

SAULT STE. MARIE SOUP KITCHEN COMMUNITY  
CENTRE & NORDIK RESEARCH INSTITUTE

PROJECT COORDINATOR REPORT

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JANUARY 28, 2013-MARCH 28, 2013

SUBMITTED BY: ALLYSON SCHMIDT

April 5, 2013



**Community Development Corporation  
OF SAULT STE. MARIE & AREA**  
A Community Futures Development Corporation



PROJECT COORDINATOR REPORT  
JANUARY 28, 2013-MARCH 28, 2013

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## BACKGROUND

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The Sault Ste. Marie Soup Kitchen Community Centre has operated as a charitable organization that provides daily meals from Monday to Friday to the community since 1983. In addition to its daily meal program, the Soup Kitchen Community Centre offers a free after-school program called "Brighter Beginnings", a Saturday crafting outreach program, a youth night, a "Good Food Box" program, serves as a community-agency food bank, and hosts community agencies in providing community outreach and workshops.

In March, 2012 the Soup Kitchen Board of Directors recognized the need to separate the children's program from its 'out of the cold' operations which mainly service adults with lived experience of deep poverty. The Soup Kitchen facility does not fully conform to the Ministry of Child and Youth Services standards to provide child and family focused programming and there are legitimate security and safety concerns for children attending the program as the Soup Kitchen is not a dedicated child care facility.

The Community Economic and Social Development program at Algoma University links community service agencies with university students for two-semester-long work-study placements. These placements provide students with valuable opportunities to apply theory to workplace situations and agencies with workers with specialized skills in community development.

Allyson Schmidt came to the Soup Kitchen Community Centre as a student to work on developing the "Good Food Box" into a profit-generating social enterprise to support growth of Soup Kitchen programming in September, 2012. The work-study placement focus shifted to researching Community Health Centres as a model for the Soup Kitchen Community Centre to deepen its services to address the challenges experienced by children and families that live in deep poverty in Sault Ste. Marie. An advisory committee of community professionals was formed to begin the process to guide the Soup Kitchen Board of Directors in the development of a community health centre in Sault Ste. Marie. Facilitation and support of the Advisory Committee was undertaken by Allyson Schmidt at this time and she continues with these duties.

At the end of Allyson Schmidt's work-study placement in January, 2013, NORDIK Institute a community-based research institute associated with the Community Economic and Social Development program of Algoma University was contracted to employ Ms. Schmidt for the Soup Kitchen Community Health Centre project with three deliverables: to complete and submit an application to the Sault Ste. Marie Community Development Corporation (CDC) Local Initiatives Fund (LIF); complete and submit an application to the Ontario Trillium Foundation; and to start a community engagement strategy. The contract period was from January 28, 2013 to March 28, 2013.

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## METHOD

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Research was conducted into the history of the Soup Kitchen Community Centre through organization documents, interviews with staff and Board members, and users of the Soup Kitchen in order to gain understanding of the current contexts surrounding the Soup Kitchen, its strengths and its challenges. I contacted provincial and national organizations that represent community health centres on behalf of the Soup Kitchen, which in turn provided the Soup Kitchen with documentation for the development of a community health centre. Meetings were held with the Advisory Committee as a whole, as well as individual members for project planning/working sessions. Research was conducted into existing community health centres in Ontario, as well as those located in Northern Ontario to examine programs, best practices, organizational and operation structures and governance and funding sources. Tours of two Sudbury-area community health centres were conducted.

Active administrative support of the Soup Kitchen Community Health Centre Advisory Committee was provided.

Challenges were the inability to meet with Soup Kitchen staff and Board of Directors, timeframes to achieve goals, and lack of office space. A Google Drive folder was created to link Soup Kitchen Board of Directors, Advisory Committee members and Soup Kitchen Staff to research materials which proved to be an ineffective method of information access due to technical difficulties of the Google Drive system.

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## FINDINGS

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### **Community Development Corporation (CDC) Local Initiatives Fund (LIF) Application**

An application to the Sault Ste. Marie CDC for the Local Initiatives Fund for \$10, 000 was completed, submitted and subsequently approved for the Soup Kitchen Community Centre to engage in a "Pre-Feasibility Study" to determine community needs regarding a community health centre in downtown Sault Ste. Marie. The Advisory Committee was instrumental in the completion of this application, specifically Larry Little, member of the Advisory Committee and Community Economic Development Officer at the CDC, Anthony Martin, Chair of Advisory Committee and Soup Kitchen Board member, as well as Ed Adshead, Project Manager at the Ontario Ministry of Natural Resources and Advisory Committee member. This fund normally grants \$5,000 per community initiative but gave the Soup Kitchen \$10, 000 due to the strength of the application and its importance to the community. See **Appendix One**.

### **Ontario Trillium Foundation Application**

The members of the Advisory Committee determined that application to the Trillium Foundation is not possible for the March 1st deadline due to time constraints and the need for an RFP. The Soup Kitchen requires a comprehensive feasibility study and business plan that will meet the requirements of the Ministry of Health and the North East Local Health

Integration Network. In order to accurately communicate the Soup Kitchen's needs and plans to consultants for tender, a detailed RFP is required. Templates have been provided to the Advisory Committee by Jerry Dolcetti, Commissioner of Engineering & Planning for the City of Sault Ste. Marie and member of the Advisory Committee and drafting of an RFP has commenced with the assistance of Ed Adshead and Larry Little, Advisory Committee members. See **Appendix Two**.

### **Start of Community Engagement Strategy**

With the assistance of Brenda Bloore, a student of the Community Economic and Social Development Program on work-study placement at the Soup Kitchen Community Centre for the Community Health Centre Project, preliminary planning has commenced for the pre-feasibility study. See **Appendix Three**. A work plan was developed for the Pre-Feasibility Study that is to occur in the Summer of 2013. See **Appendix Four**.

The CDC application provided the opportunity to gather letters of support from various community agencies as well as city government officials. This project is of great interest to the community and continued relationship-building and engagement with community partners is necessary. The Advisory Committee has identified community service agencies and those groups of people that do not use the Soup Kitchen services as key to engage to garner support for this project. Community engagement strategies that increase community awareness of this project while generating and supporting meaningful community input.

Suzanne Salituri, Francophone community member and Advisory Committee member, arranged for Tony Martin, David Ellis, Architect and Advisory Committee Member and myself to visit the West Nipissing Community Health Centre in Sturgeon Falls, Ontario and Centre de santé communautaire du Grand Sudbury in Sudbury, Ontario.

Active support of the Advisory Committee was undertaken through: organization of meetings which included booking of meeting space, securing refreshments, creating meeting agendas, supplying members with pre-meeting information, recording and distribution of minutes; Advisory Committee member outreach and communication; development of Advisory Committee Terms of Reference; development of budget for Advisory Committee. See Appendix Four.

Challenges were the inability to meet with Soup Kitchen Staff and Soup Kitchen Board of Directors during this time period.

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## RECOMMENDATIONS

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- Soup Kitchen Board of Directors Governance and Accountability

In order to build organizational capacity, ensure organizational effectiveness and accountability, the Soup Kitchen Board of Directors is recommended to develop organizational by-laws, policies and a comprehensive strategic plan that outlines organizational priorities and vision. Comprehensive planning and directions for Board of Directors development, succession planning, Board recruitment will allow the Soup Kitchen to anticipate needs of its membership, be accountable to its membership, as well as allow evaluation and reflection into the organization. Clear vision allows the Board to be responsive, proactive and effective.

- Program Evaluation, Monitoring (Continuous Quality Improvement)

Program priorities should be determined through engagement of Soup Kitchen members, community agencies and municipal, provincial and federal levels of government to assess the needs and priorities of those who access the Soup Kitchen. Evaluation of current programs offered by the Soup Kitchen should be undertaken to determine efficacy and set baselines for organization/community statistical analysis. Programs such as 'out of the cold' food programs, children's program, volunteer recruitment, volunteer management, volunteer training, fundraising programs, inter-agency outreach, community outreach, education, training programs, et al should be administered and evaluated formally and as part of day-to-day operations.

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## NEXT STEPS

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- Hire Allyson Schmidt to conduct Pre-Feasibility Study. I have secured funding for the study, am familiar with the community, its strengths and challenges, familiar with the Soup Kitchen and its strengths and challenges and am committed to the process of grassroots community engagement and organizing.
- Training and education for the Board of Directors to develop a strategic plan to guide the Soup Kitchen Community Centre through this transition period. This will support current and future Board of Directors to guide and develop Soup Kitchen vision, mission and values to service its members through operations of the organization.
- Staff training, education, evaluation and accountability is recommended to ensure that the vision, mission and values of the organization are carried out in the operations of the Soup Kitchen Community Centre.

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## APPENDIX

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### APPENDIX ONE

# LOCAL INITIATIVES FUND (LIF) APPLICATION

Date Received:

FEB 12 2013

(For Office Use Only)

Before completing this application, please read the *Application Guide* and *Essentials of Any Proposal*. If you have any questions, call the CDC office at (705) 942-9000.

Funding Requested: \$

10,000

Information on your CED Activity			
Project Title/Name:	Sault Ste. Marie Soup Kitchen Community Health Centre Pre-Feasibility Study		
Start Date:	April 1, 2013	Completion Date:	August 31, 2013
Project Location:	172 James Street, Sault Ste. Marie, ON		

Community, Group or Organization Requesting Funding			
Group Name:	Sault Ste. Marie Kitchen Community Centre	Contact Person:	Anthony Martin
		Title/Position:	Sault Ste. Marie Soup Kitchen Community Health Centre Advisory Committee Chair
Address:	172 James Street	Tel. - Work:	
Town/City:	Sault Ste. Marie, ON	- Home:	705-945-6258
Postal Code:	P6A 1W3	Fax:	
Web-site:	www.soupkitchencommunitycentre.ca	E-Mail:	anthonymartin@shaw.ca

Define your Group, Organization or Community – Its Mandate and Background (remember that community is not necessarily synonymous with municipality)

The Sault Ste. Marie Soup Kitchen Community Centre has been in existence since 1983. It has grown since its inception in the basement of Blessed Sacrament Church, relocating to its present facility in 1990 to meet the growing demand for its services. This move served to create a sense of community ownership and investment in the community centre. In 1985 the Soup Kitchen was given the Medal of Merit by the City of Sault Ste. Marie for its response in aiding the citizens of Sault Ste. Marie during the recession and subsequent layoffs at Algoma Steel in the early 1980s. The Soup Kitchen has never operated with core funding from government agencies—it has been completely supported by the citizens of Sault Ste. Marie. Our annual operating budget has grown from \$35,000 to approximately \$450,000. We continue to serve meals to well over 100 people per day, in one way or another, with a peak of 350 per day in March of 1985.

The Soup Kitchen provides a hot meal Monday to Friday for residents of the area and the city. It provides the Brighter Beginnings program in partnership with the Ministry of Community and Youth Services. This is an after school program for children that accommodates working parents. The Good Food Box Program provides monthly food boxes to area residents. The Soup Kitchen provides daily lunches for the courthouse and provides training opportunities and tutoring services for children requiring extra educational help. It provides advocacy for community residents and a safe and caring environment. A great deal of resources are donated by the community, from food stuffs to household items to clothing to books to toys, and directly distributed to clients of the Soup Kitchen Community Centre. The services and programs of the Soup Kitchen, while targeted to residents of the Old West End, are accessible to anyone who walks in the door, no matter where they live. This commitment to inclusivity has been the hallmark of the Soup Kitchen from day one, and continues to be.

The Soup Kitchen is governed by a Board of Directors from the community with a variety of professional backgrounds. It employs a staff of five (5) at the present time and looks to expand staff numbers to accommodate the completion of the new Community Health Care facility.

The Sault Ste. Marie Soup Kitchen Community Centre mandate is as follows:

The Sault Ste. Marie Soup Kitchen Community Centre is a registered charity governed by a Board of Directors and by staff and volunteers who are dedicated:

- To address the needs of those who live in poverty by providing a safe place to eat, socialize, get information and attend health and future development programs.
- To provide nurturing Children's program offering education, recreation and social activities.
- To advocate and educate the public on social justice issues.

The plans being developed are to provide an additional facility to meet the growing demands on the Soup Kitchen resources. This facility will provide for the needs of the Brighter Beginnings Children's program, to separate the children's program from the adult program; create an area for administrative needs; and to meet the health and holistic needs of the area residents. The Board of Directors has identified the need to expand the Soup Kitchen in order to meet the needs of the demographics of our community. Our community health centre is based on initiatives that other communities successfully operate.

**Provide a Brief Summary of Your Project.**

The project is to construct a Community Health Centre across from the existing Soup Kitchen to address the following four (4) areas of focus: early childhood care and learning needs; food security; primary health and wellness services; and community education. This evolves from our knowledge of the needs of our present clientele, the demographics of community compiled by the Sault Ste. Marie Innovation Centre and our research into the community health centres of other communities across the nation.

A community health centre is a holistic model of care that addresses many areas of health and wellness not limited to primary medical care with a special focus on marginalized and at-risk populations. This is a very successful model that is used in many other jurisdictions, notably Ottawa, Hamilton, Toronto, Calgary, Sudbury, North Bay and Thunder Bay. Please see Appendix 1 for a CHC fact sheet .

Response from the community to date regarding this project has been overwhelmingly positive, which has spurred the development of the following partnerships: Algoma Family Services, Algoma Public Health, Child Care Algoma, Indian Friendship Centre, Nurse Practitioner Clinic, Table de santé de Sault-Ste-Marie (Francophone).

When the strategic business plan has been developed a request will be made to the City of Sault Ste. Marie to donate the parking lot land that is across from the existing Soup Kitchen. Planning for location of the Soup Kitchen Community Health Centre in this area has been examined by the Soup Kitchen Board and the Advisory Committee as preferred site to accommodate existing and anticipated operations to best serve the needs of the community. This also fits with James St. area revitalization plans that have previously been pursued by municipal and other various levels of government. This project will be a catalyst to the revitalization of the Old West End of Sault Ste. Marie (James Street).

The funds being requested from the CDC will provide the Board of the Soup Kitchen with the necessary resources to pursue a pre-feasibility study to include a community engagement process to determine community needs, educate its community about community health centres, build community partnerships and gather other necessary information to inform a comprehensive feasibility study.

Subsequently a feasibility study/business plan will be implemented to address next steps that include:

1. an assessment of overall capital and operating costs,
2. the development of funding models,
3. the advancement of conceptual drawings, and
4. setting a timetable for construction.

Indicate Who Will Benefit Most From Your CED Activity (choose one)					
<input checked="" type="checkbox"/>	Aboriginals	<input checked="" type="checkbox"/>	Youth	<input checked="" type="checkbox"/>	Community of Interest
<input checked="" type="checkbox"/>	Francophones	<input checked="" type="checkbox"/>	Persons with Disabilities	<input checked="" type="checkbox"/>	Other (please specify):
<input checked="" type="checkbox"/>	Racial Minorities	<input checked="" type="checkbox"/>	Community of Common Bond		Economically disadvantaged
<input checked="" type="checkbox"/>	Women	<input checked="" type="checkbox"/>	Geographic Community		

Indicate What Sector Will Benefit Most From Your CED Activity (choose one)					
<input type="checkbox"/>	Industry	<input type="checkbox"/>	Retail	<input checked="" type="checkbox"/>	Other: Social services
<input type="checkbox"/>	Tourism	<input type="checkbox"/>	Forestry		
<input type="checkbox"/>	Service	<input type="checkbox"/>	Agriculture		

Brief Indication of Use of Funding			
<input checked="" type="checkbox"/>	Pre-feasibility Studies	<input type="checkbox"/>	Environmental Assessment Reports
<input type="checkbox"/>	Research Projects	<input type="checkbox"/>	Small-Scale Capital Projects
<input type="checkbox"/>	Community ICT Strategies/Projects	<input type="checkbox"/>	Seminars/Workshops
<input type="checkbox"/>	Innovation and New Technology Projects	<input type="checkbox"/>	Marketing/Promotional Projects
<input type="checkbox"/>	E-Commerce Promotion	<input type="checkbox"/>	Community Tourism Events
<input type="checkbox"/>	Development of On-line Business Services	<input type="checkbox"/>	Other Community-based Economic Development Projects

How will your project contribute to the economic activity/development of your community and/or region? (i.e. income generated, new investment levered, new infrastructure, capital assets, etc.)
<p>The project will grow the ability of the community to meet the needs of the local area residents who live in an under-served area. Transportation and mobility challenges of these residents require that these services be situated in the neighbourhood. It will further develop existing city plans to revitalize the James Street area.</p> <p>This will prepare an otherwise economically disadvantaged sector of our population to more actively participate in the community and local economy. It will create an anchor that will spur new business development. In other communities, community health centres have served as a catalyst for change.</p>

**What are the needs of your community/region that will be addressed by this project? What will its impact be on the community/region?**

The development of a community health centre will ensure that area residents have access to services that have been identified to improve quality of life and raise the standard of living for individuals and the community. Healthcare services such as: doctors; nurse practitioners; dental hygienists; physiotherapists; public health intervention and health promotion services such as diabetes education, HIV and AIDS care, nutrition, families at risk, child health promotion; social services such as counseling, advocacy, legal aid, peer support; employment services and skill development; youth engagement; Brighter Beginnings licenced after-school program; community space for community groups to utilize for various activities; the Francophone community and Urban Aboriginal community will be partners in this in order to ensure their community members have access to these services.

**Will this project create or sustain employment?** (If so, indicate number, short-term / long-term, full-time / part-time.)

This project will sustain employment for present levels of staff and will create future employment opportunities for the management, implementation and maintenance of programs offered at the community health centre, including maintenance of the building itself. The community health centre will facilitate health practitioners to bring their services to a local population that otherwise has difficulty accessing these services. Accessible health promotion and prevention actively reduces pressure on an already over-taxed emergency facility at the Sault Area Hospital.

Initial staffing of 10 is anticipated to operate this facility. An executive director will be required to oversee operations with staffing in different areas, including but not limited to: Children and Youth Programs, Community Health Programs, Primary Health (Medical and Dental) Programs, Family Programs, and Volunteer Program. Support staff including reception and building maintenance jobs will also be created.

This project will enhance presently operating businesses in the area by providing increased presence in the neighbourhood and providing incentives for new enterprises.

The community health centre is essentially a new industry for the city of Sault Ste. Marie that will create a multitude of direct and indirect career and employment opportunities.

**Specify the needs of your organization/group that will be addressed by CDC involvement in this project?**

These funds will allow the Soup Kitchen to proceed with a pre-feasibility study, the necessary precursor to the development of a feasibility study/strategic business plan. The pre-feasibility study will include community engagement strategies, including community education, community meetings, and building community partnerships. A large component will consist of gathering community research, which is necessary to

inform the feasibility study. This intensive process will ensure community investment and commitment to the community health centre project. Building local knowledge and capacity will strengthen our local knowledge economy, necessary for the growth of our city.

**What resources are being committed to this project by your group/organization?** (include: time, skills, talent, "in-kind" contribution, financial, etc. Be as specific as possible.)

The Soup Kitchen Community Centre has committed \$5000 towards the pre-feasibility study. The Soup Kitchen has dedicated office support, office equipment, meeting space, expertise, advice and in-kind services by staff calculated at an additional \$5000.

**What resources are being committed to this project by other individuals, groups/organizations and levels of government?** (include: time, skills, talent, "in-kind" contribution, financial, etc. Be as specific as possible.)

Community members have donated time and expertise to the project advisory committee. Please see Appendix 2 outlining advisory committee. Please see Appendix 3 outlining our community partners. Please see Appendix 4 for press regarding the Soup Kitchen Community Health Centre Advisory Committee.

The volunteer planning and design committee has committed a great deal of time, energy and expertise towards this project. We have an architect on the committee who is donating his professional services. There is an experienced project manager, professional community developers, and a health planning professional, a medical doctor, and business consultants. The workspace for the project is being donated by a neighbourhood business.

Should the pre-feasibility prove positive, application to the Trillium Foundation for the Feasibility Study/Business Plan.

**Is there community/regional or external support** (incl. government) **for this project?** (include letters of support with application)

There is support from: Algoma Family Services; Algoma Public Health; Child Care Algoma; Indian Friendship Centre; Mayor of City of Sault Ste. Marie; Nurse Practitioner Led Program; Table de santé de Sault-Ste-Marie

**What input will community/regional groups/organizations have in the design, management and implementation of the project?**

The Board of the Soup Kitchen will oversee the project as the sponsoring agency. The

community engagement strategy will serve to inform further development and direction of the project. The community health centre model follows guidelines as mandated by Ministry of Child and Youth Services, the Ministry of Health and Long-Term Care, North East Local Health Integration Network, Ministry of Education, Ministry of Community and Social Services, City of Sault Ste. Marie.

**What specific methods will your group/organizations use to measure the success of this project?**

The completion of the pre-feasibility study will provide us with the ability to develop an RFP, a Trillium funding application, get necessary support for this project through concrete commitments from partners and community groups, and provide community input through the community engagement strategy in the form of a document summarizing findings.

**Please indicate if any land/property involved in the project is owned by a person/entity other than the applicant.** Please attach a letter of support from the land/property owner for this project.

A request will be made to obtain approval from the City of Sault Ste. Marie to donate the land for the Community Health Centre.

**Other information that provides clarification on your project.**

Community health centres have demonstrated success in supporting and revitalizing depressed areas with their development. Please see Appendix 5 for links to Community Health Centres.

**Application From a Municipality or First Nation.** Please include (or attach) a resolution from the municipal council or band council formally requesting funds from the Community Development Corporation of Sault Ste. Marie & Area Local Initiatives Fund (LIF) to assist with this project.

## Detailed Project Budget

Complete the chart below or attach information that clearly outlines the costs and revenues for your project. Include written quotations or estimates from suppliers where required.



Project Costs (Please List)	Amount	Project Revenue (Sources of Funding)	Amount	Confirmed	Anticipated
Pre-Feasibility Study	20,000	a) Government Funding:			
		Federal			
		Provincial ( Trillium)			
		Municipal (land value)			
		b) Other sources of funding:			
		Your Group/Organization Funds	5,000	5,000	
		Fund Raising			
		Debentures, loans, mortgage			
		Other Funds (e.g. corporate, sponsorships, other partners) Please specify:			
		c) In-kind Contributions:			
		Donated Labour/Equipment Please specify: Office Equipment, Labour	5,000	5,000	
		Donated Material Please specify:			
		d) CDC Funds	10,000		10,000
<b>Total Project Costs:</b>	<b>20,000</b>	<b>Total of Financial Sources</b>	<b>20,000</b>	<b>10,000</b>	<b>10,000</b>

(Total Project Costs must equal Total of Financial Sources)

Amount requested from the CDC \$ **10,000**

## Statement by Applicant

On behalf of and with the authority of the organization, I certify that the information given on this application to the CDC LIF Fund is true, correct and complete in every respect. It is understood that if approved for LIF funding, a LIF Contribution Agreement will be prepared by the CDC and the organization will need to agree to and abide by the terms and conditions outlined in the agreement. This application will form part of the LIF Contribution Agreement. I am aware that the information contained herein can be used for the assessment of eligibility and for statistical reporting. I understand that the information in this application may be subject to disclosure. I confirm on behalf of, and with the authority of, the organization that the organization accepts sole responsibility for all costs, including capital and operating costs, related to this project. I acknowledge that I have read and understand the information contained in the CDC LIF Fund Application Guide.

Name of Authorized Person <i>(print)</i>	Position/Title	Signature	Date
Anthony Martin (Chair, Soup Kitchen Community Health Centre Advisory Committee)			
Organization President/Chair <i>(print)</i>		Signature	Date
Brian Dinsmore (Chair, Soup Kitchen Community Centre Board)			

## Appendix 1

### The CHC Model of Care from Association of Ontario Health Centres

CHCs offer a range of comprehensive primary health care and health **promotion programmes in diverse** communities across Ontario. Services within CHCs are structured and designed to eliminate system-wide barriers to accessing healthcare such as poverty, geographic isolation, ethno- and cultural-centrism, racism, sexism, heterosexism, transphobia, language discrimination, ageism, ableism and other harmful forms of social exclusion including issues such as complex mental health that can lead to an increased burden or risk of ill health.

The CHC model of care focuses on five service areas:

- Primary care
- Illness prevention
- Health promotion
- Community capacity building
- Service integration

The CHC model of care is:

- **Comprehensive.** CHCs provide comprehensive, coordinated, primary health care for their communities, encompassing primary care, illness prevention, and health promotion, in one to one service, personal development groups, and community level interventions.
- **Accessible.** CHCs are designed to improve access, participation, equity, inclusiveness and social justice by eliminating systemic barriers to full participation. CHCs have expertise in ensuring access for people who encounter a diverse range of social, cultural, economic, legal or geographic barriers which contribute to the risk of developing health problems. This would include the provision of culturally appropriate programs and services, programs for the non-insured, optimal location and design of facilities, oppression-free environments and 24 hour on-call services.
- **Client and community centred.** CHCs are continuously adapting and refining their ability to reach and to serve their clients and communities. CHCs plan based on population health needs and develop best practices for serving those needs. CHCs strive to provide client-centred care.
- **Interdisciplinary.** CHCs build interdisciplinary teams working in collaborative practice. In these teams, salaried professionals work together in a coordinated approach to address the health needs of their clients. Depending on the actual programs and services offered, CHC interdisciplinary teams may include physicians, nurses, nurse practitioners, dietitians, physiotherapists, occupational therapists, social workers, Aboriginal traditional healers, chiropractors, counsellors, health promoters, community development workers, and administrative staff.

- **Integrated.** CHCs develop strong connections with health system partners and community partners to ensure the integration of CHC services with the delivery of other health and social services. Integration improves client care through the provision of timely services, appropriate referrals, and the delivery of seamless care. Integration also leads to system efficiencies.
- **Community governed.** CHCs are not-for-profit organizations, governed by community boards. Community governance ensures that the health of a community is enhanced by providing leadership that is reflective of its diverse communities. Community boards and committees provide a mechanism for centres to be responsive to the needs of their respective communities, and for communities to develop a sense of ownership over "their" centres.
- **Based on the social determinants of health.** The health of individuals and populations are impacted by the social determinants of health including shelter, education, food, income, a stable eco-system, sustainable resources, anti-oppression, inclusion, social justice, equity and peace. CHCs strive for improvements in social supports and conditions that affect the long term health of their clients and community, through participation in multi-sector partnerships, and the development of healthy public policy, within a population health framework.
- **Grounded in a community development approach.** CHC services and programs are responsive to local community initiatives and needs. The community development approach builds on community leadership, knowledge and life experiences of community members and partners to contribute to the health of their community. CHCs increase the capacity of communities to improve community and individual health outcomes.

## **Fact Sheet 2**

### **Ontario's Community Health Centres: increasing access to care in northern and rural Ontario.**

Ontario's Community Health Centres (CHCs) are one of the best ways to keep Ontarians – and the communities where they live – healthy and strong. And CHCs are especially effective delivering care to northern and rural Ontario communities that have traditionally had difficulties accessing the care and services they need. People living in these parts of the province face shortages of health professionals and limited access to health care services and health promotion programs. These shortages are often coupled with significant transportation challenges.

To address this situation, Ontario's government has set out a goal of improving access to health care services by increasing the number of health care professionals in rural areas, improving access to health care services that reflect the needs of rural communities, and making improvements to health care infrastructure.

Ontario's Community Health Centres can play a vital role enabling these strategies.

For example:

Solving shortages of health-care professionals

CHCs have been practicing interdisciplinary care for thirty years and are therefore skilled in ensuring the right care is delivered at the right time by the appropriate provider. Over 150 nurse practitioners and 190 salaried family physicians work as primary health care providers in our centres. Clients can also access care and counselling from a wide range of other health professionals, including registered nurses, dietitians, chiropodists, speech pathologists, social workers, health promoters and community workers. And to harness additional human resources, CHCs frequently use trained volunteers to assist in community wide outreach efforts.

The likelihood of recruiting health care professionals also increases substantially for northern and rural communities that have a CHC. When health providers considering a new position in a rural or northern community know they are going to be part of an interdisciplinary team whose members support each other managing a high demand for their services, they are more likely to commit to a practice. In addition, a strategically located CHC can play a vital role in easing shortages of health professionals system wide. If people know they can access continuity of care in a CHC, pressure eases in over-crowded hospital emergency rooms.

Ensuring health-care services reflect the needs of rural and northern communities

Community Health Centres represent and reflect the communities they serve.

Governing boards, made up of women and men elected from the local community, ensures the vision, mission, programs and services of individual centres respond closely to local needs and preferences. And local community members are often engaged in consultations about the development of new CHC services and community wide programs. The result: carefully tailored services and programs that address communities' most urgent needs: For example:

- At Woolwich Community Health Centre in southwestern Ontario a rural community health worker travels throughout the catchment area offering in-school programs on farm safety to children who live and work on their family farms.

- At the Francophone Centre de santé communautaire du Témiskaming (CSCT), the interdisciplinary women's health team invited francophone women from the community to join the team during program planning. As a result, the women are organizing activities on their own and turning to the Centre as a resource to support them when necessary.

Ontario's CHCs also make it a point to identify and respond to the root causes of illness and injury in rural and northern communities. For instance:

•In south-eastern Ontario, Tweed's Gateway Community Health Centre is working with youth to promote a safer social environment and reduce vandalism in the small local community. A youth action committee is now recognized by the local municipal council.

•At West Lambton Community Health Centre health promoters have created a program called Cooking on a Shoestring, targeted at low-income families.

#### Investing in the infrastructure of health-care facilities

Continuing investment in CHCs benefits other parts of the health care system. This is because CHCs are closely aligned with the goals of the new Local Health Integration Networks to create a more connected, convenient and client-centred health-care system. For example:

•At the Woolwich Community Health Centre, members of the community fund-raised to build additional wings on the Centre to provide space for local services the community wanted: a pharmacy, dentist, chiropractor, naturopath and mid-wives.

In the soon to be established permanent North Dumfries CHC Satellite, the local Community Care Access Centre and community support agencies offering "meals on wheels" are planning to offer on-site services.

#### •Moving forward

When the provincial government increased access to Community Health Centres in 2005, the number of rural and northern communities serviced by CHCs increased from 20 to 46. However, there are still many northern and rural Ontario who have been officially designated with under serviced access for a number of years.

See:

[http://www.health.gov.on.ca/english/providers/program/uap/listof\\_areas/gp\\_ladau.pdf](http://www.health.gov.on.ca/english/providers/program/uap/listof_areas/gp_ladau.pdf)

These are the parts of Ontario where the benefits of increased access to CHC programs and services would have the most immediate and highest positive impact.

Visit: [www.ontariochc.ca](http://www.ontariochc.ca)

CONTACT: Mary MacNutt – 416-294-2698

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## Appendix 2

### Soup Kitchen Community Health Centre Advisory Committee

The Soup Kitchen Community Health Centre Advisory Committee is comprised of dedicated local professionals who give freely of their time and talents in order to guide this project and its development. Our committee is as follows:

- Allyson Schmidt, Project Coordinator
  - Anthony Martin, Former M.P. and M.P.P., Advisory Committee Chair
  - David Ellis, Architect
  - Dr. Patti Avery
  - Ed Adshead, Project Management Consultant
  - Jerry Dolcetti, City Planner
  - Larry Little, Community Development Officer
  - Paul Beach, Manager-Community Geomatics Centre
  - Peggy Lauzon, Business Consultant
  - Suzanne Salituri, Francophone Representative
-

### Appendix 3

#### Community Partners

The Soup Kitchen Community Centre is a community-based organization that has a great deal of social capital within Sault Ste. Marie. The expansion and deepening of the Soup Kitchen's services is a welcome prospect that is bringing a great deal of interest amongst many organizations that operate in the city.

Following is a list of community organizations that have indicated support and interest in the Soup Kitchen Community Health Centre project:

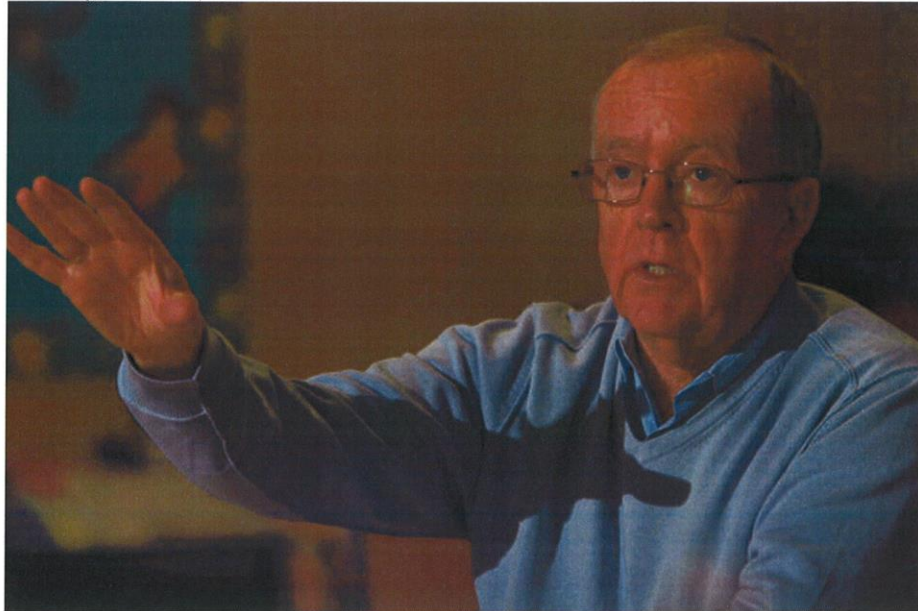
- Algoma Family Services
  - Algoma Public Health
  - Algoma University
  - Child Care Algoma
  - Indian Friendship Centre
  - Meals on Wheels
  - Nurse Practitioner Led Program
  - Table de santé Sault-Ste-Marie
- 
- Sullivan Donnelly Funeral Home is providing space for the project to work in the old Blessed Sacrament church, original location of the Soup Kitchen

Appendix 4

## Soup Kitchen advisory committee launches health centre campaign

By [Bob Mihell](#), Special to Sault This Week

Wednesday, November 21, 2012 4:45:34 EST PM



SAULT STE. MARIE, ONTARIO - An advisory committee of the Sault Ste. Marie Soup Kitchen plans to launch its campaign in the new year for the establishment of a community health centre in the city. The volunteer committee has attracted key leaders from the political and professional community in town, as well as Soup Kitchen staff and board directors.

While no price tag has been attached to the proposal yet, committee members agree it is "a big project" that would demand significant financial commitment both at the start, and for long-term operating costs.

Committee members plan to present clear evidence that a CHC would benefit the growing marginalized population in the Sault that is facing increasing difficulties accessing the health care professionals they need because of where they live.

March 31, 2012  
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18  
Page 16 of

Much of the statistical evidence comes from a recent report by the Sault Innovation Centre that incorporated a variety of data to demonstrate a strong connection between at-risk members of the community and where they live.

Former Sault member of Parliament Tony Martin, one of the key leaders involved in the advisory committee's research in the past few years, said it is time for the committee to go public and make its case known in the community.

He said there is a growing need in our community, especially for children in low income situations, for access to health care services, including preventive care.

Martin told the group at its Nov. 17 meeting, "We can't drag our feet on this forever. We need a plan for the new year that we can take to the community."

After the meeting, Martin said that the Innovation Centre stats show starkly why a CHC is needed locally. "We're not the only community, but the Sault needs this," he said.

Martin pointed out too that CHCs are not new ideas and are part of the evolving health care landscape in most communities, including nearby Sudbury.

"We are not reinventing the wheel here, and we are not starting from scratch," he said. "There are two important associations out there, one provincial one national, that are in the business of supporting emerging health centres." The local advisory committee has joined the Association of Health Care Centres both as a resource tool and for future funding support.

Martin said that bringing smaller health centres closer to populations that would otherwise have difficulty accessing health care professionals, is an emerging trend at the forefront of primary care reform in Ontario and elsewhere.

Martin agreed, as did several members of the committee, that a key next step for the group is to gain essential support from the Northeast Local Integration Health Network for the project concept.

He also said that while preventive health care was a focal point of the overall plan, there was also a broader underlying theme.

"This is much bigger than just health," he said. "It's about community development, and social development, and a whole whack of things that hopefully will enter into this and make it successful in the long run. The ultimate goal is to give people a way forward in their lives."

The local advisory committee will meet next to discuss the development of a clear strategic plan they can use to win the support of the LHIN, municipal leaders, funding agencies, and the general public.

## West End Health Centre?

By Bob Mihell, Special to Sault This Week  
Thursday, November 29, 2012 3:10:54 EST PM

SAULT STE. MARIE, ONTARIO - An advisory committee of the Sault Ste. Marie Soup Kitchen, as reported last week, will be presenting its arguments publicly sometime in the new year for the establishment of a Community Health Centre locally.

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Former Sault MP/MPP Tony Martin, one of many prominent professionals volunteering his expertise to the committee, stressed there was no need to "reinvent the wheel" regarding CHCs as they are already an established component of health care delivery in Ontario, and elsewhere in Canada.

Sudbury, in fact, has two CHCs operating in the area, including one, whose clients principally come from the francophone community that celebrated its 20 anniversary this year.

Jacqueline Gauthier, is the executive director of a second CHC located in Sudbury East that first opened April 1, 2007. Gauthier said that the CHC, which offers its services out of three separate locations, is among 73 community health centres in Ontario.

Gauthier said that community health centres differ from other medical clinics because of the different ways they use to provide health care to its clients.

"We take care of the whole person," Gauthier said. "We have an impact not only on primary care, but we do a great deal of health promotion, disease prevention, and community development activities."

While the staff of about 30 salaried employees includes medical professionals such as doctors, nurse practitioners, and nurses, she said the Sudbury East CHC also employs a social worker, health promoter, and a couple of community development officers.

And besides offering health care services, Gauthier said that the CHC made a variety of diverse activities such as yoga and painting classes, pain management classes, and Alzheimer support groups available.

Gauthier acknowledged also that a common characteristic of most CHCs is that they provide their services to marginalized groups of people within a community.

Regarding the Sudbury East CHC, she said, "We are marginalized because we have nothing else in the community. There are no doctors. We are about 45 minutes to an hour from any other health care providers."

Gauthier said that the other Sudbury CHC caters primarily to the francophone community as they feel isolated when it comes to their health care needs.

She pointed out that in Southern Ontario there are CHCs offering specialized services to isolated groups or communities such as immigrants, youth, women, or even transgender populations.

Gauthier said that funding for the operation of the Sudbury East CHC is primarily provided through the Local Health Integration Network and other provincial ministries where appropriate.

She said that she was aware that some CHCs do accept private donations, but added, "There has to be a culture in the community to allow that."

Gauthier said that the 30 salaried staff at the Sudbury East CHC are included in the clinic's operating budget. She said too that government funding for the three Sudbury East clinics has remained stable.

And because the CHC has no fee for services or caps on its health care providers, Gauthier said they were able "to do a great deal of work and commit more time on health care promotion and education," and avoid the "revolving door" time constraints forced on many medical facilities.

## Soup Kitchen looks to expand role and reach

By Elaine Della-Mattia, Sault Star  
Friday, November 30, 2012 10:24:51 EST PM

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The Sault Ste. Marie Soup Kitchen has established a committee to investigate how it can establish a community health centre to provide the services that the vulnerable need under one roof.

"There are lots of communities that have community health centres, everywhere except for Sault Ste. Marie," said Calna McGoldrick, co-ordinator of the Sault Ste. Marie Soup Kitchen. "It's something that can treat the whole person and have all the services available that an individual needs."

The committee is still in the early planning stages to develop and fine tune the vision for the project, said committee member Tony Martin.

Support for low income earners and the vulnerable is decreasing and the data presented from the Innovation Centre shows a number of at-risk members reside in the downtown area, he said.

Making it more difficult is the fact that essential services like the hospital, Algoma Public Health and many doctors, have moved to the northern end of the city on the Great Northern Road corridor. Low income earners have difficulty getting to those services, McGoldrick said.

"We try to scrape up some bus money, but we just don't have the money to give," she said.

Martin said the idea surfaced about one-and-a-half years ago at the board level when conversation revolved around what more the Soup Kitchen could do to help its clients and stabilize its operations with declining budgets and government support.

"It was time to rethink what we were doing and look at what other jurisdictions are offering and how we compare," Martin said.

A group toured a number of community health centres, including several in Ottawa.

Talks have already started with the city to determine if it will provide the land – the existing parking lot at the Soup Kitchen – to build a new facility that will start with expanding day care operations.

That would grow to include adolescent programming to help at-risk students complete high school and host a number of other services such as medical services, counselling services and employment services among others.

The challenge remains finding the funding to create a centre, McGoldrick said.

But Martin said he's hoping the concept – considered on the cutting edge by the Local Health Integration Network (LHIN) – will come together and the Soup Kitchen can make a presentation to the city, ask for the land and move forward with a plan.

The Sault Ste. Marie Soup Kitchen has joined the Ontario Association of Community Health Centres. The association helps support emerging health centres and provides a resource for local organizers.

As well, the Soup Kitchen committee is planning to meet the local francophone community, who are also undergoing plans to create a community health centre.

Martin is hoping that synergies can be created between the two groups.

"I'm hopeful," Martin said. "I'm very excited and I think this is a benefit for that neighbourhood, which has been abandoned in many ways in recent years."

The committee is hoping to present its ideas to city council in the new year.

## Appendix 5

### Links to Community Health Centres in Ontario:

- Centre de santé communautaire du Grand Sudbury (Sudbury Community Centre): <http://www.santesudbury.ca/>
- LAMP Community Health Centre: <http://www.lampchc.org/>
- North Hamilton Community Health Centre: <http://www.nhchc.ca/>
- Pinecrest-Queensway Community Health Centre: <http://www.pqchc.com/>
- Sherbourne Community Health Centre: <http://www.sherbourne.on.ca/>
- Somerset West Community Health Centre: <http://www.swchc.on.ca/>
- West Nipissing Community Health Centre: <http://www.cscno-wnchc.org/en/>

## Appendix 6

### Request for Proposal

#### The Sault Ste. Marie Soup Kitchen Community Centre

Professional services relating to preparation of pre-market feasibility study- community engagement/education

##### Background:

The Sault Ste. Marie Soup Kitchen Community Centre has operated in the Old West End of Sault Ste. Marie since 1983 in response to the economic recession and subsequent job losses in the city. In 1990, the Soup Kitchen moved to its present location at 172 James St. in an under-developed, open-air street mall. The Soup Kitchen is actively seeking to expand and re-vision its operations into a community health centre in order to provide a variety of services to the community to meet its health needs. Health is based on more than the absence of illness, and it is through the community health centre model that the Soup Kitchen feels it can reinvent itself to meet the needs of the community.

##### Purpose:

The Sault Ste. Marie Soup Kitchen Community Centre is seeking to engage a qualified consultant to conduct a pre-feasibility study for a community health centre. This pre-feasibility study will consist of an in-depth community engagement and education process which will inform a comprehensive feasibility and business plan. The Soup Kitchen wants the community to know what a community health centre is, and what the community wants from one.

The purpose of this project is to engage a consultant to undertake a community engagement process to determine community needs to develop and create community awareness and ownership of the community health centre development and operation, actively educate the community on community health centres and the model of care and operations. The final report will also advise the committee on key issues to be resolved and researched to meet community needs and maintain active community engagement and involvement to guide the process of organizational change and community ownership. In-depth knowledge of community health centres and community organizing is required.

The committee will issue a separate RFP for the undertaking of a comprehensive feasibility study, which will include all financial and operational components of a business plan.

##### Duties:

- The consultant will actively engage with the community based on community engagement strategy provided by the Soup Kitchen Community Centre;
- This will include at least five (5) community meetings for community members and at least five (5) meetings with community agencies;
- Engagement and educational materials to be distributed to community and used to foster community awareness and support will be developed by consultant in partnership with the Soup Kitchen Board and the Soup Kitchen Community Health Centre Advisory Committee;
- Consultant will be expected to actively engage with, animate and be available to community members, therefore attendance at Soup Kitchen is required;
- Training and education of community animators and facilitators who come from the Soup Kitchen community will be a requirement of the consultant;
- The Soup Kitchen Community Centre will be used for community engagement, along with other key community locations, as determined by community members;
- An advisory committee consisting of 51 percent of community members will be formed as part of the community engagement process;
- The consultant will provide a final report no later than September 1, 2013 outlining key findings, community recommendations, and outcomes of community education and engagement strategies;
- The report will outline best practices for community engagement and education based on community input.

DEBBIE AMAROSO  
MAYOR



CORPORATION OF THE  
CITY OF SAULT STE. MARIE

February 7<sup>th</sup>, 2013

**Tony Martin**  
**1097 Lake St.**  
**Sault Ste. Marie, ON**  
**P6B6B7**

SUBJECT: "Sault Ste. Marie Soup Kitchen Community Centre- Sault Ste. Marie Soup Kitchen Community Health Centre Pre-Feasibility Study"

Dear Mr. Martin,

On behalf of the City of Sault Ste. Marie, I wish to express my support for the Sault Ste. Marie Soup Kitchen Community Health Centre project.

Mr. Martin, I would like to commend you for taking this step in your attempt to provide greater accessibility to healthcare by developing the community's capacity to support marginalized groups. The Corporation of the City of Sault Ste. Marie places great importance on building the proper infrastructure to support localized healthcare, as it promotes wellness, social participation and economic stimulation in our community.

The City of Sault Ste. Marie recently received a temporary designation as an Age-Friendly City by the World Health Organization. In order to uphold this designation, and more importantly, to continue to build a healthy community for our citizens, projects of this nature must be supported and, in time, come to fruition. Access to healthcare has a vital role to play in creating an Age-Friendly City, as it affects the ability of our citizens to participate fully in their community and lead fulfilling, healthy lives.

The City of Sault Ste. Marie is in support of this initiative and recognizes the importance of providing accessible healthcare to all members of our community. Mr. Martin, I hope that you are successful in receiving support from both the Community Development Corporation and the Ontario Trillium Foundation to assist with this most noteworthy endeavour.

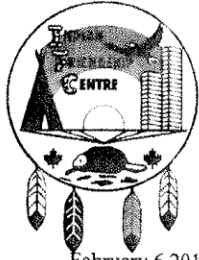
Sincerely,

A handwritten signature in cursive script, appearing to read 'Debbie Amaroso'.

Debbie Amaroso  
MAYOR

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CIVIC CENTRE · P.O. BOX 580 · SAULT STE. MARIE, ONTARIO P6A 5N1 · (705) 759-5344 · FAX (705) 541-7171



February 6 2013

## **INDIAN FRIENDSHIP CENTRE**

122 East Street, Sault Ste. Marie, Ontario P6A 3C6  
(705) 256-5634 or 256-5635  
FAX (705) 942-3227

Mr. Larry Little  
Community Development Officer  
Community Futures/Community Development Corporation of  
Sault Ste. Marie and Area

Dear Mr. Little:

Re: LIF Application Sault Ste. Marie Soup Kitchen Community Centre- Sault Ste. Marie Soup  
Kitchen Community Health Centre Pre-Feasibility Study

I am writing in support of the application by the Soup Kitchen Community Centre for a LIF grant to assist the Soup Kitchen Community Health Centre project in developing a pre-feasibility study in order to create a business plan. I believe that the project is very worthy of support, both for its contribution to building health infrastructure, and for its contribution to developing the community's capacity to support and engage with our significant population Urban Aboriginals.

Partnership with the Soup Kitchen Community Health Centre will allow the Indian Friendship Centre to deliver and expand its services to the population in the Old West End. We are prepared to actively participate in the development of a feasibility study and business plan for the Soup Kitchen Community Health Centre.

The Sault Ste. Marie Soup Kitchen Community Centre has been highly successful in building community partnerships and capacity in community health, wellness and social and economic development. I hope that the CDC will be able to support this significant initiative that will help develop a strategy to expand opportunities for underserved populations experiencing difficulty in accessing healthcare and social and economic services in Sault Ste. Marie.

Yours truly,

Cathy Syrette  
Executive Director

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ADMINISTRATION OFFICE  
148 DACEY ROAD  
SAULT STE MARIE, ON  
P6A 5J7  
PHONE (705) 945-8898  
FAX (705) 945-8735  
[www.childcarealgoma.ca](http://www.childcarealgoma.ca)



**EARLY LEARNING  
& CARE PROGRAMS**

- DACEY ROAD  
EXT. 245
- EAST VIEW PUBLIC SCHOOL  
254-3070
- ECHO BAY CENTRAL SCHOOL  
248-2043
- ÉCOLE NOTRE DAME DES ÉCOLES  
942-5343
- HOME CHILD CARE  
EXT 252 OR 253
- PARKLAND PUBLIC SCHOOL  
942-1583
- QUEEN STREET  
EXT. 250
- RM MOORE PUBLIC SCHOOL  
779-2728
- ST. JOSEPH ISLAND CENTRAL  
PUBLIC SCHOOL  
248-8000
- THESSALON – ALGOMA MANOR  
842-0117

**SCHOOL AGE PROGRAMS**

- DACEY ROAD SITE  
EXT. 245
- EAST VIEW PUBLIC SCHOOL  
254-3070
- ÉCOLE NOTRE DAME DES ÉCOLES  
942-5343
- PARKLAND PUBLIC SCHOOL  
942-1583
- R.M. MOORE PUBLIC SCHOOL  
779-2728
- ST. PATRICK SCHOOL  
542-4291
- THESSALON PUBLIC SCHOOL  
256-9591

**EARLY YEARS /  
BEST START HUBS**

- 102 WELLINGTON STREET  
942-6008
- 148 DACEY ROAD  
EXT. 246
- NOTRE DAME DES ÉCOLES  
942-5343
- SSM COMMUNITY OUTREACH  
EXT. 291

Tuesday February 12, 2013

**Re: Soup Kitchen Community Health Centre**

To whom it may concern,

Child Care Algoma and the Early Years/Best Start Hub is in support of the application from the Sault Ste Marie Soup Kitchen to create a *Community Health Centre*.

It is our understanding that this proposal will seek expansion of services developing a community health centre which will integrate medical care, health promotion and social services which are much require in this neighbourhood. We are confident that this innovative model will address community needs including vulnerable populations, culturally and linguistically diverse populations, and youth and families.

Child Care Algoma and the Early Years/Best Start has successfully established working relationships with community partners helping children and families succeed in our community, reinforcing our joint commitment to support families.

Our agency looks forward to partnering with such a needed and creative endeavour.

Sincerely,  
**CHILD CARE ALGOMA**

Claire Lafrenière  
Executive Director

*Building a Brighter Tomorrow*

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## Table de santé Sault Ste. Marie

February 12, 2013

Brian Dinsmore, chairman  
Soup Kitchen Community Centre  
172 James Street  
Sault Ste. Marie, Ontario P6A 1W3

The *Table de santé Sault Ste. Marie's* mission is to advocate for access to quality health programs and services that meet the cultural and linguistic needs of Francophones living in Sault Ste. Marie.

Further to community engagement sessions conducted during a feasibility study, the Francophone community raised the need for a Community Health Centre that would meet the needs of the Francophone community.

The *Table de santé Sault Ste. Marie* supports the possibility of a community health centre in collaboration with the *Soup Kitchen Community Centre*.

*Table de santé Sault Ste. Marie*

Le 12 février 2013

Brian Dinsmore, président  
Soup Kitchen Community Centre  
172, rue James  
Sault Ste. Marie (Ontario) P6A 1W3

La Table de santé Sault Ste. Marie a pour mission d'assurer aux francophones de la communauté l'accès à un ensemble de programmes et de services de santé en français de qualité qui répond à leurs besoins culturels et linguistiques.

La Table de santé Sault Ste. Marie s'est donné comme priorité de mieux servir les familles francophones de Sault Ste. Marie en participant au projet anticipé du centre de santé communautaire, de concert avec le *Sault Ste. Marie Soup Kitchen*.

La Table de santé Sault Ste. Marie souhaite devenir partenaire du centre de santé communautaire et veut offrir une programmation qui répondra aux besoins de sa clientèle et de la communauté francophone.

Veuillez agréer, monsieur le président, l'expression de nos sentiments les plus respectueux.

*Table de santé Sault Ste. Marie*



AA Northan MD MHSc FRCP(C)  
Medical Officer of Health  
www.algomapublichealth.com



February 12, 2013

Mr. Larry Little  
Community Development Officer  
Community Futures/Community Development Corporation  
of Sault Ste. Marie and Area  
672 Queen Street East  
Sault Ste. Marie, ON P6A 2A4

Dear Mr. Little:

Algoma Public Health (APH) is writing this letter in support of the Local Initiative Fund application made by the Soup Kitchen Community Centre. Developing a pre-feasibility study for the Soup Kitchen Community Health Centre project will guide the development of the project. The project aligns with the principles of social determinants of health, which is one of APH's strategic directions. This project will address access to health services issues that the population in this area experience. It will develop the community's capacity to support marginalized groups such as those living in poverty, urban aboriginals, the francophone community, families, women and children. It will also contribute to the health infrastructure in the community.

Currently, APH has a presence at the soup kitchen in a liaison capacity. APH staff is scheduled at various times to connect with clients on various health related topics. This project would give Algoma Public Health added avenue to deliver outreach and liaison programming to the population in this area.

The Sault Ste. Marie Soup Kitchen Community Centre has been highly successful in building community partnerships and capacity in community health. We are prepared to advance our partnership and participate in the development of this this project. APH looks forward to the support the CDC will offer to move this project forward.

Yours truly,

Dr. Allan A. Northan, MD MHSc FRCP(C)  
Medical Officer of Health

Blind River  
P.O. Box 194  
9B Lawton Street  
Blind River, ON P0R 1B0  
Tel: 705-356-2551  
TF: 1 (888) 356-2551  
Fax: 705-356-2494

Elliot Lake  
Algo Centre  
151 Ontario Avenue  
Elliot Lake, ON P5A 2T2  
Tel: 705-848-2314  
TF: 1 (877) 748-2314  
Fax: 705-848-1911

Sault Ste. Marie  
294 Willow Avenue  
Sault Ste. Marie, ON P6B 0A9  
Tel: 705-942-4546  
TF: 1 (866) 892-0172  
Fax: 705-759-1534

Wawa  
18 Girdley Street  
Wawa, ON P6S 1K2  
Tel: 705-856-7309  
TF: 1 (888) 211-8074  
Fax: 705-856-1752



SAULT STE. MARIE  
**INNOVATION  
CENTRE**  
Community Geomatics Centre

February 11, 2013

The Sault Ste. Marie Innovation Centre's Community Geomatics department has been collecting and analysing data relating to the demographics and status of the citizens of Sault Ste. Marie for the past decade. Much of the data clearly shows a wide difference in the overall well-being of the citizens of our city. Of particular concern are the residents of the downtown area from Pim Street to James Town, south of Wellington Street. The downtown area is within the bottom ten percentile of all Canadian cities when the social risk index is calculated for this area of the city. The Social Risk Index is a measure of socioeconomic risk in communities and neighbourhoods, derived from Census data from Statistics Canada. Indicators used include: Lone-parent families, families with Low income, not speaking an official language, recent immigrants, rented dwellings, mobility rate, adult unemployment rate, adults with less than a high school education and income from government transfers.

Though the needs are high, residents in the downtown area appear to have difficult times in accessing healthcare, sports and recreation and other public services. This is most likely due to a lack of services being offered in the downtown area and the transportation issues related to other locations. Most schools, associated parks, health care and other services have moved from the downtown areas in the past several years, though not due to a decreasing demand in this area.

The Sault Ste. Marie Innovation Centre strongly supports the completion of a study to determine the feasibility of constructing a community centre in the James Town area that would include access to healthcare, an early years centre for parents and children and other possible resources for a growing marginalized population in the downtown area.

Regards,

Paul Beach

GIS Manager

Sault Ste. Marie Innovation Centre

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APPENDIX TWO



**Sault Ste. Marie Soup Kitchen Community Centre Inc.**

**REQUEST FOR PROPOSALS**

**FOR CONSULTING SERVICES**

**COMMUNITY HEALTH AND CHILD CARE CENTRE FEASIBILITY  
STUDY AND BUSINESS CASE/OPERATING PLAN**

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**SAULT STE. MARIE SOUP KITCHEN COMMUNITY CENTRE INC.**

**REQUEST FOR PROPOSALS**

**FOR CONSULTING SERVICES**

**COMMUNITY HEALTH AND CHILD CARE CENTRE FEASIBILITY STUDY  
AND BUSINESS CASE/ OPERATING PLAN**

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The Sault Ste. Marie Soup Kitchen Community Centre Inc. invites you to submit a proposal to provide consulting services for a Community Health and Child Care Centre Feasibility Study and Business Case/Operating Plan.

Your proposal must contain recommendations to satisfy the requirements described in the “Terms of Reference” section supplied with this request.

During the period for proposal preparation, any questions concerning the requirements should be addressed to Mr. Tony Martin, Chair, Sault Ste. Marie Soup Kitchen Community Centre Inc. Community Health and Childcare Centre Advisory Committee, [anthonymartin@shaw.ca](mailto:anthonymartin@shaw.ca) (705) 945-6258.

This Request for Proposal along with the signed Form of Proposal and accompanying documents must be returned with your proposal. If you decline to submit a proposal, a written statement to that effect should be provided with the return of all documents.

Proposals are due and will be accepted no later than 12:00 PM, E.S.T., June 12, 2013.

We look forward to receiving your response.

Yours sincerely,

Tony Martin,  
Chair,  
Sault Ste. Marie Soup Kitchen Community Centre Inc. Community Health and

Childcare Centre Advisory Committee

[anthonymartin@shaw.ca](mailto:anthonymartin@shaw.ca)

(705) 945-6258

**SAULT STE. MARIE SOUP KITCHEN COMMUNITY CENTRE INC.**

**REQUEST FOR PROPOSALS**

**FOR CONSULTING SERVICES**

**COMMUNITY HEALTH AND CHILD CARE CENTRE FEASIBILITY STUDY  
AND BUSINESS CASE/ OPERATIONAL PLAN**

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Sealed proposals plainly marked as to contents, will be received by Tony Martin,  
until:

**12:00 O'CLOCK PM E.S.T., Wednesday, June 12, 2013**

**COMMUNITY HEALTH AND CHILD CARE CENTRE FEASIBILITY STUDY  
AND BUSINESS CASE/ OPERATING PLAN**

The Feasibility Study and Business Case/Operating Plan will focus on the development and sustainability of a Community Health and Child Care Centre in the Old West End of Sault Ste. Marie. The Community Health and Child Care Centre envisioned will provide primary health services, health promotion, psychosocial services, childcare services, educational services, and any other services as determined by community need, for residents of Sault Ste. Marie that experience barriers to accessible health and wellness.

The Community Health and Child Care Centre envisioned for the Old West End may include diverse linguistic and cultural groups in Sault Ste. Marie who also experience barriers to accessible health and wellness.

Request for Proposal Documents may be obtained by contacting Tony Martin, [anthonymartin@shaw.ca](mailto:anthonymartin@shaw.ca), (705) 945-6258.

Late proposals will not be accepted.

The Sault Ste. Marie Soup Kitchen Community Centre Inc. reserves the right to reject any or all proposals and the lowest or any proposal will not necessarily be accepted.

## **INDEX**

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- 1) INFORMATION TO PROPONENTS**
- 2) FORM OF PROPOSAL**
- 3) TERMS OF REFERENCE**

## **SECTION ONE**

### **INFORMATION TO PROPONENTS**

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**Sault Ste. Marie Soup Kitchen Community Centre Inc.**

**REQUEST FOR PROPOSALS**

**FOR CONSULTING SERVICES**

**Community Health and Child Care Centre Feasibility Study and Business  
Case/Operating Plan**

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### 1.0 Delivery and Submission of Proposals

Sealed proposals properly marked as to contents ("PROPOSAL FOR **COMMUNITY HEALTH AND CHILD CARE CENTRE FEASIBILITY STUDY AND BUSINESS CASE/OPERATING PLAN** "), will be received by the Sault Ste. Marie Soup Kitchen Community Centre Inc., 172 James Street, Sault Ste. Marie, Ontario, until 12:00 o'clock PM, E.S.T., Wednesday, June 12, 2013. **Late proposals will not be accepted.**

The Sault Ste. Marie Soup Kitchen Community Centre Inc. reserves the right to reject any or all proposals and the lowest or any proposal will not necessarily be accepted.

### 2.0 Discrepancies

If a proponent finds discrepancies in, or omissions from, the contract documents, or if in doubt as to their meaning, they shall notify Tony Martin who may issue a written addendum. Neither the proponent nor Tony Martin will make oral interpretations or clarifications, as to the meaning of the contract documents.

### 3.0 Informal Proposals

Proposals which are incomplete, conditional, or obscure, or which contain additions not called for, erasures, alterations, or irregularities of any kind, may be rejected as informal.

#### 4.0 Ability and Experience of Proponents

No Proposal will be considered from any Proponent unless known to have a background of experience in a related enterprise of a character similar to that covered by this document. In order to aid the Sault Ste. Marie Soup Kitchen Community Centre Inc. in determining the responsibility of any Proposal, the Proponent shall be able to furnish satisfactory evidence that they have the ability, financial expertise, experience, capital and facility to enable them to execute and complete the contract successfully.

Proponents not supplying the requested information within the stipulated time period may be disqualified.

#### 5.0 Confidentiality

No proponent shall have the right to review or receive any information with respect to a proposal, documentation or information submitted by any other proponent. The content of the proposal and all documentation and information shall be held in confidence by the Sault Ste. Marie Soup Kitchen Community Centre Inc. subject only to the provisions of freedom of information and privacy legislation.

#### 6.0 Proposal Left Open

The proponent shall keep their proposal open for acceptance for six (6) months after the closing date.

#### 7.0 Proposals Received

All proposals received by the Sault Ste. Marie Soup Kitchen Community Centre Inc. for consideration shall become the property of the Sault Ste. Marie Soup Kitchen Community Centre Inc. and shall not be returned to the proponent.

#### 8.0. Schedule

- Distribution of Request for Proposals: May 15, 2013
- Inquiries/ Question Period: May 15, 2013 - June 5, 2013
- Proposal Submission Deadline: June 12, 2013
- Consultant Selection: Upon funding approval
- Awarding of Contract: Upon funding approval
- Submission of final report to Sault Ste. Marie Soup Kitchen Community Centre Inc.: To be negotiated

Potential proponents are asked to designate one contact person to whom any additional information deemed to be relevant to the proposal may be communicated.

#### 9.0 Proposal Copies

Ten (10) complete copies of the proposal are required. One (1) copy to be designated as the original.

#### 10.0 Incurred Costs

The Sault Ste. Marie Soup Kitchen Community Centre Inc. will not be liable nor reimburse any Proponent for costs incurred in connection with this RFP including without limitation, preparation and delivery of its proposal, preparation and delivery of any further documentation requested by the Sault Ste. Marie Soup Kitchen Community Centre Inc., preparation for and attendance at interviews, if

required, or any other services that may be required as part of the evaluation process.

#### 11.0 Alterations to Document

No electronic reproduction or alterations of the original document will be permitted under any circumstances.

## **SECTION TWO**

### **FORM OF PROPOSAL**

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**SAULT STE. MARIE SOUP KITCHEN COMMUNITY CENTRE INC.**

**REQUEST FOR PROPOSALS**

**FOR CONSULTING SERVICES**

**COMMUNITY HEALTH AND CHILD CARE CENTRE FEASIBILITY STUDY  
AND BUSINESS CASE/ OPERATING PLAN**

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### **FORM OF PROPOSAL**

Tony Martin  
Sault Ste. Marie Soup Kitchen Community Centre Inc. Board of Directors  
Sault Ste. Marie Soup Kitchen Community Centre Inc.  
Sault Ste. Marie, Ontario

I/We the undersigned, hereby submit the attached proposal to satisfy the requirements as laid out by the Sault Ste. Marie Soup Kitchen Community Centre Inc.

I/We agree that this proposal shall be irrevocable from the time and date that the proposals are opened until the contract is awarded.

I/We agree that this proposal is made without any connection, knowledge, comparison of figures or arrangements with any other person or persons submitting a proposal for the same purpose and is in all respects fair and without collusion or fraud.

It is further understood and agreed that the lowest or any proposal will not necessarily be accepted and that the Sault Ste. Marie Soup Kitchen Community Centre Inc. reserves the right in its absolute discretion to reject any or all proposals, or accept that proposal deemed most acceptable to the Sault Ste. Marie Soup Kitchen Community Centre Inc.

Note: This "Form of Proposal" must be completed and returned as part of any proposal package to qualify.

---

NAME OF FIRM

---

ADDRESS

\_\_\_\_\_  
CITY

\_\_\_\_\_  
PROVINCE

\_\_\_\_\_  
POSTAL CODE

\_\_\_\_\_  
SIGNING OFFICER SIGNATURE

\_\_\_\_\_  
WITNESS

\_\_\_\_\_  
SIGNING OFFICER (PRINT NAME)

\_\_\_\_\_  
TELEPHONE NUMBER

\_\_\_\_\_  
DATE

\_\_\_\_\_  
FAX NUMBER

## **SECTION THREE**

### **TERMS OF REFERENCE**

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**Sault Ste. Marie Soup Kitchen Community Centre Inc.**

**COMMUNITY HEALTH AND CHILD CARE CENTRE FEASIBILITY STUDY  
AND BUSINESS CASE/ OPERATING PLAN**

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## **Terms of Reference**

### **1. Background**

The Sault Ste. Marie Soup Kitchen Community Centre Inc. currently provides a hot meal daily from Monday to Friday, Brighter Beginnings Children's Program, The Good Food Box, provides lunches for the Sault Ste. Marie Courthouse, operates as a Food Bank for community agencies, offers volunteer and training opportunities, advocacy, and a safe, caring environment.

The Sault Ste. Marie Soup Kitchen Community Centre Inc. has a proven track record of success in the community. The organization has been able to establish itself as a reliable, trustworthy and valuable member in the city of Sault Ste Marie.

This commitment has grown an organization that is able to recognize the needs of the community and develop and expand services to meet those needs.

#### **Launch of project**

In March of 2012, the Sault Ste. Marie Soup Kitchen Board of Directors decided to expand its operations in order to meet the complex needs of

community members in the Old West End community of Sault Ste. Marie. This expansion would include services such as primary health care, childcare and education, based on the community health centre model that operates successfully in other communities across Canada. Statistical evidence related to the community's needs, loss of infrastructure and services along with the health consequences associated with poverty, social isolation and inequitable access to health care and services has led the Sault Ste. Marie Soup Kitchen Community Centre to this model of care.

### **Project partners**

An Advisory Committee was formed in October of 2012 to create solutions that address the critical issues identified within the community. The Sault Ste. Marie Soup Kitchen Community Health and Childcare Centre Advisory Committee is comprised of members from a cross-section of various community agencies, linguistic groups and professions.

Support and interest has been indicated by the following partners:

- Aberdeen Business Group
- Algoma Community Legal Clinic
- Algoma Family Services
- Algoma Public Health
- Algoma University
- Child Care Algoma
- City of Sault Ste. Marie
- Community Geomatics Centre
- David Ellis Architect
- Indian Friendship Centre
- La Table Santé Sault Ste. Marie
- NORDIK Research Institute

- Nurse Practitioner-Led Clinic
- Patti Avery, M.D.
- Réseau du mieux-être francophone du Nord de l'Ontario
- Riversedge Developments Inc.
- Sault Ste. Marie Community Development Corporation
- St. John's Anglican Church
- Thinking Rock Community Arts

The Sault Ste. Marie Soup Kitchen Community Health and Child Care Advisory Committee is comprised of advisors representing a diverse cross-section of the community.

Members include:

- a city planner
- community development specialists
- a community economic development officer
- a community legal worker
- a former MP and MPP
- a medical doctor
- a member of the Francophone community
- an architect
- business people
- community artists

- provincial government employee
- public health nurses
- Soup Kitchen Community Centre staff

Community engagement will occur during the summer of 2013 and will involve community members and community agencies. This “Pre-Feasibility Study” will educate the community about community health centres, gather data about the community’s needs for health care and services and organize the community to generate grassroots support for the initiative. The Pre-Feasibility study is funded by the Sault Ste. Marie Soup Kitchen Community Centre and the Sault Ste. Marie Community Development Corporation Local Initiatives Fund.

### **What is our vision for our CHCC?**

A community health centre’s core strength is that it allows people to access a supportive circle of care that is able to meet their complex health and social needs. This model has been effective, especially in populations that experience barriers to health, such as people living in poverty and people from unique cultural and linguistic groups. Sault Ste. Marie’s diverse population would greatly benefit from this type of centre.

Community health centres are holistic health care providers, recognizing the complexity of community health needs, from individual care to health promotion and community health programs. More than primary health care, community health centres provide access to all determinants of health including social workers, community support workers, wellness programming, and other services as determined by community need.

Planting the community component roots of the CHCC in the Old West End of Sault Ste. Marie is very important, given its historical significance to the development of the community as well as its current realities. By hosting

child and health care agencies and services under one roof, the CHCC will serve as a meeting place for the community and benefit from increased access to health care that meets its complex needs. Early child care and learning is recognized as key to building strong communities and it is this commitment to community health that the CHCC will foster and support.

### **Proposed concept for Sault Ste. Marie**

The proposed CHCC will operate as a community health centre as well as a child care centre to meet the needs of local residents and families. It is anticipated that community agencies will access the centre as well to deliver programs and meet with the community. Our vision includes social enterprise incubation, a strong commitment to the arts and grounded community development.

## **2. OBJECTIVE**

The Sault Ste. Marie Sault Ste. Marie Soup Kitchen Community Centre Inc. Community Health and Childcare Centre Advisory Committee wishes to retain the services of a consulting firm to determine the needs, the feasibility, and a plan to develop a Community Health and Child Care Centre in proximity to the current Sault Ste. Marie Soup Kitchen Community Centre Inc. The catchment area should be defined in geographic terms and socioeconomic terms in proximity to present Sault Ste. Marie Soup Kitchen Community Centre Inc. facility.

## **3. SCOPE OF WORK**

### **Feasibility Study**

The successful consultant will:

1. Provide an assessment of the current situation facing the Sault Ste. Marie Soup Kitchen Community Centre Inc. and the population it serves, outlining the strengths, weaknesses, opportunities and threats, taking into consideration its current resources and capabilities;
2. Recommend supportive rationale to expand to a Community Health and Child Care Centre model;
3. Identify the linguistic, cultural and socioeconomic groups to be serviced, the targeted populations and assess their needs;
4. Identify current health and social services being provided to these groups and identify gaps in services;
5. Recommend programs and service opportunities and rationale to support these;
6. Describe the geographic catchment area and the challenges and opportunities within this area;
7. Recommend comparable health delivery models that function in similar environments;
8. Provide recommendations on potential site locations, conceptual design alternatives and rationale to support these;
9. Identify potential partners, their needs, their roles and recommend methods for collaboration;
10. Provide an assessment of the current macro operating environment, i.e. political, economic, etc.
11. Recommend on how to best proceed with the Community Health and Child Care Centre, various funding models for initial and ongoing Community Health and Child Care Centre operations;
12. Outline a detailed functional plan with objectives and timelines based on the above assessment to establish a Community Health and Child Care Centre.

## **Business Case/Operational Plan**

The Business Case/Operating Plan will address the following details:

1. The case will cover the Community Health and Child Care Centre's operations for three fiscal years;
2. Mandate for the Community Health and Child Care Centre;
3. Strategic directions of the agency, mission, vision, values;
4. Detailed organizational structure;
5. Detailed overview of the Community Health and Child Care Centre's forthcoming programs/activities;
6. Program Descriptions;
7. Capital plan to include overall capital costs, operating costs;
8. Performance measures and targets;
9. Program Evaluation process;
10. Proposed operating expenditures, projected revenues, funding requirements;
11. Summary of staff numbers; impact of business plan on human resources; compensation strategy;
12. Risk assessment and management (financial and staffing at a minimum);
13. Initiatives involving third parties;
14. Implementation Plan;
15. Communication Plan;
16. Protocols and Processes for dealing with Client Complaints and Appeals

#### **4. STUDY ADVISORY COMMITTEE AND CONSULTATION PROCESS**

The consultant will work directly with the Community Health and Childcare Centre Advisory Committee. To assist the consultant, key documentation will be available, such as, i.e. Sault Ste. Marie Social-Demographic Maps from the Community Geomatics Centre, findings from community engagement sessions.

## **5. DELIVERABLES**

25 hard copies of the **COMMUNITY HEALTH AND CHILD CARE CENTRE FEASIBILITY STUDY/BUSINESS and OPERATING PLAN** and 10 electronic copies (pdf format on CD)

## **6. PROPOSAL REQUIREMENTS**

Each Consultant's proposal (not more than ten (10) pages in length) will include the following:

- a) A paragraph that demonstrates a clear understanding of the requirements and objectives of the project;
- b) A detailed description of the proposed approach and methodology;
- c) A description of the firm's relevant experience, including similar studies, and/or previous experiences working on similar initiatives, and references with whom the details of these experiences may be discussed;
- d) A proposed work plan identifying the estimated time for consulting services to complete the necessary work outlined;
- e) A list of staff who will be assigned to the required tasks, including qualifications, relevant experience, per diem rates and amount of time that each will dedicate to this project, and the respective work task responsibilities for each individual; and
- f) A proposed budget describing professional fees, technical fees, travel costs, and other expenses.

## **6. BUDGET**

The consultant will provide a project cost breakdown for the following deliverables:

Feasibility Study and Business Case/Operating Plan to include all reports, expenses and taxes. It is expected that the consultant will be present for three (3) meetings throughout the course of the study, i.e. inception, mid-project review and Board presentation.

## **7. TIMING**

It is expected that the **Community Health and Child Care Centre Feasibility Study and Business Case/Operating Plan** will be completed within four (4) months.

## **8. RECEIVING OF PROPOSALS**

10 copies of the consultant's proposal must be received no later than noon, Wednesday, June 12, 2013.

Proposals should be addressed to:

Tony Martin,  
Chair, Community Health and Childcare Centre Advisory Committee  
Sault Ste. Marie Soup Kitchen Community Centre Inc.  
172 James Street  
Sault Ste. Marie, ON P6A 1W3

Consultants should be prepared to address any questions that might arise from the review of their proposal.

As part of the selection process, consultants should be prepared to attend an interview session in Sault Ste. Marie, at a date to be determined.

No Payment will be made for the preparation and submission of proposals or for attendance of interview.

## **9. CLIENT AND CONSULTANT AGREEMENT**

The successful consultant will enter into an agreement for services with the Sault Ste. Marie Soup Kitchen Community Centre Inc.

The Sault Ste. Marie Soup Kitchen Community Centre Inc. shall have the right at any time to cancel the agreement in whole or in part, without further payment except for those services completed prior to cancellation.

The final report and all other materials produced during the completion of this study will become the property of the Sault Ste. Marie Soup Kitchen Community Centre Inc. The consultants will be required to obtain Sault Ste. Marie Soup Kitchen Community Centre Inc. approval prior to releasing any study information to other parties.

## **10. COMMUNICATION**

All inquiries concerning this Request for Proposal should be submitted to:

Tony Martin  
Chair, Community Health and Childcare Centre Advisory Committee  
Sault Ste. Marie Soup Kitchen Community Centre Inc.  
172 James Street,  
Sault Ste. Marie, ON

P6A 1W3

[anthonymartin@shaw.ca](mailto:anthonymartin@shaw.ca)

(705) 945-6258

## **11. EVALUATION PROCESS**

The proposals will be evaluated based on, but not limited to, the following criteria:

- Corporate Profile of the Consulting Firm
- Project Team
- Relevant Past Experience
- Proposed Work Program
- Schedule

Short-listed proponents may be invited to make a presentation to provide the selection committee an opportunity to ask additional questions.

## **12. SCHEDULE**

- Distribution of Request for Proposals: May 15, 2013
- Inquiries/ Question Period: May 15, 2013 - June 5, 2013
- Proposal Submission Deadline: June 12, 2013
- Consultant Selection: Upon funding approval
- Awarding of Contract: Upon funding approval
- Submission of final report to Sault Ste. Marie Soup Kitchen Community Centre Inc.: To be negotiated

## **13. NOTIFICATION OF RESULTS**

Following the completion of the proposal, evaluations, and confirmation of an approved agreement, all consultants will be advised of the results in writing.

#### **14. SPECIFIC REQUIREMENTS**

All information, documents, plans, and memos, etc. provided to the proponent by the Sault Ste. Marie Soup Kitchen Community Centre Inc. to assist the proponent in carrying out this assignment for the Sault Ste. Marie Soup Kitchen Community Centre Inc. are, unless otherwise stated, confidential and are not to be provided to third parties without the written consent of the Sault Ste. Marie Soup Kitchen Community Centre Inc.

Time is of the essence for the delivery of provision of the services requested herein. The delivery dates must be adhered to, as the Sault Ste. Marie Soup Kitchen Community Centre Inc. may be relying on that date for scheduling future projects or funding requirements.

#### **15. CONFLICT OF INTEREST**

All Proponents, consultants, design professionals, etc, retained by the Sault Ste. Marie Soup Kitchen Community Centre Inc. shall disclose to the Sault Ste. Marie Soup Kitchen Community Centre Inc. prior to accepting an assignment, any potential conflict of interest. If such a conflict of interest does exist the Sault Ste. Marie Soup Kitchen Community Centre Inc. may at its discretion withhold the assignment from the proponent, consultant, design professional, etc, until the matter is suitably resolved. And furthermore, that if during the conduct of a Sault Ste. Marie Soup Kitchen Community Centre Inc. assignment a proponent, consultant, design professional, etc, is retained by another client giving rise to a

potential conflict of interest, the proponent, consultant, design professional, etc, shall so inform the Sault Ste. Marie Soup Kitchen Community Centre Inc.. If a significant conflict of interest is deemed by the Sault Ste. Marie Soup Kitchen Community Centre Inc. to exist, then the proponent, consultant, design professional, etc, shall refuse the new assignment or shall take such steps as are necessary to remove the conflict of interest.

## **16.CONDITIONS**

The Sault Ste. Marie Soup Kitchen Community Centre Inc. reserves the right to discuss any and all proposals, to request additional information from Proponents and to accept or reject any or all proposals.

The lowest cost proposal will not necessarily be accepted. Proposals will be evaluated and the contract awarded based on an evaluation to determine which proposal, best meets the needs of the Sault Ste. Marie Soup Kitchen Community Centre Inc..

The Sault Ste. Marie Soup Kitchen Community Centre Inc. retains the right to request additional information from bidders and failure to provide such additional information may be considered a basis for rejecting proposals.

## **17.NON-ASSIGNMENT**

Neither this contract nor any work to be performed under this contract or any part thereof may be assigned by the Proponent without the prior written consent of the Sault Ste. Marie Soup Kitchen Community Centre Inc.. Such written consent however, shall not under any circumstances relieve the Proponent of its liabilities and obligations under this contract and shall be within the sole and unfettered discretion of the Sault Ste. Marie Soup Kitchen Community Centre Inc. .

### APPENDIX THREE

Credit: Brenda Bloore

Who creates the goals?

#### **Goals for Community involvement**

1. community must be used to generate ideas for revitalization projects
2. community must be a part of implementation process
3. evaluation of existing projects and how to improve existing projects
4. what the community see as the needs, let the community Identify their community needs
5. what has been tried in the past
6. could we improve some past methods
7. to empower the community members to make inform decisions
8. to make sure the community goals are been met
9. building community capacity
10. building community leaders

#### **Community Involvement Challenges include:**

1. Does your city/town/community have a official plan for redevelopment Do they have a vision for the community
2. the governance of the community planning process, reaching consensus from diverse backgrounds and different needs
3. Developing interest and still stay within the goal of the project
4. Reaching out to participants among the residents, who have barriers
5. Involving various stakeholders (organizations, BIA etc. ) and building bridges among stakeholders, residents and governments.
6. Educating communities (residents, stakeholders, government) about the goals of the project
7. Identifying, representatives to help educate them, build capacities that will represent the diversity of the community and represent the constituencies at public meetings and or planning sessions

## Questions to ask before Community Engagement

1. Who is the community? residence, merchants, schools, stakeholders
2. Where do they live
3. Who will most directly be impacted by the revitalization project?
4. What are the community assets. open space, community space etc
5. Who started the process and why
6. Has there been past events that has given direction for revitalization, what are the outcomes of that engagement
7. Can we get the data that is required, current economic status, crime, census reports, educational systems
8. What are the stigmas attached to the revitalization area
9. Can you create a list of stakeholders, local governmental leaders, leaders in the community to commit to the project
10. Is there a volunteer community established
11. How can you break down the aspects of the project to involve the community
12. Create an engagement process by fostering a dialogue, and creating community interest and support
13. Develop a local commitment to the project for the long term process
14. Develop policies on respecting community culture and the diversity
15. Do you have a terms of reference

I think that we need to work on the questions and a event but do we have the above area covered.

What are the things you love about your community

What things are most important to you and your family member

What agencies are important to you and your family

(Avoid making assumptions about what support providers are needed) Keep track and save all of the information you gather in a binder to assist in organizing your thoughts about service providers and their different options.

If unsure of an answer get clarification

## **APPENDIX FOUR**

### **Terms of Reference 1**

Soup Kitchen Community Health Centre Advisory Committee

Terms of Reference and 6-month Work Plan

DRAFT

Friday, March 1, 2013

Prepared by:

Allyson Schmidt

Brenda Bloore

Calna McGoldrick

Tony Martin

With support of: Jude Ortiz, NORDIK and Peggy Lauzon Terms of Reference 2

To the Soup Kitchen Community Centre Board of Directors,

The following draft documents are to guide and inform the Soup Kitchen Community Health Centre Advisory Committee. These documents are to formalize the advisory process, giving the Board of Directors and Advisory Committee members clear guidelines to the expectations of time commitments, governance process and scope of work of the committee. The terms of reference outlines and describes the scope of the committee and the recommended forms of governance for the committee. The work plan outlines goals of the committee and indicators for the committee to accomplish.

There are four (4) recommendations for the Board of Directors consideration:

- ☐ To review, revise and accept the Terms of Reference for the Advisory Committee;
- ☐ To appoint a co-chair for the Advisory Committee from the Soup Kitchen Board of Directors membership;
- ☐ To allocate working hours of Soup Kitchen staff members to participate in the Advisory Committee for training and formation and participation in sub-committees and working groups;
- ☐ To allocate a budget for the Community Health Centre project to use to carry out the community engagement strategy and project planning and development in the amount of \$7,500. This amount includes funds for community engagement as part of the pre-feasibility study, the 'Faces of the Community' Gala, and space for the community health centre project.

Terms of Reference 3

## **Soup Kitchen Community Health Centre Advisory Committee**

### **Terms of Reference**

February 27, 2013

The Sault Ste. Marie Soup Kitchen Community Centre has decided on a strategic vision to develop a community health centre in the downtown area of Sault Ste. Marie, specifically in the area where the Soup Kitchen is currently located. The community health centre project is to incorporate a child care centre, the current Soup Kitchen operations, primary medical services and other services to be determined through community engagement. A staff representative from the Soup Kitchen will provide administrative support for the committee, including preparation of meeting agendas, minutes and establishment of meeting times.

### **MISSION**

Through community capacity-building and engagement, the Advisory Committee will facilitate the creation of leaders within the community to build the community health centre project through the transformative development of human, social, economic, community and political resources.

### **GOVERNANCE**

The committee may decide to have a rotating chair and a co-chair position. The chair will act as liaison to the Soup Kitchen Community Centre Board of Directors. The committee may also decide to have a secretary and a treasurer. Advisory committee members may be chosen to be representative of the community of Sault Ste. Marie and of the community of Soup Kitchen members. Ad hoc subcommittees or working groups may also be formed between Advisory Committee members and non-members of the Advisory Committee. These ad hoc subcommittees and working groups will have their own terms of reference and report to the Advisory Committee. The committee may decide to employ consensus decision-making, with majority vote, as necessary.

### **ROLE**

Soup Kitchen Community Health Centre Advisory Committee members provide an ongoing exchange of information between community members and the Soup Kitchen Board of Directors. Members are encouraged to provide strategic advice and input into the development and planning of the proposed community health centre in order to respond to needs within the community. This may be in the form of meeting participation, submission of written information, participation in sub-committees and working groups. Committee members' perspective assists the Soup Kitchen Board of Directors in ensuring that the proposed community health centre is relevant to the community. Terms of Reference 4

**Specific tasks of members are not restricted to, but include:**

- ☐ Serving as problem identifiers and solvers;
- ☐ Promoting, assessing, advising and advocating for a community health centre in Sault Ste. Marie;
- ☐ Providing input into the creation of the community health centre strategic plan;
- ☐ Recommending and/or seeking out innovative ways to create collaborations/partnerships with other organizations in support of the proposed community health centre;
- ☐ Serving as the community health centre's resource for information in local area;
- ☐ Recommending community engagement programming and events relevant to community members;
- ☐ Assisting in providing and/or reviewing content for applications, request for proposals and other written communication materials, and;
- ☐ Recommending and/or encouraging the cultivation of revenue sources to support the continued development of a community health centre.

**Commitment Required:**

Meet weekly to bi-weekly in person; estimated time: 2 hours/month

Time to be determined by members

November, 2012-November, 2013

The committee may wish to continue meeting into 2014.

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Terms of Reference

5

**Soup Kitchen Community Health Centre Advisory Committee 6-month Work Plan DRAFT****Expected Results: What do you want to accomplish?**

Describe the changes you hope will occur, your goal or desired outcome. Use Results or Change words, such as improve, reduce, enhance, expand, decrease, prevent, maintain.

Increase community engagement in development of a community health centre in downtown Sault Ste. Marie

**Activities: How will you accomplish it?**

List the tasks or things you will do to achieve your goal. Use Action words, such as conduct, deliver, facilitate, promote, train, provide, repair

- ☐ Establish a diverse advisory committee of citizen and resource people
- ☐ Develop collaborative and cooperative process in overseeing the project, prioritizing projects, developing resources and identifying additional funding sources
- ☐ Establish processes for recruiting and engaging diverse citizens and resource people in implementing development

**Performance Indicators****How will you know if you've accomplished what you wanted to do?**

Identify things that will show you are achieving your planned results. Use Indicator or Description words, such as numbers and percentages for quantitative results, and perceptions, feelings and attitudes for qualitative results.

- ☐ Advisory committee of 10-12 diverse stakeholders are engaged and actively participating in regularly scheduled meetings and adhering to Terms of Reference
- ☐ Assessment and evaluation tools identified
- ☐ Report written identifying and prioritizing gaps in data, development plans and additional funding sources
- ☐ Diverse citizens and resource

	plans ☐ Conduct a series of downtown neighbourhood focus groups in identifying priority areas and addressing potential project concerns	people are engaged in implementing development plans ☐ 3-5 neighbourhood engagement focus groups have increased awareness of community health centres
☐		☐
Increase community capacity in community health centre awareness	☐ Create conceptual presentation of Sault Ste. Marie Community Health Centre project to create awareness ☐ Survey participants and catchment neighbourhoods in evaluating project	☐ Presentation of concept to 3-5 different stakeholder groups, including Soup Kitchen membership ☐ 15-20 people have increased capacity in community health centre awareness ☐ Engagement process has improved community awareness and increased participation and neighbourhood understanding of community

## DRAFT BUDGET

This DRAFT budget for the Soup Kitchen Community Health Centre Advisory Committee accounts for three (3) major components:

1. The pre-feasibility study which is community engagement and capacity-building for the community health centre project. This includes staff time, staff training, office space, focus groups, and materials and time for community engagement. This project proposes the hiring of two (2) Algoma University students through the Soup Kitchen's contract with NORDIK.
2. The operations of the Advisory Committee including office space, staff hours, refreshments for meetings;
3. The 'Faces of the Community' Gala including promotional materials, venue space, artist honorariums.

This budget accounts for volunteer time and in-kind donations. This budget accounts for and values people's time and efforts: the real heart of this organization. This budget shows that for every dollar spent on this project, it is generating a great deal of value in the organization and in the community. ***Soup Kitchen Community Health Centre***

### **Advisory Committee**

**Oct 1, 2012 - Sept 30, 2013**

**D=A+B+C**

<b>Budget (Internal document, includes calculations)</b>	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>
Item	CDC	Cash	In-kind	Total
Amount		Other		
<b>Salaries</b>				
<i>Coordinator for Pre-Feasibility Study: April 1, 2012 - August 30, 2013</i>		9,660	9,660	
\$20/hr. x 20 hrs./week x 21 weeks =8,400				
(\$8,400) + 15% MERC (\$1,260)= \$9,660				
<b>Soup Kitchen Staff (for community engagement, chc training, Gala)</b>				
3 staff members @ \$20/hr. x 6hrs./week x 21 weeks = \$7,560		8,694	8,694	
(\$7,560)+ 15% MERC (\$1134)= \$8,694				
1 staff member @ \$22/hr. x 10 hrs./week x 21 weeks= \$ 4,620		5,313	5,313	
(\$4,620)+ 15% MERC (\$693)= \$5,313				
 <i>Summer University Students: May 13 - Aug 31, 2013</i>				
2 Algoma U students X \$ 12/hr X 35 hrs/wk X 16 wks		15,456	15,456	
funded by <b>Algoma U Summer Employment Program</b>				
Full funding for 16 wks @ \$ 12/hr + MERC (15%) to max of \$ 8,000/student				
<b>Supervision</b>				
7 hrs/week X 21 weeks X \$ 60/hour (NORDIK)		8,820	8,820	
<b>Office Space</b>				

5 months @ \$400/mo.= \$2,000 (Location to be determined)	2,000		2,000
Internet 5 months @ \$75	375		375
Office support (photocopying, office equipment, insurance)	2,400		2,400
<i>Advisory board</i>			
20 meetings X 2 hours/meeting X 11 volunteers @ \$ 18/hr (In-kind as volunteers are not paid)	7,920		7,920
Refreshments 500 \$5.00/person X 20 meetings X 15 pp= \$1,500 (Committee members and staff members)		1,000	1,500
<i>Five focus groups</i>			
Room rental \$ 50/use X 5 meetings	250		250
Focus group materials \$ 40 X 5 meetings	200		200
Child care \$ 40 X 5 meetings	140	60	200
Refreshments \$ 5.00/person X 10 pp X 5 focus groups	250		250
Volunteer attendees \$ 18/pp X 10 pp X 5 groups	900		900
Transportation fees \$2.25/pp X 10pp X 5 groups X 2 (return fare)	225		225
<i>Community Engagement Planning</i>			
Website Development (Volunteer hours 25 X \$18/hr= \$450)	450		450
Volunteer hours 100 X \$ 18/hr, in kind donations	1,800		1,800
Printing and display costs (posters, reports, brochures)	1,000		1,000
Organizations/businesses hosting data on their websites \$ 250 X 8 organizations, in-kind donation	2,000		2,000
<i>"Faces of the Community Gala" Community awareness launch - June 1, 2013</i>			
Room rental	300		300
Refreshments	1,500		1,500
Door prizes (artists, downtown businesses donations)	2,000		2,000

Artist honorariums	400		400	
Posters and other print media	400		400	
Other advertising	490		490	
Volunteers (200 hours @ \$ 18/hr)	3,600		3,600	
Total Project cost		<b>78,103</b>		
10,000	36,963	31,140		78,103
<b>Funding</b>	<b>Secured</b>	<b>Anticipated</b>		<b>Proposed</b>
SSM CDC		10,000		
Partners				
NORDIK		8,820		
Algoma U Summer Employment Program		15,456		
Other in kind contributions		22,320		
Soup Kitchen Staff hours		14,007		
Soup Kitchen contribution		7,500		
TOTAL PROJECT	<b>78,103</b>	10,000	0	68,103
FUNDING				

**Secured: Cash or in-kind contributions have already been received**

E.g.: lead organization has earmarked the funds

**Anticipated: Cash or in-kind contributions have been confirmed but not received**

E.g.: Partnering organizations have committed resources but the lead organization has not yet received them

**Proposed: Organizations plans to apply for cash or in-kind donations**

E.g. Funding applications that have been submitted and awaiting a decision or intending to submit; sponsorship programs; fundraising plans; organizations and/or businesses the lead organization plans to approach