

September 12, 2019



Re: Your request for access to information under Part II of the *Access to Information and Protection of Privacy Act, 2015* [Our File #: PRE/59/2019]

On August 14, 2019 the Premier's Office received your request for access to the following records/information:

"Information note received 6/27/2019 titled LAS - Transient Population in Happy Valley-Goose Bay."

I am pleased to inform you that a decision has been made by the Chief of Staff of the Premier's Office to provide access to some of the information requested. Access to the remaining information has been refused in accordance with the following exceptions to disclosure, as specified in the *Access to Information and Protection of Privacy Act* (the *Act*):

29. (1) The head of a public body may refuse to disclose to an applicant information that would reveal

(a) advice, proposals, recommendations, analyses or policy options developed by or for a public body or minister;

You may appeal this decision by asking the Information and Privacy Commissioner to review this response, as set out in section 42 of the *Act* (a copy of this section of the *Act* has been enclosed for your reference). A request to the Commissioner must be made in writing within 15 business days of the date of this letter or within a longer period that may be allowed by the Commissioner. Your appeal should identify your concerns with the response and why you are submitting the appeal.

The appeal may be addressed to the Information and Privacy Commissioner as follows:

Office of the Information and Privacy Commissioner
2 Canada Drive
P. O. Box 13004, Stn. A
St. John's, NL. A1B 3V8

Telephone: (709) 729-6309
Toll-Free: 1-877-729-6309
Facsimile: (709) 729-6500

You may also appeal directly to the Supreme Court Trial Division within 15 business days after you receive the decision of the public body, pursuant to section 52 of the *Act*.

This response will be published as outlined on the Completed Access to Information Requests website (<http://atipp-search.gov.nl.ca/>). If you have any further questions, please feel free to contact me by telephone at (709)729-3570 or by e-mail at matthewworthman@gov.nl.ca.

Sincerely,

A handwritten signature in blue ink that reads "M. Worthman". The signature is written in a cursive style with a large, sweeping flourish at the end.

Matthew Worthman
ATIPP Coordinator
Enclosure

Access or correction complaint

42.(1) A person who makes a request under this *Act* for access to a record or for correction of personal information may file a complaint with the commissioner respecting a decision, Act or failure to Act of the head of the public body that relates to the request.

(2) A complaint under subsection (1) shall be filed in writing not later than 15 business days

(a) after the applicant is notified of the decision of the head of the public body, or the date of the Act or failure to Act; or

(b) after the date the head of the public body is considered to have refused the request under subsection 16(2).

(3) A third party informed under section 19 of a decision of the head of a public body to grant access to a record or part of a record in response to a request may file a complaint with the commissioner respecting that decision.

(4) A complaint under subsection (3) shall be filed in writing not later than 15 business days after the third party is informed of the decision of the head of the public body.

(5) The commissioner may allow a longer time period for the filing of a complaint under this section.

(6) A person or third party who has appealed directly to the Trial Division under subsection 52(1) or 53(1) shall not file a complaint with the commissioner.

(7) The commissioner shall refuse to investigate a complaint where an appeal has been commenced in the Trial Division.

(8) A complaint shall not be filed under this section with respect to

(a) a request that is disregarded under section 21;

(b) a decision respecting an extension of time under section 23;

(c) a variation of a procedure under section 24; or

(d) an estimate of costs or a decision not to waive a cost under section 26.

(9) The commissioner shall provide a copy of the complaint to the head of the public body concerned.

Direct appeal to Trial Division by an applicant

52. (1) Where an applicant has made a request to a public body for access to a record or correction of personal information and has not filed a complaint with the commissioner under section 42, the applicant may appeal the decision, Act or failure to Act of the head of the public body that relates to the request directly to the Trial Division.

(2) An appeal shall be commenced under subsection (1) not later than 15 business days

(a) after the applicant is notified of the decision of the head of the public body, or the date of the Act or failure to Act; or

(b) after the date the head of the public body is considered to have refused the request under subsection 16(2).

(3) Where an applicant has filed a complaint with the commissioner under section 42 and the commissioner has refused to investigate the complaint, the applicant may commence an appeal in the Trial Division of the decision, Act or failure to Act of the head of the public body that relates to the request for access to a record or for correction of personal information.

(4) An appeal shall be commenced under subsection (3) not later than 15 business days after the applicant is notified of the commissioner's refusal under subsection 45(2).

**Information Note
Labrador Affairs Secretariat**

Title: Transient Population in Happy Valley-Goose Bay

Issue: To provide information on the transient population in Happy Valley-Goose Bay. This note was initiated by the Labrador Affairs Secretariat (LAS).

Background and Current Status:

- The Town of Happy Valley-Goose Bay (HV-GB) has experienced an increase in both its homeless and transient populations in recent years. Homelessness is traditionally defined as lacking a permanent place of residence whereas transient people are in communities short term and typically have permanent fixed addresses elsewhere.
- The transient population increases in the Spring as the weather warms up with people from the North Coast and Sheshatshiu setting up camps in the community. The increase in the transient population has resulted in tents in the community, loitering in public and commercial places, acts of lewd behavior, panhandling and public use of alcohol.
- In April of 2014, a large boarding house in HV-GB closed, displacing 32 people. Through a partnership between the Nunatsiavut Government (NG) and Newfoundland and Labrador Housing (NLHC), the Nunatsiavut Supportive Living Plan (NGSLP) was established.
- In Labrador, NLHC's Supportive Living Program (SLP) provides \$4.42 million for supportive services managed by the NG with 38 permanent staff and 17 casual staff. The funding supports 16 housing units in HV-GB (35 beds), 1 in Hopedale (3 beds) and 1 in Nain (4 beds); all staffed 24 hours daily. See Annex A for further information on services from NLHC.
- The Out of the Cold Shelter (The Housing Hub) in HV-GB provides 9 beds to clients with complex needs from 8pm to 8am daily but is often over capacity. The shelter is managed by the Nunatsiavut Government with \$500,000 funding from NLHC for fiscal 2019-20. Operating funding beyond this fiscal year has not yet been identified.
- The Labrador Friendship Centre operates a 12 room/24 bed hostel in the community as well. The hostel is alcohol and drug free which may act as a deterrent to accessing beds due to the noted addiction issues.
- There are a number of working groups in the community that have been formed in recent years that focus on the areas of housing, homelessness and transient people. The Central Labrador Housing Action Team was established in 2014 to address the issue of homelessness. The action team consists of provincial government representatives that includes LAS and Advanced Education, Skills and Labour (AESL), the NG, and the Salvation Army Church. The action team is chaired by NLHC.
- Another group, the Housing and Homelessness Coalition supports community interventions and events designed to assist the homeless and those who find themselves at risk of homelessness. The group advocated for the establishment of the homeless shelter, the supportive living housing program, the Kindness Connection, as well as other smaller fund raising initiatives. The group is comprised of representatives from provincial government departments/entities; the RCMP; Labrador-Grenfell Health (LGH); and community organizations.

- The Town formed the Transient and Homeless Population Working Group in July 2017 with the purpose of holding solution-focused discussions with local stakeholders regarding the transient population within the community. Representatives on the working group include the RCMP; MHA's office; the NG; the Innu Nation; LGH; local businesses; and LAS.
- The HV-GB RCMP detachment commander and other detachment members are on multiple committees/groups within the community that are examining possible solutions for this issue and related issues, including the Transient and Homeless Population Working Group, the HV-GB Housing and Homelessness Coalition, the Mental Health and Police Liaison Committee and the Mental Health Coalition.
- On June 10, 2019 the Mayor of HV-GB, Wally Andersen, wrote to Justice and Public Safety (JPS) Minister Andrew Parsons requesting a meeting to discuss the transient population in the community. The letter noted that council had received complaints of indecent exposure and acts and that the Town "does not have the resources, nor the jurisdiction, to deal with this serious issue". The letter may be viewed under Annex B.
- On June 13, 2019 the Town issued a news release calling on the Government "to provide adequate resources to address the concerns related to the 'transient' population in the community". The release noted that it had held numerous meetings with the RCMP and stakeholders to raise concerns regarding instances of indecent acts, public drunkenness, trespassing and loitering and that it is a provincial government responsibility as the Town does not have the authority or resources to deal with the matter.
- During a June 14, 2019 interview with CBC's Labrador Morning Show, Mayor Andersen stated the Town did not have the resources or know-how to deal with the transient issue and called upon the Premier, as Minister of Labrador Affairs, to meet to discuss the transient issue in HV-GB.

Analysis:

- Representatives from the Housing Hub Shelter have indicated that there are no transient people availing of beds in the shelter. Staff have noted that transients may come to the shelter during the day to shower, change clothes or for food.
- While there are transient people from different north coast communities in HV-GB, the majority of transient people in the community are primarily Innu from Natuashish which has a ban on alcohol in the community. For some living in tents during the summer months is a choice as they have homes and employment but cannot drink in their home community. It was noted that some work at the Muskrat Falls site and opt to remain in HV-GB during their turnover period instead of returning home. As such some of the people do not require supportive living.
- The RCMP in HV-GB has acknowledged the concerns of residents with respect to intoxication of individuals in public and related issues and noted it conducts regular patrols and takes measures to ensure the safety of the public, within its mandate and capacity and in collaboration with community groups, the Town and health services.
- Health and Community Services (HCS) advises training is underway with the RCMP to expand Mobile Crisis Response (MCR) into HV-GB. MCR has been implemented in other parts of Labrador with great success. Since March 31, 2018 MCR made 143 visits in the Labrador West area.

- AESL is not able to confirm if any of the transient people are Income Support clients. Residents of Natuashish and Sheshatshiu are not eligible for Income Support through the Government of Newfoundland and Labrador as both communities are covered under an income assistance program delivered by the Innu Round Table Secretariat.
- AESL has indicated that it did not receive any requests for assistance from any transient people in HV-GB in recent months. Depending on the situation, AESL has assisted in returning residents to their home community in the past.
- A meeting was held in June 2018 to discuss the homeless and transient populations in HV-GB. In attendance were the four MHA's from Labrador including Minister Dempster (NLHC); House Speaker Trimper; former Minister Letto (Municipal Affairs and Environment); former Parliamentary Assistant to the Premier, Randy Edmunds; Mayor Andersen (HV-GB); Councilors Compton-Hobbs and Dyson (HV-GB); LAS; AESL; NLHC; the NG and the Salvation Army.
- At the meeting it was noted that representatives from the Innu communities of Natuashish and Sheshatshiu have been engaged in discussions about the transient issue in the past but have not been engaged recently.
- Since June 2018, the Town has not hosted any additional meetings of the Transient and Homeless Population Working Group. The Town may wish to target specific groups for committee members that have capacity in dealing with complex needs and replace the committee members to include high-level officials and stakeholders to ensure progress.
- In June 2019, Mayor Andersen wrote the province requesting a meeting to discuss the transient issue in HV-GB. [REDACTED] 29(1)(a) [REDACTED] The budget for the community is approximately \$22 million. [REDACTED] [REDACTED] There are two enforcement officers employed by the Town that may assist in enforcement. 29(1)(a) 29(1)(a)
- [REDACTED]
- In order to address the complex issues facing HV-GB, a collaborative inter-sectoral approach is needed. 29(1)(a)
- [REDACTED]

29(1)(a)

- Issues that stem from mental health and addictions and homelessness will often present on the policing frontline but require a collaborative, community-based response. The RCMP advises they are committed to continuing to work with the community on these matters.
- As part of the Towards Recovery Action Plan, planning is underway for a number of community-based mental health and addictions services for HV-GB by 2020. These services include flexible assertive community treatment teams, community crisis beds, and opioid dependence treatment. Walk-in counselling for services (i.e. Doorways) is also available in HV-GB. As a result, there are no wait lists for counselling services in HV-GB or in any of the communities on the North or South Coast. HCS is also developing a Provincial Action Plan in response to the All-Party Committee recommendations under Towards Recovery. MAPs can be explored as part of developing a provincial action plan. For further information on initiatives from LGH and HCS please see Annex C.
- LGH advises that there are many opportunities to work collaboratively with Indigenous partners, health care providers, government, residents, people with lived experience, as well as the Town of HV-GB to address the needs of the population.
- HCS notes that there may be an opportunity to utilize the existing community coalition in HV-GB and the Indigenous Health Project Team to help inform and propose solutions to address complex issues facing HV-GB.
- Solutions will require cooperation and partnership between the Town, various government departments/agencies, law enforcement, and Indigenous groups/ governments.

Action Being Taken:

- LAS will continue to work with the Town for solutions on the transient issue and recommend that the Town convene a meeting of the Transient and Homeless Working Group with additional stakeholders.
- LAS will work with JPS to arrange a potential meeting with the Minister and Town on the transient issue.

Prepared/Approved by: F. Smith/ M. Watkins/J. Barnes/R. Bowles in consult with AESL, CSSD, HCS, IIAS, JPS, and NLHC
Reviewed by: W. Penney/C. Blundon, Cabinet Secretariat

June 26, 2019

Annex A

Break Down of Cost and Number of Beds

Nunatsiavut Government - Current 16 Units 35 beds	Happy Valley- Goose Bay	\$2,904,072	35 beds; 24-hour supervision
Nunatsiavut Government- Nain & Hopedale	Labrador-Nain and Hopedale	\$789,759	7 beds; 24-hour Supervision & Staff
Homeless Hub (8 bed shelter and staff) 8pm- 8am	Happy-Valley- Goose Bay	\$528,610	9 beds; supervision during operating hours

NLHC Rental Units in HV-GB (78)

- 70 tenant occupied units
- 3 units used by the Supportive Living Program
- 1 unit used by the Perrault Place Tenants' Association
- 4 vacancies in various stages of preparation for occupancy
- 35 applicants on the waitlist for HV-GB

Melville Native Housing Association

In addition to NL Housing's units, Melville Native Housing Association manages 75 units for indigenous applicants/tenants in Happy Valley Goose Bay. They report having 5 units under repair; and 30 on the waitlist.

Annex B

Town of Happy Valley-Goose Bay

P.O. Box 40 Station B • Happy Valley-Goose Bay, Labrador, Newfoundland • A0P 1E0 • 709-896-3321 • 709-896-9454

June 10, 2019

Hon. Andrew Parsons
 Minister of Justice and Public Safety
 Attorney General
 Government of Newfoundland and Labrador
 P.O. Box 8700
 St. John's, NL A1B 4J6

Dear Minister,

First of all, I want to thank you for taking the time out of your busy schedule to speak with both myself and Deputy Mayor Bert Pomeroy on May 30, 2019, regarding concerns related to the so-called "transient" population in our community.

As noted during our telephone call, the vast majority of these individuals are Indigenous, primarily from the Innu communities of Natuashish and Sheshatshiu, and there are some from the Inuit communities of Nunatsiavut as well. They migrate to Happy Valley-Goose Bay each spring, once weather conditions are favorable, and live in makeshift camps throughout the community. The majority, if not all, of these people, have addiction issues and move to Happy Valley-Goose Bay to have easier access to alcohol and drugs.

As a Council, we have received complaints of indecent exposure and acts, such as people urinating and defecating in public areas and having sex in open public spaces in plain view of children and others. We have also received complaints of panhandling near and at public buildings, of seniors being harassed for money, etc. Many consume alcohol in public at all hours of the day, and it's common to see an individual passed out on the side of a road or along trails within the community.

The RCMP is well aware of the situation, as is MHA Trimper, Minister Dempster, Sheshatshui and Mushuau First Nation band councils, Innu Nation, Nunatsiavut Government, Labrador-Grenfell Regional Health Authority, and the Happy Valley-Goose Bay Homeless Coalition, etc.

As you can appreciate, Minister, the Town of Happy Valley-Goose Bay does not have the resources, nor the jurisdiction, to deal with this serious issue. However, residents are turning to us to find a solution. There is nothing more concerning than receiving calls from elders who are afraid to go to the bank or post office or afraid to go for a walk for fear of being harassed. Our children, or anybody for that matter, do not need to witness vagrancy, crude and indecent acts, violence, etc. taking place in our community regularly.

The RCMP, by its admission, is unable to provide adequate enforcement because of lack of resources. When officers respond to complaints, they are limited in what they can do. The police are reluctant in laying charges for Indecent Acts, as per Section 173 of the Criminal Code, or for consuming alcohol in public, etc., as doing so will result in little or no action from the courts. As well, the facilities do not exist in the community to detain these individuals for extended periods, and they go back to their regular routines within hours of being released by the RCMP.

This issue has been ongoing for several years, but began to escalate around the time construction started on the Muskrat Falls Project. Whether this is a coincidental or not, many would argue it is just one of several direct social impacts of the Project. The Joint Review Panel for the Lower Churchill Hydroelectric Generation Project noted in its final report that it would be "inherently difficult to predict the social and cultural consequences" of the Project on Happy Valley-Goose Bay and other Labrador communities because of limited baseline data, but suggested there should be an "ongoing commitment from all involved to address social issues, conduct careful monitoring, and provide the resources necessary to respond to the unexpected."

We acknowledge there is no easy solution, and that the problem is not likely to go away anytime soon – if ever. We contend, however, that the Province needs to exercise its authority and provide the necessary supports and resources to deal with the situation – both in the long and short term. As a Council, we feel we are burdened with the responsibility to find solutions, yet this matter is completely within the jurisdiction of the Province.

Minister, this is a serious matter - one that paints our community in a very negative light; and one that requires the Province's immediate action. We are prepared to meet with you, as well as others within government, in Happy Valley-Goose Bay or St. John's, as soon as practical to discuss a co-operative, proactive approach to dealing with this negative social impact on our community.

I look forward to your prompt and favorable response.

Sincerely,


Wilson (Wally) Andersen
Mayor

c.c. Hon. Dwight Ball, Premier, and Minister for Intergovernmental and Indigenous Affairs, and Minister responsible for Labrador Affairs

Mr. Perry Trimper, MHA Lake Melville

Annex C

Health Services in HV-GB

Towards Recovery Action Plan

- In July 2017, the Provincial Government released Towards Recovery: The Mental Health and Addictions Action Plan for Newfoundland and Labrador. The Action Plan establishes a timeline to substantially complete all 54 recommendations by the All-Party committee.
- The following All-Party Committee recommendations relate specifically to Labrador:
 - Support Indigenous people to achieve their mental wellness goals by providing resources to assist with sustained land-based programming;
 - Ensure psychiatrists provide regular visits to Labrador coastal communities;
 - Establish four to six dedicated mental health beds in Labrador; and,
 - Prioritize the recruitment of two permanent full-time psychiatrists.
- An Indigenous Health Project Team has been established to advise on the implementation of Towards Recovery recommendations as well as inform the advancement of land-based programming. Membership includes representation from Sheshatshiu Innu First Nation (SIFN), Mushuau Innu First Nation, Nunatsiavut Government, and NunatuKavut Community Council, and Labrador-Grenfell Health (LGH).

Mental Health and Addictions Services and Supports

- Psychiatric services have expanded within the region through telehealth and regular visits. One new permanent psychiatrist has been recruited for Happy Valley-Goose Bay (HVGB). A second psychiatrist is providing tele-psychiatry services dedicated solely to the LGH region from St. John's.
- Walk-in counseling services (i.e. Doorways) are available in HVGB. As a result, there are no wait lists for counselling services in HVGB or in any of the communities on the North or South Coast.
- On June 12, 2019, the provincial government awarded a contract valued at \$426,000 to Fougere Menchenton Architecture Incorporated for the design of a new six-bed mental health unit at the Labrador Health Centre in HVGB. The new unit will include services that are inclusive and culturally appropriate for all Labradorians.
- Training is underway with the Royal Canadian Mounted Police to expand Mobile Crisis Response (MCR) into HVGB. MCR has been implemented in other parts of Labrador with great success. Since March 31, 2018, MCR made 143 visits in the Labrador West area.
- Planning is underway for other community-based services for HVGB by 2020. These services include flexible assertive community treatment teams, community crisis beds, and opioid dependence treatment.
- A community coalition has been established in HVGB to enable community, Indigenous partners, LGH, government, and other stakeholders to come together to discuss and address mental health and addictions issues in the area.
- Working with community organizations and Indigenous partners, LGH delivered more than 25 mental health and addictions workshops on topics like Applied Suicide Intervention Skills Training (ASSIST), Fetal Alcohol Spectrum Disorder, and youth substance use.

Primary Health Care

- LGH has completed a community needs assessment in collaboration with HVGB and SIFN partners. This initiative helps provide comprehensive information about the health needs of communities and the community's priorities, including populations with unmet needs, health issues, and gaps in resources, programs and services. The information gathered through the community needs assessment process will be used in service delivery planning.
- LGH continues to work with Indigenous and community partners towards establishing Community Advisory Committees (CACs). Establishing CACs enables community and regional health authority stakeholders to come together to discuss and prioritize community issues, and to strategize towards improved services and resources.
- LGH has been working towards primary health care renewal in Sheshatshiu and surrounding area. Community engagement sessions in Sheshatshiu have focused on diabetes management and opportunities for enhanced integration between LGH and SIFN care providers for quality improvement.
- Community engagement activities led in partnership by SIFN and LGH have led to implementation of the BETTER program in North West River and Sheshatshiu. Through the BETTER program, individuals receive a personalized prevention prescription and ongoing follow-up in the prevention and management of chronic disease.
- Community Health Nurses (CHNs) work to deliver person-focused care within the transient/homeless population. CHNs deliver education on tuberculosis (TB) at homeless shelters as well as provide contact tracing and dispense medications for TB.
- LGH provides ambulatory clinic walk-in service to enable same-day access to primary health care.