



SASKATOON _____
POLICE SERVICE

TO: Shirley Greyeyes, Chairperson
Board of Police Commissioners

FROM: Cameron McBride
Office of the Chief

DATE: 2025 April 02

SUBJECT: Vulnerable Persons Unit 2024 Annual Report

FILE NO.: 2,012-9

ISSUE:

The Vulnerable Persons Unit is comprised of the Saskatoon Police Service (SPS) Police and Crisis Team (PACT), HUB, and Crime Free Multi-Housing (CFMH). The Vulnerable Persons Unit was established in 2019 and is under the Community Engagement Division.

RECOMMENDATION:

That this report be received as information.

STRATEGIC PRIORITY:

Reduce acutely elevated-risk situation that individuals and/or families face in the community by assessing in a non-traditional Police approach.

DISCUSSION:

The Vulnerable Persons Unit was established in 2019 in order to coordinate existing units within the SPS. These units include PACT, HUB, and CFMH. Common threads among these teams are early intervention and developmental crime prevention. This involves reducing community and individual risk factors and increasing protective factors with the overall goal of impacting crime and public safety. This is an integrated, multi-dimensional, multi-sectoral approach that involves shifting from traditional calls for service response to creating alternative solutions in keeping with problem-oriented policing.

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Police and Crisis Team (PACT)

PACT is a client-centered community safety model developed through the collaboration of three agencies - SPS, Saskatchewan Health Region and Saskatoon Crisis Intervention Service (SCIS).

The PACT teams provide immediate police response to persons with mental illness (PMI) in need that are experiencing significant mental illness and/or addiction issues. They improve public and personal safety by providing collaborative and effective crisis intervention/assessment in a trauma informed practice while sharing valuable resources and information with one another.

Outcomes include:

- enhanced immediate response and service to persons experiencing mental health/addictions crisis
- reduced arrests for disturbance calls due to psychosocial crisis
- decrease volume and length of stay to emergency departments of avoidable mental health and addictions presentations
- the ability to successfully resolve, de-escalate and triage to appropriate level of service
- improved public and personal safety by providing collaborative and effective crisis intervention
- the ability to direct individuals and family members to community support agencies and medical resources, transport to emergency services or facilitate shelter needs
- follow up by phone or in person to ensure the well-being and safety of the community members

PACT units are dispatched to calls that are mental health related (e.g. attempted suicide, self-harm, welfare check, suspected mentally ill, etc.) and/or addiction related. They are designed to be reactive and respond to calls that are currently in progress – thus being timely and of great assistance to Patrol in their call response. They are also responsible for the apprehension of individuals with a Mental Health Warrant.

PACT Staffing

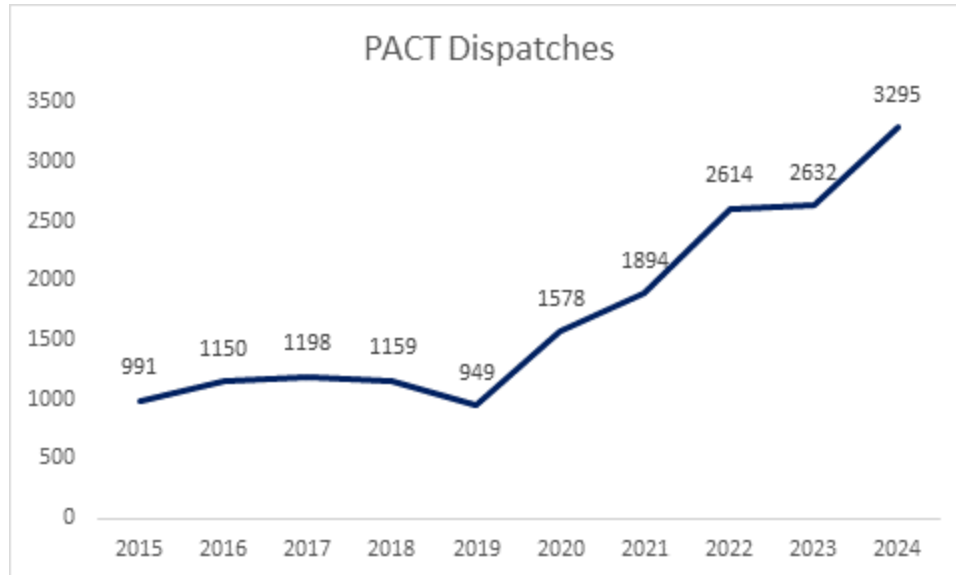
PACT is comprised of four specialized teams with the partnerships being comprised of a SPS officer and a Crisis worker from the SCIS. Each platoon within the SPS Patrol Division has a dedicated PACT unit. Each PACT unit works a four-day rotation of two-day shifts (0700-1900) and two evening shifts (1400-0200).

Three of the four PACT units have the SPS officer's positions provincially funded and Crisis worker's positions funded by SHA. The SPS fully funds the fourth PACT unit (Police Officer and Crisis worker).

PACT Statistics

In 2024, PACT was dispatched to 3295 calls – which shows a 25% increase in calls from 2023. These calls have a mental health and/or addiction component and involve an emergent nature. PACT is a primary responder – meaning that they are on the street, responding to calls in an immediate response. The demand for PACT continues to exceed capacity.

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The program objectives are to streamline and coordinate access to community resources, reduce Emergency Department (ED) visits, and when appropriate, divert mental health and addictions (psychosocial crisis) from the justice system. PACT’s goals are to reduce repeat calls for service and connect individuals with resources and supports.

Diversions from:	#	Minimal Cost Per Visit (2019)	Minimum Cost Savings	Inflation Estimation	Cost Savings with Inflation
Emergency Department	462	\$800.00	\$ 369,600.00	945.45 ¹	\$436,797.90
Detention	47	\$450	\$ 21,150.00	531.82 ¹	24,995.54
Total			\$ 380,950.00		\$437,597.05

PACT continues to divert PMI from EDs. This directly translates to significant cost saving to SHA in addition to relieving the pressure on frontline health care staff. In 2024, PACT apprehended 253 people under *The Mental Health and Services Act* (MHSA) and transported 115 people to RUH for a voluntary assessment but was successfully able to divert 462 people from the ED.

PACT also continues to have a positive impact on diverting people from being arrested, detained, or incarcerated. These diversions prevent the criminalization of mental illness and contribute to destigmatizing mental health in our community. Aside from being responsive to calls for alternative mental health crisis response infrastructures, there are significant subsequent impacts on service delivery costs.

¹ Inflation calculated using Bank of Canada Inflation Calculator, which suggested annual rate of inflation from 2019 to 2024 was 3.4 for an overall percent change of 18.18. <https://www.bankofcanada.ca/rates/related/inflation-calculator/>

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Below are the associated services and unit cost as provided by the Ministries of Health, Social Services, Justice and Medavie Services (2019):

- Emergency Room Visit (\$800)
- Ambulance Trip (\$325)
- Ambulance Assessment (\$325)
- Acute Psychiatric Hospitalization Day (\$1000)
- Medical Hospitalization Day (\$550)
- Brief Detox Day/Night (\$210)
- Social Detox Day (\$210)
- Contact with Police (\$100)
- Police Detention Day/Night for Intoxication (\$450)
- Taxi Ride – Ministry of Social Services (\$25)

One of the interactions PACT has with people experiencing mental health issues are apprehensions related to mental health warrants. For the 2024 reporting period, 302 mental health warrants were processed by SPS. Other collaborations with our community partners are being used by our PACT units in order that clients are redirected from the ED to their community mental health nurses – thus reducing the number of mental health warrants needing to be issued.

Statistics tell a story but some of the intangibles that are associated to PACT include:

- PACT spends considerable time working on safety plans/diversions from hospital. This often requires “thinking outside the box” and taking the time to develop a plan with the client that will work for them. PACT often goes back and re-connects with the client just to make sure the safety plan is working and they’re safe. This relationship building enables trust which pays off in future encounters.
- The partnership with community paramedicine (Medavie) continues to grow. The ability to work with others in the community, and be able to offer immediate solutions which allow people to be able to remain in their home is incredibly important.
- The collaboration with hospital is extremely important yet unique. The relationships that are developed with doctors, nurses and psychiatric liaison nurses help us to create an environment that fosters trust in our assessments which allow for the best outcomes for our clients. The flow of information provides for an expedited service delivery. It has been recognized that the likelihood of a patient brought in by PACT will on most occasions result in certification to Dube.
- PACT has been working with the Complex Needs Emergency Shelter in both providing service for clients needing mental health assistance and providing a safe place for clients to be when intoxicated.
- Looking through a trauma informed lens when working with involuntary clients is required by both the PACT officer and Crisis worker, as this type of practice is at the heart of providing a good experience to those they serve.
- Being out in the community has been received so favorably that PACT is being requested in the initial call. This initial response has resulted in PACT making the assessment to apprehend the client under *The Mental Health Services Act*, thus reducing the need for

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the application for a Form C warrant from the Provincial Courthouse. There has been a 25% reduction from 2023 to 2024.

- When responding to calls, PACT attends in an unmarked vehicle, which reduces the stigma associated with Police.

PACT Current Initiatives & Challenges

With the demand for mental health increasing in Saskatoon, PACT makes every attempt possible to divert away from the hospital in situations that do not require this care. Hospital EDs continue to be overburdened and short on rooms which contribute to longer waiting times of our teams. If PACT is waiting with a subject in the ED, they are unable to actively respond to calls in progress. Different formats are being looked at to allow the PACT units to remain available to mental health calls in progress. Also, collaborations are being pursued with Community Mental Health Nurses to look at ways that medications can be given in the community or client's homes instead of transporting to the ED.

Saskatoon HUB

Under the umbrella of the Community Safety & Wellbeing (CSWB) portfolio and the Ministry of Corrections, Policing and Public Safety, the Saskatoon Hub has been in effect since April 1, 2014.

The HUB table works in an outreach capacity with other agencies to identify individuals or families that are facing elevated risks that can't be solved by a single agency. Each individual or family that is brought to the table is referred to as a “discussion”. By connecting with other agencies and sharing information, a wrap-around approach can be taken to provide supports and services to reduce elevated risk. The HUB Committee meets every Tuesday and Thursday mornings to present and problem solve individuals and families that are in an elevated risk situation.

The agencies that participated at the HUB Table in 2024 include:

- Saskatoon Police Service
- Ministry of Social Services – Child and Family Services
- Saskatoon Health Authority – Mental Health and Addiction
- Community Corrections
- Ministry of Social Services – Income Assistance
- Saskatoon Public Schools
- Greater Saskatoon Catholic Schools
- Community Living Service Delivery (CLSD)
- Saskatchewan Housing Authority (SHA)
- Saskatoon Tribal Council

The HUB model is a collaborative, multi-disciplinary approach with an emphasis on integrating human service, sharing data, and measuring success along the way.

HUB Staffing

SPS has a dedicated, full time constable assigned to the HUB which is provincially funded. The HUB constable was appointed as the Chairperson for the HUB table in 2017 and continues to

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maintain this position. This role requires scheduling and meeting with individuals and families to assess and offer assistance (in person contacts), coordination of administrative tasks, serving as the HUB table liaison to multi-agency initiatives, liaising with the Government of Saskatchewan’s Community Safety and Well Being (CSWB) Implementation Team, providing education and training to the community, and serving as the HUB table spokesperson.

Additional responsibilities include maintaining the provincial database with all of the data entry for Saskatoon discussions and creating of reports to identify trends related to specific risk factors. Working in the communities with people in elevated risk situations often identifies systemic issues within our community and by working with a wide range of organizations and community groups, we are able to develop strategies to address these issues that will allow for changes to ensure a safe and secure environment.

HUB Statistics

HUB had 120 discussions presented at the table in the 2024 year. Consistent with previous years, the majority of HUB referrals are brought forward by Greater Saskatoon Catholic Schools, Saskatoon Public Schools and Child and Family Programs.

Breakdown of Agency Referrals

January 1, 2024 – December 31, 2024

Agency	# of Discussions (Originated Agency)
Greater Saskatoon Catholic School Division	33
Saskatoon Public School	29
MSS – Child and Family Programs	24
Saskatoon Police Service	11
Community Corrections	7
MSS – Income Assistance	6
SHA – Mental Health and Addiction Services	4
Saskatchewan Housing Authority	4
MSS – Community Living Service Delivery	2
Total	120

Risk Variables for Saskatoon Discussions

When discussions are brought forward, they are identified as risk variables. These variables are broken down into risk factors to allow members to accurately identify the focus of the risk variable. In 2024, mental health continues to be a prominent risk factor followed by housing and alcohol. This is predictable, as risk factors such as housing uncertainty, food insecurity, etc. will understandably affect one’s mental well-being and can lead to increased substance use.

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Risk Category	Number	% of Total
Mental Health	65	14.1%
Housing	45	9.8%
Alcohol	30	6.5%
Criminal Involvement	30	6.5%
Cognitive Functioning	29	6.3%
Drugs	28	6.1%
Missing School	28	6.1%
Physical Health	27	5.9%
Poverty	27	5.9%
Basic Needs	25	5.4%

HUB Current Initiatives & Challenges

The Saskatoon HUB Table’s primary goal is to provide an immediate and coordinated response to reduce risk. Once the risk factors have been identified, HUB addresses the immediate concerns and connects the family or individual with the appropriate ongoing support. HUB does not case manage. Unfortunately, it is becoming more and more apparent that community support groups and agencies are taxed and overwhelmed. This has led HUB to hold on to some referrals significantly longer. To address this, HUB has created a “low contact” agenda for situations where the need for our involvement has decreased, however, connections with supports still need to be confirmed or other issues need to be addressed before the table feels confident in closing. This operational change reflects the intersection of the complexities of the discussions and the capacities of the community organizations.

HUB continues to find housing a significant challenge. Wait lists for affordable housing are very long and many private rental properties are not an option for our referrals due to cost and past rental history. For example, some of our referrals have been evicted due to rental arrears and often the details around their eviction are captured on a public data system called CanLii once it has been concluded at the Office of Residential Tendencies (ORT). The majority of the landlords in Saskatoon will consider this when processing a person's application, and in many cases immediately decline their application particularly if the eviction was concerning rental arrears. In addition, due to inflation and low rental availability, the average rental rate has increased by several percentage points. Many of our referrals are on a very fixed income and simply cannot afford current housing rates. For the above reasons, we have several referrals that we have not been able to house and there is no real viable option. This only continues to highlight the need for more affordable and supported housing in Saskatoon - housing that is not only affordable for these families, but provides mentorship, educational resources and promotes community cohesion.

Crime Free Multi-Housing (CFMH)

There was an increase in demand for CFMH’s crime prevention services in 2024. The number of partnering companies and condominium boards that are worked with increased from 54 (in 2023), to 70 (in 2024). Active community partners receive information, training and, an in-depth security assessment of the buildings they work with. CFMH staff also offer on-going advice and

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support regarding criminal matters the staff or residents have experienced, or would like to avoid experiencing.

CFMH now supports 1,344 buildings across Saskatoon. The diversity of properties ranges from luxury condos to trailer parks, new to decaying rental buildings, and from social housing to large, corporate rental companies.

Training and Community Events

CFMH offered six sold-out trainings that were attended by 316 property managers, condominium board members and building maintenance staff. (Please note *right*.)

CFMH staff consistently strive to adapt and improve training to meet the needs of the rental industry and condominium boards.

For example, a training that was developed was ‘Death, Drugs and Dramas: What to Do?’ and was offered in partnership with Rental Housing Saskatchewan, (formerly known as the Saskatchewan Landlord Association). As part of this training, a Provincial Coroner shared details about what to do if a body is found in an apartment. An SPS Drug Unit officer shared insight into drugs that may be found in apartments and, CFMH staff educated about the impact of anger on the brain, body and on one’s behaviour. All 80 attendees spoke highly of the relevance of this training.

CFMH staff produced educational material that meets community needs. In 2024 we created a card with a large font and a clear message to assist the hundreds of seniors we met at CFMH community events and public events.

To celebrate the strong working relationship CFMH has with diverse housing providers a ‘Feast with the Chief’ celebration was organized. Managers/owners from 26 companies attended. All had an opportunity to network and share their expertise/experiences with each other and with Chief McBride.

CFMH staff also educated and shared information with over a thousand citizens at several community events and conferences.

Daytime/ Nighttime Security Assessments

Last year, CFMH staff conducted 38 inspections assessing the security features at 622 buildings. These buildings had 2,687 suites.

A new inspection report template was created and profiles effective security features noted in Saskatoon multi-family buildings. This report is much easier for property management staff to interpret, hopefully resulting in more improvements based on CFMH recommendations within 12 months- improvements that would reduce the likelihood of crime occurring in their buildings. CFMH staff also worked hard in 2024 to engage with property management companies which



Saskatoon Police CFMH 2024 Trainings	
JAN. 23 & 25 12:45 PM - 4:30 PM	CFMH Phase 1 Building Security Training SOLD OUT
FEB. 20 7:00 PM - 8:30 PM - VIA ZOOM	Crime in a Condo?: What You can Do in partnership with Canadian Condominium Institute N SK - SOLD OUT
APRIL 10 11:00 AM-1:30 PM	Death, Drugs and Dramas: What to do? in partnership with Saskatchewan Landlord Association (SKLA) - SOLD OUT
JUNE 18 & 20 12:45 PM - 4:30 PM	CFMH Phase 1 Building Security Training SOLD OUT
SEPT. 24 & 26 12:45 PM - 4:30 PM	CFMH Phase 1 Building Security Training SOLD OUT
OCT. 23 8:30 AM- 11:30 AM	Saskatoon Sheriff + SKLA Explain Evictions SOLD OUT
Dec. 4 6 PM - 9 PM	Feast with the Chief Networking Event

Crime Free Multi-Housing 306-975-8385 CFMH@police.saskatoon.sk.ca



Saskatoon Police Service
Crime Free Multi-Housing
How to call Saskatoon Police

- Remain calm. Speak clearly.
- Tell operator where you are.
- Give your name, phone number and address.
- Tell operator what is happening - in detail.
- Clearly describe person(s) or vehicle(s) involved.
- Give direction the suspect is travelling in.
- Stay on the line until told to hang up.

Emergency: 911
Non-Emergency: 306-975-8300

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had previously received inspection reports, providing reminders and building relationships to support a proactive approach to security.

On-going Communication

CFMH monitors the calls for service and occurrences from the buildings active in our program. In 2024, CFMH staff shared 11,347 reports with CFMH-trained property managers. CFMH staff make an extra effort to share details relevant for property management, while respecting privacy regulations. Property managers and board members appreciate receiving incidents reports, as they offer insight into what is happening in their buildings 24/hours/day and 7 days per week.

Challenges

Not a day went by in 2024 without an incident related to unhoused persons occupying or loitering in an apartment or condominium. CFMH shared 2,682 calls related to this challenging social situation. Homelessness continues to pose a challenge for building management staff as they are tasked with asking people to leave and/or, are required to clean up debris and repair vandalism and, they also must manage concerns from paying tenants. Sleeping/temporarily staying in a multi-family building’s common area is often not a safe situation for people who are already vulnerable and/or intoxicated. CFMH has noted an increase in violent crime and social disorder in multi-family building hallways and stairwells across the city. CFMH supports the work of community partners who support the hard-to-house.

CFMH Staffing

CFMH functions effectively with two full-time employees – a Coordinator and an Assistant Coordinator. CFMH staff receive support and relevant guidance from the Sargent responsible for the Vulnerable Persons Unit, Community Liaison Officers and have constructive working relationships with officers from several police units.



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CONCLUSION:

The Vulnerable Persons Unit allows the Service to proactively work in a coordinated effort to address complex, elevated risk situations. The integrated teams work toward reducing community and individual risk factors and increasing protective factors with the overall goal of impacting crime and public safety.

ATTACHMENT:

1. Saskatoon Hub Success Stories

Written by: Jodi Earl, Sergeant, Vulnerable Persons Unit
Reviewed by: Doug McNeil, Inspector, Community Engagement Division
Approved by: Dale Solie, Superintendent, Operational Support Bureau
Darren Pringle, Deputy Chief, Operations
Submitted by: Cameron McBride, Chief of Police

SASKATOON HUB—Success Story

History:

This family consists of a mother, a father and their four young children. Several years ago they immigrated to Canada from Southern Asia and eventually settled in Saskatoon.

Before being presented at the HUB table, the father had sustained a serious stroke that impacted him and his family greatly. They were now facing substantial financial stress, food insecurity and the immediate need of housing that would accommodate the father's new mobility challenges. As the father was no longer in hospital, he could not access many of the services he did while an inpatient. His daughter was having to support her father in attending physical therapy appointments at the hospital a few times per week.

Despite other agencies' involvement, Saskatoon Open Door Society reached out to HUB requesting additional support for this family as they were struggling to navigate the various systems to secure appropriate housing, income assistance and other necessities during this very difficult time. In addition, the school had identified a potential medical concern for one of the children and the family was having a difficult time connecting with a doctor.

Outcome:

Saskatchewan Housing Authority (SHA) and Saskatoon Public Schools (SPS) met with the family shortly after being accepted at the table. SHA was able to complete housing applications and advocated for them to receive an accessible home as the father was now restricted to a wheelchair. When they met with the family, the father was having to crawl up two flights of stairs while family would have to carry his wheelchair up the stairs behind him.

SPS assisted the mother in completing the required documents for Saskatchewan Assured Income Assistance (SAID) and worked with Income Assistance to ensure funds could be issued promptly. SPS also arranged for a medical appointment with St. Mary's Wellness Center for the one child to address any potential medical concerns.

Although previous agencies had begun the referral process, the follow-through would come to a halt when the family no longer met the agency's mandate for service. As this family required continued support, their applications were not completed and benefits were not received, hindering their ability to submit their housing applications.

Referred by:

- Saskatoon Public Schools

Demographics:

- Family

Referral Reasons:

- Housing
- Medical
- Poverty
- Basic Needs

Assisting Agencies:

- Saskatoon Housing Authority
- Income Assistance
- Saskatoon Public Schools
- Saskatoon Open Doors Society
- St. Mary's Wellness Center



SASKATOON HUB—Unsuccessful Story

Due to several barriers and at times lack of follow through on the family's part housing was not secured and eventually, Jordan's Principle could not provide any further funding for a hotel. To make matters worse, the stress created conflict between the daughter and her mother. Eventually, the daughter and the younger children were forced to find temporary shelter with her children's father's family out of town, and her mother and the eldest child secured a family pod at the Saskatoon Tribal Council Emergency Wellness Centre.

Despite several hopeful leads for housing, this family remains unhoused and now fractured. Although HUB has closed this referral SPS continues to keep in contact with the daughter and hopefully, in time, a proper home will be available for this family.

This referral is an example of some of the systemic issues that impede some families' ability to secure housing. It is easy to become frustrated with the rental agencies, but one has to recognize they are a business or at times a person's revenue stream. Past issues with tenants, damage to their properties, rental and utility arrears etc. have caused them to become more reluctant to rent to individuals/families with a troubled rental past. It suggests a need for more affordable housing for families that not only provides support, but also mentorship and resources to help them thrive in the community.

