

Neighbour Consultation Meeting - 446 York St

Summary of Table group discussion / Questions of clarification

What will the name of the facility be? Why are we glossing over the word “drug” why aren’t we calling it what it is? Why SCF?

Will aftercare space be large enough to hold all the clients so they are not out loitering?

What will the safety and security measures be? Beyond the code of conduct

What happens if they don’t obey the code of conduct? What are the consequences?

Logistics around SCF, hours of operation, wait times/volume – will they have the capacity? Are people compelled to stay after using? How does this affect loitering?

Are there going to be a lot of people hanging out around the site – will there be more as the men’s mission is right across the street – they hang out their now. Lots of time you see the methadone clinic and line-ups outside – how will this be addressed?

Is after care mandatory? What percentage is actually using it?

No presentation around financial or staffing plan? What investment is being made and what can be expected?

Distressing to see the location highlights? See contradictions

What happens to the person if they are told they are unable to use at the facility – what happens to them then? Also when they leave the site where do they go? What happens to those not staying for the after care?

Why is it so close to HB Beal? Contradicts what was posted on the website saying it would not be close to a school.

Neighbourhood concerns – suggestions to address concerns

No pro’s for the site, only cons

Too close to high schools, and walk-in traffic business

Concern for vulnerable people with traffic on York St.

Increase in prevalence of drugs at night

Overburdening of community members – dealing with similar issues and public disorder for many years – finding a better location would be suggested

Appendix A to Report No. 026-18

Pride in neighbourhood and community and lots of concerns and challenges already in their neighbourhood – will bring more on this community when they are trying to revitalize.

Solution – quarantine it all in one location and away from downtown. Move all the facilities (men's mission, methadone, SCF) that support these people and then downtown could be revitalized.

Concern for those using the facility and the men's mission, and being on York St., and travelling unsafely across the street

Any possibility to move to an industrial area with transportation for those that would use the facility?

Have to be cautious when pulling into underground parking in their building? Positive feeling wanting to help people, but question the layout, planning,

Also concerns with lack of police response in their area.

Not confident about the property taxes, and insurance rates. Could there be discussion on these with the city.

Re-evaluating the safety of the current area, then being able to compare to 6 month post site opening.

433 King - already people loitering and hanging out at all hours of the night and day - will this increase the negative behaviour to this area

433 King resident – clean for 20 years – understand the harm reduction process, little disappointed as the decisions are being made out of desperation. Circumventing channels, and caught up in red tape – creating a corridor from Simcoe, SA, MM's, York St., Chapmans, etc. Put all services in the old LPH, green space, facilities, community areas, etc. Police don't come right away to this neighbourhood – too many situations happening. Work with the police so that they residents feel safe. Need their presence and it needs to be transparent.

Zoning by the city – Council can pass a zoning – can this go through the appeal process and challenged by the public?

Neighbour Consultation Meeting - 241 Simcoe St.

Table group discussion / Questions of clarification

How much will it cost to operate the site and what happens if it closes with a change in government and/or policy.

Questioning the part about a decrease in public disorder – concern is that people are currently using in this area, if the SCF is there, where will they go after. You say they will disperse (not stick around), but how do you know that. Could they mill about and cause some public disorder?

What is the plan for eliminating drug use in the community? Is the community drug and alcohol strategy going to be the tool that will help to decrease the drug use? What will be the tool to do this?

Does this issue fall under the harm reduction pillar of the community drug and alcohol strategy?

Why do we not call this enabling? Are we going to solve this problem by having these 2 sites and the mobile site? How do we get people off drugs?

What is the pattern of use at SCF over time? How does this compare - how many people would be consuming vs those using the sites to consume.

What happens when the users leave the facility? Hours of operation? How will you handle drug traffickers?

How far out will the security go? Set up perimeters.

What will the city do to alleviate the destruction of property? Why funding for this versus putting that money into housing, mental health or treatment?

Why not have a larger police presence in the area, so that it helps to deter the destruction of property in this area.

Garbage collection in these areas – city won't collect unless bagged properly.

What will happen with the existing facilities on that ground floor? Will they be moved or or will they no longer exist?

Will you be supplying clean needles? Could there be a deposit on the needles to help with them being returned? Need to have them pick up their own needles. Want to know how the needles in the whole community will be address not just around the site?

What about the public health of the residents in this community?

Appendix A to Report No. 026-18

How did they pick this site as no one in this community agreed to have it in this area. Is it because we are poor and have no voice?

Notice is never given in a timely matter, had to see on news before actually know about it in their neighbourhood. We have no voice