Strategy 1- Ensure the service system and planning tables/committees are coordinated and operating efficiently and effectively.

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	Actions	Timelines	Notes	Output Indicators	Partners
1.1.1	Through the Gateway Hub ESC,	1 year		-Alignment of goals,	Service Network
	system leaders adopt a	(Urgent)		purpose, resources and	
	common purpose/vision for			outcomes	
	CSWB in NB.			-Improved system	
				coordination	
1.1.2	Conduct review of existing	1 year		-ID of gaps / duplication	
	planning tables/committees:	(Medium)		-ID of coordinated	
	-Membership			opportunities	
	-Purpose/mandate				
	-Outcomes				
1.1.3	Explore cont'd use of video	1 year		-Video Conferencing	
	conferencing and virtual			options available	
	connection for collaboration				
	beyond pandemic.				

Strategy 2 -. Create service directories that meet the needs of all citizens and improves service system navigation.

	Actions	Timelines	Notes	Output Indicators	Partners
1.2.1	Determine lead agency to ensure various service directories updated and consistent	1 year		Identify lead agency	Service Network
1.2.2	Enhance and regularly update the Nipissing Service Collaborative website (SNG)	1 year		Up to date online service directory	Brent Stephanie Allan Rhea Wendy Smith OntHealth
1.2.3	Develop and maintain a hard copy service directory	1 year		Up to date hardcopy directory	
1.2.4	Explore creation of a mobile app service directory	1-3 years		Existing mobile app	
1.2.5	Explore the creation of a telephone service directory	1-3 years	*Already exists,United Way's 211		
1.2.6	Explore creation of a kiosk-style directory service to provide in person service navigation at various locations in the city. (malls)	1-3 years (Low)		Public Kiosks with electronic interface	
1.2.7	Promote all service directories in the city	1 year		Service Network promoting efforts	

Strategy 3 – Increase Community education and awareness around CSWB.

	Strategy 5 moreuse community education and arraneness around corres.							
	Actions	Timelines	Notes	Output Indicators	Partners			
1.3.1	CSWB communication strategy,	1 year		Communications	City NB			
	including reducing stigma,	(Important)		Strategy	CSWB Coordinator			
	misinformation, and include the			Educational Campaign	NB Comms Officer			
	following actions below:			Media Coverage				
1.3.2	A. Increase community	1 year		Education Sessions				
	awareness of services available			Media Coverage				
	and link public to service							
	directories							
1.3.3	B. Promote good news stories of	1 year		Sentiment score/rank				
	local network successes			Positive Media				
				Coverage				
1.3.4	C. Provide public reporting on	1 year		The development of	Analysts,			
	CSWB Plan progress through			Statistical dashboards	statisticians and IT			
	report cards and interactive			with CSWB indicators	staff from City			
	dash-boarding on CSWB website			and other relevant	NB/DNSSAB			
				information and data.				

Strategy 4- Enhance service and program delivery throughout service network

	Strategy 4- Elimance service and program delivery throughout service network							
	Actions	Timelines	Notes	Output Indicators	Partners			
1.4.1	Explore opportunities for service centralization and shared service delivery following a Hub or wrap	1-3 years		Single point access Partnerships Funding source	Implementation Committee			
	around model. (Could include a centralized intake and common referral process)				Service Network Nurture North			
1.4.2	Building on planning work to date, systematically review all programs, services, and supports offered in the community with a view of	1-3 years		Similar programs are aligned and coordinated,gaps in services filled.	CMHA			
4.4.2	improving service delivery for clients and citizens.	4.2		Detechnic	HANDS			
1.4.3	Enable or expand existing data sharing agreements between network organizations so information, data, and knowledge can be shared and acted upon collectively.	1-3 years		Data sharing agreements are in place and CSWB data is being collected across the network, housed in central repository for analysis to inform planning, service delivery, and reporting.	Others			
1.4.4	With the above agreements in place, share 'by name' lists between organizations so the proper interventions and supports/services can be put in place.	1-3 years		Vulnerable and hard to serve populations are being served effectively through coordinated and collective planning and service delivery.				

Strategy 1 – Enhance addiction prevention and treatment programs, supports, and services, ensuring they are culturally appropriate and inclusive

	Actions	Timeline	Notes	Outcomes	Partners
1.2.1	Implement longer term addiction	1 year		-Decreased wait times for	Health Sector
	programs			programs, supports, and	
1.2.2	Expand the capacity of addiction	1 year		services	Addictions
	services including the recruitment			-Decreased drug	
	and training of staff.			overdose mortality	Mental Health
2.2.3	Where addictions and mental	1 year		Decreased incidence	
	health present together, ensure			response related to	Others
	coordinated case management			addictions and substance	
	between agencies.			use.	
1.2.4	Link individuals that have been	1 year			
	discharged from addiction				
	treatment programs to ongoing				
	supports.				

Strategy Notes:			

Strategy 2 – Implement additional harm reduction programs

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	Actions	Timeline	Notes	Outcomes	Partners
2.2.1	Align addictions harm reduction	1 year		-decreased drug OD &	Health
	efforts with the <i>research</i> being			mortality.	Addictions
	completed.			-Decreased incidence	NBPS Health Unit
2.2.2	Consider implementing harm	1 year		response related to	NB Police
	reduction recommendations			addictions/substance use.	OPP
	outlined in the <i>consultant's</i> future				Others
	report based on the research and				
	work currently being undertaken.				
2.2.3	Explore the implementation of a	1-3 years			
	safer opioid supply program.				

Strategy 3 – Build on and improve existing needle syringe programs

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	Action	Timeline	Notes	Outcomes	Partners
2.3.1	Determine a lead agency(s) for	1 year		-reduced visibility of	Health
	the needle syringe program			needles	Addictions
2.3.2	Increase the number of needle	1 year		-Increased public sense	NBPSDHU
	drop boxes throughout city			of safety *	Others
2.3.3	Provide outreach services for	1 year		-decreased incidence	
	needle syringe pick up			response to related to	
2.3.4	Offer education sessions in the	1 year		addictions and substance	
	community surrounding the			use. *(Not a realistic	
	proper disposal of			outcome for this	
	syringes/needles			strategy)	

Strategy 4 – Create a nurse street outreach program

	Action	Timeline	Notes	Outcomes	Partners
2.4.1	Explore program details	1 year		-Increased sense of	
	surrounding nursing street			physical and mental	
	outreach with view of			health	
	implementation.			-decreased drug	
2.4.2	Establish nursing street outreach	1 year		overdose and mortality.	
	program documentation and			-decreased incidence	
	secure resources			response related to	
2.4.3	Implement a nursing street	1 year		addictions and substance	
	outreach program that could			use *(should be linked	
	include <mark>wellness checks</mark> . Street			more so to over-all	
	nurses will have naloxone and			health of individuals on	
	linked to needle syringe program			the street)	
2.4.4	Offer street health clinics	1 year			

Strategy 1 – Discover and implement a community approach to successfully house vulnerable individuals with a focus on cultural appropriateness and inclusivity.

	Actions	Timelines	Notes	Output Indicators	Partners
3.1.1	Review various housing approaches (incl. Housing1st) to	1 year	*will now form part of Built For Zero Homelessness project with DNSSAB	Decrease homelessness	Housing and homeless sector
	determine best approach. Including <u>identifying existing</u>			Improve access to housing for homeless	Support/Outreach
	housing stock that could be dedicated for the selected			Increase linkages to	providers
	approach.			supports and services	Housing Providers
3.1.2	Establish program documentation and secure resources	1 year		required by the homeless population	(non-profit and private landlords)
3.1.3	Implement a pilot program	1 year			Others
3.1.4	Implement a permanent program	1-3 years			

Strategy 2 –Increase the supply of transitional and supportive housing units to meet demand

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	Actions	Timelines	Notes	Output Indicators	Partners			
3.2.1	Conduct a needs assessment to	1 year		Decreased homelessness	-Housing/Homeless			
	determine the amount of				Sector			
	transitional and supportive			Improved access to	-City NB			
	housing units needed.			housing for homeless	-DNSSAB			
3.2.2	Monitor and evaluate Northern	1 year		population	-IFC			
	Pines, Suswin, NPON				-NPON			
3.2.3	Explore innovative opportunities	1 year		Increased linkages to	-Others			
	and creative partnerships to			supports/services				
	support the development of			required by homeless				
	additional Transitional and			population				
	supportive housing. (as needed)							

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Strategy 3 –Increase the supply of affordable housing units to meet the demand.

	Actions	Timelines	Notes	Output Indicators	Partners
3.3.1	Conduct a needs assessment to	1 year			
	determine size and types of				
	housing needs.				
3.3.2	Increase rental subsidies to	1-3 years			
	enhance affordability in the				
	private market.				
3.3.3	Explore innovative funding	1 year			
	opportunities and creative				
	partnerships to support the				
	development of additional				
	affordable housing units (as				
	needed				

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Strategy 4 –Expand and coordinate outreach programs

	Charley : Expanse and coordinate can each programs						
	Actions	Timelines	Notes	Output Indicators	Partners		
3.4.1	Review current outreach	1 year		Decreased homelessness	Housing/Homeless		
	programs				Sector		
3.4.2	Explore opportunities to further	1 year		Improved access for			
	increase outreach services to			housing (homeless)	Outreach Services		
	meet identified gaps						
3.4.3	Coordinate day programming	1 year		Increased linkages to	Others		
	for homeless and low income			supports and services			
	individuals and families.			required by homeless			
				population.			

NORTH BAY COMMUNITY SAFETY AND WELL BEING PLAN PRIORITY 4 MENTAL HEALTH

Strategy 1 – Enhance access to mental health programs, supports, and services and ensure these re culturally appropriate and inclusive

	Actions	Timelines	Notes	Output Indicators	Partners			
4.1.1	Expand the capacity of mental health services for adults including the recruitment and training of	1 year		Decreased wait times for Mental Health	Health Mental Health			
4.1.2	staff. Expand the capacity of mental health services for children including the recruitment and training of staff.	1 year		Decreased suicide rate Decreased incidence response related to MH	Addictions Other			
4.1.3	Where mental health and addictions present together, ensure coordinated case management between service providers.	1 year		Increased client/community satisfaction of mental health services				
4.1.4	Link individuals that have been discharged from mental health programs to ongoing support programs.	1 year						
4.1.5	Ensure the larger public establishments are welcoming and inviting to those with mental illness. (reduce stigma)	1 year						

NORTH BAY COMMUNITY SAFETY AND WELL BEING PLAN PRIORITY 4 MENTAL HEALTH

Strategy 2 –Increase psychiatry and primary service care

	Actions	Timelines	Notes	Output Indicators	Partners
4.2.1	Conduct a review of the waitlist demand for psychiatry care and primary care (ie. Family doctors and nurse practitioners)	1 year		Increased sense of physical and mental health	Health Mental Health
4.2.2	Explore opportunities to increase capacity for psychiatric care. This may include the recruitment of additional psychiatrists.	1-3yrs year		Decreased suicide rate Decreased incidence response related to mental health	Others
4.2.3	Explore opportunities to increase capacity for primary care. This may include the recruitment of additional doctors and/or nurse practitioners	1-3 years			

Strategy Notes:		

NORTH BAY COMMUNITY SAFETY AND WELL BEING PLAN **PRIORITY 4- MENTAL HEALTH** Strategy 3 –Expand the Mobile Crisis Service Actions Timelines **Output Indicators Partners** Notes Increase the hours of operation 4.3.1 Decreased suicide rates **NBPS** 1 year to provide services 24hrs/day, 7 days week. *Decreased Incidence **NBRHC** 4.3.2 Expand the number of mobile 1-3 years response related to crisis Service teams based on Mental Health Health Sector peak demand hours. Others...

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