



GUELPH POLICE SERVICES BOARD
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FINANCIAL SERVICES DIVISION

TO: Chair Peter McSherry and Members of the Guelph Police Services Board

DATE: Thursday, October 5, 2023

SUBJECT: 2024-2027 OPERATING BUDGET

PREPARED BY: Sarah Purton, Manager, Financial Services

APPROVED BY: Daryl Goetz, Deputy Chief of Administration

RECOMMENDATION:

That the Guelph Police Services Board receive the Guelph Police Service 2024 - 2027 Operating Budget in the amounts of \$61,399,520 in 2024, \$66,366,000 in 2025, \$70,863,850 in 2026 and \$75,403,900 in 2027 for consideration and approval at the October 19, 2023 Guelph Police Services Board Meeting.

SUMMARY:

The 2024-2027 operating budget represents the second time that a multi-year operating budget has been presented for Board approval. **The Service's** four-year budget has been developed in consideration/furtherance of the following:

- **Alignment with the Service's** Strategic Plan.
- Continued implementation of the recently completed KPMG Staffing & Service Delivery study recommendations. These recommendations provide an essential roadmap in providing efficient and effective staffing and service delivery to meet the needs of our rapidly growing community now and into the future. The full KPMG Staffing and Service Delivery report is attached as Appendix A.
- Completion of the implementation of our urgently required supportive staffing program to support our members and our community. This program was initiated by the Board in 2023 based on the needs/rational documented

in the Supportive Staffing Model Implementation Report dated June 15, 2023. A copy of this report, and related attachments, is attached as Appendix B.

- **Meeting the Service’s** legislated responsibilities and contractual / collective bargaining obligations. This includes ongoing commitments to partner agencies including CMHA and Victim Services Guelph-Wellington. Also included are legislative responsibilities including NG911 requirements and WSIB obligations.
- As presented the Service has a fully funded 10-year capital budget and forecast. The 4-year operating budget continues to ensure that proper preventative maintenance is being undertaken to maintain GPS assets and facilities.

The purpose of this report is to present the Guelph Police Services Board with the **Service’s 2024-2027 Operating Budget**. As outlined in section 39 of the Police Services Act, a municipality that maintains a municipal board shall provide the board with sufficient funding to provide adequate and effective policing in the municipality. The Act also requires that a municipal Police Services Board submit operating and capital estimates to the municipal council that will show amounts required to maintain the police service and provide it with the infrastructure and administration necessary to provide policing services.

2024-2027 GUELPH POLICE SERVICE OPERATING BUDGET:

TIMELINE & PROCESS

In correspondence dated May 11, 2023, the Guelph Police Services Board received direction from the City Treasurer outlining budget development guidelines for the 2024-2027 Operating and 2024- 2033 Capital budgets. The following schedule was supplied for the current year budget process:

	Date	Item	Start time
1	Thursday, October 26, 2023	Budget Document Released & Budget Message Board Opens	
2	Tuesday, November 7, 2023	Special Council: Budget presentation	9:00 a.m.
3	Thursday, November 9, 2023	Special Council: Budget deliberations	9:00 a.m.
4	Wednesday, November 15, 2023	Council budget public delegations	6:00 p.m.
5	Wednesday, December 6, 2023	Council budget approval	9:00 a.m.

Also included in this communication was that city staff will present Council with a complete four-year budget for approval (2024-2027).

The 2024-2027 budget has been prepared by staff and guided by staff input, contractual and legislated obligations, and strategic themes and priorities as identified by external partners and internal requirements. Contractual requirements

(collective agreement), economic reality, and workload implications were identified to ensure that a fiscally responsible budget was put forth. The Guelph Police Service (GPS) finance team requested all Business Unit Managers complete a thorough review of their operating expenses over the last 4 years while compiling their 2024-2027 operating budget.

SERVICES PROVIDED:

The GPS provides policing services to the City of Guelph and the recommended budget provides funding for 229.5 police officers and 121.45 civilians in 2024, as well as growth in future years of six police and two civilians each year. The GPS serves the community by way of crime prevention initiatives, intelligence-led policing, and community partnerships.

Refer to Appendix C for the organizational structure.

2024 – 2027 OPERATING BUDGET OVERVIEW:

The proposed 2024-2027 budget reflects the resources required to provide adequate and effective policing for our rapidly growing city. The budget has been developed while balancing competing variables of risk, community expectations, efficacy of service, and affordability. As indicated in the KPMG report attached, immediate resource enhancements are required as the GPS continues to have lower staffing levels than other similarly sized police services in Ontario. This deficit is negatively affecting service delivery and member wellness. In an effort to mitigate the associated costs, the 2024-2027 budget has phased in these required enhancements. While this strategy serves to lessen the cost impacts, it must be noted that there are risks associated with the staffing shortage, albeit reduced, that we will continue to experience relative to similar sized communities. Potential risks include impacts on response times, service delivery levels, clearance rates, overtime, and member off duty sick time, among others.

The below table highlights the budget impacts by year and are discussed in more detail in the following section of the report:

	Proposed							
	2024		2025		2026		2027	
	Budget Change (\$)	Net Tax Levy Impact (%)	Budget Change (\$)	Net Tax Levy Impact (%)	Budget Change (\$)	Net Tax Levy Impact (%)	Budget Change (\$)	Net Tax Levy Impact (%)
A. Base Budget Changes								
Increases for Salaries & Benefits	1,747,900	3.05%	2,715,300	4.42%	2,812,700	4.24%	2,759,000	3.89%
Annualization of Prior Year Additional Staff	330,000	0.58%	498,600	0.81%	114,000	0.17%	153,000	0.22%
Increase to Operating Expenses	370,750	0.65%	247,080	0.40%	159,350	0.24%	267,950	0.38%
Partner & Legislative Obligations	151,300	0.26%	127,200	0.21%	34,600	0.05%	35,700	0.05%
Capital Financing	173,000	0.30%	173,000	0.28%	384,300	0.58%	176,700	0.25%
B. Impacts from Capital	81,700	0.14%	60,100	0.10%	61,900	0.09%	63,800	0.09%
C. New Operating Requests								
Requests with No FTE Impact	169,000	0.30%	10,900	0.02%	-	0.00%	-	0.00%
Requests for Additional Staff	374,300	0.65%	823,100	1.34%	854,100	1.29%	886,500	1.25%
D. Supportive Staffing Requirements	732,400	1.28%	311,200	0.51%	76,900	0.12%	197,400	0.28%
Subtotal	4,130,350	7.21%	4,966,480	8.09%	4,497,850	6.78%	4,540,050	6.41%
E. Assessment Growth Allocation	(659,000)	-1.15%	(672,000)	-1.09%	(689,000)	-1.04%	(699,000)	-0.99%
Total	3,471,350	6.06%	4,294,480	6.99%	3,808,850	5.74%	3,841,050	5.42%

BUDGET COMPONENTS

A. Base Budget Increases

Base budget year over year increases, excluding **the Service's share of assessment** growth, are as follows:

- 2024 base operating budget increase - \$2.77M or 4.84%
- 2025 base operating budget increase - \$3.76M or 6.13%
- 2026 base operating budget increase - \$3.51M or 5.28%
- 2027 base operating budget increase - \$3.39M or 4.79%

As shown in the above table, compensation costs represent the largest increase impacting the multi-year budget.

Revenues:

- 2024 revenues have increased by \$10.3K from an increase in user fees (\$28K) offset by a reduction in the revenue received in the form of donations for Youth and Crime Prevention programming (\$17K).
- 2025 revenues have increased by \$19.3K from user fees due to an increase in the budgeted volume of clearance record checks.
- 2026 and 2027 revenues have remained the same as the prior year budget.

The majority of grants will be expiring during this budget and due to the **uncertainty around the provincial government's program reviews**, a detailed schedule of all grants assumed for the 2024 budget process is included as Appendix D. A summary of recommended changes to Board approved user fees is provided as Appendix E.

Compensation:

Compensation represents approximately 84% of the Service's budget and provides funding for contractual obligations for existing permanent full and part time staff, temporary staff, benefit costs including increases to statutory benefits and annualization of new positions from the prior year. An estimated increase has been included in this budget as all GPS collective agreements expire at the end of 2023.

Purchased Goods and Purchased Services:

- 2024 purchased goods and services related to based budget changes have increased by \$639.7K. These increases are a result of the following:
 - Reduction in automotive supplies to align with actual spending (\$44.4K)
 - Increase in utilities for Headquarters (\$20.6K)
 - Increased repairs and maintenance costs for Headquarters offset by a reduction in lease costs (\$63.3K)
 - Increase in communication costs related to the new NG911 system that is provincially mandated (\$109.4K)
 - Increased travel and training costs (\$270K) due to a number of variables including evolving service delivery and mandated training requirements
 - Consulting and professional fees mainly due to increased legal fees (\$110K) due to several variables including collective bargaining costs, outsourcing of prisoner meals (\$16K) and partner contributions primarily related to PRIDE (\$200K). Of this \$200K, \$168K is related to a contribution to upgrade **PRIDE's fingerprinting system**. **Staff are recommending that these expenses be funded from the Service's contingency reserve in 2024 & 2025 to have no impact on the operating budget.**
- 2025 purchased goods and services have increased by \$334K largely due to:
 - the annualization of CCTV costs that were budgeted for 2 months in 2024 (\$116.6K)
 - incremental operating costs associated with NG911 (\$93.6K)
 - increased partner contributions for PRIDE (\$33.6K)
 - increase of \$70.4K for various purchased goods and services by units to maintain base operations
- 2026 Purchased Goods and Purchased Services have increased by \$147K excluding the removal of expenses that are reserve funded. Increases are associated with:
 - Inflationary increases of \$60K for various purchased goods and services by units to maintain base operations.
 - Increased partner contributions related to PRIDE (\$34.6K). This is an inflationary estimate as PRIDE does not do multi-year budgeting. The

contribution for the fingerprinting project being undertaken by PRIDE is also complete in 2026. This will reflect a reduction in purchased services by \$168K offset by removal of reserve funding in the same amount for a net zero impact.

- Increased utilities for Headquarters (\$21.4K)
- Impact from capital approved in 2024 & 2025 of \$31.1K
- 2027 Purchased Goods and Purchased Services have increased by \$235K as follows:
 - inflationary increases of \$170K for various purchased goods and services by units to maintain base operations including increases for training (\$50K) and communication charges related to the radio contract which is up for renewal in 2027.
 - increased utility costs for Headquarters (\$23.4K).
 - Increased partner contributions related to PRIDE (\$35.7K). This is an inflationary estimate as PRIDE does not do multi-year budgeting.

Financial Expenses:

- 2024 Financial expenses have increased by \$10K to budget for the HST on the parking taxable benefit.
- 2025 to 2027 Financial expenses have remained the same as the year.

Internal Charges and Recoveries:

- 2024 Internal charges and recoveries have increased by \$55K. Decreases were budgeted in the payroll recovery revenue for dispatch (\$32K) and insurance (\$80.2K). Additionally, due to the entire fleet of frontline and traffic vehicles being moved to hybrid, the fuel budget was decreased by \$78.5K. Increases were experienced in reserve transfers to the Police Capital Reserve (\$173K) and permit fees (\$5K).
- 2025 Internal charges and recoveries have increased by \$212K due to reserve transfers to the Police Capital Reserve (\$173K), permit fees (\$6K) and insurance (\$27K).
- 2026 Internal charges and recoveries have increased by \$431K due to reserve transfers to the Police Capital Reserve (\$384K), permit fees (\$6K), and insurance (\$29K).
- 2027 Internal charges and recoveries have increased by \$245K due to reserve transfers to the Police Capital Reserve (\$177K), permit fees (\$6K) and insurance (\$33K).

B. Impact from Capital

Operating Increases arising from the 2024-2027 Capital Budget are as follows:

- 2024 \$42.3K for equipment to outfit new 2024 Uniform **FTE's**, operating costs associated with growth fleet vehicles (\$16K) and two months of software costs for the CCTV project (\$23.4K).
- 2025 \$43.6K for equipment to outfit new 2025 Uniform FTEs and operating costs associated with growth fleet vehicles (\$16.5K)
- 2026 \$44.9K for equipment to outfit new 2026 Uniform FTEs and operating costs associated with growth fleet vehicles (\$17.0K)
- 2027 \$46.3K for equipment to outfit new 2027 Uniform FTEs and operating costs associated with growth fleet vehicles (\$17.5K)

C. New Operating & Expansions Requests

This budget includes the addition of 6 Uniform and 2 Civilian **FTE's each year**. The 8.0 new FTEs have been annualized through out each year to reflect what staff feel is a balanced approach to address population growth and affordability.

- 2024- \$374,300 for new FTEs
- 2025- \$823,100 for new FTEs
- 2026- \$854,100 for new FTEs
- 2027- \$886,500 for new FTEs

The approved 2023 and requested FTE complement for 2024 to 2027 is below:

Year	2023	2024	2025	2026	2027
Total FTE	342.95	350.95	358.95	366.95	374.95
Police	223.50	229.50	235.50	241.50	247.50
Civilian	119.45	121.45	123.45	125.45	127.45

Also included are various operating requests:

- 2024- \$169,000 which includes funding for Consulting and Safeguarding for HR and Health and Safety (\$58K), Computer Software (\$82K), Building Maintenance (\$6K) as well as off-site storage for the property unit (\$12K) and an Electronic Vehicle/Alternative Fuel consultant (\$50K) that was previously budgeted in capital. Staff are recommending that the Electronic Vehicle/Alternative Fuel consultant be funded from the police contingency reserve as it is one-time in nature.

-
- 2025-\$10,900 which includes a new request for Electronic Notebook Software (\$45K) offset by a reduction of one-time costs that were approved for software in 2024 (\$34,100).
 - There are no additional new requests for 2026-2027.

D. WSIB Obligations related to Supportive Staffing

Also included in the 2024-2027 operating budget is funding for WSIB and long-term disability costs for which the service is responsible. Since presumptive legislation **came into effect in 2016 the Service's WSIB budget has been underfunded**. The increase needed to fund these leaves would be:

- 2024-\$732,400
- 2025-\$311,200
- 2026-\$76,900
- 2027-\$197,400

In addition to fully implementing the supportive staffing model in 2024, staff have assumed that supportive staffing is grown by 1 sworn FTE in 2025 and 1 sworn and 1 civilian FTE in 2027. Hiring has also been annualized for the supportive staffing model.

Reserve Transfers:

The 2024-2027 budget continues to include transfers from the Police Sick Leave Reserve (\$400K) to fund payments to members and from the Police Contingency Reserve to offset one-time costs related to the EV Consultant (2024- \$50K) and APHIS project (\$167.7K per year in 2024 & 2025). The operating budget also includes budgeted transfers to our Police Capital Reserve to fund our capital budget requests as well as debt servicing cost.

Refer to Appendix F for comparative year over year statements.

CONCLUSION:

In summary, the 2024-2027 operating budget estimate is \$61,399,520 in 2024, \$66,366,000 in 2025, \$70,863,850 in 2026 and \$75,403,900 in 2027. The 2024-2027 budget was created to ensure the provision of adequate and effective policing services in a context of fiscal restraint and affordability for our community.

STRATEGIC PLAN 2019 - 2023:

Priority 1: Community Policing with the need for higher visibility in the community.

Priority 2: Organizational Health and Service Effectiveness, with need to review police resources and how they are deployed to better meet the needs of the

community and members.

Priority 3: Community Wellness with a continued focus on how the Service manages mental health-related calls for service.

Priority 4: Road Safety with proactive traffic enforcement.

Priority 5: Drugs and Property Crime with increased efforts to offset the increase in these types of crimes.

Priority 6: Downtown with increased police visibility to address safety concerns.

FINANCIAL IMPLICATIONS AND/OR RISKS:

Risks to the 2024-2027 proposed budget include contractual agreements, benefit costs, Workplace Safety and Insurance Board (WSIB) costs, legislative impacts, technology changes, grant values and grant continuance and the actual impact of the new Headquarters building as it becomes operational. For this budget term inflationary impact and forecasting the impact of inflation over the forecast period was challenging. Assumptions were made in the budget related to the grant revenue and rate of crime which could impact workload driven costs (i.e., overtime, project costs). Lastly the financial health of the City and the overall tax supported budget could have implications on the police budget.

ATTACHMENTS:

Appendix A: KPMG Staffing and Service Delivery Report

Appendix B: Supportive Staffing Model Implementation Report dated June 15, 2023

Appendix C: Organizational Structure

Appendix D: Schedule of Grants

Appendix E: Proposed User Fee Changes

Appendix F: Detailed Operating Budget

2024-2027 Operating Budget Slide Presentation



Staffing and Service Delivery Study

Guelph Police Service

Final Report

February 16, 2023

Guelph Police Service | Staffing and Service Delivery Study

Disclaimer

This report has been prepared by KPMG LLP (“KPMG”) for Guelph Police Service (the “Service”, or “Client”) pursuant to the terms of our engagement agreement with Client dated August 5, 2022 (the “Engagement Agreement”). KPMG neither warrants nor represents that the information contained in this report is accurate, complete, sufficient or appropriate for use by any person or entity other than Client or for any purpose other than set out in the Engagement Agreement. This report may not be relied upon by any person or entity other than Client or for any purpose other than set out in the Engagement Agreement. This report may not be relied upon by any person or entity other than Client, and KPMG hereby expressly disclaims any and all responsibility or liability to any person or entity other than Client in connection with their use of this report.

The information provided to us by Client was determined to be sound to support the analysis. Notwithstanding that determination, it is possible that the findings contained could change based on new or more complete information. KPMG reserves the right (but will be under no obligation) to review all calculations or analysis included or referred to and, if we consider necessary, to review our conclusions in light of any information existing at the document date which becomes known to us after that date. Analysis contained in this document includes financial projections. The projections are based on assumptions and data provided by Client. Significant assumptions are included in the document and must be read to interpret the information presented. As with any future-oriented financial information, projections will differ from actual results and such differences may be material. KPMG accepts no responsibility for loss or damages to any party as a result of decisions based on the information presented. Parties using this information assume all responsibility for any decisions made based on the information.

No reliance should be placed by Client on additional oral remarks provided during the presentation, unless these are confirmed in writing by KPMG.

KPMG have indicated within this report the sources of the information provided. We have not sought to independently verify those sources unless otherwise noted within the report.

KPMG is under no obligation in any circumstance to update this report, in either oral or written form, for events occurring after the report has been issued in final form.

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01

Executive Summary

Guelph Police Service | Staffing and Service Delivery Study

Executive Summary

The Guelph Police Service (the “Service” or “GPS”) engaged KPMG to complete a review of the Service’s staffing levels and service delivery. The Review was completed between September 2022 and January 2023.

The Review engaged internal and community stakeholders, reviewed data from the Service related to its operations (e.g., occurrences, cases, service time, staffing and shift complements, expenditures), and researched the metrics and practices of three comparable municipal police services in Ontario. From this input, the Review identified opportunities for improvement and refined them with the GPS project team.

The Review provided recommendations intended to improve the overall effectiveness of policing in Guelph. Collectively, the recommendations should position the Service to be a modern police service that supports the needs of the citizens of Guelph today and over the next five to ten years.

The Review observed that:

- There has been significant growth in the population of Guelph over recent years
- The Service has been effective at reducing crime when it was able to increase its officer complement
- Staffing levels remain lower proportionately than those of its comparators, and the Service is challenged to maintain expected service levels, including addressing the community’s need for more proactive policing. The challenge to meet service expectations will be exacerbated by anticipated growth in the population served as mandated by Ontario’s Places to Grow Act, 2005.
- Presumptive legislation, Supporting Ontario’s First Responders Act Bill 163, has had a significant impact on the Service’s ability to operate at its authorized complement of officers
- The complexity of crime, including cyber crime and human trafficking, has created a need for investments in new capabilities, including the creation of a specialized data analytics capability

Guelph Police Service | Staffing and Service Delivery Study

Executive Summary

In consideration of these findings, the Review makes six recommendations for consideration by the Service:

1. Increase senior leadership to increase capacity for strategy, staff development and performance management.
2. Realign Investigative units to promote greater collaboration and more specialized supervision.
3. Develop data and analytics capabilities to more effectively prevent and respond to crime.
4. Increase staff complement with a focus on patrol and investigations, and employ an active staffing model to help mitigate the impacts of presumptive legislation.
5. Increase the effectiveness and capacity of front-line uniformed officers.
6. Adjust patrol shift schedules to have overlapping schedules during peak hours.

02

Project Overview

Guelph Police Service | Staffing and Service Delivery Study

Project Overview



Project Objectives

The Guelph Police Service (the “Service” or “GPS”) engaged KPMG to complete a staffing and service delivery study.

The Service’s project objectives are:

1. To determine an efficient uniform and civilian staffing levels for the service in order to promote alignment of current and future resource needs.
2. To conduct a staffing and service delivery study to examine, assess, critique, and make specific recommendations on strengths and opportunities to meet current and future service delivery requirements.



Project Drivers

The population of Guelph grew by approximately 9,000 people since 2016 to approximately 145,000 in 2021. During this time period, the number of Guelph police officers increased by 21¹. The population is expected to reach 208,000 by 2051². The City has witnessed increases in crime volume, and crime cases have become more complex to investigate. This anticipated growth and socio-economic changes will continue to drive demand for policing resources.

Guelph Police Service already faces challenges shared by many police services, including challenges with staffing and workloads, increasing complexity in calls for service, and ongoing resource constraints.

In addressing these challenges, Guelph Police Service sees an opportunity to employ modern practices to build a policing service that is both sustainable and effective at meeting the needs of its community.

Sources:

1. Statistics Canada. Table 35-10-0077-01 Police personnel and selected crime statistics, municipal police services. (<https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=3510007701&pickMembers%5B0%5D=1.326&cubeTimeFrame.startYear=2016&cubeTimeFrame.endYear=2021&referencePeriods=20160101%2C20210101>, accessed September 2022). Crime is measured by the Crime Severity Index.
2. City of Guelph. Long-term Population and housing Growth, Shaping Guelph: Growth Management Strategy, January 2022.

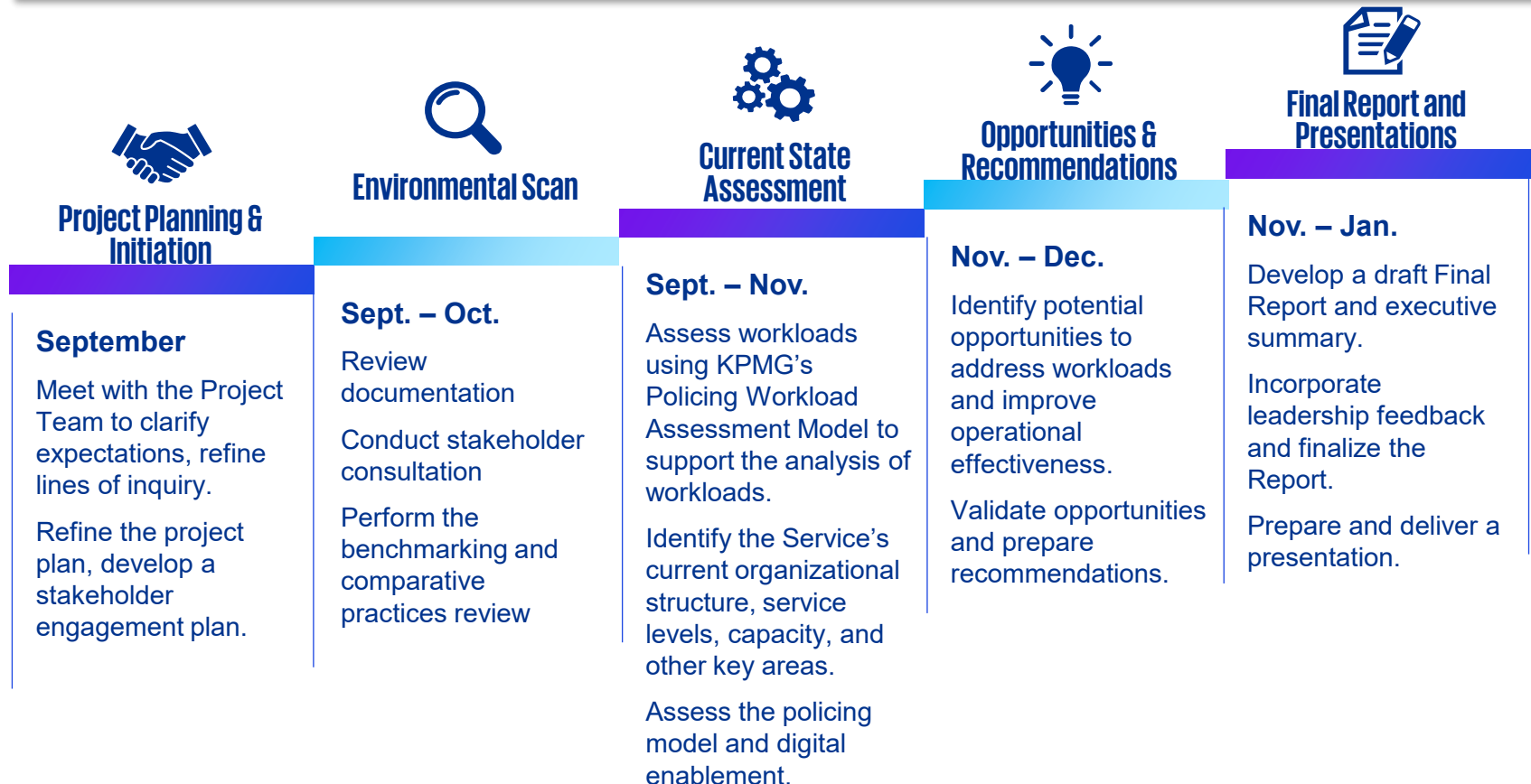
Guelph Police Service | Staffing and Service Delivery Study

Project Overview



Project Work Plan

The project commenced on September, 2022 and was completed in early January 2023.



Guelph Police Service | Staffing and Service Delivery Study

Project Overview

Stakeholders Engaged

Service leadership, members of the Board, front-line officers, and community partners were engaged to obtain an understanding of the current operating model as well as perspectives on opportunities to improve the current staffing model. Below is a summary of the stakeholder engagement performed.

01

GPS Leadership Interviews

1. Chief
2. Deputy Chief
3. Inspector, Investigative Services
4. Inspector, Executive Services
5. Inspector, Neighbourhood Services
6. Inspector, Neighbourhood Services Field Support
7. Inspector, Administrative Services
8. Counsel, Legal Services
9. Manager, Human Resources
10. Manager, Financial Services
11. Manager, Data Services
12. Manager, Information System Services
13. President, Guelph Police Association
14. President, Senior Police Association
15. Police Services Board Representatives

02

GPS Non-Management Staff

1. Civilian Members
2. Uniform Division (Neighbourhood Services)
3. Detectives (Investigative Services)
4. Mid-Level Managers, Sworn Officers

Staff Survey

KPMG also issued an online survey open to all GPS staff.

03

Community Partners

1. Mayor, City of Guelph
2. CEO, CMHA
3. Executive Director, Immigrant Services
4. Director, University of Guelph Police
5. Executive Director, Victim Services

03

Summary of Findings

GPS is Affordable relative to Similar-Sized Services

To assess the affordability of the police service, KPMG utilized the cost per \$100,000 current value assessment (CVA) found in the BMA Municipal studies over the cost per capita. In this affordability analysis, KPMG included Guelph and 11 other comparators. The additional comparators are included to provide insights on different sized communities.

The graph on the right suggests that larger centres with higher assessed property values are more capable of affording policing services than smaller communities with lower assessed property values. This graph indicates that the impact on cost per citizen in Toronto is different than the cost per citizen in Windsor thereby making the larger police budget in Toronto more affordable for citizen's than Windsor's police budget.

Source: BMA Municipal Study 2016 to 2021

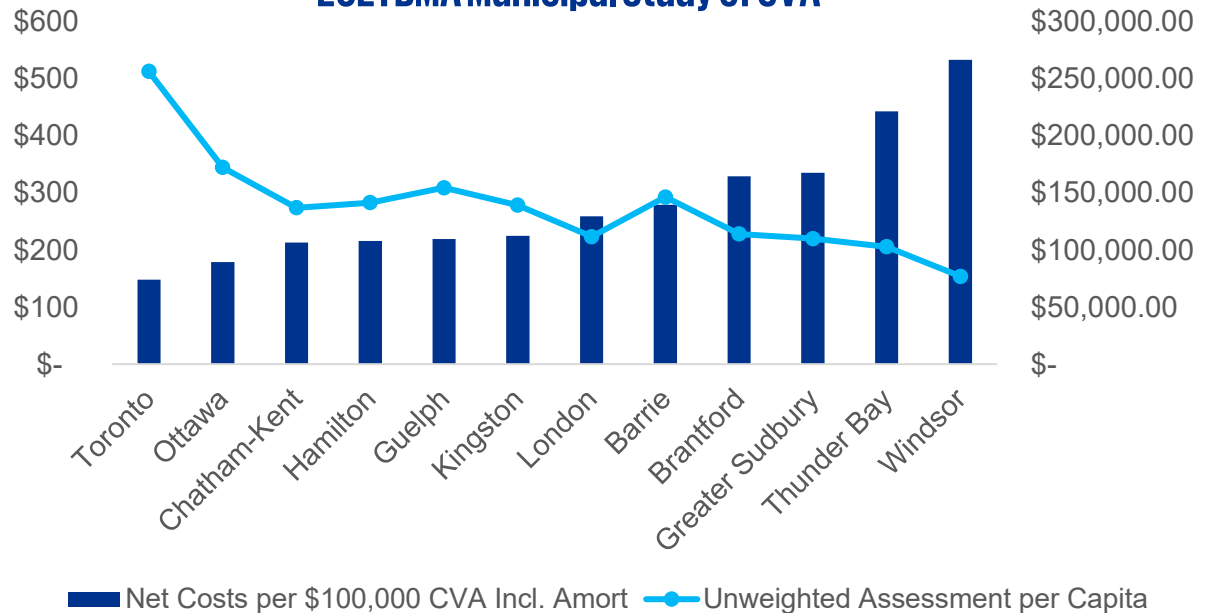
\$200

Guelph's average net costs per \$100,000 CVA excl. amortization from 2016 to 2021.

\$64

the difference (lower) between Guelph's 2021 net costs per \$100,000 CVA excl. amortization and the group average.

2021 BMA Municipal Study of CVA



Guelph Police Service | Staffing and Service Delivery Study

Population Pressures Service Capacity

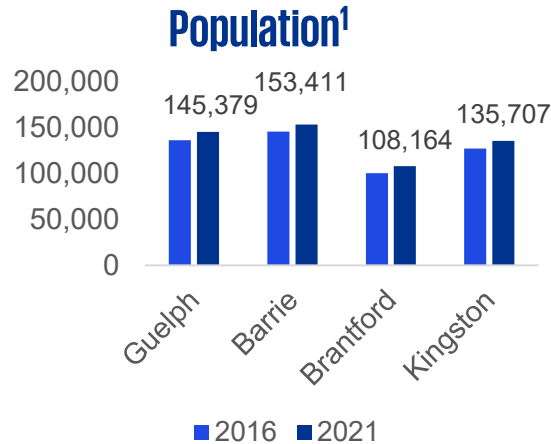
The City of Guelph experienced the highest growth in population (8,937 residents) between 2016 and 2021 compared to the comparator services.

The Service has 14.7 active officers per 10,000 residents, the lowest amongst comparators, and 339 calls per officer, approximately 32 more calls per officer than the closest comparator.

Currently, the GPS is spending approximately \$370 per citizen. This is compared to \$480 by Barrie, \$370 by Brantford, and \$357 by Kingston. The graph on the previous page indicates that Guelph's residents have the same level of affordability to Barrie's population, but graph representing police budgets shows that Barrie is currently spending \$110 more per capita.

Source:

1. Statistics Canada
2. Municipal FIR



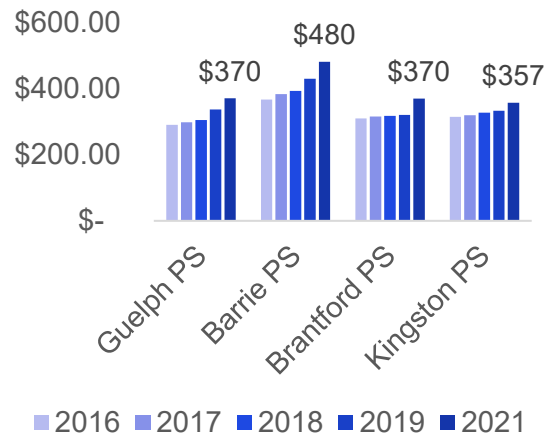
6.6%

City of Guelph's population growth, from 2016 to 2021, is the highest amongst the selected comparators.

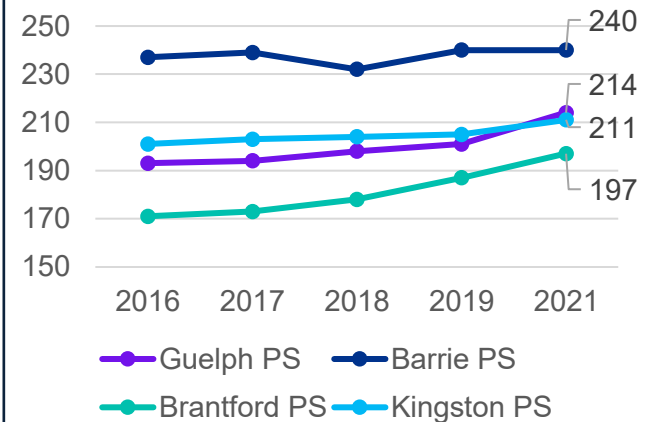
14.7

GPS active officers per 10,000 residents, the lowest amongst comparators.

Police Budgets per Capita¹



Number of Active Officers¹



Investment in Police Services Impacts Crime Rate

Guelph has seen a 17% reduction in its Crime Severity Index (CSI) since 2018, including an 8% reduction in CSI in 2021. The CSI reduction correlates with an increase in the number of authorized officers between 2019 – 2021.

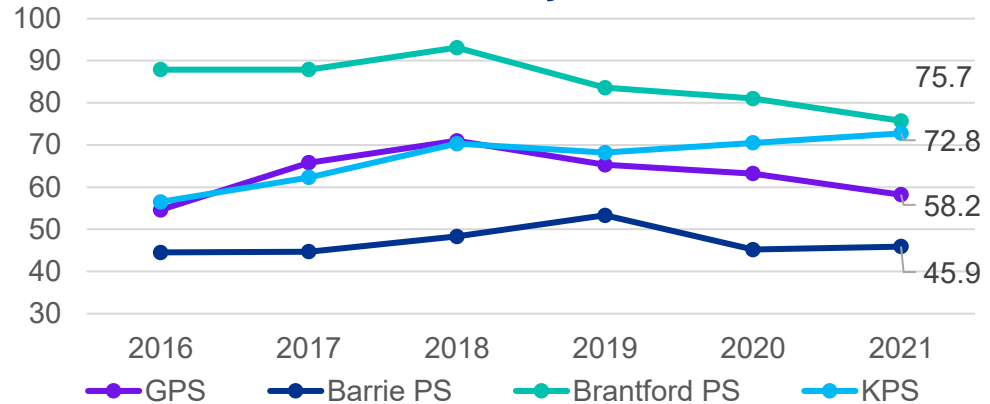
GPS has the second lowest CSI and the second lowest Weighted Clearance Rate compared to Barrie, Brantford and Kingston.

Improvement occurred across all CSI areas, including Overall CSI, Violent CSI and Non-Violent CSI, which resulted in an improvement in its rankings among the 35 Census Metropolitan Areas (from 19th to 12th lowest CSI).

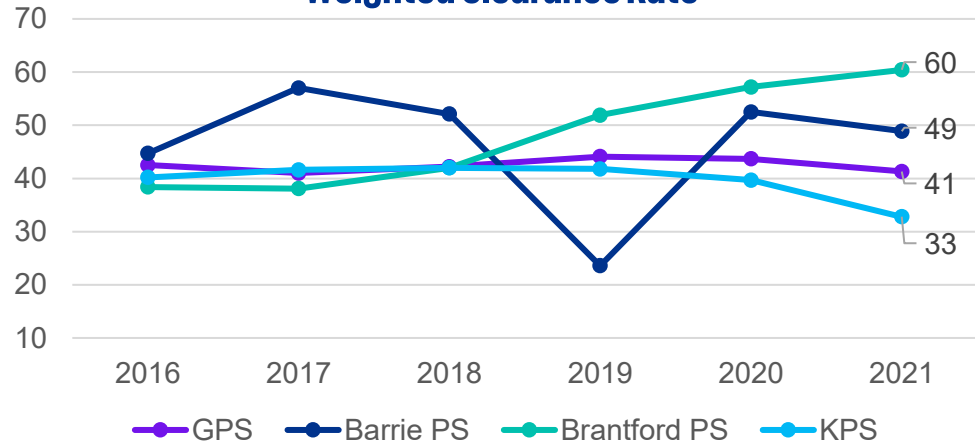
Source:

1. Statistics Canada
2. Municipal FIR
3. Police Service Annual Reports

Crime Severity Index¹



Weighted Clearance Rate



Officer Complement Remains Low Comparatively

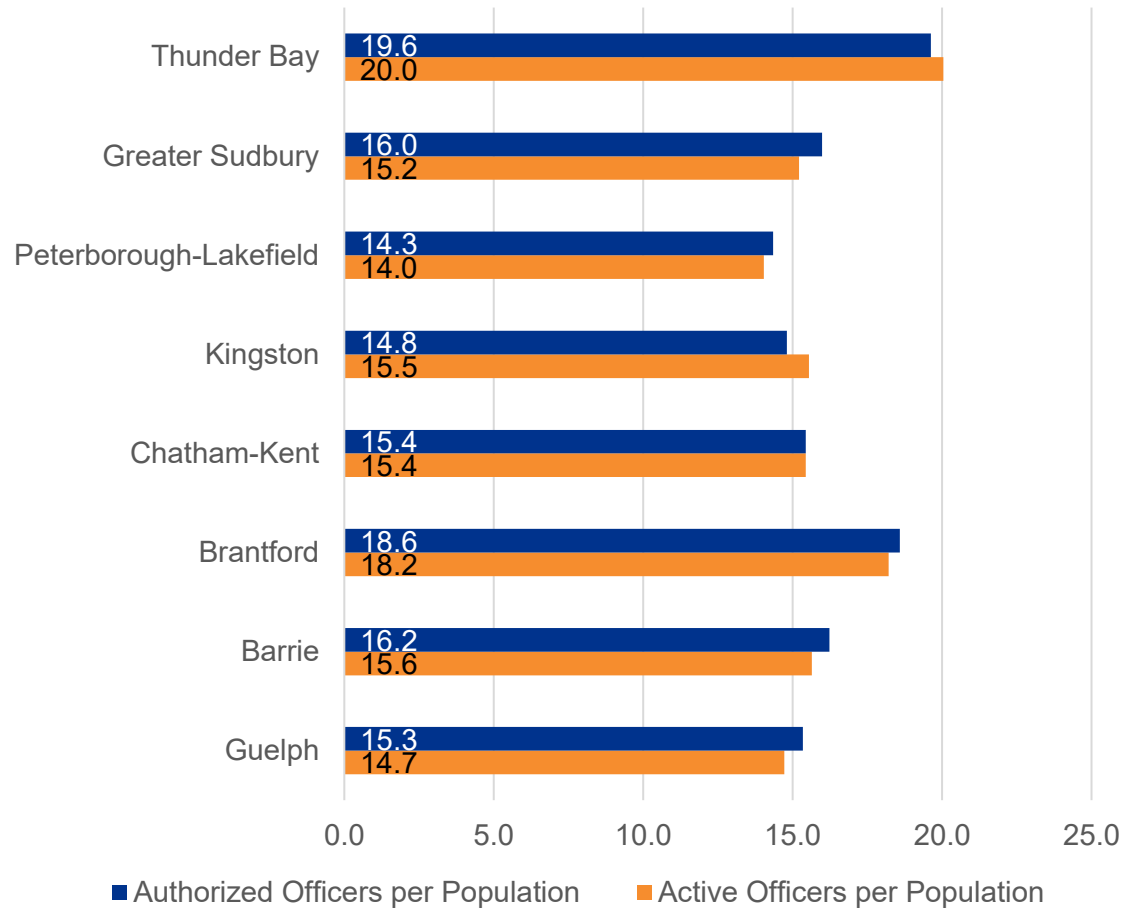
Notwithstanding improvements in its CSI, in terms of officers per population, the Service has a lower staffing level than other similarly-sized services in Ontario.

Each police service is authorized by its board to hire a specific number of officers to service its local population. The actual number of officers available on duty varies from the authorized complement due to turnover, vacation, and work-related leaves under Bill 163 presumptions.

The graph on the right displays the 2021 active versus authorized officers per 10,000 population of 8 mid-size single tier cities within Ontario. The average authorized complement of the group is 16.4 officers per 10,000 population and the active complement is 16.3 officers. GPS is below both averages.

Factoring in Guelph's average population growth (1.2% 3-Year CAGR, 2.4% 2023 forecast), the Service would need an additional 19 officers above the authorized complement of 223 to maintain the average officers per population for the comparator Services.

Active vs. Authorized Officers per 10,000 Population



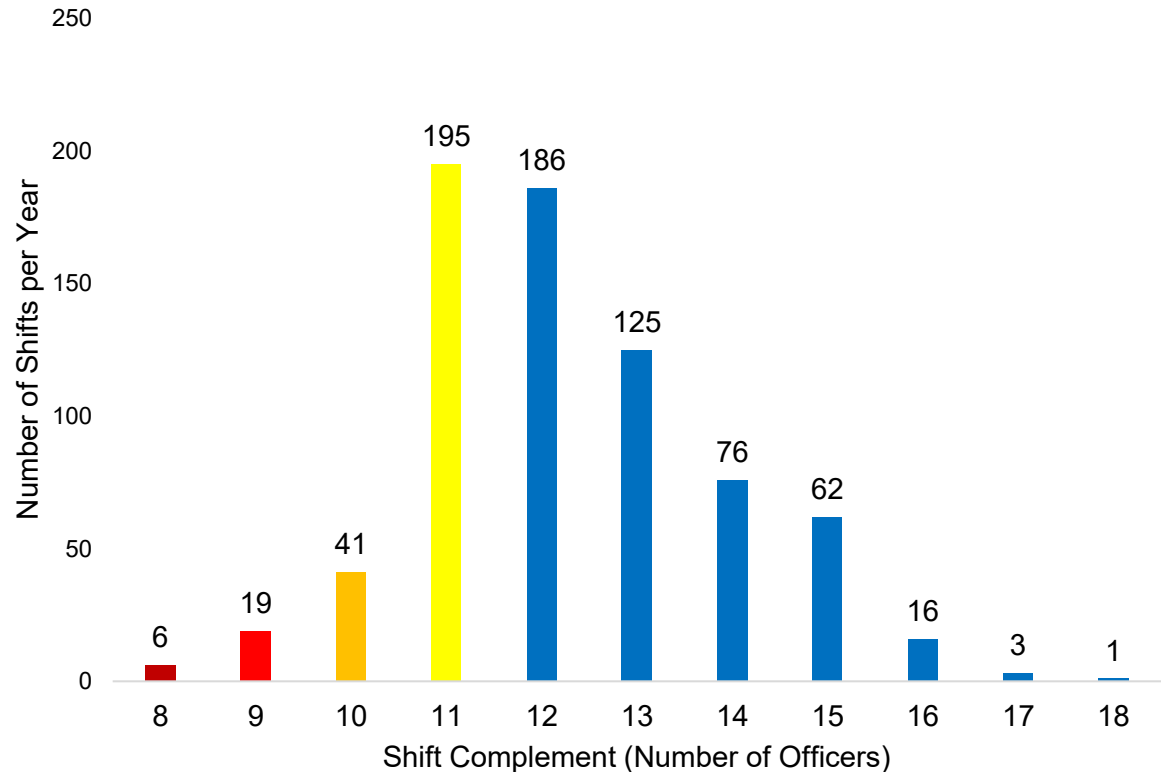
Source: KPMG analysis using Statistics Canada data

Leave affects Capacity and Ability to be Proactive

In 2021, the Service was challenged to meet shift minimums agreed upon with the Police Association via an MOU without the use of overtime. Currently, the Service has 20 – 22 officers authorized per shift, but due to a variety of officer absences (e.g., leaves, vacations, training, presumptive legislation, etc.) 12% of shifts would have been below the minimum shift complement of 11 officers if overtime had not been used. An additional 27% of shifts would have been just meeting the minimum complement.

Analysis of patrol time in 2021 suggests that the Service requires an average of 12 officers present per shift to maintain current service levels. An estimated 13 to 15 officers available and on patrol per shift could result in 10% to 20% of patrol time dedicated to proactive policing.

Number of Shifts and Staffing Levels (2021, before Overtime)



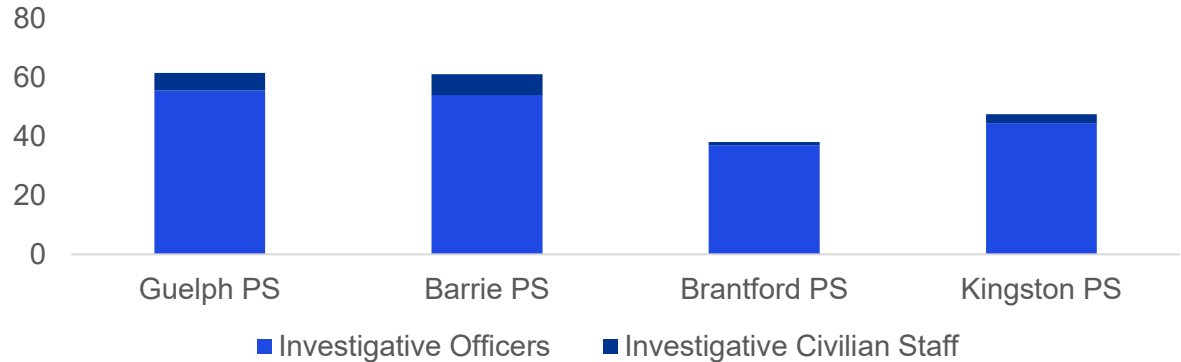
Source: KPMG analysis using 2021 data provided by GPS

Administrative and Investigative Resources

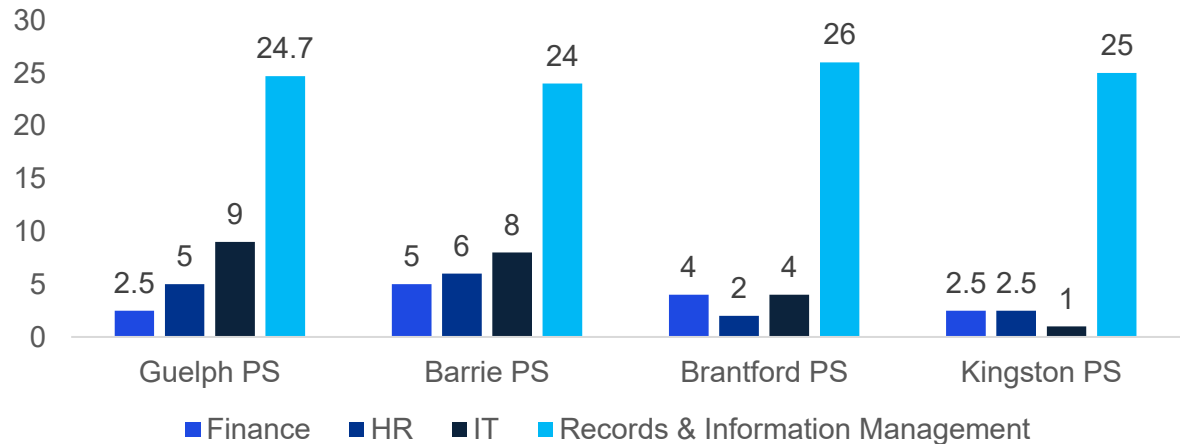
GPS and Barrie have similar investigative resources. Whereas the Kingston PS and Brantford PS have lower levels of investigative resources.

Similarly, due to GPS's participation in PRIDE, where it provides a significant portion of the operational systems support, the Service retains additional administrative resources compared to the comparator jurisdictions. Stakeholders report that workloads are high, particularly in human resources. However, they also note that the function is undergoing a transformation of its systems, which should yield efficiencies.

Comparator Investigative Services Total FTEs



Comparator Administrative Total FTEs



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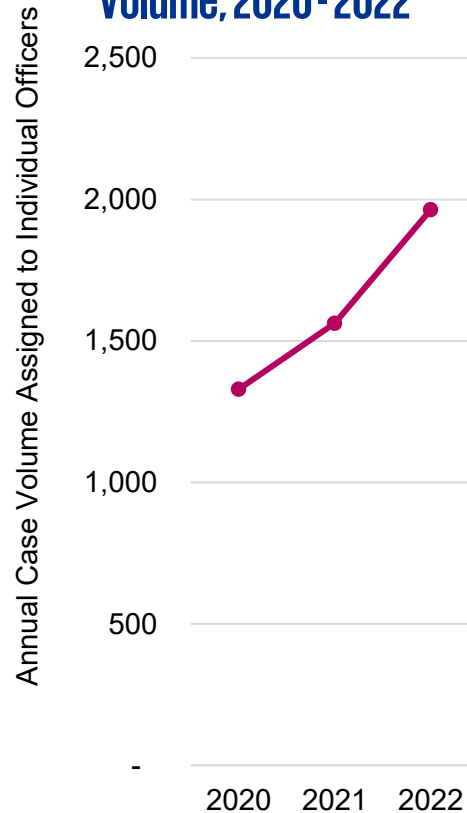
Investigative Case Load Increasing

Guelph has seen demand for its investigative services increase significantly over the past three years without a corresponding increase in resources.

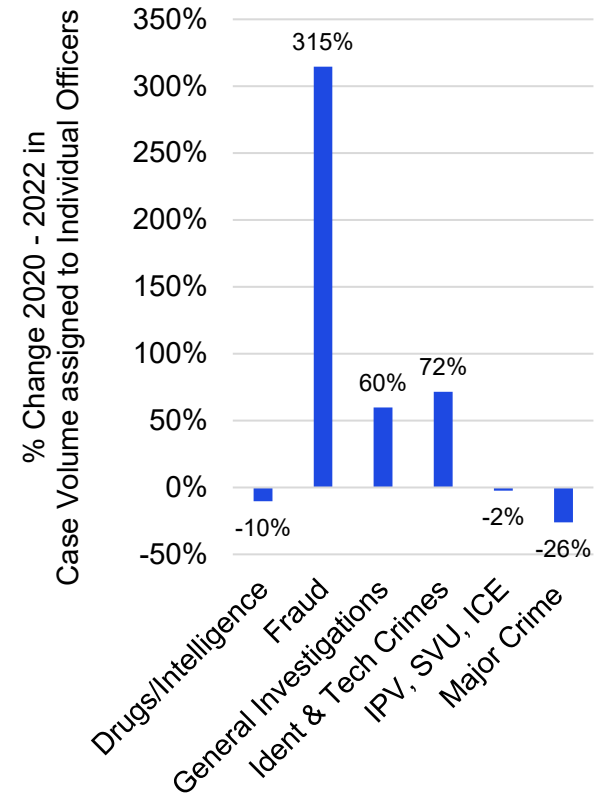
Investigative Services' case volumes assigned to individual officers increased 48% overall between 2020 and 2022. The highest growth areas are in Fraud (315%), Identification and Technology Crime (72%), and General Investigations and Special Projects (60%). The current case load for Fraud includes cyber crime cases. While total IPV, SVU and ICE cases decreased slightly, IPV cases grew significantly.

We note that the Community Response and B.E.A.T. unit was new in 2022, and stakeholders report that it is currently at capacity. Identification recently increased staffing levels to handle increased case loads.

Overall Annual Case Volume, 2020 - 2022



Change in Case Volume by Unit, 2020 - 2022



Source: KPMG analysis using data provided by Guelph Police Service

04

Recommendations

Guelph Police Service | Staffing and Service Delivery Study

Summary of Recommendations

Based on the analysis performed, KPMG identified recommendations to help the Service address how to rebalance officer workloads and increase operational efficiency. The recommendations are summarized below. KPMG also assessed each recommendation based on the potential impact as well as the implementation complexity for the Service to consider in its prioritization of the recommendations.

GPs will need to carefully assess each recommendation and its implementation impacts, and make a decision about whether the recommendations can and should be implemented by the Service as proposed, and for when.

Top Recommendations

1. Increase senior leadership to increase capacity for strategy, staff development and performance management.
2. Realign Investigative units to promote greater collaboration and more specialized supervision.
3. Develop data and analytics capabilities to more effectively prevent and respond to crime.
4. Increase staff complement with a focus on patrol and investigations, and employ an active staffing model to help mitigate the impacts of presumptive legislation.
5. Increase the effectiveness and capacity of front-line uniformed officers by:
 - a. Triaging and diverting more calls away from front-line officers
 - b. Using Special Constables for activities such as securing crime scenes, and managing traffic
 - c. Promoting the use of pre-charge diversion programs
6. Adjust patrol shift schedules to have overlapping schedules during peak hours.

Guelph Police Service | Staffing and Service Delivery Study

Recommendations



Recommendation #1

Increase senior leadership to increase capacity for strategy, staff development and performance management.

Observation(s)

- The Deputy Chief currently has seven direct reports spanning different operational and administrative functions. This is a relatively high span of control for supervision of highly-diverse functional areas.
- Some stakeholders indicated that there was not sufficient leadership capacity to provide adequate focus on strategy, and overall organizational performance.
- Some stakeholders suggested that a second Deputy Chief might be beneficial to split administrative and operational responsibilities.

Recommendation Detail

The Service should consider implementing a second Deputy Chief / CAO position to rebalance the organization's management reporting structure and provide greater leadership attention and strategic guidance. This new position would enable the Service to split the administrative and operational responsibilities between the current Deputy Chief and a second Deputy Chief or Chief Administrative Officer. An additional Administrative Support position is needed to support the new Deputy Chief / CAO position and the overall executive and administrative services.

An illustrative organizational structure reflecting this change is provided on the next page.

Complexity	Impact	Implementation Timeline
Low	High	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="background-color: #4a4a99; color: white; padding: 5px 10px; border-radius: 5px;">Less than 6 Months</div> <div style="background-color: #d9d9d9; padding: 5px 10px; border-radius: 5px;">6 - 18 Months</div> <div style="background-color: #d9d9d9; padding: 5px 10px; border-radius: 5px;">+18 Months</div> </div>

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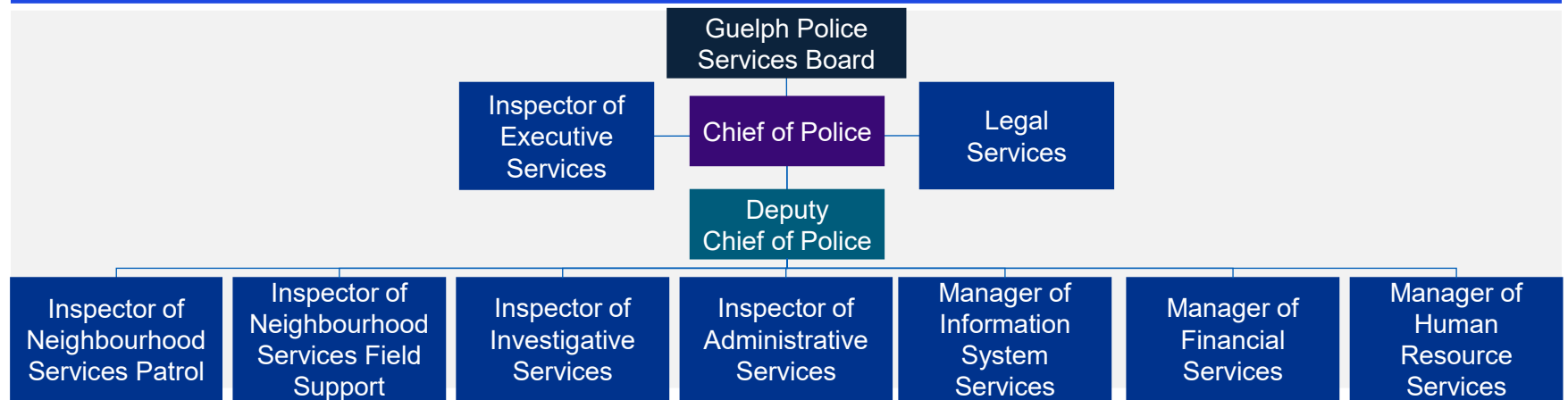
Recommendations



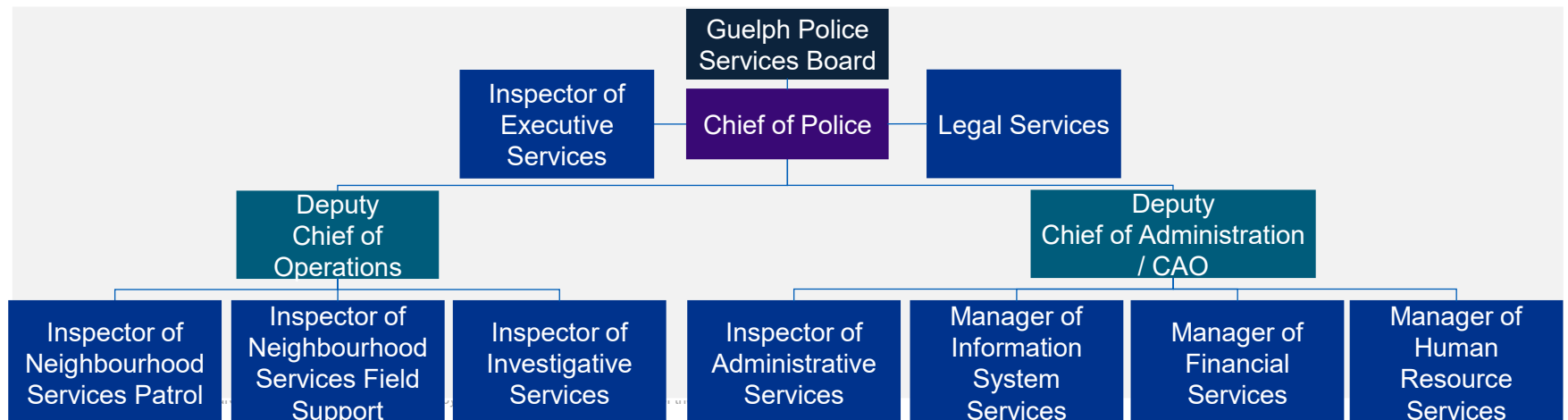
Recommendation #1

Increase senior leadership to increase capacity for strategy, staff development and performance management.

Executive Structure – Current State



Executive Structure – Recommended Future State



Guelph Police Service | Staffing and Service Delivery Study

Recommendations



Recommendation #2

Realign Investigative units to promote greater collaboration and more specialized supervision.

Observation(s)

- Stakeholders identified that some high-risk Investigative Units, specifically the Drugs and Intelligence units, could benefit from increased direct supervision. The Drugs and Intelligence units report to a part-time Staff Sergeant.
- The Service is experiencing increased demand in the areas of cyber crime and human trafficking for which it does not have dedicated teams.
- The current structure does not promote sharing of resources, information and practices among all units that address crimes against persons.
- The Service currently seconds a resource to Waterloo Regional Police Service to support a shared human trafficking unit. However, Stakeholders indicated that Guelph cases are not always prioritized.
- Stakeholders shared that there is some loss of knowledge and efficiency when constables rotate through Investigative Services Units. This is a common practice to develop officers and promote cross-organizational understanding.

Recommendation Detail

The Service should consider realigning the organizations structure of the Investigative units around crimes against persons, crimes against property, proactive investigation (intelligence and drugs). Within the group focused on crimes against property, the Service should consider adding a cyber crimes team to address increasing cyber crime rates, and assume some of the associated workload currently performed by the Fraud team.

The Service should consider anchoring talent within the units to retain expert knowledge. This would entail designating one or two permanent positions in each unit that would become subject matter experts in those units. The remainder of the positions would be staffed with constables on a rotation.

Guelph Police Service | Staffing and Service Delivery Study

Recommendations



Recommendation #2

Realign Investigative units to promote greater collaboration and more specialized supervision.

Recommendation Detail

In addition, the Service could consider establishing its own, dedicated human trafficking unit. This could be comprised of the existing member seconded that is Waterloo Regional Police Service as part of a regional initiative (potentially relocated to Guelph to increase priority on Guelph's cases), and an additional constable. The establishment of a Human Trafficking unit would likely exceed the current SVU Sergeant's capacity to provide effective supervision to the units they oversee, and may require the addition of a second Sergeant. Two Sergeants could share responsibility for the SVU, IPV, ICE and Human Trafficking units as it is expected that there may be cross-over and fluctuations in the resources allocated within these units.

Complexity	Impact	Implementation Timeline
Low	Medium	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="background-color: #663399; color: white; padding: 5px; border-radius: 5px;">Less than 6 Months</div> <div style="background-color: #cccccc; padding: 5px; border-radius: 5px;">6 - 18 Months</div> <div style="background-color: #cccccc; padding: 5px; border-radius: 5px;">+18 Months</div> </div>

An illustrative organization chart for Investigative Services is provided on the next page. Staffing numbers or positions in red represent possible additions and are discussed in Recommendation 4. Positions highlighted in turquoise are shown for additional consideration should the Service wish to establish its own human trafficking team. The estimated timeline shown considers only the change in organization structure. Staffing level changes would require additional time, which is considered in Recommendation 4.

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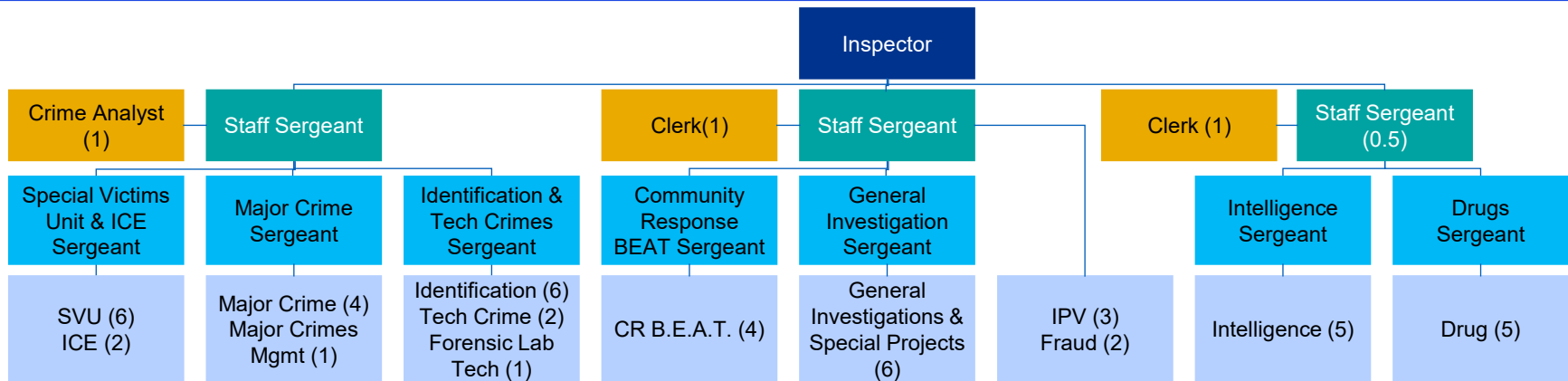
Recommendations

Legend

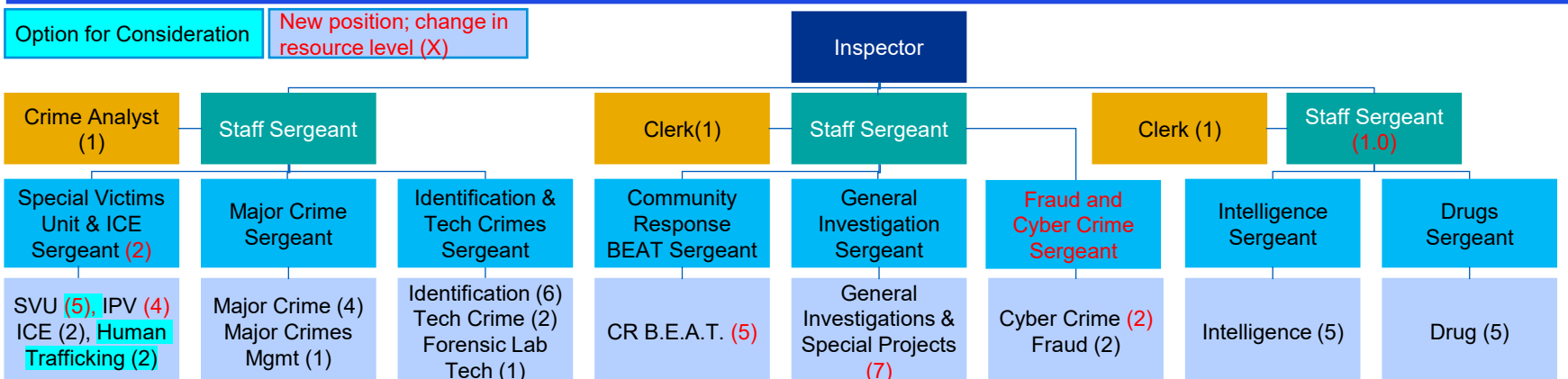


Recommendation #2
 Realign Investigative units to promote greater collaboration and more specialized supervision.

Investigative Services – Current State



Investigative Services – Recommended Future State



Guelph Police Service | Staffing and Service Delivery Study

Recommendations



Recommendation #3

Develop data and analytics capabilities to more effectively prevent and respond to crime.

Observation(s)

- Intelligence-led policing is a leading practice among policing organizations across North America. It requires a sophisticated data and analytics capability to analyze and predict crime, optimize resource allocation in response to service demand, and drive performance management.
- Stakeholders noted that the Service does not have strong analytics capabilities.
- Stakeholders also noted the Service needs to develop performance metrics that can measure the efficiency of resources, and performance of police units and personnel.
- Barrie Police Service hired a PhD student who maps crimes and to assist in determining the optimal deployment of resources. That Service also had success partnering with Durham College students for data analytics.

Recommendation Detail

The Service should consider establishing a data and analytics function that would focus on crime analysis, resource allocation and performance measurement. The Service should consider hiring three data analysts (one senior analyst, and one or two junior analysts, potentially including a student intern) to provide a critical mass of capability.

In its nascency, the unit could report to the Manager of Information Services while it builds capabilities (e.g., establishes access to and collection of data, acquires analytical software, and develops core tools (e.g., predictive models, heat maps, performance dashboards)). As it develops, it will be important that the unit be part of core policing operations (e.g., part of Neighbourhood Field Support) to promote effective information sharing between officers and the analytics team, and to support the credibility of the team.

The team will need to use statistical, geospatial and analytical software and dashboards to analyze and disseminate data.

Guelph Police Service | Staffing and Service Delivery Study

Recommendations



Recommendation #3

Develop data and analytics capabilities to more effectively prevent and respond to crime.

Recommendation Detail

To support a data and analytics function, the Service will need to improve its data management practices to enhance data quality and availability. This will require the Service to:

- Communicate the importance of accurate data collection to front-line officers.
- Encourage more accurate and consistent tracking of policing activities. For example, generating calls internally related to proactive activities, implementing timesheets to allow investigators to track hours spent on each case, encouraging front-line officers to accurately reflect arrival time, time spent, and the time they left crime scenes, etc.
- Measure and evaluate officer and overall front-line data quality regularly.

Complexity	Impact	Implementation Timeline		
High	High	Less than 6 Months	6 - 18 Months	+18 Months

Guelph Police Service | Staffing and Service Delivery Study

Recommendations



Recommendation #4

Increase staff complement with a focus on patrol and investigations, and employ an active staffing model to help mitigate the impacts of presumptive legislation.

Observation(s)

- The Service is operating below its authorized complement. Stakeholders and data suggest that on average, approximately 10% of the workforce is on presumptive leave. In addition, at any point, approximately 25% of the workforce is on training and or away on regular absences (e.g., parental leaves, vacations, etc.). Operating below complement contributes to increasing officer workload and stress.
- Some stakeholders indicated that the staffing gaps within units is an opportunity to civilianize certain roles and responsibilities (i.e., the use of forensic accountants and cyber crime analysts).
- Guelph has a lower ratio of officers per population served than the average of its comparators and the Service is challenged to meet minimum patrol shift complements. Patrol officers spend limited time on proactive policing.
- Caseloads for investigative services have increased over the past four years without a corresponding increase in capacity. In addition, Guelph has a relatively low clearance rate.

Recommendation Detail

The Service should consider increasing its authorized sworn officer complement by approximately 18.5 to 28.5 officers in order to:

- Increase capacity in Investigative Services by an estimated **6.5 to 8.5 FTEs** to address case load increases. These additions would include:
 - 1 constable for Intimate Partner Violence
 - 1 Sergeant to supervise Fraud and Cyber Crime
 - 2 constables for Cyber Crime (could include one civilian)
 - 1 constable for General Investigation
 - 1 constable for B.E.A.T.
 - Additional 0.5 FTE at the Staff Sergeant level to oversee Drug and Intelligence (the current Staff Sergeant is 0.5 FTE)

Guelph Police Service | Staffing and Service Delivery Study

Recommendations



Recommendation #4

Increase staff complement with a focus on patrol and investigations, and employ an active staffing model to help mitigate the impacts of presumptive legislation.

Recommendation Detail

- Should the Service elect to establish its own in-house human trafficking team, it could consider recalling its seconded resource (currently assigned to the Special Victims Unit) and **adding one additional constable** for a complement of 2. To maintain effective supervision, the addition of this team would most likely require the addition of a sergeant who would oversee the human trafficking and ICE teams.
- Increase front-line patrol actual attendance to a target of 15 FTEs per shift in order to dedicate approximately 20% of patrol time to proactive policing. Due to the current leave rate of patrol officers, each shift will require additional authorized officers. Currently, each shift contains 20 – 22 sworn officers and the average number of officers on patrol in 2021 was 12.4. To meet the target of 15 officers per shift, the Service would require approximately 25 authorized officers per shift. The Service should consider **increasing the front-line patrol by 12 to 20 authorized officers**.

The total increase in officer complement would align the Service with the average officer to population ratio of its comparators, projected for 2023 and add some capacity for growth.

On an on-going basis, the Service should continue to maintain staffing levels that are reflective of workload and population growth. This will require more data collection and monitoring of officer capacity and workloads, particularly in front-line policing and investigations.

In addition, the Service should consider implementing an **Active Staffing model** to replace capacity loss associated with officers on presumptive leave. GPS-reported officers on medical or Workplace Safety and Insurance Board leave grew from eight in 2016 to 27 in 2021. Stakeholders identified this as a trend that is expected to continue moving forward. The service could aim to hire a number of officers in excess of its authorized complement to account for the sustained loss of officers on presumptive leave. This is the approach that some fire services employ to maintain acceptable levels of resourcing.

Complexity	Impact	Implementation Timeline
High	High	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="background-color: #d3d3d3; padding: 5px; border: 1px solid #ccc;">Less than 6 Months</div> <div style="background-color: #d3d3d3; padding: 5px; border: 1px solid #ccc;">6 - 18 Months</div> <div style="background-color: #4a7ebb; color: white; padding: 5px; border: 1px solid #ccc;">+18 Months</div> </div>

Guelph Police Service | Staffing and Service Delivery Study

Recommendations



Recommendation 5a

Increase the capacity and effectiveness of front-line uniformed officers by triaging and diverting more calls away from front-line officers.

Observation(s)

- Some stakeholders perceive that the Communications Centre is not triaging as many calls as it could and that the road Sergeants are doing further triaging.
- Stakeholders expressed interest in the Service exploring different privatization opportunities as well as the expanded use of auxiliary units.

Recommendation Detail

The Service should consider updating its call management strategy where the Communications Centre operates as a “Control Centre.”

- Implementing policies and procedures – Implement detail protocols and SOPs for when to close non-police calls or when to divert calls; alternative response options should focus on demand management.
 - Provide additional education and job aids (e.g., scripts) to Communications Centre staff regarding non-police calls, calls they can redirect to online reporting, calls that do not require a police presence that they can direct to the front desk, etc.
 - Develop criteria for referral to increase the consistency of triaging calls and support the Communications Centre’s onboarding process (e.g., Suspect Gone, No Evidence to be collected, No continuing danger to the public, etc.).
 - Implement an appointment-based or call-back response for non-emergency calls to reduce the number of calls on screen.
 - Assign accommodated officers unable to perform patrol duties to perform follow-up on calls, such as Neighbour Disputes, Build a Broadcast, Advice on Landlord Tenant Complaints. This work requires an officer, but is not dependent on an officer’s on-scene presence.
- Empowering decision-making authority – Empower the Communications Centre staff to make decisions on closing or diverting calls.
 - Implement a performance management framework of intake throughput and demand management outcomes.

Complexity

Impact

Implementation Timeline

Low

Medium

Less than 6 Months

6 - 18 Months

+18 Months

Guelph Police Service | Staffing and Service Delivery Study

Recommendations



Recommendation #5b

Increase the capacity and effectiveness of front-line uniformed officers by using Special Constables for activities such as securing crime scenes, and managing traffic.

Observation(s)

- Stakeholders expressed interest in the Service exploring an expanded use of Special Constables.
- Leading practice among policing organizations is to employ peace officers or special constables to perform activities that are lower risk but still require an on-scene presence.
- Brantford Police Services successfully petitioned the government for increased Special Constable authorities. The granted request gives the Service's Special Constables all the powers outlined in Appendix A.
- As a result of Covid, bails are mostly processed from the Service's station cell area remotely, and this has become standard practice. However, Special Constables are still required to be present on site at the courthouse. Currently, Special Constables during day shifts process prisoner intakes, run bails, and perform cell checks on prisoners.

Recommendation Detail

To divert the calls from front-line officers, the Service should consider increasing the duties of Special Constables to include taking reports on low-priority calls, securing crime scenes and managing traffic. Based on any additional duties identified, the Service should review the potential workload impacts on Special Constables and front-line officers and consider apportioning some of the recommended increase in sworn officers to be lower-cost Special Constables. Special Constables require less training and equipment cost.

The increase use of Special Constables and the associated budget would be requested after 2024, and would potentially offset future Constable hiring needs.

Complexity	Impact	Implementation Timeline		
Medium	Low	Less than 6 Months	6 - 18 Months	+18 Months

Guelph Police Service | Staffing and Service Delivery Study

Recommendations



Recommendation #5c

Increase the capacity and effectiveness of front-line uniformed officers by promoting the use of pre-charge diversion programs.

Observation(s)

- Stakeholders indicated that a large majority of crime is committed by a small minority of the populace. The reasoning for this is the courts refusal to hold individuals for pending trial.
- Stakeholders identified that the Service does not have a formalized diversion program in place.

Recommendation Detail

The Service has a relationship with a John Howard Society. However, lack of officer awareness has hindered the ability to effectively implement diversion programs. The goals of these programs are to increase the use of non-judicial interventions to avoid the harmful effects of jail and criminal records, which reduces the workload of officers and the courts.¹ Ottawa Police Service and Barrie Police Service have implemented diversion programs, such as Adult Pre-Charge Diversion, Shop-Theft Protocol and John School Seminars. The Province provides social services-type funding to John Howard Society and similar organizations to deliver these diversion programs.

- An **Adult Pre-Charge Diversion** program is used when arresting individuals for minor offences, such as mischief, theft or fraud. In this program, the individuals found committing these offences are not given a sentence. Instead, they perform tasks that force them to confront the behaviour that led to their arrest.
- A **Shop-Theft Protocol (STP)** is used for individuals arrested for shoplifting by store security personnel. This protocol enables the arrested individual to avoid jail and a criminal record. Instead, the individual is referred to a STP diversion office where they are assigned tasks that address the underlying behaviours associated with shoplifting. The STP implemented by the Ottawa Police Service is based on an arrangement between the Service, retail store outlets and the pre-charge office. Special Constables and members of the Transit Authority also refer a number of individuals to this program.

Source: (1) Toronto Police Service

Guelph Police Service | Staffing and Service Delivery Study

Recommendations



Recommendation #5c

Increase the capacity and effectiveness of front-line uniformed officers by promoting the use of pre-charge diversion programs.

Recommendation Detail

- Some Services utilize the **John School Seminars** to provide an informative view into individuals engaged with sex-workers. These Seminars introduce various speakers who present on the risks of sex work and its impact on the community.
- Similar diversion models can be applied to the Drug Court and Wellness Court. These diversion programs can also be part of the Service's call management strategy.

By diverting minor offences, the programs enable offenders to come to terms with their behaviours, and correct them. The public and Service in turn benefit from the decrease of such behaviour and caseload. The offender benefits by avoiding the stigma of a criminal record.

Complexity	Impact	Implementation Timeline
Low	Medium	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="background-color: #4a4a9a; color: white; padding: 5px 10px; border-radius: 5px;">Less than 6 Months</div> <div style="background-color: #d3d3d3; padding: 5px 10px; border-radius: 5px;">6 - 18 Months</div> <div style="background-color: #d3d3d3; padding: 5px 10px; border-radius: 5px;">+18 Months</div> </div>

Source: (1) Toronto Police Service

Guelph Police Service | Staffing and Service Delivery Study

Recommendations



Recommendation #6

Adjust patrol shift schedules to have overlapping schedules during peak hours.

Observation(s)

- The Service has a high call volume during daytime hours and a low call volume in the early morning hours. Target patrol shift complements do not reflect this variation in time-of-day call volumes.
- Stakeholders expressed interest in additional coverage during peak demand hours.

Recommendation Detail

To increase the capacity of front-line patrol officers on duty, the Service should consider adjusting patrol shift schedules to have overlapping schedules during busy times. As shown in the following diagram, the GPS receives the majority of calls for service on weekdays between the hours of 8AM to 9PM, with peak volumes occurring from 9AM to 6PM. A readjustment of the patrol shift schedules to overlap shifts during peak hours could help redistribute workload across a larger resource pool and better balance officer caseloads.

Staggering shifts would result in a partial shift complement in the early morning hours, which would be below current minimums. While this may be appropriate given low call volumes, the Service would need to work with the Police Association to confirm that this would be acceptable and officer safety would not be compromised. Sergeant on-duty schedules will need to be adjusted according to the new shift schedules to provide supervision.

An alternative model would be to establish a day shift. However, increasing the average complement of existing shifts should be a priority for the allocation of any additional resources. It is likely that any remaining resources would be minimal and too small to staff an effective and consistent day shift.

The Service will need to adjust the number of patrol vehicles and associated equipment levels to support any increase in patrol officers.

The Communication Centre's working schedules will need to be adjusted to mirror the revised patrol shift schedules and officer staffing levels.

Complexity

Impact

Implementation Timeline

Medium

Medium

Less than 6 Months

6 - 18 Months

+18 Months

Guelph Police Service | Staffing and Service Delivery Study

Recommendations



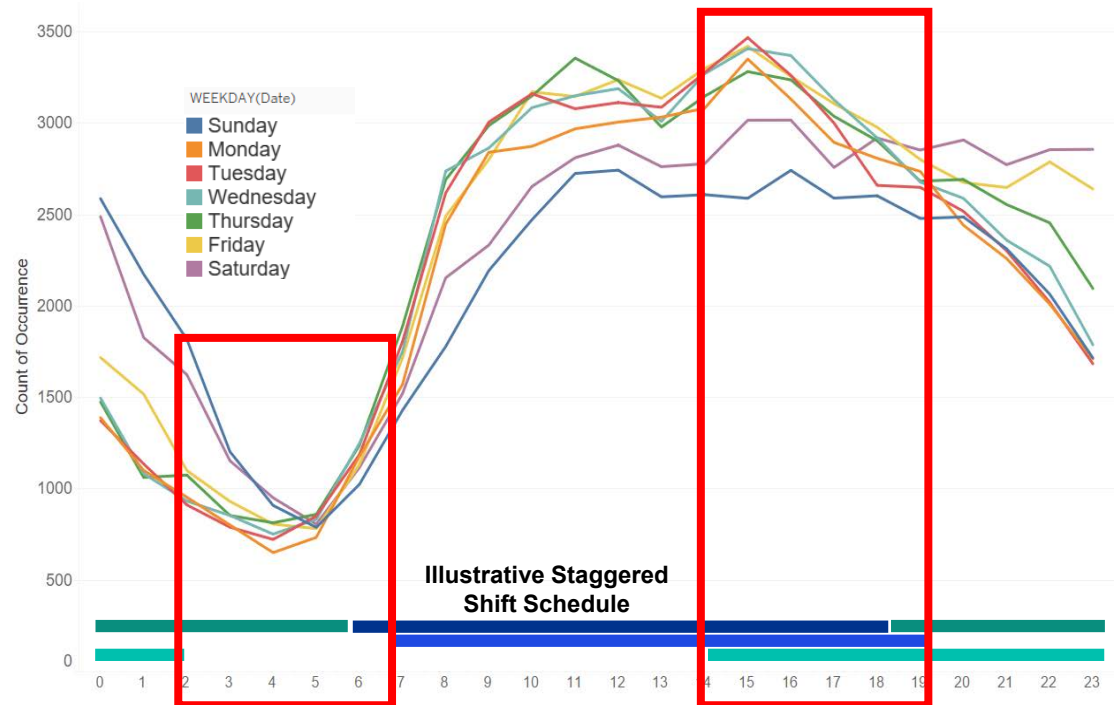
Recommendation #6

Adjust patrol shift schedules to have overlapping schedules during peak hours.

This diagram to the right displays total by day of the week and time of day.

- The majority of occurrences take place Monday-Friday between the hours of 8AM-9PM, with peak volumes occurring 9AM-6PM.
- Friday and Saturday evenings show high levels of occurrences, driven largely by Priority 1 and 2 calls.
- An illustrative staggered shift schedule is provided for consideration:
 - 6AM – 6PM Day Shift
 - 7AM – 7PM Day Shift
 - 2PM – 2AM Afternoon/Night Shift
 - 6PM – 6AM Night Shift
- GPS could consider starting the afternoon shift later (e.g., 4PM – 4AM) on Friday and Saturday evenings to support higher priority call volumes in the early morning hours.
- Resourcing the afternoon/night shifts could be weighted towards the night shift to provide a higher staffing level when only one shift is on duty.

Occurrence Distribution by Day and Time

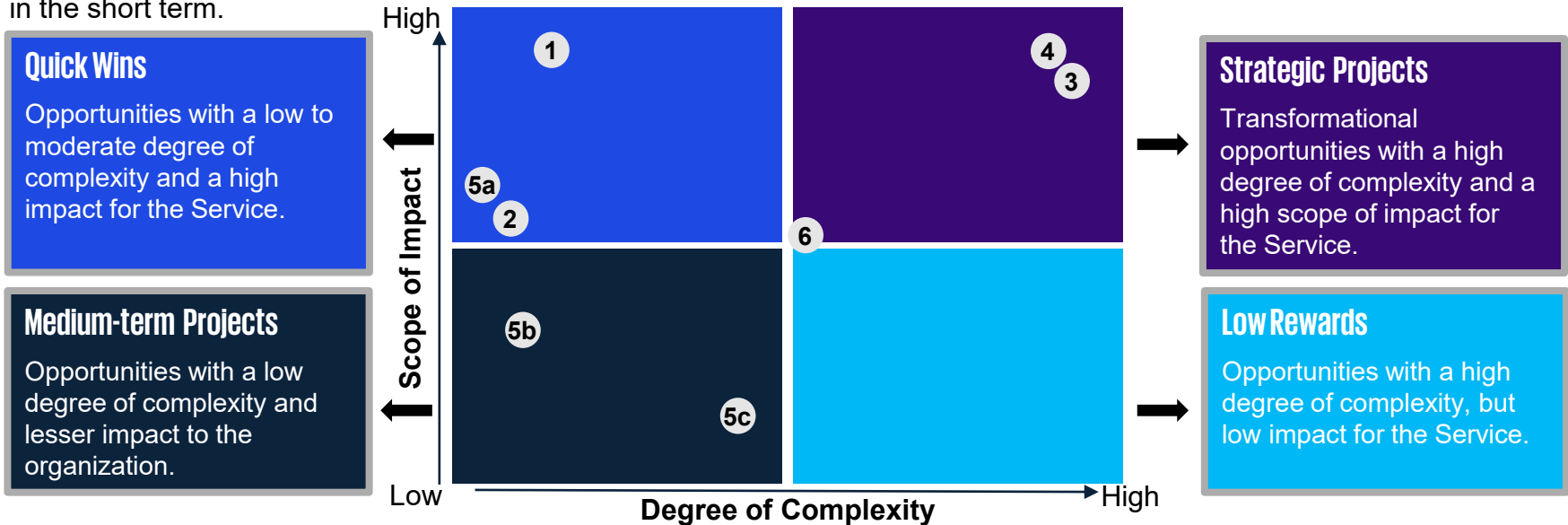


Source: 2019 – 2021 Occurrence data provided by GPS

Guelph Police Service | Staffing and Service Delivery Study

Prioritization of Recommendations

The recommendations are mapped for *complexity vs. scope of impact* to help prioritize activities. The prioritization categories and criteria are outlined below. Three recommendations would require minimal resources and could be initiated in the short term.



Scope of Impact	
Rating	Description
Low	Minor operational impact.
Medium	Impact that provides significant benefit to one area or aspect of the organization.
High	Impact that creates strategic change across the organization.

Degree of Complexity	
Rating	Description
Low	Could be implemented within 6 months and without dedicated resources or significant budget.
Medium	Could be implemented in 6 – 18 months, and would require a dedicated resource and significant budget.
High	Could require more than 18 months to implement and would represent a major project within the organization.

Estimated Resource Impacts of Recommendations

The estimated resourcing impacts of the recommendations are summarized in the table below. The recommended staffing increases shown are in addition to resources required to meet authorized complement levels.

Recommendation Reference	Type of Hire	Additional Resources Estimated (FTEs)	Assumptions
Uniform			
1	Deputy Chief / CAO	1.0	A second Deputy Chief / CAO position to provide more strategic focus on the Service's administrative and allow the current Deputy Chief to place more focus on their operational responsibilities.
4	Neighbourhood Patrol Constables / Sergeants	12 – 20	Front-line patrol constables and sergeants to address current workload requirements.
4	Investigative Services	6.5 – 8.5	Additional resources to address current workload requirements. Additional 0.5 FTE Staff Sergeant for Drugs and Intelligence, 1 Constable for Intimate Partner Violence, 1 Sergeant to supervise Fraud and Cyber Crime, 2 Constables for Cyber Crime (could include one civilian), 1 Constable for General Investigation, 1 Constable for Community Response and B.E.A.T. Possible resource additions related to establishing a Human Trafficking team, including 1 Sergeant and 1 Constable.
	Total Uniform	19.5 – 29.5	
Civilian			
1	Administrative Support	1.0	Support position to support executive and administrative services.
3	Data Analysts	3.0	Senior analyst and two junior analysts
4	Cyber Crime Analyst	1.0	
	Total Civilian	5.0	
	Total	24.5 – 34.5 FTEs	

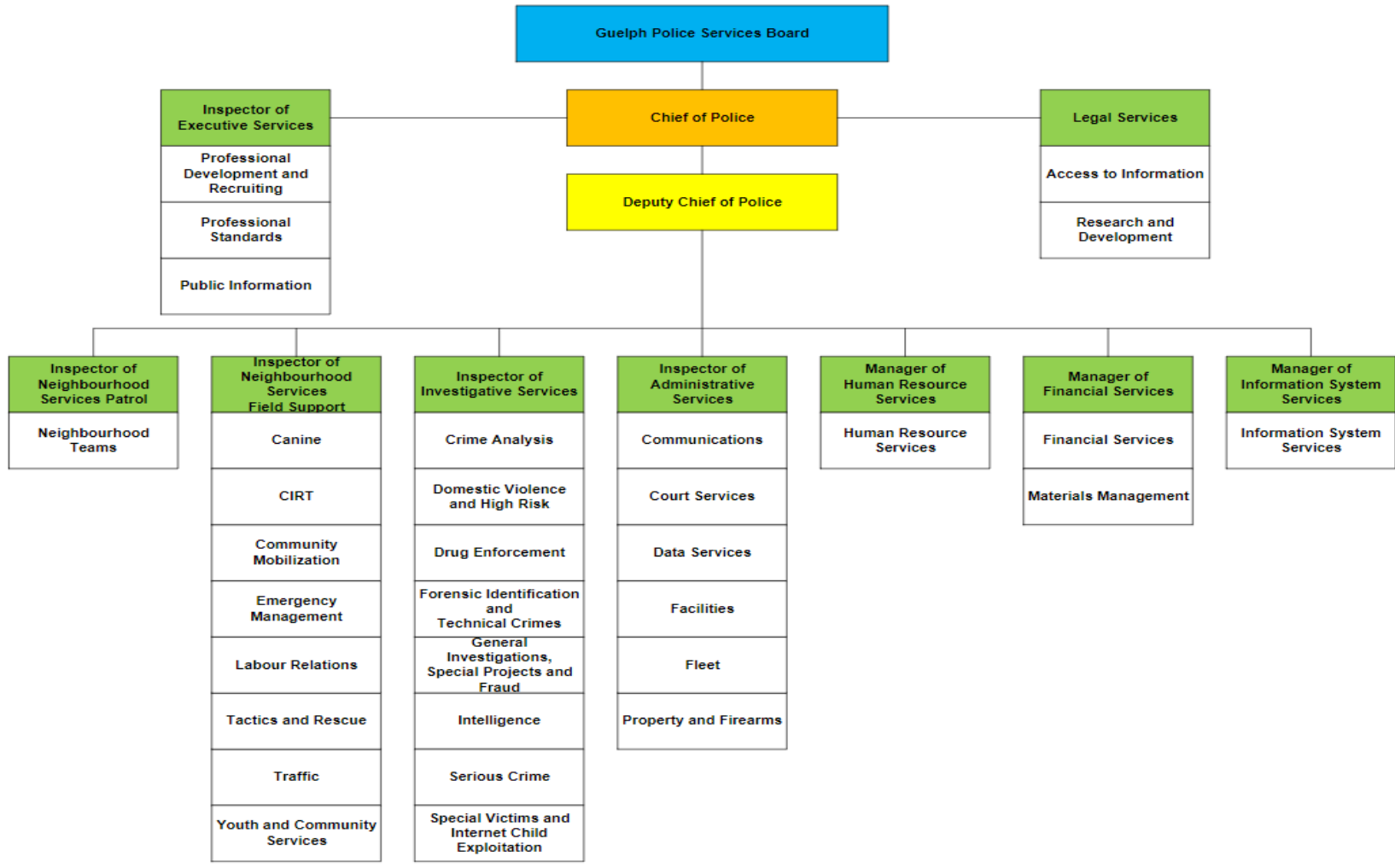
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Appendices

Appendix A: Organizational Chart

Guelph Police Service | Staffing and Service Delivery Study

Guelph Police Service – Organizational Chart



Guelph Police Service | Staffing and Service Delivery Study

Guelph Police Service – Staffing Complement

Position / Rank	Executive Services	Admin. Services	Patrol	Field Support	Investigative	Legal	IT	Finance	HR	Total 2022 Authorized
Chief					1					1
Deputy Chief					1					1
Inspectors	1	1	1	1	1					5
Staff Sergeants	1	2	4	1	2.5					10.5
Sergeants	2		12	4	7					25
Constables	3 + 1*	2 + 2*	95	34	44					180
Total Sworn	10	7	112	40	54.5					222.5
Manager / Comms. Supervisor		6				1	1	1	1	10
Special Constables		15.7	4							19.7
Facility & Fleet Maintenance		8								8
Communicator / Dispatcher		27								27
Administration	3	22.7	0.5		5	3.5	8	3.5	4	50.2
Total Civilian	3	79.4	4.5	0	5	4.5	9	4.5	5	114.9
Total GPS	13	86.4	116.5	40	59.5	4.5	9	4.5	5	337.4
Actual										327
Staffing Gap										10.4

* Indicates an officer on modified work assignment.

Source: 2022 data provided by Guelph Police Service

**Appendix B:
Brantford Police
Service Special
Constable Powers**

Guelph Police Service | Staffing and Service Delivery Study

Brantford Police Service – Special Constable Powers

The table below outlines the specific powers that the Brantford Police Service's Special Constables possess.

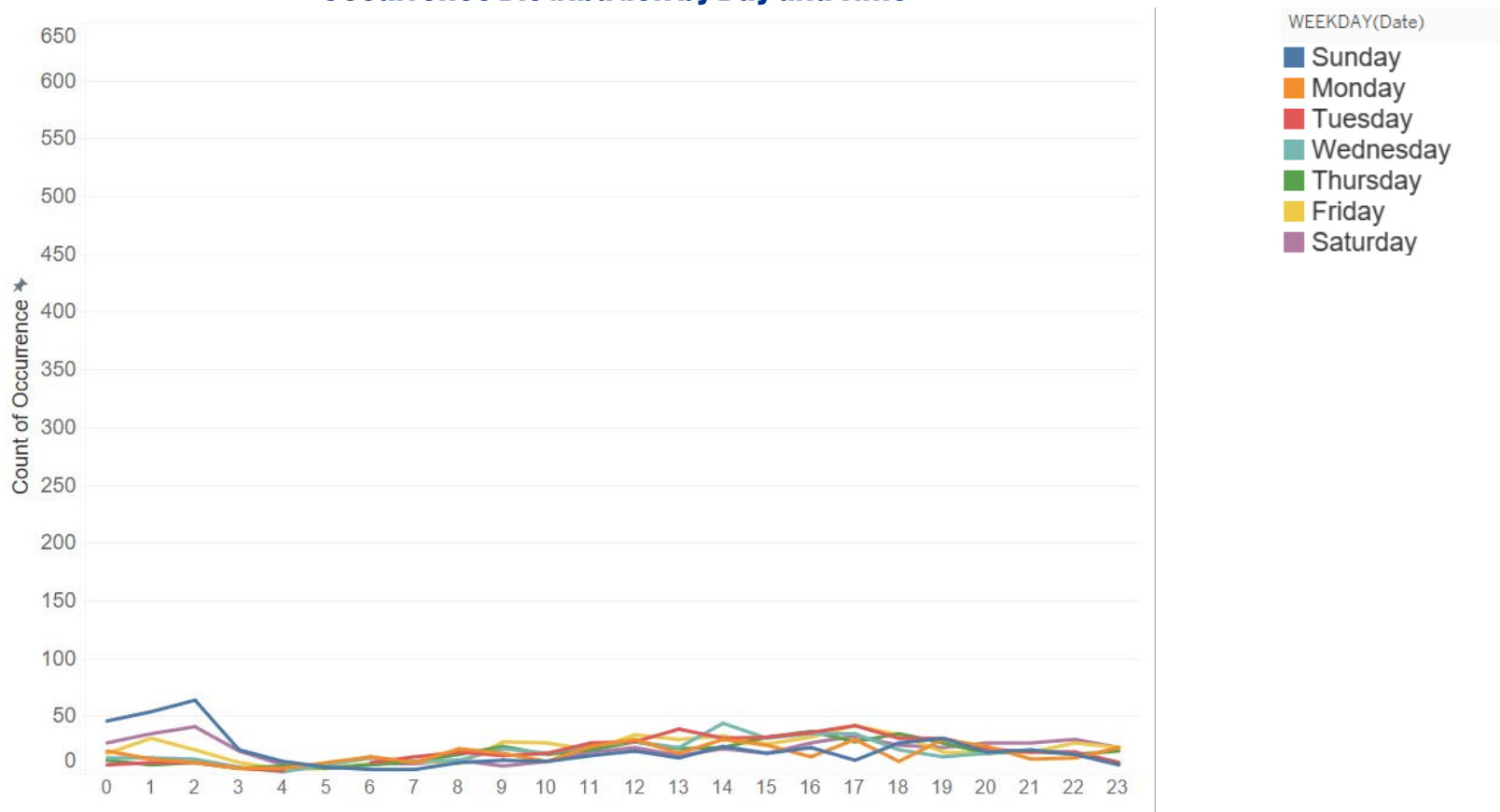
Act	Sections
Highway Traffic Act	• 134(1)(2), 134.1(1).
Liquor License and Control Act	• 31(1)(2), 42(2), 43(2), 48(1), 61(1a)(1bi)(1bii)(1c)(2), 62.
Youth Criminal Justice Act	• 6(1), 7, 11, 12.
Mental Health Act	• 17, 28(1)(2), 33.
Trespass to Property Act	• 9(1)(2)(3), 10.
Others	• 12(3), 14, 16(1)(2), 17(1)(2), 19.

Appendix C: Occurrence Distribution by Day and Time

Occurrence Distribution by Date and Time – Priority 1

The graphic below outlines the occurrence distribution by date and time for priority 1 calls for service.

Occurrence Distribution by Day and Time



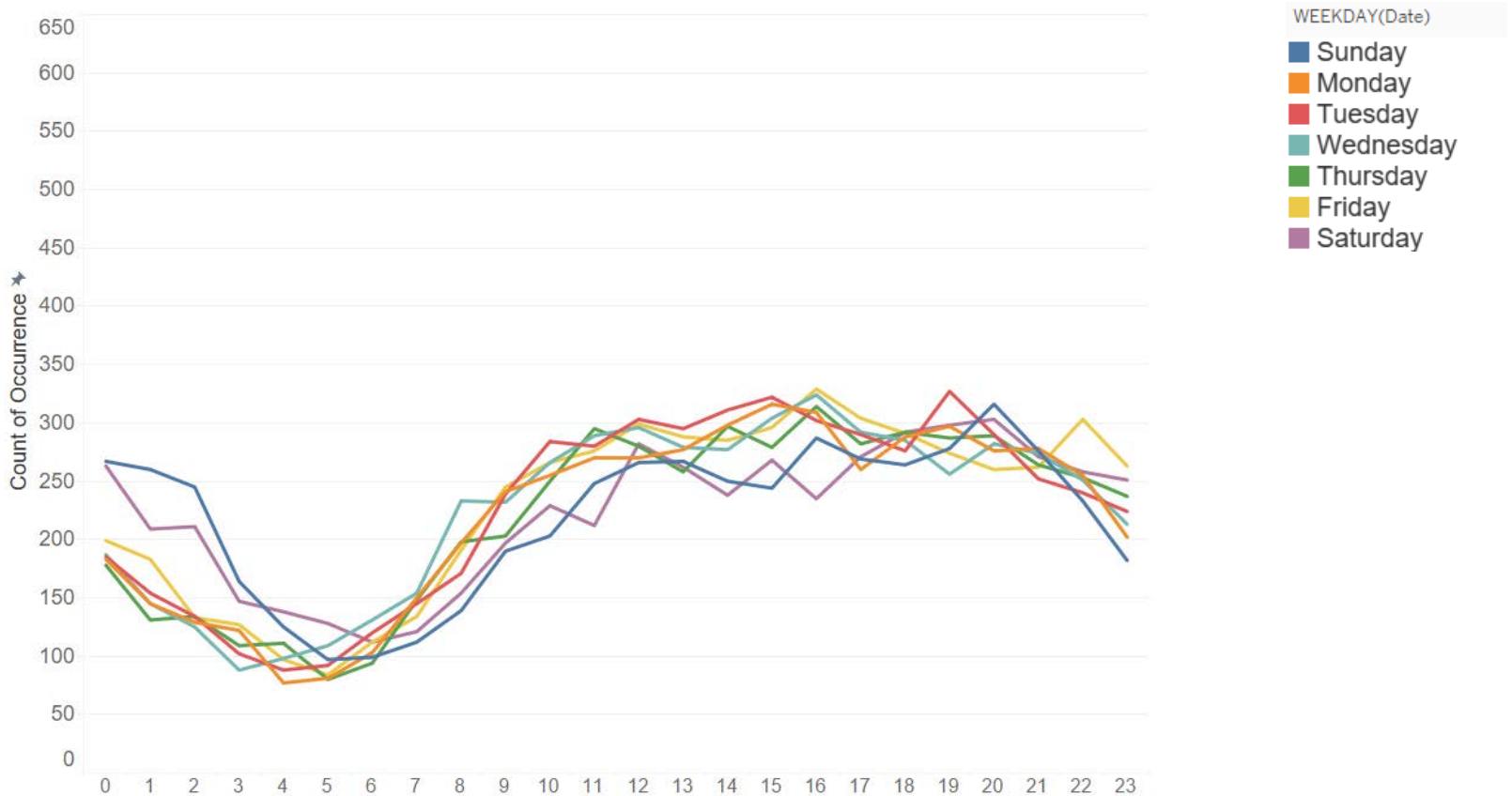
Source: KPMG analysis based on data provided by GPS.

Guelph Police Service | Staffing and Service Delivery Study

Occurrence Distribution by Date and Time – Priority 2

The graphic below outlines the occurrence distribution by date and time for priority 2 calls for service.

Occurrence Distribution by Day and Time



Source: KPMG analysis based on data provided by GPS.

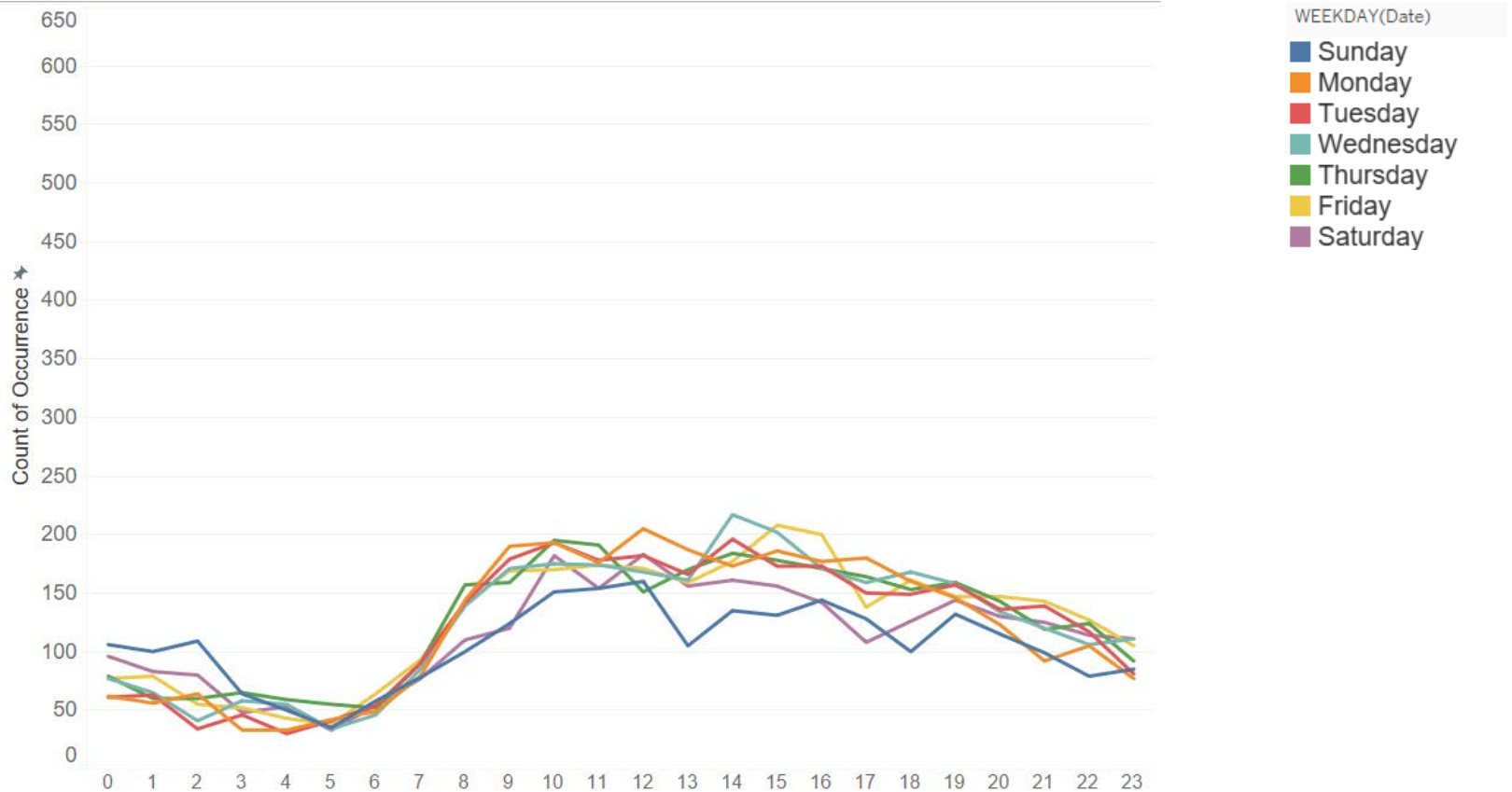


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Occurrence Distribution by Date and Time – Priority 3

The graphic below outlines the occurrence distribution by date and time for priority 3 calls for service.

Occurrence Distribution by Day and Time



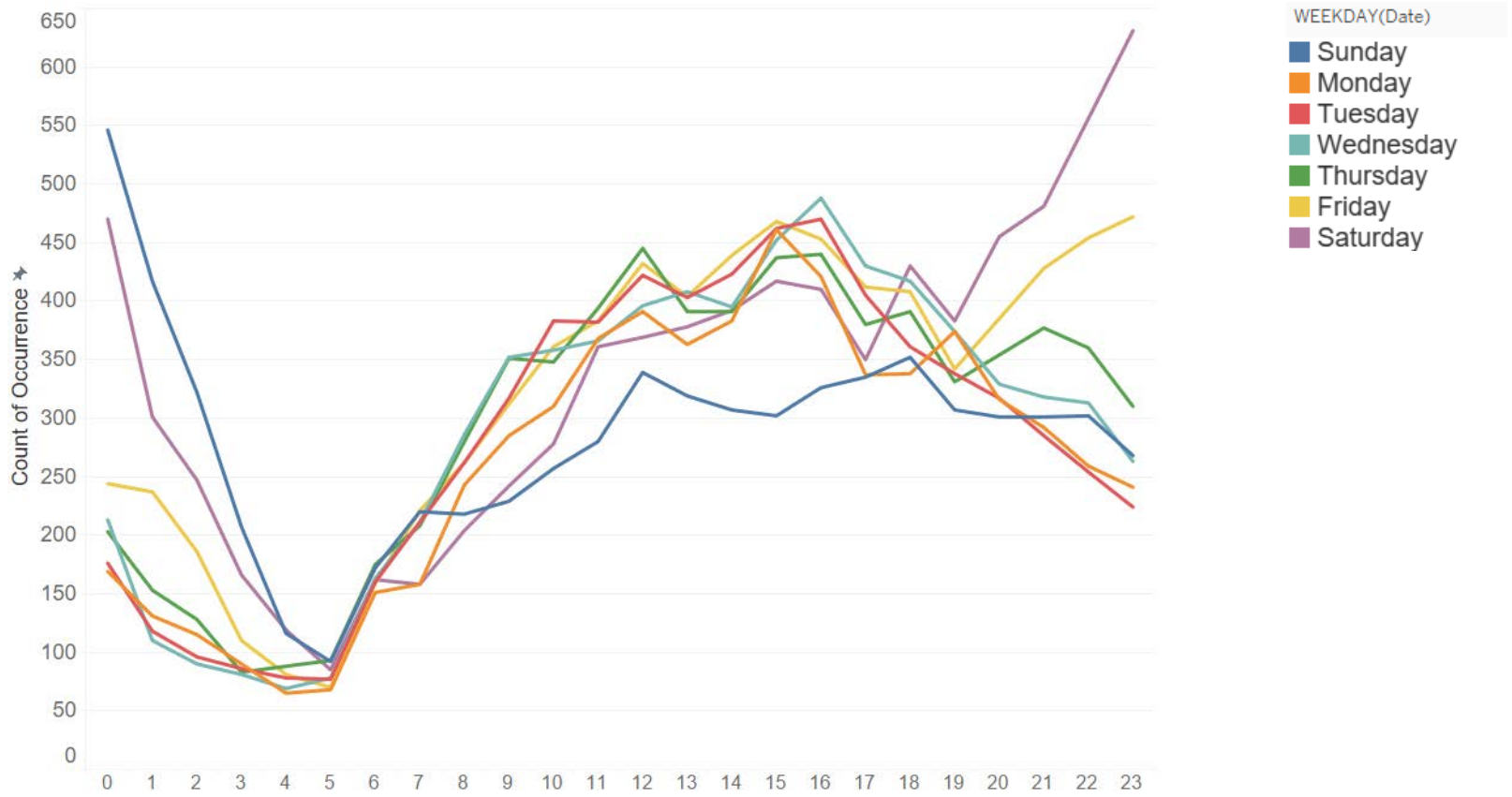
Source: KPMG analysis based on data provided by GPS.



Occurrence Distribution by Date and Time – Priority 4

The graphic below outlines the occurrence distribution by date and time for priority 4 calls for service.

Occurrence Distribution by Day and Time

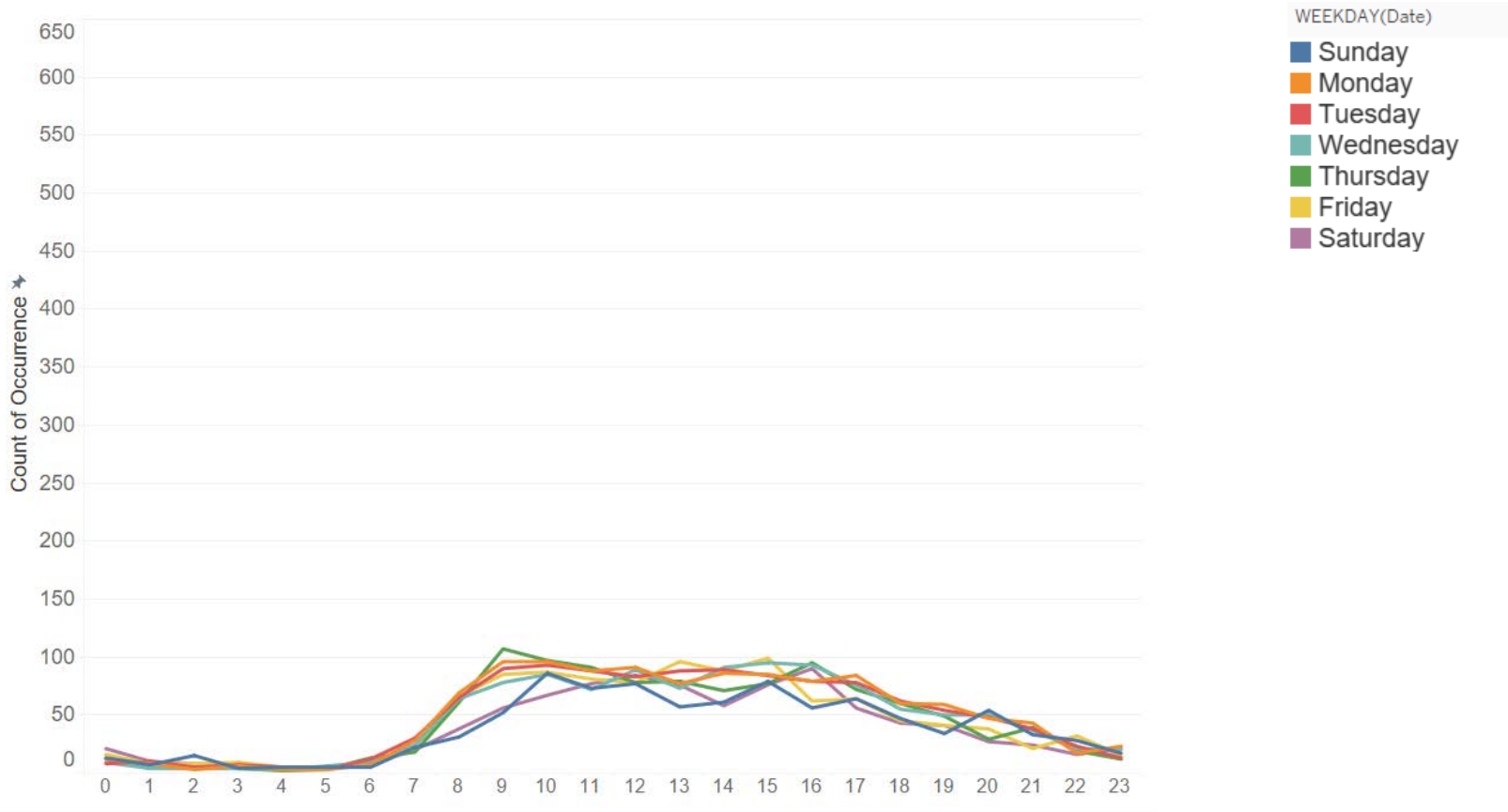


Source: KPMG analysis based on data provided by GPS.

Occurrence Distribution by Date and Time – Priority 5

The graphic below outlines the occurrence distribution by date and time for priority 5 calls for service.

Occurrence Distribution by Day and Time

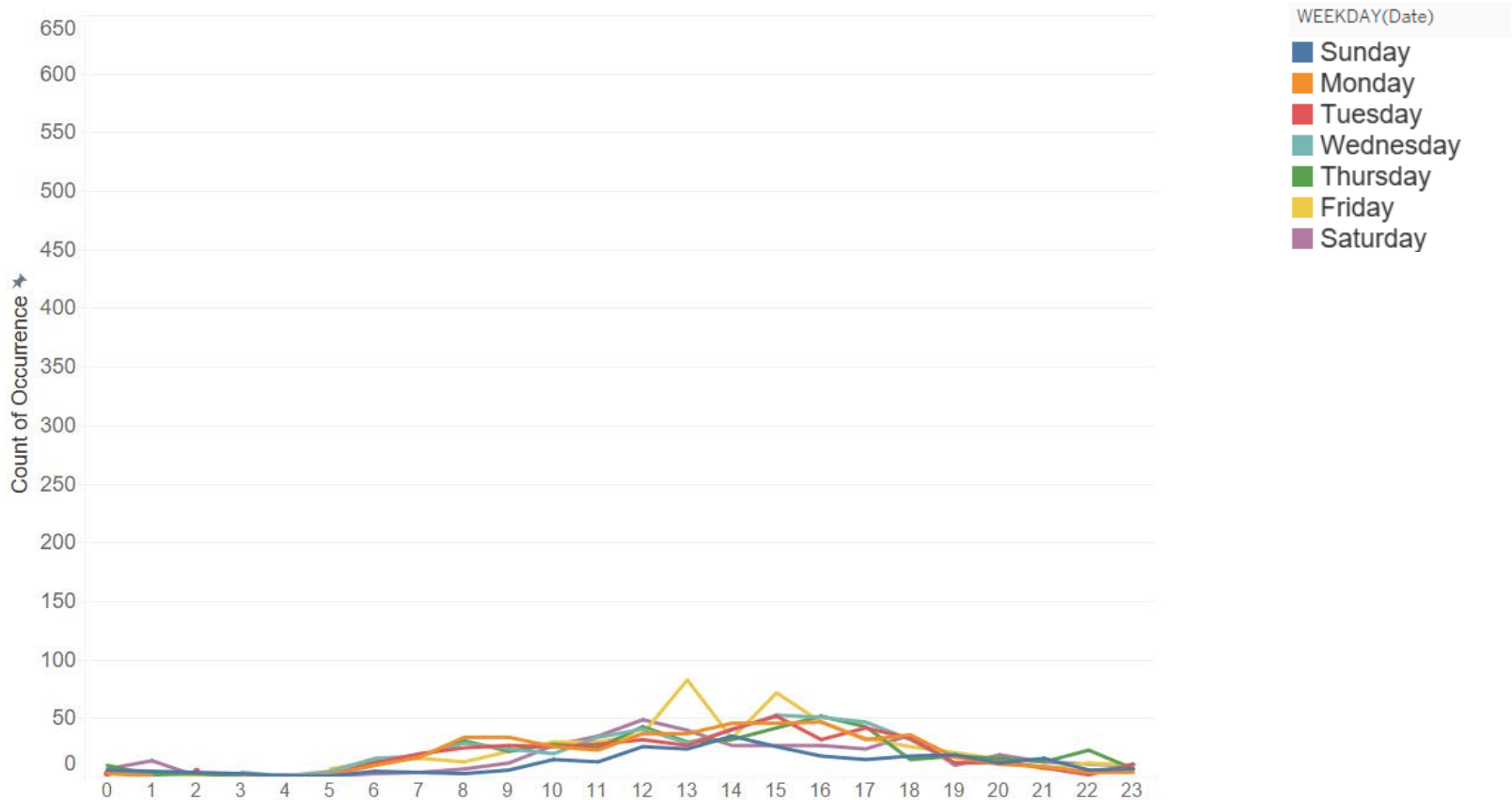


Source: KPMG analysis based on data provided by GPS.

Occurrence Distribution by Date and Time – Priority 6

The graphic below outlines the occurrence distribution by date and time for priority calls for service.

Occurrence Distribution by Day and Time



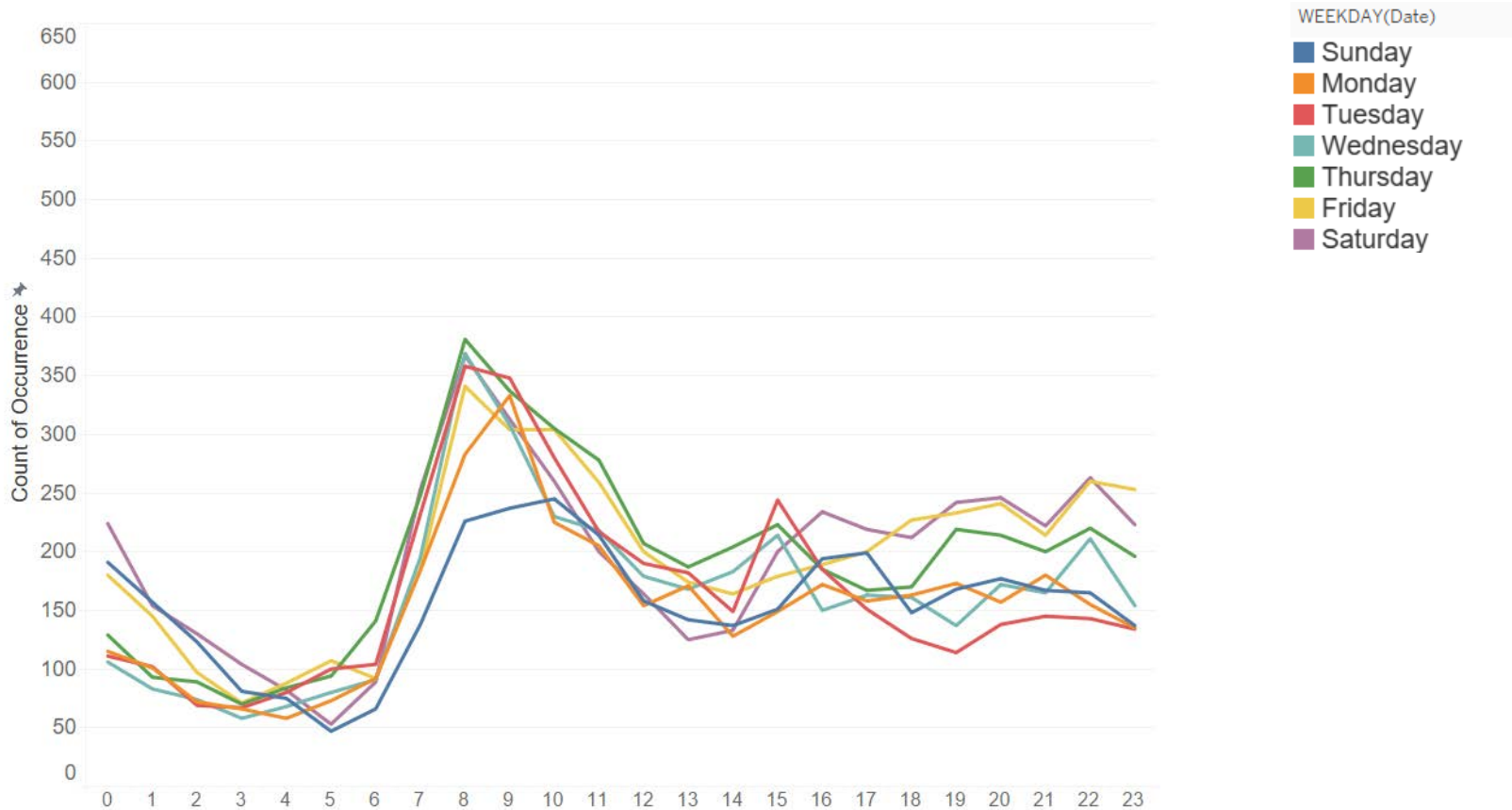
Source: KPMG analysis based on data provided by GPS.

Guelph Police Service | Staffing and Service Delivery Study

Occurrence Distribution by Date and Time – Priority 7

The graphic below outlines the occurrence distribution by date and time for priority 7 calls for service.

Occurrence Distribution by Day and Time

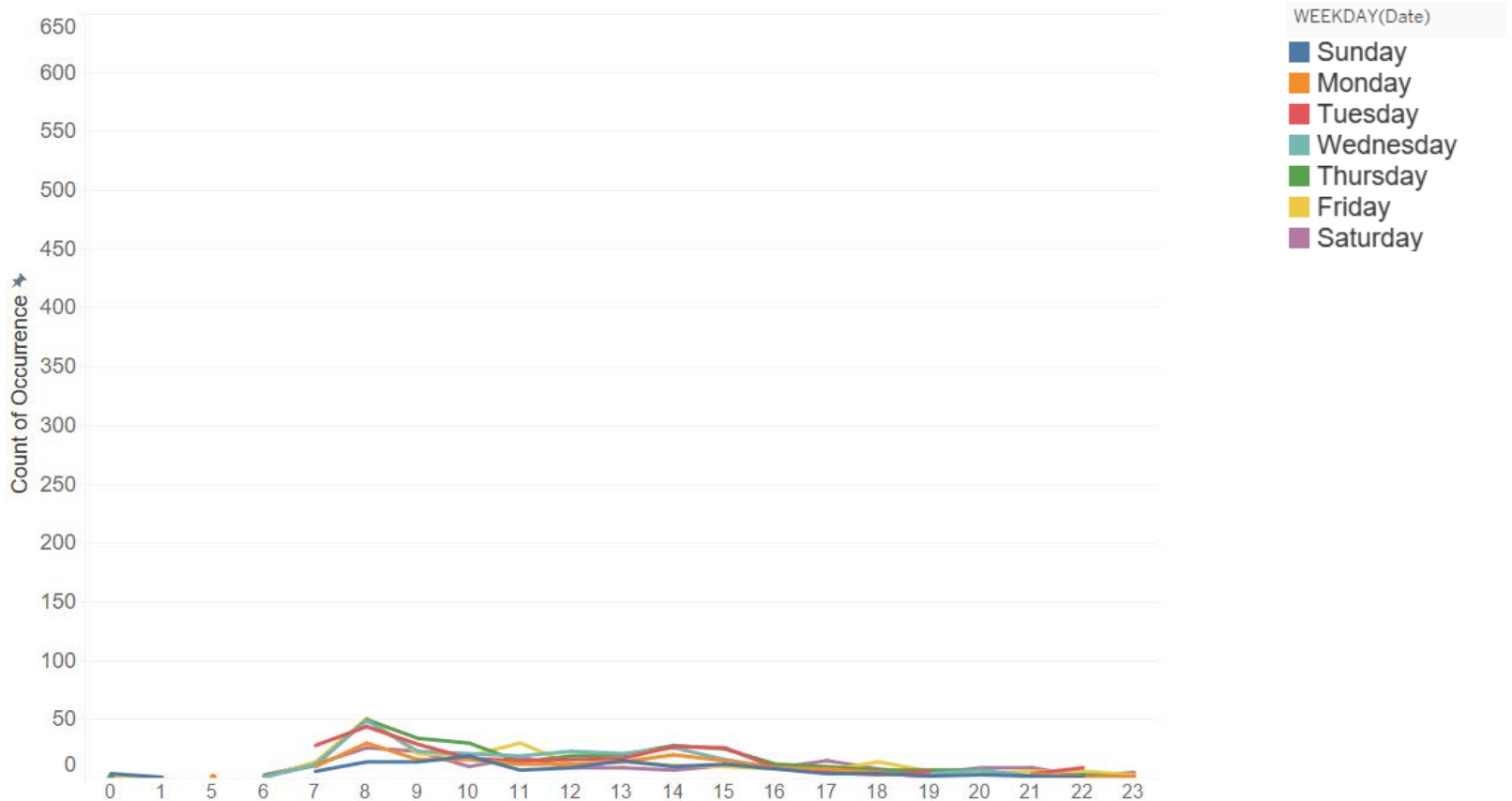


Source: KPMG analysis based on data provided by GPS.

Occurrence Distribution by Date and Time – Priority 8

The graphic below outlines the occurrence distribution by date and time for priority 8 calls for service.

Occurrence Distribution by Day and Time

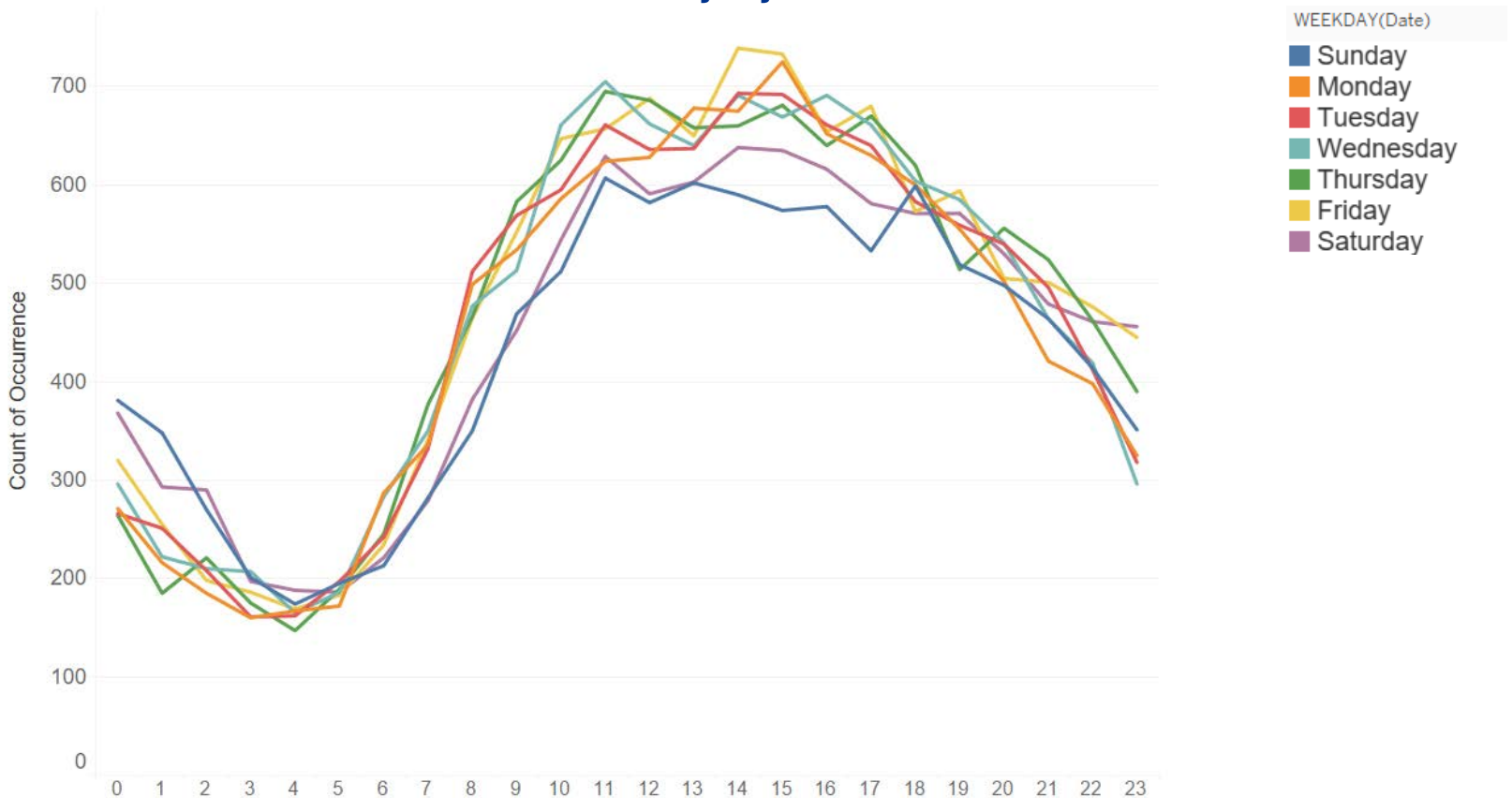


Source: KPMG analysis based on data provided by GPS.

Occurrence Distribution by Date and Time – Priority 9

The graphic below outlines the occurrence distribution by date and time for priority 9 calls for service.

Occurrence Distribution by Day and Time



Source: KPMG analysis based on data provided by GPS.



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The information provided to us by Client was determined to be sound to support the analysis. Notwithstanding that determination, it is possible that the findings contained could change based on new or more complete information. KPMG reserves the right (but will be under no obligation) to review all calculations or analysis included or referred to and, if we consider necessary, to review our conclusions in light of any information existing at the document date which becomes known to us after that date. Analysis contained in this document includes financial projections. The projections are based on assumptions and data provided by Client. Significant assumptions are included in the document and must be read to interpret the information presented. As with any future-oriented financial information, projections will differ from actual results and such differences may be material. KPMG accepts no responsibility for loss or damages to any party as a result of decisions based on the information presented. Parties using this information assume all responsibility for any decisions made based on the information.

No reliance should be placed by Client on additional oral remarks provided during the presentation, unless these are confirmed in writing by KPMG.

KPMG have indicated within this report the sources of the information provided. We have not sought to independently verify those sources unless otherwise noted within the report.

KPMG is under no obligation in any circumstance to update this report, in either oral or written form, for events occurring after the report has been issued in final form.

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GUELPH POLICE SERVICES BOARD
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OFFICE OF THE CHIEF OF POLICE

TO: Chair Peter McSherry and Members of the Guelph Police Services Board

DATE: Thursday, June 15, 2023

SUBJECT: Supportive Staffing Model Implementation

PREPARED BY: Kelley McKeown, Manager, HR and Occupational Health, Safety and Wellness, Sarah Purton, Finance Manager, and Lisa Pelton, Finance Manager

APPROVED BY: Daryl Goetz, Deputy Chief of Administration

RECOMMENDATION:

1. THAT the Guelph Police Services Board authorize the hiring of 4.0 Constable Full-Time Equivalents over complement in 2023 as a critical first step in order to support the active staffing model outlined in the KMPG Staffing and Service Delivery Study and to provide critical support to our front line response capacity; and
2. THAT the Guelph Police Services Board receive the 2023 funding strategy and 2024 - 2027 forecasted budget impacts related to these supportive staffing positions for information.

SUMMARY:

Since the introduction of presumptive legislation for first responders in 2016, the Service has experienced an increased level of both workplace (combination of presumptive leaves and other work-related illnesses and injuries) and non-workplace related leaves. Despite the introduction of presumptive legislation and the increased number of presumptive WSIB leaves, there has not been a corresponding increase to the WSIB budget. As a result of the shortfall in the WSIB budget since the introduction of this legislation and expectations that the Service operate within its authorized complement, these leaves have been managed by consistently operating at a reduced deployable member complement in order to provide those on leave with the required support and operate within the approved budget. This situation is no longer viable or sustainable. Therefore, staff are requesting the Board's approval to begin implementing the active staffing model

included as recommendation #4 of the KPMG Staffing and Service Delivery Study (Appendix 1). The active staffing model aims to provide much needed staffing support for any police or civilian member who has been on a presumptive WSIB leave of 1-year or greater for which there is no current prognosis for a return to work. This model would assist by ensuring those on leave receive the required support, address the service delivery gaps resulting from lost capacity, and provide critical member wellbeing supports for those who remain in the workplace. Attached as Appendix 2 to this report is the Ontario Chief Coroner's Expert Panel's report on Police Officer Deaths by Suicide. This report was published in September 2019 and provides a fulsome discussion on mental health and wellbeing challenges in policing. Context around the state of policing resources in Ontario and the personal impact this has both on the identity of a police officer and their commitment to duty are provided in the two excerpts from the Coroner's Report below:

"Police officers represent 0.18% of the Canadian public (a number that is similar in Ontario). Put another way, 99.82% of Canadians do not carry these same authorities and responsibilities. Most police members will tell you that their career is not a job but a calling, and this distinction from almost all other Canadians is not lost on them. It is a source of great pride, and it carries its own burdens and every day stressors that most of us cannot imagine." (page 6)

"Nonetheless, it appears to us as a panel that police resources in Ontario are strained to a breaking point in many locations around the province. It follows that mental health impact can be expected to continue and perhaps even grow in frequency and intensity if this situation is not somehow addressed.

These resource shortages may be real or perceived. They may be due to an inability or unwillingness to implement new models and re-engineered practices as some might suggest. They may be due to an unwillingness of local, provincial and federal governments to meet the real budget requirements as others would argue. They may be due in part to a vicious circle where each new accommodation of a member with mental health issues further aggravates already diminished staffing levels. But, while decision makers grapple with these arguments, police members are burning out, many are becoming ill, and some are dying.

It is in their nature to keep coming to work. It is in their nature to deploy into harm's way even when understaffed. It is also in their nature to minimize and suppress their own symptoms until they can no longer do so." (page 10)

Furthermore, commentary specific to presumptive leaves and courses of action or pathways to better outcomes can be found on pages 8 and 11 of the report respectively.

Pathway #4 from the report is provided below and speaks directly to the concept of the proposed active staffing model.

Pathway #4: Resourcing, Accommodation and Burnout (Excerpt from the Report of the Expert Panel on Police Officer Deaths by Suicide Report):

For most municipal police services in Ontario, Police Service Boards are responsible to maintain adequate staffing levels to meet demand for service in their jurisdiction. For the OPP and First Nations police services, this responsibility rests with the provincial and federal governments. Most police budget-setting processes establish an 'authorized strength' of members. The authorized strength model is built on the premise that all the police positions are filled, and all members are at work. The model does not adequately consider that staffing vacancies occur when recruitment numbers fall short, and also when members are away from the workplace on medical leave. This gap translates to an additional workload for members who are working. Through intensified workload demands in regular deployment, and often through increased overtime levels, essentially it falls to the members to subsidize the shortfall in the authorized strength.

The repercussions of this model are that those left working are forced to function in an environment where they are short-staffed which may lead many to burnout. Some may also develop a feeling of contempt toward members that are on medical leave. All of this leads to further erosion in the identity issues occurring for those absent members.

Under the current model, staffing gaps contribute to an ongoing systemic deterrent to disclosure of mental health issues, create a significant barrier to those who need to access and maintain proper care paths, and uphold a false expectation of fit-for-duty capacity that perpetuates stigma and self-stigma surrounding mental health and occupational stress injuries. The reality of staffing gaps must be confronted.

Each individual police service will undoubtedly continue to face fiscal pressures, and in the short term at least, most may be unable to resolve their current staffing gaps on their own. Attention should be given to acting collectively to establish a province-wide system for exceeding authorized staffing that will allow for sufficient resourcing to fill vacancies when members are away from the workplace on medical leave.

For 2023, staff are requesting Board approval to hire 4.0 constable FTEs over complement to provide supportive staffing as a critical first step in implementing the active staffing model recommended by KPMG. These FTEs would be included in the September 2023 intake at the Ontario Police College (OPC), ensuring that they will be available to provide supportive staffing at the GPS early in 2024.

REPORT:

Background & Leave Data:

In 2016, the Workplace Safety Insurance Act was amended to include post-traumatic stress disorder (PTSD) presumption for first responders. This legislation meant that it was no longer required to provide a link between a traumatic event and a PTSD diagnosis for specific positions within a police service.

When comparing the first year of the presumption to current, workplace (combination of presumptive leaves and other work-related illnesses and injuries) and non-workplace related leave levels have increased for police by 187%, while civilian levels have increased by 42% during the same period to date. The 5-year average for police injury/illness leaves as reported in the HR annual report for 2022 is 20-police members and 8-civilian members.

At the time of this report, there are a total of 26 FTE's (18-police positions and 8-civilian positions) for which the leave duration is 1-year or more with no prognosis for a return to work. Of these 26 FTE's, 6-police positions and 6-civilian positions have been permanently backfilled with supportive staffing positions (classified as 'over-complement'). Accordingly, supportive staffing is currently required for 12-police positions and 2-civilian positions to implement the active staffing model recommended by KPMG.

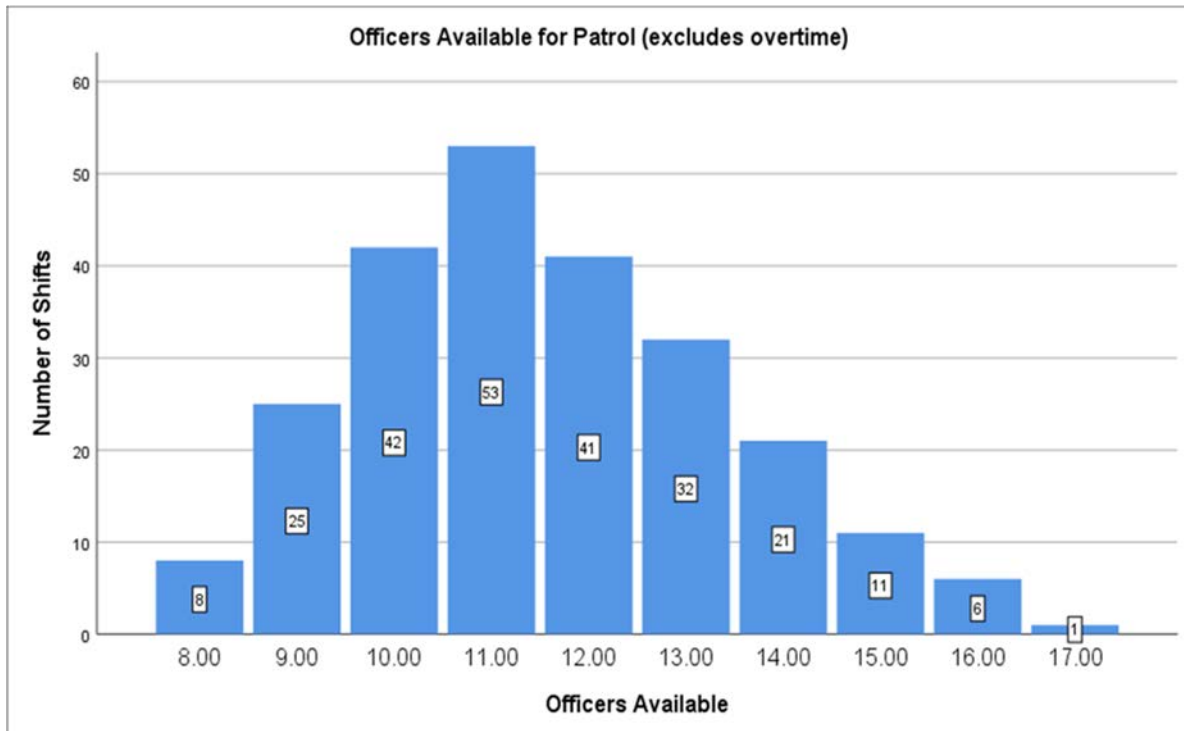
Despite best disability management processes and practices, it is not expected that a notable decrease in leave levels will occur over the next 5-years. Without a commitment to address reduced staffing levels resulting from leaves, member wellbeing and service delivery challenges are expected to increase.

KPMG Staffing & Service Delivery Study

In mid-2022, the Service retained KPMG to conduct a staffing and service delivery study that, using multiple sources of internal and external data, provided recommendations to improve the overall effectiveness of policing in Guelph. Included as recommendation #4 of the KPMG report was to ***"increase staff complement with a focus on patrol and investigations and employ an active staffing model to help mitigate the impacts of presumptive legislation."*** The report highlighted the increased number of leaves that have occurred since 2016 and recommended that the Service hire officers in excess of its authorized complement to account for the ongoing loss of members on a presumptive leave. The report also identified that Guelph had a lower ratio of officers per population served compared to its comparators and stated that the Service was challenged to meet minimum shift complements.

For purposes of this report, data for the first 4 months of 2023 has been populated to provide information on patrol officer availability prior to additional officers brought in on overtime and is depicted in the following graph. For this 4-month period, of the 240 total shifts worked, 53 shifts (22%) were staffed with the established minimum of 11 officers. This is consistent with officer availability for

patrol data the KPMG study reported based on analysis of historical data. Furthermore, there were 75 shifts (31%) that required overtime of one or more officers to meet the established minimum of 11 officers. In total, the Service functioned with approximately 53% (128/240) of shifts with 11 frontline patrol officers. Overtime analysis shows that for the first 5 months of 2023, overtime hours related to call-outs for short staffing are up 68% or 1,273 hours and up 83% or 856 hours related to prearranged overtime compared to the same period last year. These numbers do not include overtime related to the downtown supplementary staffing initiative.



While leaves are one contributing factor of many to the actual number of officers available for patrol, these absences have a significant impact on day-to-day operations as longer-term absences effectively reduce the baseline number of officers within front-line response platoons which amplifies the impact of shorter term absences.

GPS Active Staffing Model

In response to KPMG’s recommendation, and on-going trends all Police Services are experiencing related to increased levels of leaves, staff are requesting the Board’s approval to hire supportive staffing positions in excess of authorized complement which would provide staffing support for those members on leave. This model would automatically ensure deployable staffing support for any member, whether civilian or police, who has been on a presumptive WSIB leave for 1-year or more, with no current prognosis for return to work.

For the purposes of this report, staff are requesting Board approval to hire 4.0 constable FTEs to provide supportive staffing in 2023 as an initial step in implementing this model. These FTEs would be included in the September intake at OPC which would allow them to join frontline patrol in early 2024.

2023 - 2027 Financial Impact

Since presumptive legislation came into effect in 2016 the Service's WSIB budget has been underfunded.

The total estimated cost to begin the implementation of the recommended Active Staffing Model and fund 4.0 constable FTEs to provide supportive staffing is \$570,000. Included in this costing is:

- The estimated loss of earnings paid to the employee on leave plus the WSIB administration fee;
- Estimated benefits the employee on leave is entitled to;
- Salary and benefit cost for the supportive staffing FTEs. Salary is calculated at a 4th class constable rate for 2023 for a 4 month period with the associated benefit mark-up applied;
- Additional operating and capital costs that the service will incur as a result of the new FTEs.

Offsetting this cost is budgeted salary and benefits of \$600K. Based on this analysis there is adequate funding available to support this request for 2023.

For 2024 onward, the estimated incremental impact on the Service's operating budget would be approximately \$330K (2023\$). This reflects the base budget increase that would need to be made to the Service's WSIB budget in order to fund this request on a go-forward basis.

STRATEGIC PLAN 2019 - 2023:

Priority 1: Community Policing with the need for higher visibility in the community.

Priority 2: Organizational Health and Service Effectiveness, with need to review police resources and how they are deployed to better meet the needs of the community and members.

Priority 3: Community Wellness with a continued focus on how the Service manages mental health-related calls for service.

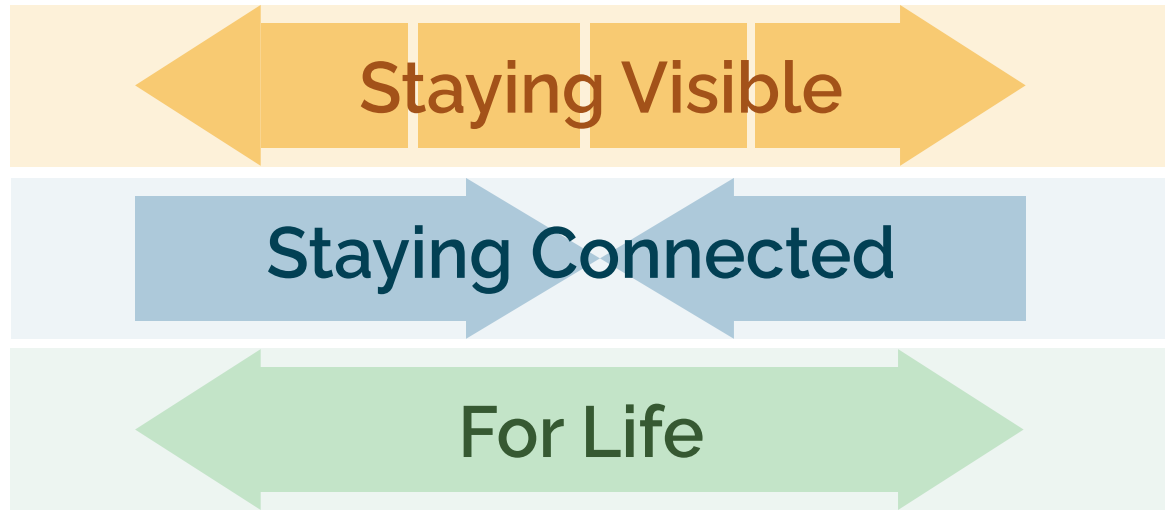
FINANCIAL IMPLICATIONS:

Total estimated cost of the 4.0 constable FTEs being requested is \$570K which in 2023 would be offset by the salary and benefits budgeted for the members on leave. Approval of this request will result in an estimated increase to the 2024 base budget of approximately \$330K. The incremental impact on the 2025 and forward budget would be any inflationary increases applied to the loss of earnings payments and associated benefits.

ATTACHMENTS:

Appendix 1: KPMG Staffing & Service Delivery Study (**REMOVED and included as standalone appendix for budget report**)

Appendix 2: Report of the Expert Panel on Police Officer Deaths by Suicides



Report of the Expert Panel
on Police Officer Deaths by Suicide

September 2019

Foreword: Respecting Our Nine Lost Officers and Their Survivors

We begin by extending our respect and our appreciation to the families, friends and colleagues of the nine police members whose untimely deaths by suicide during one single year became the catalyst for our Review Panel. We know it cannot have been easy for these survivors to share their grief alongside their generous and thoughtful observations on a system that was at times supportive, and too often flawed and frustrating.

We want these survivors to know that we recognize their loved ones for the fullness of their lives. Each of these nine individuals served the public. Each of them committed themselves to high standards of professionalism. Each of them chose and trained for a career filled with danger, stress, trauma and fatigue in order to keep our communities safer for all. And, each of them also lived, laughed and enjoyed the loving company of their families, friends, neighbours and colleagues.

We decided early as a panel that we would not identify the nine by name, nor would we showcase any details of their life and passing. Policing is much too small a community to do so without violating privacy. But moreover, we chose to direct this report toward the future. We chose to honour the nine by learning all that we can from their experience, and our results are presented as collective findings gathered from the individual as well as shared journeys of these fallen officers. And, we hope that by joining with them in this manner, we might help to craft a legacy of better outcomes for all their brothers and sisters, present and future, who work within the policing system in Ontario, and beyond.

The charge given to us by the Chief Coroner was clear in this regard: *“Nine officers died by suicide. What would they and their survivors say should have been done differently?”*

Throughout our deliberations and through this report, we offer our best attempts to answer that question on their behalf.

Respectfully,

*The Members of the Ontario Chief Coroner’s Expert Panel on Police Officer Deaths by Suicide
September 2019*

Executive Summary

During 2018, nine deaths by suicide occurred among serving and retired police officers in the province of Ontario. This number was thought to be unprecedented*. Soon after the year ended, the Office of the Chief Coroner initiated an expert panel review process. The eight-member panel began its work in June 2019. The experts on the panel understood that world research on suicide prevention has demonstrated that any specific death by suicide is difficult to predict or prevent, given that the known risk indicators for suicide also exist in large numbers of people who never attempt or die by suicide. Despite this, however, there are a number of evidence-based risk indicators for suicide, which when taken together, provide a list of factors known to be present in the majority of cases of completed suicide. Therefore, these points of risk can be used as potential targets for intervention when dealing with a vulnerable individual, and for the panel's purpose, these points of risk could serve as a method for organizing and understanding the information obtained on the nine deceased police officers. These risk indicators and potential targets for intervention to prevent suicide are described in Part One of our report.

These risk patterns were clearly evident in all nine of our subject officers' lives. In Part Two, we identify several characteristics unique to policing that may place all police members at greater risk, including the presence of mental health challenges, whether mild, moderate or severe. Given the presence of a diagnosable mental disorder (often Depression) in over 90% of those who die by suicide, the panel interpreted its mandate to extend beyond preventing deaths by suicide, to include a focus on improving mental health outcomes for all police members.

In Part Three of our report, we introduce and discuss seven pathways to better outcomes. The first of these, and perhaps the most vital, is the normalization of mental health issues. We call for deliberate steps to introduce a more open culture that will support earlier and continuing visibility of mental health conditions, better and sustained access to care, treatment and recovery, and an end to the isolating social disconnections that can often carry these conditions to their extremes. In a cross cutting manner, the six remaining themes build upon other aspects of this culture to strengthen organizational and clinical supports, to protect the strong sense of identity that police members value deeply, to more actively inform and engage police members' families and outside supports, and to better unify and align the tremendous efforts at improvement that are already underway across the policing and mental health systems. Alongside this discussion, we also feature in a running sidebar a number of specific observations on the strengths and weaknesses in the current police and mental health ecosystem. In Part Four, these themes are consolidated into a broader legacy.

* A Note About the Number

There is currently no requirement in Ontario for Coroners or others to record or track deaths by suicide among first responders, including police. Therefore, it is not known if this number of suicides in a single year was higher than the number in previous years.

Statistically, it is much higher than reported rates in the general public. Anecdotally, it may reflect increases in mental health issues across the policing sector.

For the panel, for police services and police association officials, for health professionals, and most notably for the surviving families, it is an alarming and unacceptable number.

Assembled under 14 main recommendations in Part Five of this report, our panel outlines a total of 36 actions and specifications, most of which include proposed roles and responsibilities, and all of which reflect a continuing theme of collaboration. First among these is a call for the formation of an Ontario Police Members Mental Health Collaborative (OPMMHC) to serve as a standing body that will initiate, guide, monitor and report on an urgent and comprehensive plan of action in Ontario.

The panel members are named in the Appendix, and we are all grateful to Dr. Dirk Huyer for his leadership in assembling this expert panel and for inviting us to serve in this important work. We also extend our thanks to the staff in the Office of the Chief Coroner for their valued guidance throughout our process.

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Part One: Understanding the Common Tragedy in Any Death by Suicide

Our panel consisted of eight members selected by the Chief Coroner of Ontario for the expertise and perspective that each member could bring to the review. Several members are mental health professionals with expertise in suicide and suicide prevention, with experience working with police and other first responders. Others are current or past members of police organizations representing executive ranks, civilian specialties, and front line police officers with lived experience. One member is a mental health professional with extensive experience working with a police service outside of Canada, which has a reputation for excellence in promoting member mental health and well-being. One member is an educator and researcher with a special interest in policing culture. An early priority for the panel was to share their expertise and find a common frame of reference for understanding suicide. Following a discussion of the literature and the task at hand, two well-researched models for understanding suicide appeared to best fit the requirements for the review, the Canadian Forces Modified Mann Model for Suicide Prevention, and the Policing and Mental Health Ecosystem, and both are discussed further below. The panel also received input from outside delegations. We accessed a wide range of literature on the subject, digested other models from medical and sociological research, and we consulted the notes and themes culled from often painful interviews with survivors.

We learned that there is no prototype. Each and every suicide, whether attempted or completed, is in many ways as unique as the person involved. Although there is no single pattern that all suicides follow, the panel reviewed commonly studied and accepted factors associated with death by suicide. These include the presence of a **mental health problem**, often **depression**, combined with: a **stressful life event** or **significant loss**, which may be personal (loss of an important relationship through separation or divorce); experiencing **stressful or overwhelming events related to work**, such as violence or loss of status; or **stress due to other factors** (especially those causing embarrassment or shame). These conditions and events may then lead vulnerable persons to start thinking of suicide as a “way out”, or a way to solve their problems. There are then a number of factors, which have been shown to increase a person’s chances of acting on these thoughts and dying by suicide. These factors include: **impulsivity**, where either the person acts quickly and without much consideration, when a method of suicide is close at hand; or, the person uses drugs or alcohol which can decrease impulse control and lead to impulsive action; **hopelessness or pessimism**, where the person no longer believes there can be positive solutions or outcomes for them; **emotional dysregulation**, where the person is having difficulty controlling or moderating their feelings and behavior, and may be angry, aggressive, or prone to risk-taking; **access to lethal means**, where the person has a lethal method of death close at hand, which gives them no chance to deliberate on their actions, and kills quickly; and, **contagion or imitation**, where a vulnerable person learns of the death by suicide of someone whom they admire, or with whom they identify, and suicide begins to look like a “reasonable alternative” to the stresses and problems the vulnerable person is facing (the phenomenon of “copycat suicides” when the suicide of a public figure or celebrity is widely publicized is an example of this).

While hope and opportunities for intervention will always remain, once a clear intention to end one's life has been formed, options narrow considerably for preventing that death. There are many more opportunities before that point to prevent that decision from being made.

We recognized a distinctive pattern that would prove vital to our deliberations, a pattern that was also clearly evident in our nine subject deaths. We observed that by the time each of our subjects formed that determined intention to end his or her life, each had traveled a series of pathways, and each pathway had reached its end. The intersection of three specific pathways stood out for us. One is the path of acute mental health issues, often with associated substance use disorders. Another is the path of lost or diminished access to timely and quality care, effective treatment services and a range of essential supports. And the final one is the path of actual or perceived emotional disconnection from family, friends, and organization, often pushed to its endpoint by one or more precipitating events, sometimes at work, and more often in personal and family life.

We recognize that this observation may not break new ground in medical science, but our own discussions of this evident pattern proved instrumental in shaping the direction of our review. We recognized that we would be greatly limited if we were to direct our efforts solely to 'preventing suicides', per se. On the other hand, the imagery offered by these three critical pathways and their ultimate tragic convergence opens a much wider field of opportunity for changing the conditions. We know that if these conditions are unchanged, they will continue to lead some to that ultimate point of despair, and they will most certainly lead too many others to experience deterioration in the quality of their life and career. It is on these upstream aims and opportunities for improvement that we have chosen to focus this report.

We reviewed available literature and best practices in suicide prevention with a view to anchoring our own work in credible models. We noted that the US Air Force implemented a comprehensive suicide prevention program to reduce the risk of suicide, implementing 11 initiatives aimed at strengthening social support, promoting development of social skills, and changing culture to encourage effective help-seeking¹. We also found utility in the Mann Model for Suicide Prevention in the Community². Moreover, we found a closer fit with the adaptations to that model made by the Canadian Forces (CF).

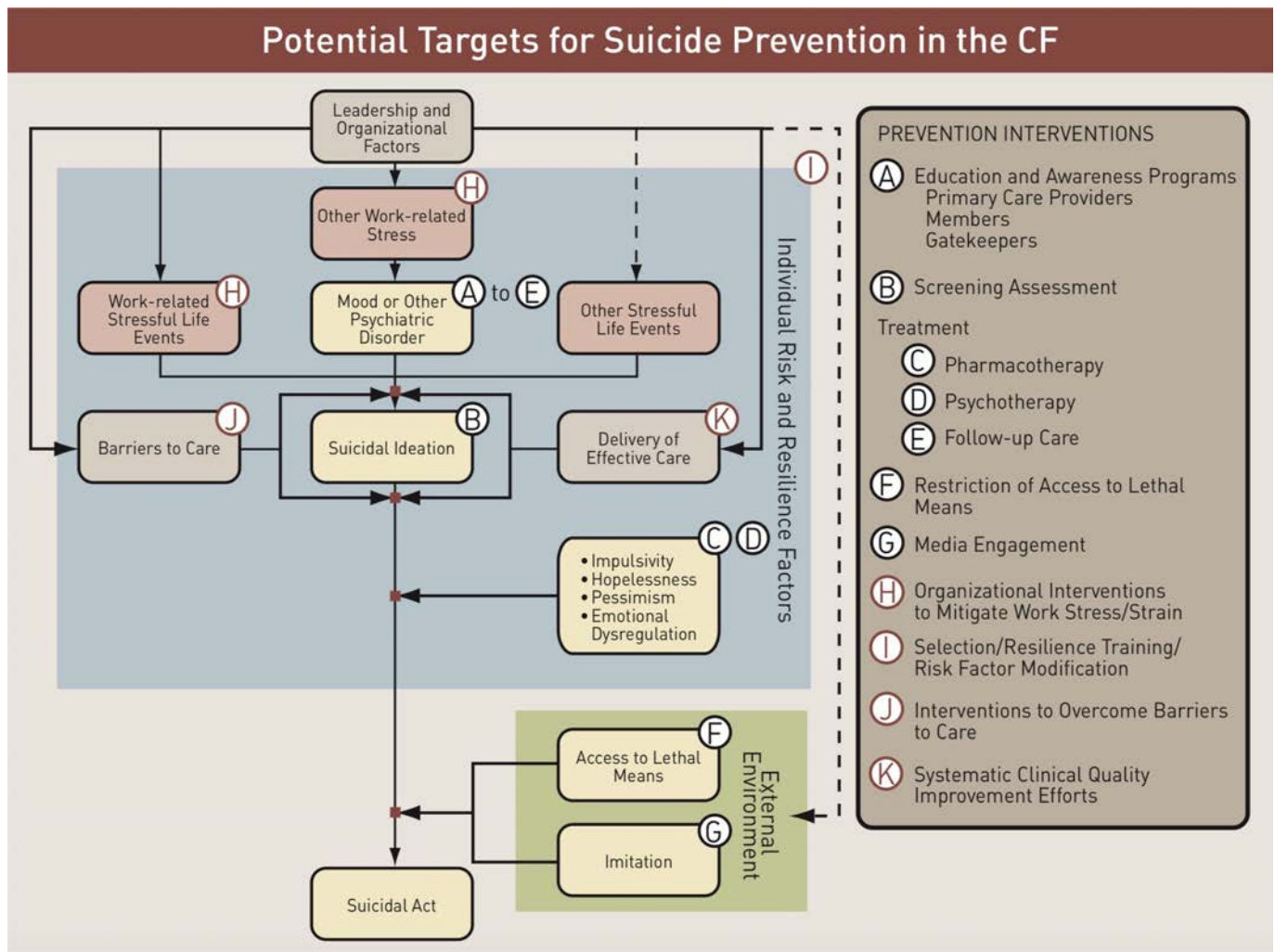
In many ways, the CF-modified Mann model³ (Figure 1) reflects a wider range of opportunities for intervention that are consistent with our pathways observations, and which also closely align with the paramilitary nature of policing and its organizational culture.

¹ USAF (2001). [The Air Force Suicide Prevention Program: A description of program initiatives and outcomes \(AFPAM 44-160\)](#). Suicide Prevention Resource Center.

² Mann JJ, Apter A, Bertolote J, Beautrais A, Currier D, Haas A et al. Suicide prevention strategies: a systematic review. JAMA 2005 October 26;294(16):2064-74.

³ [Report of the Canadian Forces Expert Panel on Suicide Prevention \(PDF\)](#).

Figure 1: Canadian Forces Modified Mann Model for Suicide Prevention



We include in our recommendations (see Part Five below) a call for further research and development that might lead to a police-specific version of the CF-modified Mann model for broad application across the sector, incorporating any additional factors and interconnections addressed within this report.

Part Two: Learning from Deaths by Suicide and Mental Health Issues in the Context of Policing

Our mandate was to examine deaths by suicide specifically among police officers. No doubt, much of the general knowledge and social science about suicide applies as much to this sub-set as it does to the general population. Police members are people first, and like everyone else, their lives are subject to the same successes, challenges and complexities as their non-policing peers. But, even the expression of our mandate implies that there might be something different from the norm in the pathways traveled by our nine, and by other police officers and civilian members that have arrived at the same tragic point outside the scope of our study. Our panel shared that same suspicion from the outset, and we set out to dive deeply into the question.

First, we noted that there is important work being done across Canada to better understand, through research, the mental health and well-being challenges faced by those in the policing profession, as well as in the broader community of first responders. Specific priority has been placed by the federal government on understanding and serving the mental health needs of public safety personnel in Canada through a number of efforts, including the passing of the Federal Framework on PTSD Act in 2018. The Canadian Forces has invested considerable research and development to better serve the mental health needs of active service members and veterans. Our panel recognizes the work of the Canadian Institute for Public Safety Research and Treatment (CIPSRT), the Canadian Institute for Military and Veteran Health Research (CIMVHR), their funding partners, and countless others working in this field for the commitment they have shown to improving outcomes for first responders, including police. The deliberations, conclusions and recommendations of our own panel are timely and relevant in the overall pattern of efforts in Canada in this regard.

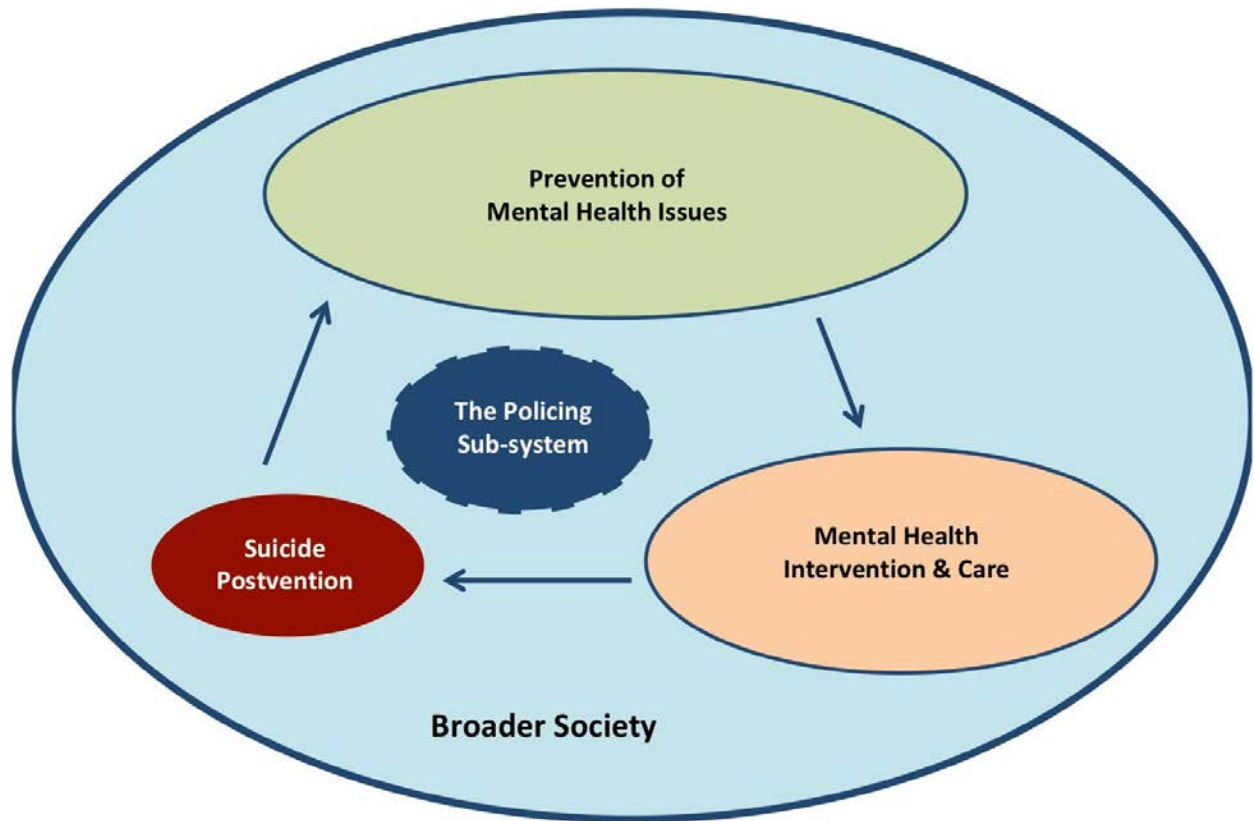
We also note that there have been significant advances in mental health awareness and resilience training across Ontario police services in recent years, along with a growing number of staff and consulting psychologists embedded within the ranks to increase access to professional support and organizational guidance. In 2017, the Canadian Association of Chiefs of Police (CACP) established a Psychologist Sub-Committee under its Human Resources and Learning standing committee in an effort to achieve greater alignment and to create a network of best practices, among other aims.

The Ontario Provincial Police (OPP) has been engaged in a multi-pronged examination of mental health and suicides among its members, and the efficacy of current mental health supports available through its partnerships with its principal collective bargaining units, the Ontario Provincial Police Association (OPPA) and the OPP Commissioned Officers Association (COA). They have also engaged within these studies the active support of charitable and not-for-profit agencies that provide peer support, early intervention, and health care referrals, most of them working on a volunteer basis. The OPP reviews are broader in scope than our review, spanning a longer time frame of lived experience and including extensive consultations with active and retired members. We were fortunate to have the opportunity to interact with their study team members, their executives, and the OPPA during our own deliberations, and to review some of their findings and several proposed and promising solutions that are well underway.

We also received delegations from the Toronto Police Association (TPA), the Police Association of Ontario (PAO), and the Ontario Association of Chiefs of Police (OACP), each of whom showcased progressive and encouraging steps being taken along with expanded services in place or under development. We gained an international perspective on emerging practices related to police well-being from a recent global scan executed and summarized for us by a team from Deloitte.

All of these discussions yielded a progressively clearer picture of a policing and mental health ecosystem (see Figure 2), as others have noted in their own research. In our view, mental health and wellness issues in general, responses to moderate to acute illness, and deaths by suicide must be situated and understood in this context if we are to change the conditions and reduce risk for all police officers and civilian staff.

Figure 2: A Policing and Mental Health Ecosystem



We note there is an extensive health and social infrastructure intended to serve the broader public across Ontario in every phase of prevention, as illustrated in Figure 2. And, we also learned of ongoing initiatives to strengthen those supports, reduce suicide risk, and improve mental health outcomes for everyone, including police members. We encourage interested readers to consider all of these ongoing efforts to improve outcomes. Within the scope of our own report, suffice to say that the evident levels of commitment to these issues within policing give strong evidence that there are indeed apparent and urgent differences from broader society in the pathways experienced by police officers and their civilian colleagues in the policing sector.

Through our own analysis and discussions, we developed several observations on factors that are either unique, or at least uniquely acute within policing culture. We outline below those we found most salient to our study, and we highlight them for their real and potential impacts upon the mental wellness of police service members in Ontario.

Stigma and Self-stigma for Mental Health Issues

We often hear of stigma as a major factor in how society responds to persons experiencing mental health issues, and we salute efforts such as the Bell Let's Talk initiative, anti-stigma outreach programs from the Canadian Mental Health Association (CMHA), the Centre for Addiction and Mental Health (CAMH), and a host of community based organizations and public and private sector agencies. No one is served well by a social prejudice that differentiates mental suffering from physical, and we believe outcomes would be considerably better for everyone if this false separation could be eliminated.

And so, the starting point for the average police member may be no different than for others. At least, that is, until they enter the academy, hit the streets, or begin to work at the communications centre. In most police jurisdictions across Ontario, estimates run as high as 40% of police calls for service being tied to incidents involving persons with mental health issues. Whether or not the police are the appropriate response in many of these cases is a topic of considerable debate and outside the scope of our study. But, the fact remains that within the first few years of service, a police officer, communicator, or other specialist will have come to recognize those with mental health issues among the highest frequency of calls, and often for patrol officers they may even rank among their primary encounters with the public. Sadly, if the police are being called, they may also be encountering such individuals at the very worst times and often under the most critical stages of their condition. And in extreme cases, these encounters may involve violence and a direct threat to the safety of the public and that of the responding officers. It is also worth noting that it is police officers that must respond to almost every suicide that occurs in the general public.

Police members have reported to us directly and in other studies we consulted that notwithstanding their high degrees of compassion, training and their on-scene professionalism that is the norm in these thousands of calls for service, most police members will soon come to regard any person with mental health issues as someone they would never want to be. They also told us that they often become disillusioned about the effectiveness of mental health care when they bring acutely mentally unwell people to hospital only to see them leave shortly afterwards with little to no change in their condition or circumstances.

The Lifeline of Police Identity

Sworn police officers in Ontario and across Canada are invested with extraordinary responsibilities. They have the power under due circumstances to deny a person's freedom through arrest and detention, to enter private homes and communication devices with judicial authorization, to investigate and interrogate, to confiscate vehicles and other property, and when required, to apply escalating levels of force up to and including ending someone's life. They carry a range of use-of-force options on their duty belt and in their patrol car, and while they have an unenviable obligation to use them when warranted, they also carry the most exacting levels of accountability to formal authorities, to public oversight bodies, and to the informal world of mainstream and social media. When crisis or violence erupts, members of the public tend to move away from it, while police officers are duty-bound to move toward it. They must face it head on, often with great risk to themselves and their on-scene colleagues on whom they often must rely so that they remain safe and, so that no one else is injured.

Police officers represent 0.18% of the Canadian public (a number that is similar in Ontario). Put another way, 99.82% of Canadians do not carry these same authorities and responsibilities. Most police members will tell you that their career is not a job but a calling, and this distinction from almost all other Canadians is not lost on them. It is a source of great pride, and it carries its own burdens and every day stressors that most of us cannot imagine.

In any occupation, if a co-worker began to report or display mild symptoms of a mental illness, such as depression, anxiety disorder, or even moderate substance use, his or her colleagues might be alarmed, might recognize and pick up some workload imbalance, and might even be troubled periodically by behaviour they see as odd. It is doubtful that most co-workers would feel threatened by this individual's personal condition except in rare and extreme circumstances.

In policing, if a member reports or displays mild mental health issues, for at least some colleagues and even for the member himself or herself, such 'odd behaviour' can rise to life and death significance. It could be interpreted as, or merely feared to become a direct threat to the member and any colleagues who may be called to rely upon him or her at any time during a shift. While such dire situations may be infrequent in reality, they are by their nature unpredictable, and there is little margin for error when they occur. Apparently, from members' own disclosures, this is not lost on the average police officer, ever.

When combined with the self-stigma described above, this fear of being the one to let down the team may be even greater for the officer with the mental health issue, no matter how mild or moderate, than it is for his or her colleagues. Officers are trained to be team players and in truth, they will typically support one another. But, this may not be what goes through the mind of the afflicted. Instead, due to the early training and conditioning and the ongoing workplace culture of policing, many officers report becoming quite binary in their view of such things: either you are fit for duty, or you are not. As such, any loss or limit on your ability to perform the full scope of your duties can amount, in the mind of the individual, to a loss of your identity as a police officer.

Interestingly, this is not usually the same, or at least is not experienced to the same degree, if the deficiency arises from a physical injury or illness. Injuries are not uncommon in police work or even in off-duty activities. Illnesses can affect everyone in relatively uniform measure. Police can be very supportive, and when illnesses or injuries are severe, they often exhibit outstanding levels of support for their ill or injured colleagues.

But, likely due to the stigma and self-stigma they share, when the deficiency is due to psychological injury or arises from the same forms of mental health issues that affect 20% of all Canadians, the harsh and unfortunate term that is often invoked in policing is "broken toys". In other words, you are no longer fit for duty. And, as we all recall from childhood, once broken, most toys cannot be fixed.

Faced with this harsh and often binary reality, a great number of police members will deny and shield the presence of mental health issues for as long as they can. The literature suggests that they may turn, in greater than average numbers, to alcohol and other substance use, and other often harmful self-medicating activities, in efforts to mitigate symptoms and to contain their underlying issues from exposure and treatment. Despite considerable investments by police services in their human resource departments, employee and family assistance programs (EFAP), and many other supportive options, many will avoid such doorways out of fear of exposure.

Too often, by the time their condition either forces them to seek help of their own accord, or is recognized by others or by consequences that leave them no choice but to seek help, they will have already traveled well down all three of the pathways described above. They may be at a point of greater criticality in their mental health issues. They may have a narrower range of secondary prevention and care options available to them. And, with surprising frequency, they may be experiencing disconnection due to damaged relationships with their employer, their colleagues, their friends, and their family as a result of their unmanaged illness and/or their unhealthy reliance on intoxicants.

The High Costs of Accommodation

In the best cases, members who recognize or are recognized early for mild to moderate mental health conditions will be quickly and effectively connected to the professional services and guidance they require. Enter the high personal costs and heightened risks that stem from accommodation. This is a term, and a status, that can be almost as loaded and stigmatized as mental illness itself in the policing culture.

If you are being accommodated by the organization, there are very differing responses that might apply. If you are still able to come to work and execute tasks that remain central to the mission, you are still serving your calling. Even if there are restrictions placed on your attendance, your deployment or your range of duties, and others know this to be due to a temporary or even permanent physical injury or illness, you may still be regarded as a dedicated and courageous member for continuing to serve when and where you can.

But, something appears to change if the reasons for modified duty or extended absence from work are left open to speculation and rumour, as can often be the case when a member chooses to remain private about mental health issues they are experiencing, or about the nature of their treatment and path to recovery. Stigma and misinformation about mental health care and recovery can lead to harsh and even hostile presumptions among peers, supervisors and managers that a member's behaviour is simply malingering, especially where there have been past performance issues or workplace conflict. This despite evidence that real malingering is actually quite rare. And, to quote one demeaning descriptor used by some, a member has been reduced to "counting paper clips" if a reassignment falls far outside their usual scope of duties, notwithstanding that it is still significant and dignified work.

Again, it is easy to see how quickly and how much further a member being accommodated for mental health reasons under these prevailing conditions might travel down those three pathways. Some may deny their own conditions completely, or deny themselves access to the care and treatments available due to self-stigma and cultural perceptions. Even if receiving care, the motivation will be very strong to suppress symptoms, to exaggerate wellness, and if accommodated or absent, to push hard toward full reinstatement, thus risking an increase in the criticality of the underlying mental health issues. The tendency to eschew available supports and services will be a common tactic to remain unrestricted in one's duties. If performance issues or conflicts with supervisors begin to surface, it may be without the benefit of true explanation. And, these additional stressors and ongoing deceptions at work and at home will often continue to deepen other actual and emotional disconnections from family and friends, especially when substance use also increases as a chosen means of coping.

The Give and Take of Post-Traumatic Stress Disorder (PTSD) Presumptive Policy in Ontario

An operational stress injury (OSI) is a non-medical term that is generally defined as "persistent, psychological difficulties resulting from operational duties" . Within a broad category of operational stress injuries related to policing, a number of mental health issues can be described as post-traumatic stress injuries (PTSI), including depression, substance use disorder, and specifically, the clinically diagnosed condition Post-Traumatic Stress Disorder (PTSD). With increasing acceptance and reduced stigma as a result, operational trauma is rapidly becoming the exception that breaks the rule, when compared to police attitudes on mental health in general. This is a positive development in and of itself.

⁴ Public Safety Canada (2019). [Post-traumatic stress injuries and support for public safety officers.](#)

The Ontario legislature passed presumptive legislation in 2016, expediting access to Workplace Safety and Insurance Board (WSIB) benefits, and by extension access to care for members who have been diagnosed by a psychiatrist or psychologist. It is no longer necessary to establish a causal link between a specific traumatic event and the condition. There is little doubt that this step has brought many more police officers to the care they require while also reducing the burden and added stressors of justifying their condition on the basis of a single traumatizing experience.

However, the panel observed two difficulties that have arisen, perhaps as unintended consequences from this progressive policy. The first is that WSIB and clinicians are still required to adjudicate the general pattern of trauma in order to exert some measure of control over the uptake of these benefits and services. As such, while a single precipitating event might not be required, some police officers experiencing symptoms of PTSD might still find themselves trying to justify their basis, and if unsuccessful and benefits are denied, to pull away from the care they require due to cost and now worsened self-stigma.

The second concern is that while the presumption opens a path to care for PTSD, it may inadvertently be closing down other paths to care for more generalized mental health conditions, including the broader range of occupational stress injuries. This can lead to misdiagnosis and over-diagnosis of PTSD on the one hand, since that is where the benefits are most accessible, and it can leave those experiencing such conditions as depression, anxiety disorders and substance use disorders without similar access and/or self-justification, on the other.

There is no doubt that trauma is a real and present danger in police work, and recent research is revealing more about and reducing stigma around the genuine nature of OSI's being experienced by military veterans and first responders across the board. However, just as PTSD is gaining legitimacy as one condition, our panel recognized the potential risk of narrowing the lens through which we view the entire spectrum of mental health challenges to which police officers may be prone.

The Confounding Interplay among Workplace Stressors and Life Events for Police

It seems likely that any person who experiences a decline in their mental wellness might struggle to distinguish the roles played by the stresses of everyday living versus those that have come from earning a living. Nonetheless, our panel observes that there is an interplay among these sources that may be even more complex for police than for others. As our nine subjects traveled down those three pathways to their tragic point of convergence, most had become disconnected from their employer and organizational supports, and at the same time, most were also disconnecting from their family, friends and social supports, if not in actual terms, then certainly to significant degrees of emotional detachment. The inherent danger in this observation is that one might be easily inclined to attribute their condition to on-the-job trauma and/or workplace dynamics, and miss the corresponding stressors playing upon them from their interpersonal conflicts, economic challenges, and other stressors of everyday life. Or, since in most of our cases and others we reviewed the most apparent precipitating events actually derived from outside of work, it would be just as easy to ascribe their state of health to everyday life alone, and to discount the roles played by their career-long experiences.

What makes this dilemma important in the context of policing is the interwoven nature of police identity as described above. Many police members have described the difficulties they face in even recognizing the distinction between work life and home life. The difference between on and off duty for a police officer is merely a distinction of pay and equipment because in Ontario, once sworn, a police officer carries his or her authorities and responsibilities 24 hours a day. Since they tend to see themselves serving and defined by a calling, and they

operate tightly within a team culture that is unique in society for its rights and its responsibilities, their identity tends to travel with them. Many have described the way their children, spouses and significant others view them as heroes. As such, disappointing one's colleagues on the job may also be, in their own perception, to disappoint those others outside of work and to fall short of that important identity for everyone.

An Enduring Commitment to Duty Despite the Personal Costs

Our final observation on the peculiarities of the policing context requires a disclaimer: neither a study of police deployment options, nor a full appreciation of the economics of policing fell within our scope. We did recognize that like all public services, police budgets must be managed and sometimes resources must be constrained.

Nonetheless, it appears to us as a panel that police resources in Ontario are strained to a breaking point in many locations around the province. It follows that mental health impact can be expected to continue and perhaps even grow in frequency and intensity if this situation is not somehow addressed.

These resource shortages may be real or perceived. They may be due to an inability or unwillingness to implement new models and re-engineered practices as some might suggest. They may be due to an unwillingness of local, provincial and federal governments to meet the real budget requirements as others would argue. They may be due in part to a vicious circle where each new accommodation of a member with mental health issues further aggravates already diminished staffing levels. But, while decision makers grapple with these arguments, police members are burning out, many are becoming ill, and some are dying.

It is in their nature to keep coming to work. It is in their nature to deploy into harm's way even when understaffed. It is also in their nature to minimize and suppress their own symptoms until they can no longer do so.

Part Three: Seven Pathways to Better Outcomes

Earlier, we identified the three converging pathways that each of our nine subjects traveled to the ultimate point of their tragic deaths by suicide. Throughout our deliberations, we also uncovered seven new pathways that we believe will point the way to better outcomes for all police members in the future.

In Appendix A to this report, we list a number of specific recommendations, and where appropriate, we also identify potential roles associated with each.

In this section of our report, we will first discuss these pathways as they emerged for us as clear themes for action, as areas of opportunity, and as new ways of understanding and approaching the challenges outlined above. These themes are cross cutting in nature, and many of our specific recommendations derived from several of these pathways to change. They are discussed here in no particular order of priority. In the view of the panel members, every one of them will play an important part in any comprehensive plan of action.

1. Normalizing Mental Health Challenges

Removing stigma from mental health in general society is an important goal for everyone. In policing, it is a goal that must be recognized and acted upon as an urgent priority. The goal must be to make mental health as normal a subject as any other form of health, wellness and fitness for duty. To be effective, this normalization must begin prior to recruitment, it must extend through basic training at academies and remain evident in on-the-job orientation training with well-prepared coach officers. It must continue throughout policing careers, and it must extend to include the families and significant others of police service members at every stage.

Family members can play vital roles in the recognition, management and support of mental health issues at every stage of prevention and treatment, but only if they are included in an open conversation from the outset and gain continuing knowledge and awareness of what to look for and how to respond.

Current attitudes about mental health issues among serving police members at all levels represent a clear and present danger. It matters not whether these attitudes have derived from general society, or have been cultivated within police ranks through their prolonged exposure to mental health crises and the suicides of others to which they frequently must respond. Policing as a system must transition to a point that their own mental health risks, mild to moderate mental health issues, and advanced mental health conditions are recognized early and acted upon consistently with the support of accessible care and suitable services. For this to occur, mental health in policing must come out of the shadows.

We believe much can be gained by linking mental wellness

Panel Observations on Current Strengths & Weaknesses in the Police Mental Health Ecosystem

Access to Appropriate Care and Treatment

Privacy and Fear of Career Repercussion
Many care and benefit paths begin with the human resources unit of the member's police service. Many members fear reputational damage from disclosing their mental health issues to fellow employees and members of organizational management.

For the panel, for police services and police association officials, for health professionals, and most notably for the surviving families, it is an alarming and unacceptable number.

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to peak performance, a concept that most police officers recognize and value. This will require taking conversations and training events well beyond 'mental readiness'. Such events must also include a greater awareness and understanding of the secondary and tertiary prevention and care models that are available. They must demonstrate that even broken toys can be repaired, and that the path to recovery will be fully supported without diminished identity and without marginalization from the core mission of policing.

We envision that a broad and multi-faceted campaign will be necessary to bring about this transition. In many ways, it is already underway as reflected in our own review and others occurring in parallel, and in the promising initiatives undertaken by Ontario police services and their varied associations. But in our view, it must be scaled up and amplified. Openness, awareness and supportive behaviours toward fellow members experiencing mental health issues should become essential competencies tied to performance and promotion systems at every level, and other forms of recognition should also be explored.

It has been said that police officers are prepared to die for one another. They must also be prepared to live for one another, and at the same time, to live fully for their families and friends without suffering in silence.

2. Navigating Through Transitions

When it comes to mental health issues in policing, the devil seems to lurk in the transitions. Our studies revealed consistently that some of the greatest risks for interruptions in care, for denial and suppression of symptoms, and for aggravated levels of stress tend to occur most during pivotal transitions in an individual's deployment status in the workplace. Critical transitions may include: periods of repeat short term absence necessitated by mild to moderate symptoms, whether diagnosed or not; initial disclosure and while applying for benefits and psychological services; reassignment to modified roles due to conditions affecting fitness for duty; reassignment back into full service; and, periods of extended leave due to escalated conditions and/or to access more intensive levels of care and treatment.

Of all of these transitions, return to work (RTW) stands out as the point of greatest risk. The complex decision-making processes about returning to modified duties or to full

Access to Walk-in Support

Access to Walk-in Support
Some agencies have introduced independent staff and outside psychologists and some have established out-of-office locations for walk-in support without risking disclosure. Relatively few police services currently offer this option.

Limited Access in Small Urban, Rural and Remote Settings

Smaller police agencies may lack the resources to provide support-with-privacy options for their members. As well, smaller communities may have limited clinical resources, requiring significant travel and potentially more absences from work for those seeking assistance.

Benefit Limits

Some member associations (OPPA and Ottawa Police Association) recently negotiated no-limit arrangements with their benefits providers. In most Ontario police services, there are restrictive limits on the length of care provided under existing benefits and insurance schemes, and co-pay costs vary significantly.

WSIB claims face ongoing pressure to reduce or restrict uptake, duration and cost, and often require extensive efforts by member and families to justify the need for care, treatment and compensation for absence from work. An additional barrier is the requirement to be seen by only WSIB approved treatment providers. The WSIB payment scheme is generally paid at a much lower rate than market.

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reinstatement can generate significant stress for individuals, their families, their co-workers, their care providers, and their benefits administrators including the WSIB. Among our nine subjects, RTW factored heavily and frequently into their worsened health conditions, triggered open conflict with their organization and peers, initiated or aggravated performance and professional standards issues, and often led to financial stress.

Further aggravating these stressors is the current fragmentation that individuals and families must navigate. Certain services and supports may be available from the employer, while others may be provided only through their Police Association. Individuals may be directed to some services by independent peer support workers, by benefits and EFAP providers, and by clinical care providers. Some of these same agencies may provide 'system navigator' supports. But, experience has shown that rarely do such navigation supports cross the full spectrum of clinical guidance, procedural assistance, and educational programs to help the individuals and families affected.

A full scope of navigation supports should be readily available to all members in all police services, built upon consistent best practices, yet remaining flexible to the needs of each individual, family, and police service involved.

3. Continuing Access to Quality Care with Evidence-based Treatment and Solutions

Based on our lived experience sources including the voices of survivors, the confidence level among police members and their families in the current patchwork of care providers is at best moderate to low. We heard of service professionals with little to no familiarity with policing or first responder issues, including the role played by recurrent trauma. We heard of others who initially established a strong connection with their patient, only to later refuse to continue providing care under established benefit fee schedules. And, we heard of well-qualified and policing-knowledgeable professionals who established strong bonds and achieved successful outcomes with their patients.

Given the often fragile state of any police member who is coming to terms with symptoms or with a mental health diagnosis amid the cultural dynamics described earlier in this report, any barrier to access can be a reason for them to revert to suppression, denial and withdrawal from care. For some of our nine subjects, the last years and months of their lives

Availability of Trauma and Police-informed Clinicians

When seeking treatment, members face limited availability of practitioners who are familiar with the unique demands of police work and the role of trauma in mental health issues. No universally reliable reference source currently exists, though some are under development.

Inconsistency in Peer Support Models

Volunteer-driven police and first responder peer support providers have emerged in the past few years, and many are seeing demand grow for their services. Currently, peer support practices and service offerings are viewed to be inconsistent in scope, quality, and integration with other MH services.

Balancing Affordability vs. Quality of Treatment

When faced with benefit limits, or due to fear of disclosure to their employer and colleagues, members and their families often struggle to access and sustain affordable care paths, often forced to choose between high quality care and treatment for a very short duration, or questionable care over a longer period of access. Many simply withdraw from this challenge and elect no continuing care.

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were clearly punctuated with stop-start patterns in their care path. For others we heard from, their descriptions of their own care paths ranged from successful, to frustrating, to futile.

It is imperative in our view that access to quality care become universal among police members in Ontario, and the quality of care options must extend to include policing and trauma informed clinicians and the application of evidence-based treatments and solutions. It is our understanding that some of the volunteer agencies and police associations in Ontario have begun to establish referral lists of suitably qualified professionals and support networks. This work should be accelerated and made widely available as soon as possible.

4. Resourcing, Accommodation and Burnout

For most municipal police services in Ontario, Police Service Boards are responsible to maintain adequate staffing levels to meet demand for service in their jurisdiction. For the OPP and First Nations police services, this responsibility rests with the provincial and federal governments. Most police budget-setting processes establish an 'authorized strength' of members. The authorized strength model is built on the premise that all the police positions are filled and all members are at work. The model does not adequately take into account that staffing vacancies occur when recruitment numbers fall short, and also when members are away from the workplace on medical leave. This gap translates to an additional workload for members who are working. Through intensified workload demands in regular deployment, and often through increased overtime levels, essentially it falls to the members to subsidize the shortfall in the authorized strength.

The repercussions of this model are that those left working are forced to function in an environment where they are short-staffed which may lead many to burnout. Some may also develop a feeling of contempt toward members that are on medical leave. And, all of this leads to further erosion in the identity issues occurring for those absent members.

Under the current model, staffing gaps contribute to an ongoing systemic deterrent to disclosure of mental health issues, create a significant barrier to those who need to access and maintain proper care paths, and uphold a false expectation of fit-for-duty capacity that perpetuates stigma and self-stigma surrounding mental health and occupational

Availability of Supportive Care for Family Members

Currently, family members are very often excluded from the care path of their loved ones dealing with mental health issues. It appears that this is may be due to a lack of information about options available, lack of knowledge about mental health in policing, real or perceived privacy concerns, or it may be a symptom of the member's disconnecting behaviour.

System Navigators & Patient Advocates

When police members find themselves in crisis they are often required to navigate unfamiliar and complex processes which can be a barrier to care, while also having a detrimental effect on the member's well-being, especially for those already reticent to disclose. Some members and families may also incur financial strain by paying for expenses which may be eligible for coverage. A full scope of system navigator supports will span clinical, educational, and financial challenges.

Internal Attitudes, Behaviours, Knowledge and Skills

Unwarranted Perceptions of Malingering

Despite recent investments in mental health awareness and resilience training, suspicions and even outright accusations of malingering remain common in policing culture. Evidence shows that incidents of malingering are rare, and in most cases, the requirement for care and accommodation is very real.

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stress injuries. The reality of staffing gaps must be confronted. Each individual police service will undoubtedly continue to face fiscal pressures, and in the short term at least, most may be unable to resolve their current staffing gaps on their own. Attention should be given to acting collectively to establish a province-wide system for exceeding authorized staffing that will allow for sufficient resourcing to fill vacancies when members are away from the workplace on medical leave.

5. Preserving Identity: The Criticality of Criminal or Police Act Charges and Social Media

The RTW transitions described above represent the most frequent high-risk points for police members with mental health issues, but situations where officers face charges and/or public embarrassment through mainstream or social media could be described as the most acute. In our review of deaths by suicide, if not managed with care these ‘hand-off’ situations can clearly rise to the level of a precipitating event with an impact equivalent to the loss of a primary personal relationship.

Recognizing the significant role that police identity has for members deeply invested in policing culture, police services have a special responsibility to ensure that any sudden and extreme damage to that identity is managed with care and support. We reviewed situations and practices where special hand-off arrangements are in place and applied to ease the negative consequences. Among our nine, we also reviewed some situations that, whether intended or not by the service, were experienced by the subject member as outright abandonment. We reviewed others that fell somewhere in between.

Every police service must take on the responsibility to establish and apply hand-off procedures that will ensure that no matter the severity of a member’s infraction or breach of duty, or whether the scope of any disciplinary action contemplated is seen as a minor set-back or a career-ending criminal charge, supports will be in place to maintain a connection to the member and his or her family, and to ensure a continuity of professional care as may be required.

6. Managing Suicide Events

We cannot manage, improve or learn from things we do not know about. As important steps towards improving outcomes

Limited Knowledge among Supervisors & Managers about Treatment and Recovery

Anecdotally, many police managers, supervisors and peers continue to regard mental health conditions as a permanent disability. Awareness of the true nature and success rates of treatment and recovery would greatly improve return-to-work transitions for members who have experienced a mental health issue, thereby aiding in stigma reduction

Limited Creativity and Sensitivity in Assigning Accommodated Duties

The binary ‘fit for duty, or not’ attitude described elsewhere in this report continues to influence decisions on modified duty. Members report the negative impact on their dignity from reflex assumptions about the limits of their ability to perform and to remain tied to the core mission with which they identify strongly.

Unclear Guidelines on Privacy and Connection During Accommodation

Supervisors, managers and peers report being uncertain of if or how they might maintain a connection to their colleagues who are absent from work due to mental health issues. This is further aggravated if professional standards issues are also involved. Greater clarity, established guidelines around consent, and the development of compassionate, trauma-informed skills would be of significant benefit in this regard.

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for all police members in Ontario, all coroners should be directed to record and report on any death by suicide of a first responder, a database should be established to permit ongoing data capture and analysis, and any death by suicide of a police member should trigger a death review in the Office of the Chief Coroner. In our view the unique nature within, and the place of policing in society, requires that we closely track and learn from every situation that results in a death by suicide, with a view to continuous improvement across the entire police and mental health ecosystem.

Much of the foregoing discussion has centred on opportunities in the prevention and intervention stages of mental health. Postvention is also recognized as a best practice in suicide prevention, and there are two aspects to it that warrant priority attention and action from our review. One of these involves extending caring support to the bereaved, including direct actions to prevent collateral mental health conditions among family members, close friends and associates, and the other addresses the need to minimize the risks of a contagion effect across the policing community.

In the first, we note that among the survivors of our nine, some degree of bereavement support from their loved one's employer, association, and colleagues was evident in most cases, but it can best be described as uneven in its execution, its scope and its duration. When properly planned and constructed, postvention practices are designed to achieve a number of aims in the aftermath of a death by suicide, specifically to:

- prevent suicide among people who are at high risk after exposure to suicide;
- facilitate the healing of individuals from the grief and distress of suicide loss;
- mitigate other negative effects of exposure to suicide; and,
- in a policing context, some means to respectfully memorialize the deceased.

All police services should have a prepared organizational response plan for postvention services designed to assist the bereaved in managing the immediate crisis of a death by suicide and coping with its long-term consequences.

With regard to the broader community, there exists in the literature some evidence of a risk for contagion effects. In other words, particularly among others in the same population group who may already be experiencing mental health challenges, one or more suicides in that same group may have a triggering effect. Clusters of deaths, as seen in our nine cases in a single year, certainly heighten concerns in this regard. It is important to note that the contagion need not necessarily amount to additional suicides for us to be concerned. The potential to exacerbate the mental health issues of any police member or group of members is also worthy of our concern.

Postvention is a critical part of suicide prevention, and can also be part of a comprehensive strategy for mental wellness in general. Ensuring that postvention activities take place after any police member suicide should not be the responsibility of one group, one police service or one individual. This will require a whole-of-community commitment.

Balancing Workload Pressures vs. Compassionate Support

When entire police organizations are under strain due to limited deployable resources, the pressure to return members to full active duty often overrides compassion for the individual, and reduces active support for their continuing accommodation and care.

7. Joint Ownership and Collaborative Action

Our police and mental health ecosystem model shown earlier in Figure 3 illustrates both the scope of resources and capacities that currently exist to lend support to positive outcomes in police member mental health, as well as the complexity and potential for fragmentation that currently exists across this system (see Sidebar above). We also noted earlier the range of promising initiatives and policy considerations that are underway to bring improvement to the level and quality of services at every stage of prevention, intervention and postvention. Our deliberations led us to some concern that if left unchanged, continued fragmentation may undermine much of this promise.

Policing as a system must adopt a no-wrong-door mindset in order to ensure that every member and family affected by mental health issues, at their earliest presentation, faces no barriers in seeking out, accessing, and affording the care and treatment they require. To fully achieve this, policing must act as the unified system that it is in the eyes of its members.

We recognize recent collaborative undertakings among the OPP, its associations and its not-for-profit partners as one promising model, but little will change if that same approach is not replicated across the remaining police services that serve Ontario communities. Similarly, we were encouraged by collaborative discussions described by the OACP and PAO, and by TPA with its employer partner the Toronto Police Service. We also recognize that member mental health has become a priority agenda item for the Ontario Association of Police Service Boards (OAPSB), as it has nationally with the CACP, the Canadian Association for Police Governance (CAPG) and the Canadian Police Association (CPA). But, in our view there is a growing risk of lost effectiveness and efficiency from an emerging patchwork of bilateral and multilateral initiatives taking shape, without the full involvement of all parts of the ecosystem moving in common directions.

In Ontario, we believe the Ministry of the Solicitor General, guided by this report to the Ontario Chief Coroner, is best positioned to provide the essential leadership and mobilization to achieve a whole-of-system approach. We address this opportunity as the first of our recommendations for action in our Appendix A.

Part 4: A Much Broader Legacy

Taken collectively, these seven pathways encompass a range of opportunities for a whole-of-system solution to a very real problem in policing that extends well beyond and well ahead of any specific occurrences of death by suicide.

We hope that police and association executives, boards, and mental health service providers will embrace these opportunities and work together on the specific actions we propose below. We believe a new policing culture can emerge where the full cycle of prevention, recognition, appropriate disclosure, care and treatment, recovery and reintegration can occur with greater openness, greater success, and without repercussion to anyone facing mental health challenges whether due to operational or organizational stressors, or from any other cause inside or outside of work.

And, we hope that every police member, sworn and civilian, will bring the same courage that they bring every day in service of others, to embrace and thrive in this new and more open culture. We hope that current and future members will remain visible so that others can assist them, and will remain fully connected to their families and friends as well as to the calling they have chosen. We know it is a calling they value, for life.

Finally, we hope the foregoing discussion and the 14 specific recommendations that follow below will inspire the comprehensive and collaborative action on police member mental health that is urgently required in Ontario.

Part Five: Our Recommendations for Action

1. The Policing Services Division of the Ministry of the Solicitor General (PSD-MSG) will lead the development of an Ontario Police Members Mental Health Collaborative (OPMMHC) as a standing body accountable to the Deputy Solicitor General, to meet quarterly on a continuing basis and to operate under the following initial terms of reference:
 - a) OPMMHC will be comprised of qualified volunteer representatives from police service boards, police service executive management, police associations, police supervisors (sworn and civilian), police members with lived experience, police family members with lived experience, police psychologists and other mental health providers with expertise in policing, researchers, peer support groups, and insurance and benefits providers;
 - b) OPMMHC will be co-chaired by one representative of police executive management and one police association executive;
 - c) OPMMHC will serve in a steering and coordinating role to identify and act to resolve gaps, overlaps and service deficiencies in order to improve the effectiveness, efficiency and universal accessibility of mental health supports to police service members across the province;
 - d) OPMMHC will establish and disseminate appropriate benchmarking tools and metrics, establish implementation timelines, report semi-annually on progress of recommendations in this report and from other sources, and execute other initiatives as OPMMHC members may determine;
 - e) OPMMHC will develop an agenda of priority research topics for policing in Ontario, including encouraging the development of a police specific interpretation of the CF-modified Mann model for suicide prevention depicted in Figure 1 of this report, incorporating any additional factors and interconnections addressed within this report.
 - f) MSG will provide administrative support and base funding sufficient to sustain the meetings of the OPMMHC;
 - g) OPMMHC projects will be otherwise staffed and resourced through in-kind contributions from the participating members;
 - h) and, other terms of reference as PSD-MSG and the participating OPMMHC stakeholders may determine.
2. The OPMMHC, once established, will lead the development of a Communications Sub-committee (OPMMHC-Comms) dedicated to the design and ongoing execution of a broad campaign aimed at normalizing mental health challenges, reducing stigmatizing behaviours and assumptions, achieving healthier identity and work life balance, and building awareness of supports, treatments and recovery outcomes in all police services, police academies, and police-related program units in Ontario Community Colleges and Universities;
 - a) OPMMHC-Comms will be staffed on an in-kind, part-time basis by Ontario police services, and supported by PSD-MSG with additional funding on a project-by-project basis, as required;

- b) The normalization campaign will be available for province-wide roll out by December 31, 2020.
3. The OPMMHC, once established, will lead the development of a Knowledge Translation Sub-committee (OPMMHC-Education) dedicated to accessing, interpreting, adapting and disseminating best practice education and training resources for mental health and suicide prevention to all identified end-users (including police members, leadership, families, peer supporters, clinicians and the general public) from available sources, including universities, governmental and non-governmental organizations such as the Canadian Institute for Public Safety Research and Treatment, the Canadian Institute for Military and Veteran Health Research, the Public Health Agency of Canada's PTSD Secretariat, Veterans Affairs Canada, the Department of National Defence, and other police professional organizations and stakeholder groups;
- a) The Knowledge Translation Sub-committee will be well developed and materials will be rolling out province-wide by December 31, 2020. There will also be provisions for measuring application and retention of new knowledge by the end-users, continuous improvement, and updating of materials as needed.
4. OPMMHC will work with Ontario police services, peer support agencies, insurers and clinical providers to establish clear guidelines for the qualifications and standards necessary to provide clinical care and peer support services to police members.
5. OPMMHC will produce by January 1, 2021 a single, consolidated and living referral source outlining the availability of suitably qualified care providers and treatment options in all regions of the province.
6. OPMMHC will work with all partners to advance a no-wrong-door policy across the province, with a view to reducing administrative and funding barriers to members in need of immediate access and care.
7. PSD-MSG will direct all police services in Ontario to develop and implement a comprehensive mental health (MH) and wellness strategy by June 30, 2021;
- a) Comprehensive MH strategies will include local normalization initiatives; provisions for ensuring access for their members to suitable evidence based and qualified prevention, self-care, intervention, and postvention supports;
- b) Comprehensive MH strategies will also include training and education initiatives, as informed by OPMMHC-Education, designed to meet the needs of recruits, members, coach officers, supervisors, managers, human resources specialists, peer support providers, mental health professionals, and families;
- c) Comprehensive MH strategy elements may be provided directly by a police service, through partnerships with other police services, and/or in partnership with third party providers, as required;
- d) Comprehensive MH strategies will provide for engagement of family members in learning and discussion sessions and other activities related to police member mental well-being during the recruitment process, at critical transition points (as defined in this report), and periodically throughout policing careers;
- e) Comprehensive MH strategies will include the establishment of specific competencies and performance expectations, related to maintaining and supporting mental wellness and/or responding to mental health issues, for all members in general, and specifically for supervising members, and will be incorporated into promotion, performance management, and recognition systems by December 31, 2021.

8. OPMMHC will assist and guide police services in establishing web-based Members and Families Mental Health Portals, service-specific for larger services and/or general access for all services, to make available information and resources to support open and informed conversations about mental health and well-being. Portals will be established and accessible to all services by June 30, 2021.
9. OPMMHC will guide the development of best practice guidelines for managing all mental health related accommodations and return-to-work (A-RTW) decision processes by December 31, 2021;
 - a) A-RTW processes will include collaboration among management, human resource specialists, members, families, associations, insurers and third party clinical advisors, with clear roles and responsibilities established for each;
 - b) A-RTW processes will include specific guidelines for maintaining supportive connections with accommodated members and those who are absent from work, and with their families when permitted.
10. OPMMHC will guide the development of best practice guidelines for managing all high-risk 'hand-off' support processes by December 31, 2021;
 - a) Hand-off processes will apply to any situation involving or with the potential to involve Police Service Act charges, criminal charges, removal of use-of-force options, or member identification and negative attention from mainstream or social media;
 - b) Hand-off processes will include specific guidelines for maintaining supportive connections with accommodated members who are absent from work, and with their families when permitted.
11. PSD-MSG will encourage more police services in Ontario to hire mental health professionals to the extent affordable on their own, or in partnership with neighbouring police services.
12. The Ontario Association of Chiefs of Police (OACP) will be encouraged by this report to establish a provincial parallel to the CACP's Psychologist Sub-committee to facilitate greater cooperation, capacity, and the development of Ontario-specific best practices.
13. PSD-MSG will encourage more police services in Ontario to adopt, if they have not already, police mental health partnerships along the lines of COAST, PACT and similar models across Canada, and Project ECHO in the USA, in order to improve relationships and interactions between police and persons with mental health issues in the community, and to further normalize member awareness and knowledge about mental health prevention, treatment and recovery.
14. The Office of the Chief Coroner (OCC), in partnership with others as required, will seek to establish policy in Ontario that requires all coroners to report and share information on any death by suicide of a first responder, including police, and to initiate a death review committee in all such cases;
 - a) The OCC will lead the development of a suitable system for capturing data from all such deaths by suicide and resulting death reviews;
 - b) The OCC will lead the design and development of analytic tools, through consultation with OPMMHC and others, to learn from cumulative deaths by suicide with a view to identifying opportunities for continuous improvement in the first responder mental health ecosystem.

Appendix: Members of the Chief Coroner's Expert Panel

Dr. Lori Gray

Dr. Gray is a clinical, forensic, and rehabilitation psychologist whose focus has been best practices and progressive approaches in early intervention and comprehensive care through her work with multiple emergency services and peer support programs. She is currently based out of private practice in Barrie, ON and works with first responders and emergency services across Ontario. Her background includes diverse experience as the psychologist for one of the largest paramedic services in Canada, Centre for Addiction and Mental Health, Detroit Receiving Hospital, Ministry of the Attorney General, Correctional Service of Canada, and postsecondary teaching.

Dr. Gray has received the Future Pioneers of Psychology Award from the American Psychological Association, Early Career Achievement Award from the Canadian Psychological Association Traumatic Stress Section, Odyssey Early Career Achievement Award and GLAD Award for Teaching and Mentorship from the University of Windsor, among other awards from agencies including the International Society for Traumatic Stress Studies, Canadian Psychological Association, and Social Sciences and Humanities Research Council of Canada.

Dr. Simon Hatcher

Dr. Hatcher is a psychiatrist and researcher at The Ottawa Hospital Research Institute. He trained in psychiatry in the UK before working in New Zealand for twenty years and moved to Canada in 2012. He has been the principal investigator on several large randomized controlled trials of treatments for suicidal people. Clinically, he runs a First Responder Clinic at The Ottawa Hospital and has received research funding to investigate the preferences of First Responders for mental health care and to test different ways of screening for mental disorders in first responders.

Dr. Hatcher is a member of the Canadian Institute for Public Safety Research and Treatment (CIPSRT).

Lieutenant Colonel (Ret) Alexandra Heber

Dr. Heber is the first Chief Psychiatrist of Veterans Affairs Canada (VAC), and an Assistant Professor of Psychiatry at the University of Ottawa. She was the VAC lead author on the CAF- VAC Joint Suicide Prevention Strategy. She has over 30 years' experience working in Mental Health. Dr. Heber served in the Canadian Armed Forces (CAF) and was deployed to Afghanistan as Psychiatrist in Charge of the CAF Mental Health Services for Task Force Afghanistan. Her military experience included a decade as Clinical Leader of Military Mental Health in Ottawa, then the establishment of the Section of Clinical Programs for CAF Headquarters, where she oversaw 30 CAF mental health clinics across Canada.

She has presented and published nationally and internationally on Post Traumatic Stress Disorder and suicide prevention in military, veteran, and first-responder populations. Her research interests include: suicide prevention, the military-civilian transition experience, and the role of peer support in military and paramilitary

organizations. She has authored 2 online courses on PTSD and trauma-informed care, one for Canadian physicians and one for the Newfoundland and Labrador Health Authorities, and she has authored a number of reports for the Justice Department, Government of Canada, on cases involving torture and PTSD.

Dr. Heber works on developing strong collaborative relationships among government, academics, research institutes, clinicians, military and public safety organizations, families and those with lived experience. She has received the Veterans Affairs Canada Leadership Award, the Canadian Armed Forces Chief of Defence Staff Commendation, the Queen Elizabeth II Diamond Jubilee Medal and the General Service Medal, South-West Asia.

Dr. Stephanie Barone McKenny

Dr. McKenny is a police psychologist with the Los Angeles Police Department (LAPD) and provides consultation to several elite units including SWAT, Air Support Division, Criminal Gang Homicide Division, and undercover agents. She has worked with law enforcement personnel at the international, national, state, county, local, and university levels. Dr. McKenny is also a nationally certified sports psychologist and clinical trauma professional who applies peak performance skills in designing and implementing officer wellness programs, including the Mother of All Suicide Prevention Campaigns (which led to 25 months of 0 suicides at LAPD), the Resilience Task Force, the Substance Abuse Task Force, the Smart Detective, the annual Heart of LAPD Walk, and the pending Tactical Relief Checks.

As the spouse of a Navy Captain and the sister of a Lt. Colonel, Dr. McKenny understands at a very personal level the demands and sacrifices that police members make every day, and also the demands and daily sacrifice of their spouses, children, and extended family.

Serving Police Member

This panel member is a currently active police sergeant who has served as a police officer in Ontario for over 30 years. His career includes over 25 years of front-line uniform policing assignments as well as six years of administrative and corporate experience.

While often described by others as a “high performer” and “go-to guy”, this member also describes himself as “someone who has suffered in silence for over 15 years while enduring the profession’s unrelenting exposure to critical incidents and traumas”. He is committed to leveraging his lived experience to create a legacy of preventing police suicides by improving police culture, eliminating stigma, and promoting mental wellness and resilience.

His fellow panel members are thankful for the courage and insight this member brought to our deliberations. His name is withheld here solely out of respect for his and his family’s privacy.

Angela Slobodian

Ms. Slobodian is the Acting Director of Wellness at the Ottawa Police Service (OPS). As a registered nurse she has worked in hospitals and in public health. In 1994 she moved from her native Nova Scotia to Belleville, Ontario to begin work as an Occupational Health Nurse at a global telecommunications company, and this began her interest and passion in occupational health. She completed her diploma in Occupational Health Nursing and received her certification in 2002. She left the private sector company in 2009 as Director of North American Health Operations, moving to the Ottawa Police Service as Manager of Health, Safety and Lifestyles. As a nurse she has always had a commitment to health promotion and illness prevention.

The opportunity came to lead the development of a Wellness program at Ottawa Police, and Ms. Slobodian was pleased to take the lead. She currently has responsibility for the Health and Safety team and for the Peer Support and Resiliency program and OPS.

Clive Weighill, C.O.M.

Chief Weighill (retired) is a veteran of policing in Saskatchewan. He served as the Chief of Police for the Saskatoon Police Service from 2006 to 2017 following his 31 years of service with the Regina Police Service, leaving that service at the rank of Deputy Chief. In September 2018, Mr. Weighill became the Chief Coroner for the Saskatchewan Coroners Service.

During his policing career Mr. Weighill worked in Patrol, Communications, Crime Prevention, Commercial Crime, Property Crime, Drugs, Vice, Planning and Research and Senior Administration. He also served as the President of the Canadian Association of Chiefs of Police (CACP) from 2014 to 2016. He is the recipient of the Police Exemplary Service Medal and Bar, the Saskatchewan Protective Services Medal, the Saskatchewan Centennial Medal, the Queen's Diamond Jubilee Medal, the Lieutenant Governor's Gold Medal for Excellence in Public Administration in Saskatchewan, and he is a Commander of the Order of Merit of the Police Forces.

Norman E. Taylor - Panel Moderator and Lead Writer

Mr. Taylor has served Canada's policing community for over 25 years in his combined roles as an independent policy advisor, educator, researcher and author. Since 2014, he has organized and executed three national conferences on policing and mental health issues in partnership with the Canadian Association of Chiefs of Police (CACP) and the Mental Health Commission of Canada. In his capacity as co-founder and Program Director of the CACP Executive Global Studies Program, he has led global research studies on policing interfaces with the mental health system, and on some of the unique patterns and behaviours that shape the internal culture of policing. Mr. Taylor also provides strategic advisory and educational services to many police services, communities, and at all government levels across Canada and in the USA.

Mr. Taylor is a recipient of the Queen Elizabeth Diamond Jubilee Medal on nomination by the CACP, the Premier of Saskatchewan's Award for Excellence in Public Service: Innovation, and in 2018 he was proud to be named an Honourary Commissioned Officer in the Ontario Provincial Police.

Guelph Police Services Board

Legal Services

Access to Information

Research and Development

Chief of Police

Inspector of Executive Services

Deputy Chief of Operations

Deputy Chief of Administration

Executive Office

Public Information

Professional Development and Recruiting

Professional Standards

Inspector of Neighbourhood Services Patrol

Neighbourhood Teams

Inspector of Neighbourhood Services Field Support

Canine

CIRT

Community Mobilization

Emergency Management

Labour Relations

Tactics and Rescue

Traffic

Youth and Community Services

Inspector of Investigative Services

Crime Analysis

Domestic Violence and High Risk

Drug Enforcement

Forensic Identification and Technological Crimes

General Investigations, Special Projects and Fraud

Intelligence

Serious Crime

Special Victims and Internet Child Exploitation

Inspector of Administrative Services

Communications

Court Services

Data Services

Facilities

Fleet

Property and Firearms

Manager of Human Resource Services

Human Resource Services

Manager of Financial Services

Financial Services

Materials Management

Manager of Information System Services

Information System Services

Appendix D Schedule of Grants

ACTIVE GRANTS:

								Included in the 2024-2027 Operating Budget			
Grant Name	Purpose	Grantor	Term	Expires	One-time or	Funding Received	2024	2025	2026	2027	
					On-going						
Court Security Prisoner Transportation (CSPT) Program	To assist municipalities in offsetting costs of providing court security and prisoner transportation, including salaries and benefits.	Ministry of Community Safety and Correctional Services	1 year	December 31, 2023	On-going application required	\$1,225,809	\$1,191,800	\$1,191,800	\$1,191,800	\$1,191,800	
Community Safety and Policing (CSP) Local Priorities	To support initiatives that improve the effectiveness and efficiency of policing services. The PEM grant aims to provide greater flexibility to police services and boards to focus their funding on implementing initiatives that address local needs.	Ministry of Community Safety and Correctional Services	3 Years	March 31, 2025	On-going application required	\$2,585,185 over 3 years	\$861,700	\$861,700	\$861,700	\$861,700	
Community Safety and Policing (CSP) Grant (Provincial Priorities)	This collaborative initiative is aimed at reducing sexual violence and harassment and human trafficking in Guelph through prevention and enforcement. Project Stronger Together, which includes the Guelph Police Service (GPS), Victim Services Wellington (VSW), the Child Witness Center (CWC), the Guelph General Hospital (GGH), and Women in Crisis (WIC) as project partners, has a two-pronged approach - prevention through improved education, and enforcement through improved police training and improved victim experiences throughout the investigative process.	Ministry of Community Safety and Correctional Services	3 Years	March 31, 2025	On-going application required	\$1,093,900 over 3 years	\$364,700	\$364,700	\$364,700	\$364,700	
Reduce Impaired Driving Everywhere (RIDE) Program	To provide funds to offset staff costs of enhancing RIDE programs of sobriety checks.	Ministry of Community Safety and Correctional Services	2 years	April 30, 2024	On-going application required	\$71,343 over 2 years	\$35,700	\$35,700	\$35,700	\$35,700	
The Provincial Strategy to Protect Children from Sexual Abuse and Exploitation on the Internet	To support operations of providing specialized investigative support on matters involving sexual abuse and exploitation of children on the internet, which will contribute to the provincial strategy by building capacity and sustainability and supporting the establishment of a co-ordinated strategic plan among police services, crown attorneys and victim support services.	Ministry of Community Safety and Correctional Services	4 years	March 31, 2025	On-going application required	\$626,000 over 4 years	\$156,500	\$156,500	\$156,500	\$156,500	
TOTAL INCLUDED							\$2,610,400	\$2,610,400	\$2,610,400	\$2,610,400	

Appendix E: Proposed User Fee Changes

Guelph Police Service Board Fees and Charges for Services						
<i>Service</i>	<i>Document/Service</i>	<i>Existing Fee</i>	<i>Recommended Fee</i>	<i>Change</i>	<i>HST Status (T=Taxable; E=Exempt)</i>	<i>HST Included in Fee (Yes/No)</i>
Alarms, pursuant to policy LE-001*						
False Alarm Attendance		\$160.00	\$190.00	\$30.00	T	No
Cancelled False Alarm	For calls in progress	\$85.00	\$125.00	\$40.00	T	No
Fingerprints						
Civilian	VISA requirement, adoption, pardons	\$35.00	\$35.00	\$0.00	E	No
Volunteers		\$0.00	\$0.00	\$0.00	E	No
*RCMP will charge a \$25 fee for Vulnerable Sector (VS) Fingerprints, volunteer organizations may be exempt as per RCMP determination						
Freedom of Information (FOI)**						
FOI Application		\$5.00	\$5.00	\$0.00	E	No
Photocopies and Computer printouts		\$0.20 per page	\$0.20 per page	\$0.00	E	No
Records provided on CD-ROMs		\$10.00 per CD-ROM	\$10.00 per CD-ROM	\$0.00	E	No
Manual Search for a record		\$7.50 per 15 minutes	\$7.50 per 15 minutes	\$0.00	E	No
Preparing a record for Disclosure	Severing a part of a record	\$7.50 per 15 minutes	\$7.50 per 15 minutes	\$0.00	E	No
Developing a computer program or another method of producing a record from machine readable record		\$15.00 per 15 minutes	\$15.00 per 15 minutes	\$0.00	E	No
Costs of locating, retrieving, processing and copying a record if the costs are specified on an invoice		as per invoice	as per invoice	\$0.00	E	No
Reports						
Property, Insurance	General Occurrence Report	\$50.00	\$50.00	\$0.00	T	Yes
Accident Reports		\$50.00	\$50.00	\$0.00	T	Yes
Witness Statements		\$50.00	\$50.00	\$0.00	T	Yes
Record Suspension		\$70.00	\$70.00	\$0.00	T	Yes
Local File Closure		\$40.00	\$60.00	\$20.00	T	Yes
Reconsideration Fee		\$10.00	\$10.00	\$0.00	T	Yes
Police Clearance - Employment & Student Placement	Police Criminal Record Check	\$40.00	\$45.00	\$5.00	E	No
	Police Information Check	\$40.00	\$45.00	\$5.00	E	No
	Police Vulnerable Sector Check	\$40.00	\$45.00	\$5.00	E	No
Police Clearance - Volunteer	Police Criminal Record Check	\$0.00	\$0.00	\$0.00	E	No
	Police Information Check	\$0.00	\$0.00	\$0.00	E	No
	Police Vulnerable Sector Check	\$35.00	\$25.00	-\$10.00	E	No
Notice of suspension of Driver's License		\$1.50	\$1.50	\$0.00	E	No
Collision Reconstruction Report						
CAD Scale Diagram		\$550.00	\$600.00	\$50.00	T	No
Field Sketch		\$250.00	\$300.00	\$50.00	T	No
Officers Technical Notes	Per Page (per page)	\$13.00	\$0.00	-\$13.00	T	No
	Per Report	\$75.00	\$300.00	\$225.00	T	No
Photographs	Per Photograph (REMOVE)	\$15.00	\$0.00	-\$15.00	T	No
	Per Occurance	\$75.00	\$100.00	\$25.00	T	No
Technical Data Report		\$550.00	\$600.00	\$50.00	T	No
Technical Interview with Collision Reconstruction Officer	First Hour	\$200.00	\$200.00	\$0.00	T	No
	Additional Hour	\$65.00	\$80.00	\$15.00	T	No
	minimum Fee	\$200.00	\$200.00	\$0.00	T	No
Vehicle Mechanical Inspection Report	per vehicle	\$200.00	\$300.00	\$100.00	T	No
Video or Audio of Scene	per occurrence	\$150.00	\$200.00	\$50.00	T	No
Complete Reconstruction Report		\$2,500.00	\$3,500.00	\$1,000.00	T	No

Service	Document/Service	Existing Fee	Recommended Fee	Change	HST Status (T=Taxable; E=Exempt)	HST Included in Fee (Yes/No)
Special Duty, pursuant to policy AI-006						
Administration Fee	per day	\$35.00	\$35.00	\$0.00	T	No
Late Notice Request Fee		\$100.00	\$150.00	\$50.00	T	No
Cruiser Fee	per hour	\$35.00	\$40.00	\$5.00	T	No
Officer Fee, minimum three hours						
Constable	Event not serving liquor	1.5 times the 1st Class constable wage/hr. under the collective agreement	1.5 times the 1st Class constable wage/hr. under the collective agreement	\$0.00	T	No
	Event serving liquor	1.5 times the 1st Class constable wage/hr. under the collective agreement, plus \$10.00 per hour	1.5 times the 1st Class constable wage/hr. under the collective agreement, plus \$10.00 per hour	\$0.00	T	
Supervisor	Event not serving liquor	1.5 times the 2nd level sergeant wage/hr. under the collective agreement	1.5 times the 2nd level sergeant wage/hr. under the collective agreement	\$0.00	T	
	Event serving liquor	1.5 times the 2nd level sergeant wage/hr. under the collective agreement, plus \$10.00 per hour	1.5 times the 2nd level sergeant wage/hr. under the collective agreement, plus \$10.00 per hour	\$0.00	T	
Short Notice Cancellation Fee - if less than 24 hours notice is provided		A minimum payment of three (3) hours per officer will be charged along with all associated fees and taxes. Fees for the use of police equipment will not be charged.	A minimum payment of three (3) hours per officer will be charged along with all associated fees and taxes. Fees for the use of police equipment will not be charged.	\$0.00	T	No

*Alarm fees billed directly to a property owner will be exempt from HST

**R.R.O., 1990, Reg. 823 as amended under the Municipal Freedom of Information and Protection of Privacy Act

**If the estimate from the FOI office is \$100 or more, a deposit of 50% will be required

Appendix F: Detailed Operating Budget Report

GUELPH POLICE SERVICE

	2023		2024		2025			2026			2027		
	Budget	Budget Estimate	Variance	Variance %	Budget Estimate	Variance	Variance %	Budget Estimate	Variance	Variance %	Budget Estimate	Variance	Variance %
Revenue													
User Fees & Service Charges	-588,100	-616,300	-28,200	4.8%	-635,600	-19,300	3.1%	-635,600	0	0.0%	-635,600	0	0.0%
Product Sales	-500	0	500	(100.0%)	0	0	0.0%	0	0	0.0%	0	0	0.0%
Licenses & Permits	0	0	0	0.0%	0	0	0.0%	0	0	0.0%	0	0	0.0%
External Recoveries	-43,500	-26,500	17,000	(39.1%)	-26,500	0	0.0%	-26,500	0	0.0%	-26,500	0	0.0%
Grants	-2,610,800	-2,610,400	400	(0.0%)	-2,610,400	0	0.0%	-2,610,400	0	0.0%	-2,610,400	0	0.0%
Total Revenue	-3,242,900	-3,253,200	-10,300	0.3%	-3,272,500	-19,300	0.6%	-3,272,500	0	0.0%	-3,272,500	0	0.0%
Expense													
Salary & Wages													
Permanent Salaries	37,284,614	38,272,000	987,386	2.6%	40,887,900	2,615,900	6.8%	43,281,100	2,393,200	5.9%	45,633,500	2,352,400	5.4%
Temporary Salaries	88,260	88,200	-60	(0.1%)	93,800	5,600	6.3%	99,400	5,600	6.0%	101,000	1,600	1.6%
Overtime	1,000,000	1,000,000	0	0.0%	1,000,000	0	0.0%	1,000,000	0	0.0%	1,000,000	0	0.0%
Special Duty	105,200	105,200	0	0.0%	105,200	0	0.0%	105,200	0	0.0%	105,200	0	0.0%
Total Salary & Wages	38,478,074	39,465,400	987,326	2.6%	42,086,900	2,621,500	6.6%	44,485,700	2,398,800	5.7%	46,839,700	2,354,000	5.3%
Employee Benefits	12,990,526	14,125,400	1,134,874	8.7%	15,540,900	1,415,500	10.0%	16,922,900	1,382,000	8.9%	18,367,400	1,444,500	8.5%
Other Compensation (Sick Leave Payout)	400,000	400,000	0	0.0%	400,000	0	0.0%	400,000	0	0.0%	400,000	0	0.0%
Total Salary, Wage & Benefits	51,868,600	53,990,800	2,122,200	4.1%	58,027,800	4,037,000	7.5%	61,808,600	3,780,800	6.5%	65,607,100	3,798,500	6.1%
Purchased Goods													
Administration & Office Expenses	75,700	73,300	-2,400	(3.2%)	70,400	-2,900	(4.0%)	73,600	3,200	4.5%	70,700	-2,900	(3.9%)
Fleet, Equipment & Vehicle	162,850	120,800	-42,050	(25.8%)	124,500	3,700	3.1%	127,800	3,300	2.7%	130,600	2,800	2.2%
Utilities & Taxes	302,000	322,600	20,600	6.8%	342,400	19,800	6.1%	363,800	21,400	6.3%	387,200	23,400	6.4%
Operating	284,025	284,500	475	0.2%	287,500	3,000	1.1%	292,200	4,700	1.6%	297,900	5,700	2.0%
Personnel Supplies	180,130	164,000	-16,130	(9.0%)	166,600	2,600	1.6%	195,400	28,800	17.3%	198,000	2,600	1.3%
Computer Software	2,200	92,500	90,300	4,104.5%	56,300	-36,200	(39.1%)	11,600	-44,700	(79.4%)	11,900	300	2.6%
Total Purchased Goods	1,006,905	1,057,700	50,795	5.0%	1,047,700	-10,000	(0.9%)	1,064,400	16,700	1.6%	1,096,300	31,900	3.0%
Purchased Services													
Repairs & Maintenance	1,251,950	1,422,500	170,550	13.6%	1,718,300	295,800	20.8%	1,858,400	140,100	8.2%	1,958,500	100,100	5.4%
Communications	584,350	709,900	125,550	21.5%	830,000	120,100	16.9%	857,700	27,700	3.3%	945,000	87,300	10.2%
Training/Travel	674,885	945,720	270,835	40.1%	944,900	-820	(0.1%)	970,800	25,900	2.7%	1,020,700	49,900	5.1%
Consulting & Professional Services	1,768,200	2,241,400	473,200	26.8%	2,258,300	16,900	0.8%	2,111,350	-146,950	(6.5%)	2,163,600	52,250	2.5%
Contracted Services	6,000	6,000	0	0.0%	6,000	0	0.0%	6,000	0	0.0%	6,000	0	0.0%
Rental/Leases	81,700	57,100	-24,600	(30.1%)	57,000	-100	(0.2%)	57,900	900	1.6%	58,900	1,000	1.7%
Permits / Approvals	39,200	81,700	42,500	108.4%	60,100	-21,600	(26.4%)	61,900	1,800	3.0%	63,800	1,900	3.1%
Total Purchased Services	4,406,285	5,464,320	1,058,035	24.0%	5,874,600	410,280	7.5%	5,924,050	49,450	0.8%	6,216,500	292,450	4.9%
Financial Expenses	9,300	19,300	10,000	107.5%	19,300	0	0.0%	19,300	0	0.0%	19,300	0	0.0%
Total Expense	57,291,090	60,532,120	3,241,030	5.7%	64,969,400	4,437,280	7.3%	68,816,350	3,846,950	5.9%	72,939,200	4,122,850	6.0%
Internal Charges													
Internal Charges	4,803,300	4,820,700	17,400	0.4%	5,030,100	209,400	4.3%	5,453,800	423,700	8.4%	5,673,600	219,800	4.0%
Internal Recoveries	-1,582,320	-1,762,500	-180,180	11.4%	-1,734,600	27,900	(1.6%)	-1,584,300	150,300	(8.7%)	-1,584,300	0	0.0%
Total Internal Charges	3,220,980	3,058,200	-162,780	(5.1%)	3,295,500	237,300	7.8%	3,869,500	574,000	17.4%	4,089,300	219,800	5.7%
Net Budget	57,269,170	60,337,120	3,067,950	5.36%	64,992,400	4,655,280	7.72%	69,413,350	4,420,950	6.80%	73,756,000	4,342,650	6.26%
WSIB Obligations (Supportive Staffing)	0	1,062,400	1,062,400		1,373,600	311,200		1,450,500	76,900		1,647,900	197,400	
Net Budget before Assessment Growth	57,269,170	61,399,520	4,130,350	7.21%	66,366,000	4,966,480	8.09%	70,863,850	4,497,850	6.78%	75,403,900	4,540,050	6.41%
Assessment Growth Allocation			-659,000			-672,000			-689,000			-699,000	
Net budget After Assessment Growth			3,471,350	6.06%		4,294,480	6.99%		3,808,850	5.74%		3,841,050	5.42%