City of Kelowna
Regular Council Meeting
AGENDA

Monday, October 21, 2019
9:00 am
Knox Mountain Meeting Room (#4A)
City Hall, 1435 Water Street

1. Call to Order

2. Confirmation of Minutes

   Regular AM Meeting - October 7, 2019

3. Reports

   3.1 IHA Presentation

4. Resolution Closing the Meeting to the Public

   THAT this meeting be closed to the public pursuant to Section 90(1) (e) and (f)
   of the Community Charter for Council to deal with matters relating to the
   following:
   
   - Acquisition, Disposition or Expropriation of Land or Improvements
   - Law Enforcement

5. Adjourn to Closed Session

6. Reconvene to Open Session

7. Reports

   7.1 City Clerk, Verbal Update. re: Council Meeting with West Kelowna

   7.2 City Clerk, Verbal Report, re: 2020 Council Meeting Schedule

       To review the draft 2020 Council Meeting Schedule.
8. Issues Arising from Correspondence & Community Concerns

8.1 Mayor Basran, re: Issues Arising from Correspondence

9. Termination
City of Kelowna

Regular Council Meeting

Minutes

Date: Monday, October 7, 2019
Location: Knox Mountain Meeting Room (#4A)
City Hall, 1435 Water Street

Members Present
Mayor Colin Basran, Councillors Maxine DeHart, Ryan Donn, Brad Sieben,
Mohini Singh, Luke Stack and Loyal Wooldridge

Members Absent
Councillors Gail Given and Charlie Hodge

Staff Present
City Manager, Doug Gilchrist; City Clerk, Stephen Fleming, Deputy City
Manager, Joe Ceron; Divisional Director, Infrastructure, Alan
Newcombe; Utility Services Manager, Kevin Van Ylief; Water Operations
Manager, Andy Weremy; Utility Planning Manager, Rod MacLean;
Divisional Director, Active Living & Culture, Jim Gabriel; Community &
Neighbourhood Services Manager, Mariko Siggers; Recreation Technician,
Melina Moran; Communications Advisor, Lisa Ruether; Legislative
Coordinator (Confidential), Arlene McClelland

(* Denotes partial attendance)

1. Call to Order

Mayor Basran called the meeting to order at 9:03 a.m.

2. Confirmation of Minutes

Moved By Councillor Wooldridge/Seconded By Councillor Donn

R1010/19/10/07 THAT the Minutes of the Regular AM Meeting of September 30, 2019 be
confirmed as circulated.

Carried

3. Reports

3.1 Principles and Priorities for Water Supply in Kelowna

Staff:
- Displayed a PowerPoint Presentation
- Provided rationale for the development of a Water Supply Policy framework.
- Spoke to the principles of the proposed policy; setting priorities, directions and limitations.
- Identified and spoke to each of the six policy statements.
- Responded to questions from Council.
Council
- Provided individual comments.

Moved By Councillor Singh/Seconded By Councillor Donn

**R1011/19/10/07** THAT Council direct staff to proceed with developing a policy regarding water supply for customers of the Kelowna Water Utility consistent with the recommendations outlined in this report,

AND THAT staff be directed to bring forward a draft Policy on Water Supply for customers of the Kelowna water utility at a future regular PM Meeting of Council.

**Carried**

3.2 Annual Civic & Community Award Program Updates

Staff:
- Displayed a PowerPoint Presentation.
- Provided background information on the annual awards program acknowledging 17 awards are presented with up to 51 finalists.
- Identified and spoke to the proposed category updates to the program and provided rational for those amendments.
- Spoke to the development of a Council Policy and outlining the policy framework.
- Responded to questions from Council.

Council
- Provided individual comments.

Moved By Councillor Donn/Seconded By Councillor Singh

**R1012/19/10/07** THAT Council receives, for information, the report from Active Living & Culture, dated October 7th, 2019, that outlines the Annual Civic & Community Award program updates;

AND THAT Council endorse in principal changes to the Civic & Community Award categories as outlined in the report dated October 7th, 2019;

AND THAT Council directs staff to prepare a council policy which outlines the core structure and governance of the Civic & Community Awards and report back for approval.

**Carried**

The Meeting recessed at 10:23 a.m.

The Meeting reconvened at 10:37 a.m.

4. Resolution Closing the Meeting to the Public

Moved By Councillor Singh/Seconded By Councillor Stack

**R1013/19/10/07** THAT this meeting be closed to the public pursuant to Section 90(1) (e) (f) and (j) of the Community Charter for Council to deal with matters relating to the following:

- Acquisition, Disposition or Expropriation of Land or Improvements
- Third Party Business Information
- Law Enforcement

**Carried**
5. **Adjourn to Closed Session**
   The meeting adjourned to a closed session at 10:37 a.m.

6. **Reconvene to Open Session**
   The meeting reconvened to an open session at 12:03 p.m.

7. **Issues Arising from Correspondence & Community Concerns**
   
   7.1 **Councillor Singh, re: Draft Resolution, Opposition to Province of Quebec Bill 21**
   
   Councillor Singh
   - Made comment on Quebec's Bill 21.
   - Commented that several municipalities across the country are adopting resolutions in opposition to Bill 21.
   - Spoke to the current Court challenge proceeding in Quebec regarding Bill 21.
   - Interested in the thoughts of other Council Colleagues.

   Council
   - Provided individual comments.

   **Moved By Councillor Singh/Seconded By Councillor Wooldridge**

   **R1014/19/10/07:** THAT Council direct staff to place a Notice of Motion on the October 21, 2019 afternoon meeting of Council in support of Kelowna as a multicultural, socially diverse, and inclusive city, opposed to Bill 21 as enacted by the Province of Quebec.

   **Carried**

   7.2 **City Manager, re: Money Laundering Commission**

   City Manager
   - Advised that a Commission Hearing is being held in Kelowna on October 29, 2019.

8. **Termination**
   The meeting was declared terminated at 12:16 p.m.

Mayor Basran

City Clerk

/acm
Report to Council

Date: October 21, 2019
To: Council
From: City Manager
Subject: Overview and update of Interior Health services
Department: Social Development

Recommendation:
THAT Council receives the report from Interior Health regarding an overview and update of Interior Health services, dated October 21, 2019.

Purpose:
To provide Council with an overview and update of Interior Health services.

Background:
On June 10, 2019, staff from Interior Health provided Council an overview of health services. This presentation is a follow up to the June 10, 2019, discussion and will focus on strategic direction and the delivery of health services in Kelowna. The presentation will be from Deborah Preston, Community Health Service Administrator, and Daniel Cameron, Mental Health Substance Use Health Service Administrator.

Internal Circulation: Divisional Director, Active Living & Culture

Submitted by: Sue Wheeler, Social Development Manager

Approved for inclusion: J. Gabriel, Divisional Director Active Living & Culture

Attachment: Overview and update of Interior Health services (Powerpoint)
Community based Mental Health Services:

**Cedar Sage Health and Wellness Clinic:** The clinic provides trauma-informed short-term, team-based care to higher functioning individuals experiencing a mental health illness as well as services to individuals with substance use concerns. The clinic is available to individuals who have a family physician, with referrals from by family physicians and nurse practitioners.

**Access:** The clinic accepts referrals from family doctors, primary care providers, nurse practitioners, health care or community support teams. The clinical also accepts self-referrals

**Contact:** 250-469-7070 (x13555)

**Eating Disorders Program:** Provides individual and group therapy for persons with a diagnosis of an eating disorder. Referral from a family physician is required.

**Access:** The clinic accepts referrals from family doctors or pediatricians. Self-referrals not accepted.

**Contact:** 250-469-7070 (x13553)

**Adult Short Term Assessment & Treatment Team (ASTAT):** Short term group and/or individual counselling service for individuals with moderate to severe symptoms related to mental illness (such as anxiety and mood disorders).

**Access:** The team accepts self-referral, family physicians, hospital, community agencies and psychiatrists.

**Contact:** 250-469-7070 (x13553)

**Adult Community Support Services (ACSS):** Case Management Services are available for people with a serious and persistent mental illness. This program provides longer term treatment, rehabilitation, case management, support services and residential care.

**Access:** The team accepts referrals from hospital, family doctors, and psychiatrists. Self-referrals not accepted.

**Contact:** 250-469-7070 (x13553)

**Seniors Mental Health:** Provides mental health services to seniors with mental disorders or behavioral and psychological symptoms that compromise their ability to function independently, seriously affect their feelings of wellbeing, or adversely affect their relationships with others. Serves those who are experiencing one or more of the following: depression, bi-polar affective disorder, anxiety, psychotic disorders, delirium, complex dementia with psychiatric or behavioral problems, and/or longstanding psychiatric disorders with age-related complications. Provides clinical assessment, treatment, consultation, case management, psychosocial rehabilitation.

**Access:** The team accepts referrals from hospital, community care, family doctors, and psychiatrists.

Self-referrals not accepted.

**Contact:** 250-469-7070 (x13553)

**Crisis Response team and Police and Crisis team (PACT):** A mobile mental health and substance use (MHSU) crisis intervention team which provides an enhanced community response to people experiencing a mental health crisis.
and/or substance use crisis. The PACT consists of a dedicated psychiatric nurse and a specially-trained RCMP officer who patrols the streets and responds to calls. The team will assess needs and connect the person in crisis with appropriate services with a goal to reduce repeat MHSU visits to the local emergency department, as well as reduce repeat MHSU calls to the police.

Access: The team accepts referrals from all sources.
Contact: CRT- 250-250-212-8533
        PACT - through RCMP or 911

Assertive Community Treatment (ACT) Team: ACT teams are an established way of working with clients who have complex medical, psychiatric and social care needs who may have difficulty accessing community mental health and substance use services. ACT serves clients with serious mental illnesses and substance use disorders that are complex and who have very significant functional impairments, and who, because of the limitations of traditional mental health services, may have gone without appropriate services. ACT teams are delivered by a group of multidisciplinary mental health staff who work as a team and provide the majority of the treatment, rehabilitation, and support services clients need to achieve their goals. The team is directed by a team coordinator and a psychiatrist and includes a sufficient number of staff from the core mental health disciplines, at least one peer support specialist, and a program/administrative support staff who work in shifts to cover 24 hours per day, seven days a week to provide intensive services (multiple contacts may be as frequent as two to three times per day, seven days per week, and are based on client need and a mutually agreed upon plan between the client and ACT staff).

Access: The team accepts referrals from community agencies; forensics, Interior Health, or other health authorities if client is relocating. Self-referrals not accepted.
Contact: 250-469-7070 (x13553)

Community based Substance Use Services:

Outpatient Substance Use Services and Treatment (Adult and Youth): Services include outreach, medical consultation, assessment, referral, education sessions, as well as individual, group and family counselling/therapy and case management. Provided in the home, office-based or community; can be short-term or longer-term.

Access: Self-referral, Interior Health staff, physician or community partners
Contact: 250-469-7070 (x13553)

Substance Use Day Treatment: Day treatment programs are a component of substance use treatment services and consist of a six week program offered to individuals requiring intensive therapeutic services, where facility based treatment may not be appropriate.

Access: Self-referral, Interior Health staff, physician or community partners
Contact: 250-469-7070 (x13553)

Opioid Agonist Treatment: Provides people who are addicted to opioids with prescribed daily medications to help with opioid withdrawal and cravings (Suboxone and Methadone clinics). Available through Interior Health in Kelowna at the Community Health and Services Centre and Foundry locations.

Access: Self-referral, Interior Health staff, physician or community partners
Contact: 250-469-7070 (x13553)

Injectable OAT: iOAT is an evidence-based treatment intervention for people with severe Opioid Use Disorder (OUD) and has been demonstrated to reduce illicit opioid use and improve quality of life. It is the highest intensity treatment option available for people with severe OUD who have been unsuccessful at reducing or ceasing their intravenous non-medical use of opioids with adequately-dosed, lower-intensity treatment.
options, such as oral OAT. It is an important component of the continuum of care when treating people with OUD. The Kelowna IOAT clinic has a capacity for 20 participants.

**Access:** Self-referral, Interior Health staff, physician or community partners

**Contact:** 250-469-7070 (x13553)

### Substance Use Connections (KGH and community):** The Substance Use Connections Teams work in Kelowna General Hospital to assertively engage with substance use clients within 72 hours of a referral, and they remain connected to clients until those individuals are successfully linked to appropriate addictions care. They work closely with community service providers and with the rest of the care team in the hospital, including nursing staff and physicians.

**Access:** Individuals are referred and connected during an acute episode in KGH

**Contact:** through acute care referral only

### Mobile Supervised Consumption Services:** Services include supervision of drug consumption, responding to overdoses, minor wound care, distribution of harm reduction supplies, support and referrals. Low threshold, low barrier services for a high risk population that is not likely to engage with formal health care services. The focus of these services is on reducing the risks associated with substance use and engaging people into care.

**Access:** Self-referrals. Individuals present onsite during hours of service.

**Contact:** individuals present onsite

### Facility based Withdrawal Management:** Interior Health contracts “The Bridge” in Kelowna for a number of inpatient treatment options including 15 adult withdrawal management beds and four dedicated to young people under the age of 18. There are also several inpatient facilities outside of the region that Kelowna residents may access.

**Access:** Interior Health Substance use services and clinicians support the referral process to “The Bridge” programs and other agencies. Individuals can **self-refer**.

**Contact:** 250-763-0456 (The Bridge direct)

### Facility based Treatment Services:** Programs offer intensive short-term therapy designed for clients ready to make significant changes to their substance use patterns in a safe, alcohol and drug free living environment. Treatment programs are usually accessed through referral from an outpatient service and typically last 28 days. Follow-up is provided through local outpatient counselling services. Within Kelowna Interior Health contracts “The Bridge” for facility based treatment services. There are facilities across Interior Health and B.C. that residents may also access (Vernon, Burnaby, Vancouver Island, Vancouver, Burnaby, Surrey).

**Access:** Interior Health Substance use services and clinicians support referrals. Individuals can **self-refer**.

**Contact:** Interior Health 250-469-7070 (x13553) or 250-763-0456 (The Bridge direct)

### Support Recovery Beds:** In Kelowna Interior Health contracts “The Bridge” for support recovery beds, which provide clients a safe, substance-free setting while they await inpatient treatment, return from inpatient treatment or transition to a more stable lifestyle. Residents may also access contracted support recovery beds outside Kelowna (there are beds in Kamloops, Vernon, Merritt, Nelson, Cranbrook, Armstrong, Williams Lake.)

**Access:** Interior Health Substance use services and clinicians support referrals. Individuals can **self-refer**.

**Contact:** 250-763-0456 (The Bridge direct)
Hospital and Facility based Services:

McNair Mental Health and Substance Use Unit, KGH: Services provided for adults include psychiatric and concurrent substance use assessment in the emergency department, in-patient mental health intensive care, inpatient assessment and treatment, and discharge planning back to the community.

**Access:** This is an acute care service provided at KGH

In-Reach, KGH: A team of nurses and social work provides consultation services to KGH including mental health supports for patients anywhere in the hospital, other than those designated mental health areas where trained staff are integrated/available. The team also provides comprehensive mental health assessments for patients presenting to the emergency department with a mental health concern, then liaises with the emergency department physician(s) to discuss appropriate follow-up and referrals.

**Access:** This is an acute care service provided at KGH

Addiction Medicine Consultation Services, KGH: Management of substance use disorders for patients in hospital. The addiction consult service provides a comprehensive assessment, diagnosis, and treatment plan, specifically management of intoxication and/or withdrawal, as well as treatment initiation where indicated. Team members liaise with community service providers to facilitate continuity of treatment during the transition between hospital and community. The service is available Monday – Friday with on call services in the evenings and weekends.

**Access:** This is an acute care service provided at KGH

Tertiary Adolescent Psychiatry Unit, KGH: The Adolescent Psychiatry Unit is a regional 8-bed specialized inpatient program for youth aged 12-17 who are struggling with significant psychiatric symptoms, such as psychosis, mood disorders, or anxiety disorders that require an extended stay for assessment and treatment planning.

**Access:** This is regional Interior Health Tertiary care service provided at KGH. Individuals are referred by their psychiatrists throughout Interior Health and access is coordinated by a specialized intake team.

Cara Centre: Community based facility for short stay psychosocial rehabilitation, for adults with moderate to severe mental health concerns that require psychosocial rehabilitation.

**Access:** This is a regional Interior Health tertiary care service. Individuals are referred by their psychiatrists and health care team throughout Interior Health and access is coordinated by a specialized intake team.

Youth and young adult Community based Services:

Early Psychosis Intervention (EPI) (Foundry and Doyle locations): Youth services include: psychiatric care, multidisciplinary services, assessment, medication management, case management, family support and education. EPI Services are available for people who may be experiencing their first psychotic episode. This program provides assessment, treatment, rehabilitation and support services. The Interior Health programs are for 19 and over, although they will take clients as young as 17. Child and Youth Mental Health (MCFD location) offers a similar program for those 18 and under.

**Access:** Self, physician, Nurse Practitioner, family member, Access/intake clinician

**Contact:** 250-469-7070 (x13553)
Youth Intensive Case Management (Foundry location): A new service to help remove barriers and bridge gaps in mental health and substance use treatment for young people. The inter-professional, collaborative Intensive Case Management team approach includes access to psychiatrists as well as registered nurses, counsellors, and life skills workers. These teams also provide supports for families, recognizing this is an important aspect of client care.

Access: Self, physician, Nurse Practitioner, Family, Access/intake clinician/Ministry for Child and Family Development
Contact: 250-469-7070 (x13553)

Regional Programs managed and coordinated from Kelowna:

Developmental Disability Mental Health Services (DDMHS) (Regional): Provides specialized mental health consultation and services to individuals 14 years of age and older who have both an intellectual developmental disorder and a mental health disorder.

Access: Interior Health clinician, General Practitioners, pediatricians, psychiatrists, Ministry for Child and Family Development, Community Living BC
Contact: 250-763-4122

Interior Health Children’s Assessment Network (IHCAN) (Regional): Provides assessment and diagnosis for children and youth in Interior Health who demonstrate significant impairment in a number of areas of functioning, including development and learning, mental health, adaptive and social skills, or biomarkers such as prenatal substance exposure. Sees children under three assessment streams: Autism Spectrum Disorder, Fetal Alcohol Spectrum Disorder, and Complex Child and Youth.

Access: Family doctors, pediatricians, psychiatrists, nurse practitioners
Contact: 250-763-4122
Overview and update of Interior Health services

Deborah Preston, Community Health Service Administrator
Danielle Cameron, MHSU Health Service Administrator
Agenda

* Interior Health Overview
* Population Health Approach & Understanding Needs
* Interior Health: Primary and Community Care Transformation
* Interior Health’s connection to current work
* Substance Use Services Continuum
* Discussion and Questions
Interior Health

Quick Facts
A snapshot of Interior Health

- Population over 750,000 in the Southern Interior
- 60 Municipalities
- 109 Designated Places
- 54 First Nation Communities
- 1,456 Hospital Beds
- 16 Community Hospitals
- 6,853 Residential Care and Assisted Living Beds
- 24 Health Care Centres
- 1,456 Hospital Beds
- 4 Regional Hospitals
- 2 Tertiary Hospitals
- We cover over 215,000 sq. kilometres
- Over 1,500 Physicians
- Over 20,000 Staff
- Over 4,800 Volunteers

$2.4 billion annual budget

Every person matters
IH key strategies

- **Primary & Community Care**: Improved, patient-centred access to team-based primary care for everyday health issues or concerns.
- **Mental Health & Substance Use**: Increased early intervention and timely access to the right supports and services.
- **Seniors Care**: Coordinated access to team-based, specialized community services and programs for those with complex medical conditions and/or frailty.
- **Surgical Services**: Improved access to surgical care with a focus on patient experience and outcomes.
- **Aboriginal Health**: Partnerships and shared decisions to support improved health and wellness.
- **Health & Safety in the Workplace**: A healthier, safer IH with a strong safety culture embedded into everyday practice.
Population Health Approach

Aims to improve the health of the entire population and to reduce health inequities among population groups.

Looks at and acts upon the broad range of factors and conditions that have a strong influence on our health.
* Needs Assessment
  * Information Gathering (facts, assets, resources, gaps)
    * Provides baseline data
  * Determines Priorities
  * Strengthens Partnerships & Encourages Collaboration
  * Informs Resource Allocation
Primary and Community Care Transformation: Why Transform?

- Fragmented care delivery
- Changing workforce
- Increasing volume and complexity of patient care needs
* Primary Care Network plan submitted to Ministry of Health. June 15, 2019
* Urgent Primary Care Center: announced in September, to open in December 2019 (Capri)
* Specialized Community Services Programs with initial focus on:
  * Chronic Medical Frail
  * Mental Health and Substance Use
* NEXT areas of Focus – Cancer Care, Surgery
* Interior Health has been involved with Journey Home since the inception of the Task force.

* Spring 2018, we shifted the way we approached Journey Home and Community Wellbeing issues, we came together with:
  * Population Health – Medical Health Officer
  * Healthy Communities
  * Community Clinical Operations
  * MSHU Clinical Operations

* We all had to be at the table – the problems were complex and solutions require a collective, cross portfolio response
Active contributors to the Journey Home Strategy and with the board.

Participants and contributors to Journey Home activities:
* Shelter Design Labs
  * Winter Mat Planning
* Systems Mapping
* Housing first 101
* Built For Zero
  * Coordinated Access
* Ending “Us and Them” Nov 2018; October 2019
* Agassiz, McIntosh and McCurdy (BC Housing sites) community engagement awareness building open houses

Participants at Partnership tables with Journey Home H and the City of Kelowna:
* Community Action Team (CAT – Opioid Response)
* KoAST/HUB table – seats at situation table and senior leadership group
* System Leaders Table (City lead)
* Community Inclusion Team (City lead)
While they are inextricably linked, the role of Health in the Housing is not clearly defined.

- Ministry of Municipal Affairs and Housing
- Ministry of Social Development and Poverty reduction
- Ministry of Health
- Ministry of Mental Health and Addictions

Wrap around services – what does this really mean? Is this Health?

- Involves Case Coordination and Individualized Service Planning to create, implement and monitor a plan of support for each individual

Provincial investments in Housing and higher level Housing with Supports.

- How does health align with new builds?
Substance use continuum

**Interior Health Substance Use Service Continuum**
Interior Health provides a wide range of substance use services, from prevention to intensive treatment for all ages. We strive to ensure all services are welcoming and inclusive of all peoples, of any gender identities, cultures, ethnicities and backgrounds.

**Access to Substance Use Services**
Person Centered | Recovery Oriented | Harm Reduction | Trauma Informed
Not all services are available in all centres

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**Low Barrier Services**
- Prevention / Early Intervention
- Low Barrier Services
- Crisis & Hospital Services
- Withdrawal Management Services
- Facility Based Treatment Services
- Outpatient Treatment Services
- Support Recovery Housing

**Moderate to High Intensity Services**
- Temporary Housing*
- Housing with Minimum to Moderate Supports
- Private Market Housing

**Long Term Recovery Support**
- IH Funded Beds

*Interior Health does not provide housing but may provide in-reach services to these sites
Questions & Discussion
Contacts

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