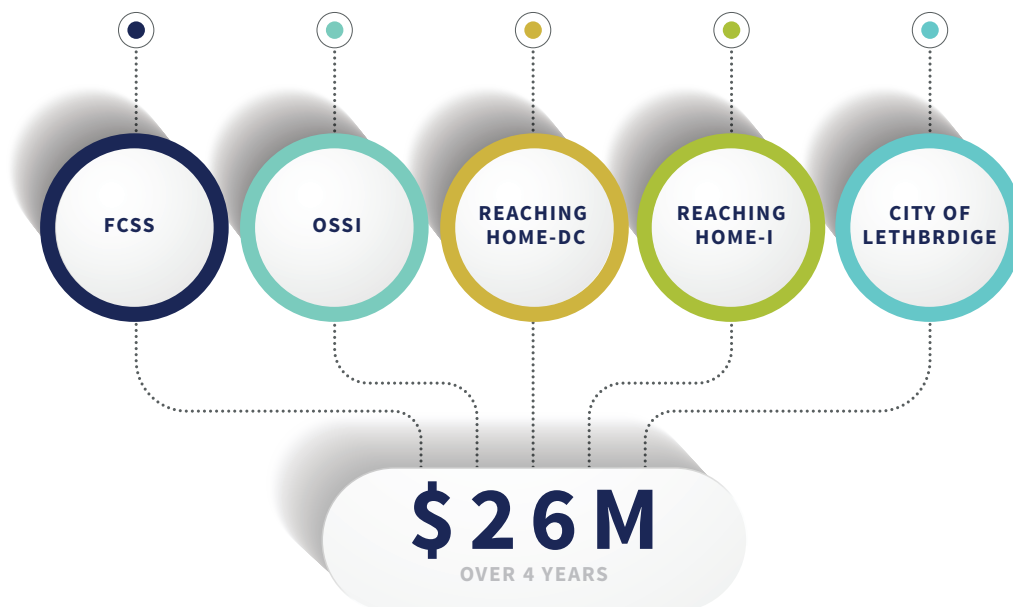
Funding already exists – what’s already in place should be leveraged, and re-allocated based on robust logic, evidence, and delivering on shared outcomes.

WHAT IS IT?

Integrated Investment Framework: an evidence-based approach to determining allocations to any third-party funded or government-delivered interventions, programs, services, or benefits. All investment should flow through a consistent procurement and performance management process overseen by the local Systems Planning Organization with strategic governance provided by the Community Systems Integration Table to ensure allocations advance common priorities and avoid duplications. Philanthropic and other government funders should be encouraged to co-invest/stack through the same mechanism to maximize impact.

Our process includes aligning all the funding coming into our community - \$700M+. We made the decision to start with the funds the City controls as the first step towards this and are working with other funders to integrate further.

FUNDING SOURCE



TARGETS

REACH 20,000 PEOPLE

THROUGH PRIMARY PREVENTION EFFORTS TO MITIGATE RISK AND VULNERABILITY,
WHILE ENHANCING KNOWLEDGE ABOUT COMMUNITY RESOURCES



SUPPORT

3,000

VULNERABLE PEOPLE

Target secondary prevention interventions to annually support 3,000 vulnerable people improve wellbeing and safety outcomes.



SUPPORT

350

PEOPLE PER YEAR

to obtain and maintain housing across funded programs

END CHRONIC HOMELESSNESS BY 2022

LIMIT RETURNS TO HOMELESSNESS FROM HOUSING INTERVENTIONS

to less than 15% across funded programs by 2025.



ENHANCE SERVICE QUALITY AND IMPACT THROUGH INTEGRATED COORDINATED ACCESS, PERFORMANCE MANAGEMENT, LIVING/LIVED EXPERIENCE AND FRONTLINE ENGAGEMENT

HOW WE DID IT

Building on the Social Impact Audit, the City worked to go through a line-by-line analysis of various City-controlled investments in the community. Our belief is that by cleaning our own house first, we can lead by example and prompt similar efforts across other funding streams. During this review, we were able to identify over 30% of investments that could be better leveraged to meet community needs. In a portfolio of just under \$10M/ year, this is significant.

We also saw inconsistency in our approach to performance management: we found that we could do a much better job for our community by investing in an integrated manner. To this end, with Council's decision, we gave notice to all funded programs and put services out to tender to align to the new Strategy and an integrated investment framework that ensures consistent KPIs, quality standards, and performance management moving forward. As a result, an open and competitive bidding process is currently underway across our OSSI, FCSS, Municipal Block Funding, City of Lethbridge, and federal Reaching Home (Designated, and Indigenous) funding streams.

Find out more: [Link to RFSQ](#)



8. SYSTEMS PERFORMANCE MANAGEMENT

It is essential that our work moving forward is grounded in research and data and will be monitored through rigorous performance management, rather than relying on anecdotes and opinion. We should be scaling up effective models of accreditation to standardize evidence-based program models and interventions eligible for access to public funds based on efficacy, user experience, and continuous adherence to performance management and quality standards.

WHAT IS IT?

Systems Performance Management: *mechanism of oversight for outcomes monitoring and performance management, the coordination of diverse funding streams, and service quality standards across systems and funding streams monitored at systems levels. Includes systems-level Key Performance Indicators towards which diverse stakeholder groups work.*

This will require that our community develop an integrated approach to funding interventions to support vulnerable populations, and ensure these are monitored using consistent KPIs and targets across funding streams. Without this approach, it is difficult to discern how funded interventions reinforce common goals. To this end, agreed-upon indicators and targets at the system level and specific to program type are needed (KPIs).

HOW WE DID IT

To develop common KPIs, we looked at promising practices and current performance trends in our investments. We applied financial and systems modelling to understand stock and flow of vulnerable population dynamics and needs to guide intervention supply and flow-through to ensure appropriate investments to needs in a proactive and data-driven manner.

Moving forward, we recognize the need for an efficient information management system to implement performance management processes and systems planning across sectors and funding streams. This shared information system aligns data collection, reporting, coordinated intake, assessment, referrals and service coordination in Lethbridge. Regardless of which software system is used, implementing a common tool will create a more coordinated and effective service delivery system and will act as the backbone of the CWSS.

Find out more: [Link to KPIs](#)



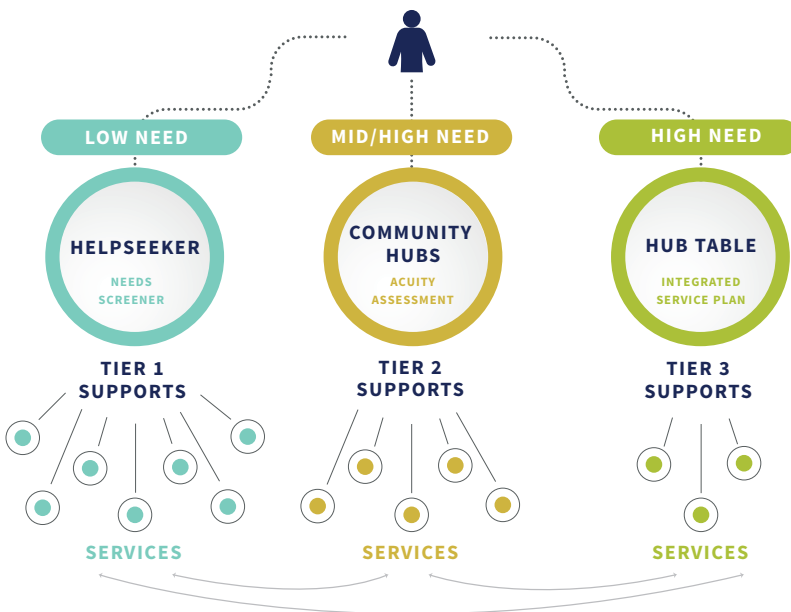


9. INTEGRATED COORDINATED ACCESS

As we saw more and more services enlist on HelpSeeker, we recognized the need for a consistent and transparent process to support people getting access to the right help was needed. In plain terms, Integrated Coordinated Access refers to a process that ties together over 1,500 independent programs, organizations, and services in Lethbridge into a coordinated system to serve us all better and more efficiently. This means that we work with the person to right-match and right-size supports to ensure resilience is built for sustainable wellbeing.

This means that we all understand the steps we need to take to find the right help, no matter our challenge. You might be a teacher helping a student with mental health challenges, a nurse helping a patient experiencing homelessness, or you're a parent struggling with the stress of juggling daily family life and career. Or you may be wondering how you can get help because of food insecurity, domestic violence, addictions, or other challenges.

Where do you go for help? What's the right help in this situation? This initiative aims to alleviate these barriers.



TIER 1 SERVICES

Early childhood parenting, Food centre, Recreation program, Mental health prevention

TIER 2 SERVICES

Social housing, Addiction outpatient services, Counselling supports, Housing & Supports programs

TIER 3 SERVICES

Intensive case management, Permanent supportive housing, Specialized addiction treatment

WHAT IS IT?

Integrated Coordinated Access: a process by which those looking for support with social, health, or other needs are triaged to appropriate resources. The vision of Integrated Coordinated Access is to develop a standardized process individuals in need and service providers in a community or region can follow to improve service delivery and coordination of resources for social supports. This goes well beyond homelessness or housing resources. Our goal is to integrate and coordinate over 1,500 programs in our community dealing with a wide range of issues. Some are delivered by non-profits, others by government, the faith or voluntary sector as well we private operators. We need to connect the dots and align everyone to fully leverage our community's assets and will.

In the case of high systems users, the City facilitates the convening of local stakeholders (funders, service providers, coalitions, government departments, etc.) to develop a coordination table for service plan and intervene with 100 of our city highest systems users to tackle our most complex clients and get them on the recovery track.

HOW WE DID IT

Through the community engagement process, we heard over and over again that Lethbridge needed a means that no matter where an individual looking for help goes, they are more likely to get the same answers or advice to get them to the right services and supports as quickly and easily as possible.

We proposed a phased approach to phase in this model and expand over time to include diverse service providers within the community: government, nonprofit, voluntary, and private sectors. We will start with City-funded programs, and expand across all 1,500 with community support over the next 3 years.

Find out more: [Lethbridge ICA Guidelines](#)



10. WELLBEING SUPPORTS

The research evidence is clear: holistic, person-centred interventions are essential to achieve sustainable outcomes. This applies to the issues of homelessness, addictions, mental illness, child abuse, etc., by building and delivering services from the person out. Prioritizing their strengths and input is more effective and efficient in the long-run; however, this means that we have to challenge the tunnel-vision on specific populations and issues that end up creating barriers and silos. Longterm, this will save money and get us all a better outcome: a safe and well individual.

For instance, we know that a vulnerable person does not exist in a silo: they have families and friends impacted and impacting them, yet we often focus interventions only on the presenting 'client'. We also know that everyone has assets and strengths, yet we tend to assume only deficits and needs in delivery. We also know people are dynamic and they seldom have only one issue or need they should be supported with, yet programs tend to be siloed by disciplinary, ministerial, and have funding boundaries to name a few.

This is why we are moving forward with investments in wellbeing models that take this view of people, families, and communities. This means interventions are evidence-based and address wellbeing in an integrated manner, rather than one issue at a time.

WHAT IS IT?

Wellbeing: involves various interrelated domains impacting individual, family, and community wellbeing including basic needs like housing and income. These domains are impacted by relationships, community, and societal contexts.



Wellbeing is the key concept that guides the development of our interventions. To support a person-centred approach, interventions that address individual wellbeing across key dimensions of their lives are better able to deliver sustainable results- when one area suffers, others are affected and vice-versa.

HOW WE'RE DOING IT

This model of supporting people means that we are not solely relying on government or funded programs to achieve wellbeing. It also means we support people with what works, not what we are guessing might work. Research and evidence needs to back up the response. The new Integrated Request for Supplier Qualifications (RFSQ) calls for interventions that hit this mark across populations and levels of need.

We will be looking to invest in services that are effective and support individual and community wellbeing backed by research, including brain science, as well as:

- » **Home visitation programs and Healthy Start** initiatives to foster safe environments that support nurturing and stable relationships for children and families to enhance parenting skills training and social support.
- » **Trauma-informed interventions** for those exposed to trauma to prevent or treat traumatic stress symptoms include cognitive behaviour therapy, trauma-focused cognitive behavioural therapy, and child-parent psychotherapy.
- » **Mental health and addiction treatment and recovery services** to support chronic disease management using psychological and social interventions to address underlying root causes.
- » **Targeted skill-building and education** to address lifestyle risk factors among vulnerable people such as smoking, poor nutrition, and poor coping strategies to prevent the development of chronic disease and mental health problems.
- » **Housing Plus** interventions focused on homeless complex needs clients that combine medical, mental health, addictions and housing supports using a trauma-informed lens.

This requires better visibility of the various interventions involved with vulnerable populations. The ability of service providers, multi-disciplinary teams, police officers, and health professionals to respond in the most appropriate and beneficial manner to priority individuals requires appropriate information sharing around shared outcomes. This means that we will need to resolve this lack of integration if we are to move forward and enhance cost savings, efficiencies, and coordinated service delivery across systems rather than simply within silos.

CONCLUSION

We believe we can do better to ensure this wealth of resources is put to effective use for taxpayers and donors. While sporadic attempts to collaborate across systems have been made in the past, a provincially mandated process to support this work has not been established. This is in large part because of the red tape involved in disparate funding streams, lack of real-time data, and administratively overburdened frontline staff.

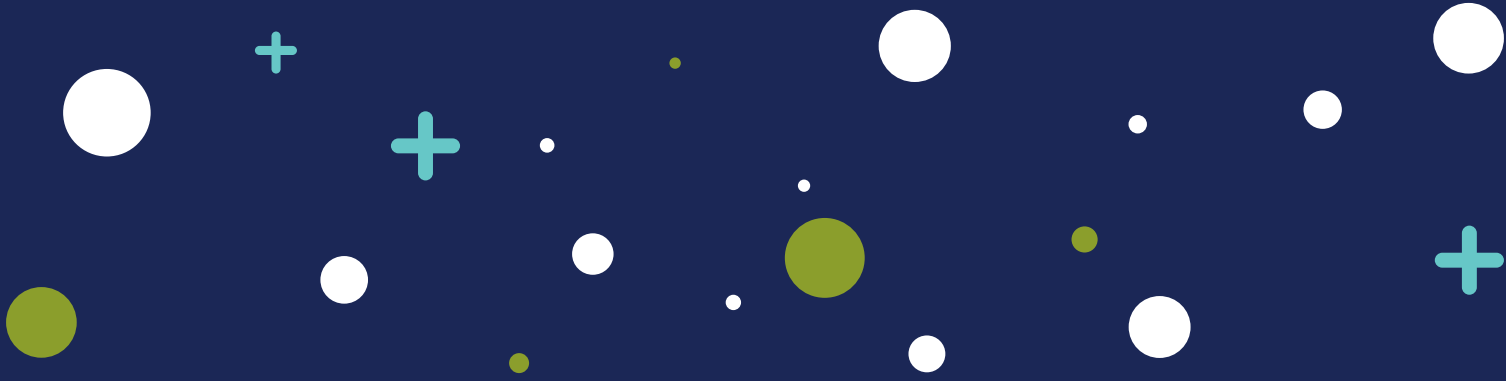
We have built a path forward, created for and by community, and supported by government, to catalyze action from multiple sectors to work collaboratively to meet, with the purpose of disbanding silos and identifying opportunities for systematic service integration to maximize impact.



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