



Integrated Care Hub

Community Engagement Committee

Terms of Reference (Final)

As approved by consensus at ICH CEC meeting on Oct. 2, 2025

The Integrated Care Hub (ICH) Community Engagement Committee has been established by the ICH Consortium partners, at the request of the City of Kingston and the Ministry of Health. This forum provides a place to share perspectives on ICH initiatives and discuss neighbourhood concerns about safety, security, and hazardous waste. The following **Terms of Reference** were developed collaboratively by founding members of the Committee.

PURPOSE of the Integrated Care Hub Community Engagement Committee:

Neighbours, businesses, service providers, the city and other partners can do much to resolve tensions and complex issues that arise when serving some of our community's most marginalized and vulnerable citizens. This committee is intended to provide a forum where members can safely and openly share their perspectives on neighbourhood concerns about public health, safety and security related to the ICH.

The ICH program operates as a part of the neighbourhood and community, and this forum has been established to:

- promote **understanding** of complex issues,
- help build more trusting **relationships**,
- enhance **information** sharing, and
- **develop solutions** to problems of shared concern to improve life in the neighbourhood and/or operations in the ICH.

It is noted that broader neighbourhood issues (like provincial regulations, encampments, housing shortages and litter/waste collection) may affect the ICH site, its programs and relations with the community; however, resolution of those issues are often beyond the scope, authority and mandate of the ICH and this committee.

SCOPE of the Work:

Committee discussions are intended to provide a safe forum for members to:

- Identify, explore and understand issues of shared concern in the ICH neighbourhood.
- Advocate for those shared ICH and neighbourhood concerns.
- Share information and updates among agencies, partners and community members.
- Propose solutions leading to action on problems and advance ideas with community decision-makers. (Whoever takes the lead will be accountable for reporting back.)
- Engage with various levels of government and collaborate with other communities and partners to facilitate their involvement in finding solutions and support.
- Monitor and evaluate progress towards improved operations and public safety.

These discussions may lead to proposals for action, presentations to partners, and/or various types of communication with community residents, businesses, agencies/service providers and government officials.

It is important to note the ICH Community Engagement Committee is not an operational decision-making body with respect to the daily operations of the ICH. Input and advice, however, is welcomed for the ICH's consideration.

Participants:

Members should have first-hand knowledge of the impacts of the ICH on the neighbourhood, and work, reside or have a business nearby. The committee is expected to have between 8 and 16 regular participants or members, with a balance of representation among neighbourhood residents and businesses, the municipality, and ICH agencies. The committee will also welcome members with lived experience (such as former ICH clients).

Membership will be reviewed at least annually (or as required). While the ICH recruited the initial founding members, going forward the committee will advise the sponsor on the review and succession process, in consultation with the ICH.

Guests may be invited from time to time to share their experiences or knowledge where it is helpful to the work of the committee. Other guests may be invited as observers with permission in advance from the committee.

Current Membership:

Neighbourhood Residents (3).....
Neighbourhood Businesses (3)

Client Representation (1-2)
City of Kingston District Councillor (1)
Community Partners (2)

ICH Representatives – KCHC (2)
ICH Representatives — AMHS (3)
Administrative Support for Committee

Founding Members:

Tammy Lunn, Valerie Gray, Diego Natale
Joe Quattrocchi, Brian Campbell,
Jonathan Pilon/ Alana Bennett

Jamie Bruschetti
Councillor Gregory Ridge
Acting Inspector Dave Geen, Kingston Police
Steven Mothersell, City Bylaw Enforcement
Wendy Vuyk, Justine McIsaac
Betty Jo Dean, Sean Preston, Julie Lambert
AMHS-KFLA (Jill Dupuis)

Accountability & Reporting:

The committee will be accountable to its sponsors in the ICH Consortium and responsive to funders as required. This could include the City of Kingston, United Way or the Ontario Ministry of Health.

In April 2022, Addiction & Mental Health Services became the lead on consortium funding and Integrated Care Hub operations, while Kingston Community Health Centres continues to lead the Consumption Treatment Services co-located at the ICH. Other members of the ICH Consortium include Home Base Housing, Providence Care, and Trellis HIV & Community Care.

Expectations of Committee Members and Conduct at Meetings:

Members will be expected to act in accordance with the aims and mandate of the Terms of Reference, and to:

- Respect the Terms of Reference, established protocols and accepted procedures for the operation of the Community Engagement Committee.
- Preserve confidentiality regarding other committee members, client matters and other confidential information that may be shared or discussed.
- Be prepared to work constructively and collaboratively with other CEC members.
- Be respectful of the expression of diverse opinions, which may be different from their own.
- Refrain from using language or acting in a way that is threatening, abusive, racist or otherwise disrespectful.
- Bring any immediate concerns regarding ICH operations first to the attention of ICH management. The concerns may then be brought to the attention of the CEC.
- Not to act as an official spokesperson on behalf of the CEC unless requested to do so from time to time by the committee. The ICH will be represented by its own staff.

Committee Processes, Documentation and Reporting:

The first few meetings will be facilitated by an independent facilitator to work through an initial period of “forming” to collaboratively confirm • the scope for issues of concern, • productive focus for the committee’s mandate, • structure and membership of the group, • how best to work together (frequency, format, expectations for participants), and • preferred methods of communications among participants, partners and the community.

The founding committee is also expected to:

- Identify the best times, frequency and places to meet.
- Establish standard methods for sharing information and other communications.
- Confirm initial membership and selection of an on-going chair/co-chairs.

Administrative support for committee scheduling and documenting issues discussed will be provided by the ICH.

Situation Description:

The **Integrated Care Hub (ICH)** was established under emergency orders during the early days of the pandemic crisis (April 2020).

The ICH is a low-barrier, harm-reduction facility supporting individuals who are unhoused or precariously housed. In 2023, its Consumption and Treatment Services (CTS) program responded to more than 21,000 visits involving 500+ individuals and 400 medical emergencies.

It provides essential services like consumption care, harm reduction, showers and washrooms, food, and a place to rest as well as connecting clients to addiction and mental health supports. It is not a shelter, safe haven for illegal activity, enabler of addiction, or a permanent solution.

In the fall of 2024, the ICH shifted its model from a COVID-19 response to a health-focused recovery model of care. It also developed a new safety plan and on-site security protocol for its clients, staff and visitors.

Residents and businesses in the neighbourhood have long observed and experienced significant issues including elevated crime rates, theft/break-and-enters and criminal activity, slow emergency response times, encampments, trespassing, fires, noise, litter, environmental damage, reduced property values, harassment, assaults, sex work and open drug use in public spaces such as bus shelters, storefronts and private property.

Over many months, these concerns have been raised with the ICH and Consortium partners, the City of Kingston, By-law Enforcement, Kingston Police, emergency services, Health Canada and through public processes such as the Curb Side Committee and Moulton (NERT) Report.

Despite these repeated efforts, residents and business owners say meaningful action has been slow, with many of their concerns and requests being overlooked or ignored.

The complexity of the situation is compounded by overlapping mandates, regulations and jurisdictions of the many organizations involved in the neighbourhood surrounding the ICH.

While ICH staff and security play an important role in managing behaviours on-site, their ability to address issues beyond their property line remains limited, meaning neighbours continue to be exposed to unresolved challenges.

Services Offered:

The Integrated Care Hub (ICH) is supported by a Consortium of partners (AMHS-KFLA, Kingston CHC, Providence Care Centre, Home Base Housing, Trellis HIV and Community Care) at 661 Montreal Street. Services on site include a Consumption and Treatment Service (CTS), Access and Support Centre, overnight rest area, and active connections for those in need to services/care.

Funding:

Operations at the ICH are primarily funded by The Ministry of Health, City of Kingston and United Way. AMHS–KFLA operates the Integrated Care Hub. In operation starting in 2020, the annual approximate combined operating budget is \$3.0 million. The CTS is operated by Kingston CHC under separate Ministry Health funding.

Issues to Consider:

The Integrated Care Hub and the Consumption Treatment Services have been valuable in providing a complex set of services for vulnerable populations. At the same time, neighbours and community residents have raised concerns regarding public health and safety related to the operations of the hub.

Reopening plans have incorporated ways to manage client and service flow in accordance with revised operational plans and installation of newly erected fencing around the site.

Establishing a Community Engagement Group:

ICH Consortium partners, the City of Kingston and the Ministry of Health hope for us to come together to share perspectives on ICH initiatives and discuss neighbourhood concerns about issues of safety and security. Participation is desirable from neighbourhood and community residents, businesses, partners, and other stakeholders.

The City has also asked AMHS to provide a security and safety plan for the operations of the Integrated Care Hub, considerate of client, staff, neighbourhood and community safety, and to develop Terms of Reference and recruit participants for a community consultation group.