

PO Box 1749 Halifax, Nova Scotia B3J 3A5 Canada

#### **MEMORANDUM**

To: Accessibility Advisory Committee – Chair & Members
From: Jennifer Weagle, Legislative Assistant
Date: November 13, 2013
Subject: November 18, 2013 AAC Meeting Item 5.1 Presentation – Metro Community Housing Association – Cathy Crouse, Executive Director

Ms. Cathy Crouse, Executive Director, Metro Community Housing Association, will be presenting to the Committee at the November 18<sup>th</sup> AAC meeting. Ms. Crouse forwarded the attached submission that the MCHA made to the Regional Plan 5-year review (RP+5) for your information. Ms. Crouse will be speaking to the housing issues outlined in the submission.



#### **Metro Community Housing Association**

## Submission to Halifax Regional Municipality on the Five-Year Review of the Regional Plan

Sent on July 3, 2013 via e-mail to PlanHRM@halifax.ca

#### 1.0 Background Information on MCHA and Supported Housing Services

Metro Community Housing Association (MCHA) is a non-profit organization formed in 1974 to provide supported housing to people who have experience with mental health issues. We are funded through service contracts with the provincial Department of Community Services (DCS) through the Services for Persons with Disabilities Program (SPD).

The following is an overview of the supported housing services MCHA provides within our two major program areas:

- a) Residential Services:
  - Six licensed Small Option Homes with 3 residents in each home.
  - Four licensed Group Homes with a distribution of 4, 7, 9 and 10 residents.
  - > A licensed Residential Care Facility (RCF) with 31 residents.
  - A licensed Regional Rehabilitation Centre (RRC) with 5 residents who are transitioning from the East Coast Forensic Hospital.
- b) Supported Apartment Services/Independent Living Supports (ILS)
  - 75 individuals living in apartments and provided with in-house and case management supports of up to 21 hours a week.

MCHA is the only fully independent non-profit organization within HRM with the mission to support people with mental health issues. Other organizations which serve the same population are for-profit operators or government services. We currently provide support to 159 individuals through a volunteer Board of Directors, 130 paid staff members, and an annual budget of \$5.8 million.

A major change in the provision of the DCS Services for Persons with Disabilities (SPD) Program occurred in May of 2010 when the provincial government amended the Homes for Special Care Act to include Small Option Homes. This decision was made to ensure that Small Option Homes would be licensed and residents would therefore have access to provisions within the Protection for Persons in Care Act. The process of licensing MCHA's six Small Option Homes was completed in July of 2012 when we were issued five-year licenses subject to maintaining licensing standards, which are monitored through twice-yearly inspections.

At the same time that this transition was underway the province was faced with the financial constraints imposed by the worldwide financial crisis of 2008. The direction that DCS has given to residential service providers is to increase the capacity within our homes wherever possible, and particularly within Small Option Homes. Early in 2013 the Department of Health and Wellness and DCS jointly issued a discussion paper entitled "Putting People First: Working Together to Support Independence and Dignity" which outlines the principles for the development of a truly person centered service system for seniors and people with disabilities. This paper states that there is a pressing need for the development of efficient and effective services and support systems and states that there are "approximately 280 people waiting for SPD residential services. Many are in hospital – some for as long as two or more years – even though they don't need acute medical or psychiatric care at that level." (Putting People First, p. 3)

#### 2.0 Human Rights Protection related to Supported Housing

The United Nations Convention of the Rights of Persons with Disabilities, to which Canada is a signatory nation, states the following:

#### "Article 19 – Living independently and being included in the community

States Parties to this Convention recognize the equal rights of all persons with disabilities to live in the community, with choices equal to others, and shall take effective and appropriate measures to facilitate full enjoyment by persons with disabilities of this right and their full inclusion and participation in the community, including by ensuring that:

- a) Persons with disabilities have the opportunity to choose the place of residence and where and with whom they live on an equal basis with others and are not obligated to live in a particular living arrangement;
- b) Persons with disabilities have assess to a range of in-home, residential and other community support services, including personal assistance necessary to support living and inclusion in the community, and to prevent isolation or segregation from the community;
- c) Community services and facilities for the general population are available on an equal basis to persons with disabilities and are responsive to their needs."

The current framework of zoning restrictions within HRM presents a barrier to the human rights of individuals who require supported housing. The zoning restrictions also interfere with the efficient delivery of supported housing services. Given the violation of human rights and the pressing need for increased capacity of supported housing services in HRM, the Regional Plan needs to ensure that the current zoning restrictions are removed.

On April 12, 2013, representatives of MCHA and other agencies providing supported housing met with Sean Audas, Development Officer, Western Region; and Andrew Faulkner, Development Officer, Eastern Region to review the zoning regulations related to licensed Homes for Special Care. The following summaries and comparison chart provide an overview of the discriminatory, confusing and inconsistent restrictions that are currently in place within the zoning regulations for Halifax Peninsula, Dartmouth, and Downtown Dartmouth.

As the information provided below illustrates, the zoning restrictions provide significant barriers to where supported housing can be located, particularly if there are more than three residents in a home. With the current need for the Department of Community Services to increase the capacity of Small Option Homes, these restrictions will now have a greater impact on the human rights of people with disabilities to receive the supports they need and to live in the community with choices equal to others.

#### **Overview of zoning restrictions in Halifax:**

- Licensed Homes for Special Care providing housing for 4 up to 10 individuals (including staff) can be in any residential or commercial zone, provided specified stipulations are met. The number of staff counted is the highest number of staff that would be on shift at any one time, e.g.: count one for single staffed homes, and two if double staffing is scheduled at any time of the day. If a supervisor or an administrator has an office in the home, they are also counted as a staff member.
- 2) Organizations that wish to relocate a home to any of the Residential or Commercial Zones that permit R-1 uses are required to meet the specific stipulations, including that the new location is not within 1,000 feet of another "special care home". The agency is responsible for obtaining a letter from the provincial government to confirm that the location meets this requirement.
- 3) The exception to 2) above is the R-3: Multiple Dwelling Zone. In the by-laws for this zone there is reference to R-1 uses being permitted in 44(1)(a) but there is also a separate reference to a "special care home" under Other Uses 44(1)(g) (Page 72). There is also a specified stipulation in "48A Open Space for Special Care Home A minimum of 35 percent of the lot area of any lot on which a building is erected, altered or used as a special care home, shall consist of landscaped open space." (Page 78) Within this zone the number of residents is identified in the definition of a Special Care Home, which is "four or more persons".

- 4) Homes with more than the R-1 limit of 10 individuals, including staff, may also be located in the P Zone: Park and Institutional. Special Care Homes are not specified in this zone but the uses listed in 67(1) for the P Zone includes "or another institution of a similar type" in (d).
- 5) The specific stipulations for special care homes embedded in the R-1 Zone, such as the requirement for outdoor landscaped space per resident, has not applied to Small Option Homes located in apartment buildings when they were not licensed. It is not clear how this will be affected by the fact that they are now licensed.
- 6) If a nonconforming use is in place when a property is purchased, the nonconforming use can be transferred to the new owner, provided that the use is in operation within 6 months of the purchase. After six months the non-conforming use approval expires. This is specifically stated in the Dartmouth By-laws as "discontinuance" (see Page 8 of these notes), and also applies within Halifax areas.

#### Overview of Zoning Restrictions in Dartmouth and Downtown Dartmouth:

- 1) R-1 Single Family Homes: Group homes of 4 or more residents are not permitted in R-1M, R-1 A Zones. They are not specifically excluded, but they do not fall under the definition of "family" which permits up to 3 roomers or boarders.
- 2) R-2 Two Family Homes: Group homes of not more than 6 residents are permitted.
- R-3 Multiple Family (medium density); R-4 Multiple Family (high density) and C-2 – General Business: Group homes of not more than 12 residents are permitted.
- 4) The Dartmouth MF-1 (Multiple Family Residential Zone) permits in (48)(1)(d) "Institutions, other than for corrections use or for the treatment of mental cases." This clause is highly discriminatory and offensive.
- 5) If a location is on a street that abuts to a more restrictive zone, the by-laws of the more restrictive zone will apply. For example, a home of four residents cannot be located on a street that abuts an R-1 Zone.
- 6) "Lodging houses" of 3 to 8 rooms are permitted in the Dartmouth By-laws in R-3, R-4 C-4 and MF-1 zones. "Rooming houses" are permitted in the Dartmouth DB – Downtown Business zone. If there are live in or overnight staff supports in lodging or rooming houses, the exclusion of Homes for Special Care in their definitions would apply.
- 7) In the Dartmouth By-laws Zone S Institutional does not specify a size limit for "institutions". The Downtown Dartmouth By-laws define a home for more than three persons licensed under the Homes for Special Care Act as a "residential care facility" and specifically includes them in the definition of an institution. Institutions established prior to July, 2007 are allowed to remain in the Dartmouth - Downtown Neighbourhood Zone. The Dartmouth -Downtown Business District Zone permits institutional uses.

	Halifax Peninsula	Dartmouth	Downtown
Definitions	Three or less residents considered a family through reference to the Halifax Charter. "Special Care Home" defined as for four or more persons, and licensed by the Homes for Special Care Act.	"Family" definition in By-laws provides for up to three roomers or boarders. "Group Home" defined as for more than 3 persons and licensed pursuant to the Homes for Special Care Act.	Dartmouth "Residential Care Facility" defined as for more than 3 persons and includes facilities licensed by the Homes for Special Care Act. "Institutional Use" defined to include a residential care facility.
	Halifax Peninsula	Dartmouth	Downtown Dartmouth
Excluded Zones	More than ten residents, including staff, permitted only in P: Parks and Institutional Zone.	<ul> <li>Four or more residents excluded from R- 1: Single Family Zone.</li> <li>Seven or more residents excluded from R- 2: Two Family Zone.</li> <li>Thirteen or more residents excluded from R- 3: Multiple Family (medium density), R-4: Multiple Family (high density), and C-2: General Business Zones.</li> </ul>	DowntownNeighbourhoodZoneZoneexcludesinstitutional usesafter July 5, 2007.Others in existenceon July 5, 2007 aregrandfathered as anon-conforminguse.DowntownBusiness DistrictZoneZone permitsinstitutional usesand roominghouses to amaximum of sixrooms.

**Comparison Summary of Zoning Language and Restrictions** 

	Halifax Peninsula	Dartmouth	Downtown Dartmouth
Other	R-1: Single Family	Streets which	Discontinuance:
Restrictions	Zone requires	border on a more	Transfer of a non-
	landscaped open	restrictive zone	conforming use to
	space; 1,000 feet	apply the more	a new owner
	from another Special	restrictive rules.	expires after 6
	Care Home; and		months.
	specified parking.	MF-1: Multiple	
		Family Residential	
	R-3: Multiple	excludes	
	Dwelling Zone	institutions for	
	requirement for	corrections use or	
	landscaped open	for the treatment of	
	space is a minimum	"mental cases".	
	of 35% of the lot.	Discontinuance:	
	Discontinuance:	Transfer of a non-	
	Transfer of a non-	conforming use to	
	conforming use to a	a new owner	
	new owner expires	expires after 6	
	after 6 months.	months.	

#### **Recommendation for Chapter 3: Settlement and Housing**

The Board of Directors of Metro Community Housing Association is in agreement with the direction that Draft 2 of the Regional Plan has taken with respect to S-33 in Section 3.5 on Housing Diversity and Affordability, specifically: "(d) permitting licensed homes for special care of more than three residents; (e) permitting small scale homes for special care as single unit dwellings and eliminating additional requirements beyond the use of as a dwelling."

## The Board of MCHA recommends the immediate removal of restrictions related to Homes for Special Care within land use by-laws to ensure that the human rights of people with disabilities are respected within all areas of HRM.

The Board of MCHA also supports the intent of the sentence that was in Draft 1 of the Regional Plan, which stated in S-31C on Page 38: *"The number of residents permitted should be compatible with the prevailing land use."* This statement is consistent with the principles of inclusion and social integration. However, it is important that the mechanism for making determinations of appropriate size and scale be delegated to the Development Officer level of decision-making. It would be tragic if this type of decision would involve either a) a lengthy process, or b) a process that requires a public meeting, as this would enable discrimination of people with disabilities due to the persistence of prejudice and NIMBY attitudes.

#### 3.0 Affordable Housing

Access to safe, accessible and affordable housing is one of the primary concerns of the people supported by MCHA who live in their own apartments. It is very difficult to access this type of housing with the \$535 a month that is provided by DCS through Income Assistance to cover the cost of both rent and utilities.

The provincial government's recent release of the Housing Strategy for Nova Scotia now provides a framework for collaboration with municipalities to pursue the development of mixed housing projects wherein a percentage of units are targeted to people with low and fixed incomes. It is encouraging that HRM has quickly and publically supported the provincial Housing Strategy. HRM has also recently shown support for this planning and policy direction through provisions for density bonuses to encourage developers to include affordable housing within their building projects. Section 3.5 of Draft 2 of the Regional Plan and the associated fact sheet on Housing Affordability outlines a variety of ways that HRM intends to support the goal of increasing our stock of affordable housing including *"permitting auxiliary dwelling units or secondary suites within singe unit dwellings".* 

MCHA is in full support of efforts made to increase the availability of affordable housing and is particularly interested in the following intention stated in Draft 2:

## *"S-35 HRM may consider partnerships or financial support for non-profit housing organizations."*

MCHA currently receives a direct financial benefit from HRM with the reduction of our property taxes of 75%, which must be applied for annually. We greatly appreciate this support, which enables us to allocate more of our funding to directly benefit of the people we support. As our budgets are becoming increasingly more difficult in balance, we would appreciate any further support the municipality could offer in this regard.

# The MCHA Board recommends that HRM give consideration to the further reduction of property taxes for non-profit housing organizations from the current 75%, and a mechanism to eliminate the administrative burden of making an application on an annual basis.

MCHA is also very interested in beginning a discussion with HRM on collaboration and partnership on the implementation of our Property Development Plan to replace or enhance the six supported housing properties that we own. The types of support that we envision could be contributed by HRM within this partnership would include the sharing of technical expertise, provision of information on programs and assistance, consideration of the sale of municipally owned land at below market levels, and property swap arrangements.

#### 4.0 Food Security

As of July 1, 2013, the food allowance that is provided by DCS to MCHA clients who live in their own apartments is \$254 a month, which averages to \$8.35 per day. The amount that is actually spent on food is likely to be less because all personal hygiene and household items must be paid for from the food allowance.

The Settlement and Housing Chapter in Draft 1 of the Regional Plan included the following statement on Page 50 within the Section 3.9 on Healthy Communities:

"Food security, including access to healthy food within proximity to residential areas, is also paramount to good land use planning and community design. Food stores, markets and community gardens should be included within new and existing neighbourhoods and communities.

## *S-40D HRM shall, through the secondary planning process, consider health impacts and food security*"

This statement is not included in Draft 2 of the Regional Plan and it was one of the only areas in Draft 1 that acknowledged the need for food security. Affordable housing is misplaced unless there is also access to affordable, accessible, and healthy food. People who need affordable housing rarely own a private car or can afford the cost of a taxi to obtain their groceries. The aging population, as well as parents with small children, needs to be able to walk to a local store to buy small quantities of food, as carrying heavy bags of groceries by foot or by public transit is not possible. Corner markets in residential areas that provide staple non-perishable foods as well as fresh fruits and vegetables are commonplace in other large cities but not in the areas of HRM delineated for the Regional Center.

# The Board of MCHA strongly recommends that the Regional Plan include the intention to support the availability of healthy and affordable food, which is accessible to local residents without requiring the use of a car or taxi.

MCHA appreciates the opportunity to provide input to the review of the Regional Plan and we look forward to the final version and the resulting opportunities to increase the availability of supported and affordable housing within HRM.

If there are any questions regarding this submission, please contact Cathy Crouse, Executive Director at 225-7119 or <u>ccrouse@mcha.ns.ca</u>

Respectfully Submitted by: Karl Lingley, President, Metro Community Housing Association