

2020 Annual Report



What we do, who we serve

PHS Community Services Society provides housing, healthcare, harm reduction and health promotion for some of the most marginalized people in Vancouver and Victoria.

We provide more than 1,500 units of supportive housing with 'wraparound' services – clinical, mental health and social supports. The PHS philosophy is meeting people where they are at – because this saves lives.

We were incorporated as a Canadian charity, the Portland Hotel Society, in 1993 and renamed PHS Community Services Society in 2003.

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Letter from the Board Chair: Year in review

Allen Garr, PHS Board Chair

This was to be a year for building out our administrative supports. Focus on supports and infrastructure would allow us to make systems improvements we've sought for quite some time.

Our new CEO, Micheal Vonn, was barely settled in last fall when she hired our first Chief Operating Officer. And the long and complex process of building systems to better support the work began.

It was hardly smooth sailing. Micheal inherited a commitment by the Board in conjunction with CUPE to take on collective bargaining under the auspices of HEABC (The Health Employers Association of British Columbia). Both PHS and the Union were clear on how this would be beneficial. We did not, however, appreciate all the complexities until we were in the whirlwind of trying to sort them out.

But that was only one issue.

We joined with Vancouver Coastal Health and the B.C. Centre for Substance Use in an exciting and innovative application to the Federal government who announced a Canada-wide program for initiatives in "safe supply" of drugs. Only to have this crucial funding program temporarily delayed.

Meanwhile our Housing staff, in addition to the provision of our continuum of supportive housing and low barrier

shelter, was working with folks tenting in Oppenheimer Park to help assess their needs and find appropriate housing.

The Board hit the road to Victoria to see first hand how our staff there are providing much needed and welcome housing, harm reduction and clinical services to that community.

The Board also set up our first Fundraising Committee. It supports our staff Fund Development Manager, who is doing a great job of expanding (and cherishing) our generous community of donors.

All of this was of course before we were hit with a double whammy in March: the COVID-19 pandemic and more lethal street drugs leading to more overdose deaths.

The complications and challenges of dealing with these emergent crises were (and still are) enormous with a focus on workplace safety to keep staff working safely and resident and community member safety (including safe supply and safe housing) in order to successfully isolate.

It is undeniably a credit to our staff that we have so far pulled through. And we continue to be the go-to folks our funders and the community turn to for help solving their most difficult and urgent problems.

Executive overview: A celebration of courageous people

Micheal Vonn, Chief Executive Officer

Who do you choose to be for this time? Are you willing to use whatever power and influence you have to create islands of sanity that evoke and rely on our best human qualities to create, produce and persevere?

Margaret Wheatley

After years of finding the grit and resilience to combat the nested public health crises of homelessness, drug poisoning and overdose, PHS and community have had to dig deeper still and do all that in the context of COVID-19.

In this annual report we are highlighting just a few of the people whose heroic efforts are helping to bring the communities we serve through this grimly challenging time.

It's long been known that crises can create opportunity and COVID is proving no exception. The sudden imperative to support individuals' ability to physically isolate brought about a temporary safe drug supply protocol (Pandemic Withdrawal Management). Our clinical team's expertise in addiction medicine was not only foundational in the creation of this protocol but uniquely positioned us to use it effectively.

Likewise, our work supporting the individuals living in a 'tent city' in Oppenheimer Park predated COVID. But

when COVID considerations galvanized the creation of transitional housing, our folks had invested deeply in relationship-building with that community and so, were uniquely positioned to move the vast majority of people to transitional housing on a near-impossible deadline.

Meanwhile, the crisis of the OD epidemic continued unabated and we adapted our overdose protocols and our harm reduction strategy as quickly as we could. We did a recruitment campaign to onboard and train more staff with the essential life-saving skills of OD response. And because culture saves lives, we pivoted quickly to ensure the continuance of Indigenous programming, aspects of which have been amended to provide for physical distancing.

We saw new money provided through income assistance to support the most vulnerable community members during COVID at the same time that banks were closing branches. Simply put, the people we serve do not have the option of online banking. Pigeon Park Savings went to extraordinary efforts to fill the gap and provide the critically needed services so that income supports could translate into rent and food for the people most in need.

While I'm on the subject of heroes, we have supporters who could see that the hardships we would all endure because of COVID were going to be hardest on the most marginalized and made generous donations that



CELEBRATING COURAGE: PHS COMMUNITY SERVICES SOCIETY CEO MICHEAL VONN.

we translated into essential community supports ranging from laundry services to food security to PPE.

We are deeply grateful to everyone – community members, peers, staff, board members, funders, supporters, partners and allies -- who have brought their skills, energies, compassion and creativity to the mammoth efforts

of this past year. There are many more than we can highlight in this report.

Amidst all the fear, loss and uncertainty of this time, we rely on courageous people to build islands of sanity. Here are some of those wonderful folks.

Indigenous Health Services: Culture Saves Lives

Indigenous people comprise a disproportionately large percentage of the people we serve.

Decades of medical evidence clearly demonstrates the social determinants of health. The cut-to-the-chase is simply that the more marginalized you are in terms of your society, the worse your health.

In other words, equality and belonging are key elements of health. Indigenous cultures have long recognized this, honouring the concept of ‘culture as medicine.’

It’s especially valuable in an inner-city setting, where PHS Indigenous Health Services works with Indigenous harm reduction leaders in a movement called Culture Saves Lives.

“Culture Saves Lives is an awareness and direct-action campaign acknowledging the tireless work of our ancestors to uphold our culture,” said Wendy Nahanee, Indigenous Health Services Manager.

“It reconnects the disconnected, and educates mainstream services of the power, beauty, and enduring strength of our traditions and ceremonies.”

The program combines culture and harm reduction with healing circles, smudging, drumming, singing, traditional dances, feasts, sweat lodge ceremonies, drum-making

workshops, honouring ceremonies and memorials for Indigenous people in the Downtown Eastside.

This includes access to Elders and traditional medicines, peer support and housing, nutrition and healthcare. It’s particularly important for substance users who often face stigma, exclusion and cultural disconnection.

Wendy said: “Connection to culture truly saves lives, and we seek to provide space for community members, especially First Nations people oppressed by mechanisms of colonization such as residential schools and the foster care system, to rediscover and celebrate their roots.”

On top of this, the intertwining health emergencies of 2020 created a whole set of new challenges. Peer outreach was stepped up to build one-to-one connections to counter isolation and ensure basic needs are met.

The Hub, a cultural meeting place, quickly pivoted to provide coffee and sandwiches to those who were hungry due to the closure of neighbourhood food services.

The team has continued to drum and provide an uplifting cultural presence in the community, handing out take-home medicine bundles.

Reconnecting people with their heritage creates an environment for connection and healing. It saves lives.

Tributes to two PHS peers who served the community

PHS peer Dave Apsey oversaw the distribution of millions of clean needles and harm reduction paraphernalia and reversed thousands of overdoses.

Dave, who died aged 58 of natural causes in April, was a legend at Washington Needle Depot and Spikes on Bikes. As CBC reported in March, “his position as a peer enabled him to respond to more than 2,000 overdoses.”

A PHS peer for more than 18 years, Dave is remembered for his dedication and a caring personality.

“He did it because it’s giving back to the community,” said fellow peer Randy Pandora. “Dave showed leadership. He would often say ‘I don’t want the peers to like me, I want them to do what I ask of them,’ but if someone didn’t show up for a couple of days he would make sure they were OK. Behind his gruff demeanor he cared.”

Overdose prevention peer Thomus Donaghy is remembered for devoting his life to saving the lives of others.

A regular at our Molson and Maple Overdose Prevention Sites, Thomus, 41, was attacked and killed during a shift break at the St. Paul’s Hospital Overdose Prevention Site, in July. The police apprehended a suspect who was charged with one count of manslaughter.



REMEMBERED: PHS PEER DAVE APSEY.

“It isn’t possible to know the exact number of lives Thomus has saved,” said Molson Overdose Prevention site program manager Chris Langford. “He would hold us to task demanding we do the most we can to prevent the tragedy of further overdose deaths.”

“Thomus displayed his kindness and compassion time and time again with participants, community members, and the coworkers who were his friends and family. He was a beautiful human, and will be greatly missed.”



**MEDICAL DIRECTOR: DR.
CHRISTY SUTHERLAND.**

Saving lives during intertwined health emergencies

Navigating through the concurrent public health emergencies of the OD epidemic and the COVID-19 pandemic requires a combination of old-fashioned hard work, cutting-edge medical expertise and boots-on-the-ground street smarts. Thankfully, we have folks who bring all the needed elements.

The challenges at the beginning of the year were sourcing personal protective equipment (PPE) and translating public health's pandemic policies based on advice created for hospital staff into policies that could be applied to residential and harm reduction settings.

Although supplies were made available through partners Vancouver Coastal Health and B.C. Housing, additional PPE resources were required to meet the extensive operational needs of all of our services and facilities.

PHS requires 2,400 surgical masks per week and up to 50,000 pairs of surgical gloves a month, said Housing and Programs Admin Assistant Kristina Hedlund, who was overseeing procurement.

"It was a lot of work and stress at the beginning," she said. "We were making round-the-clock deliveries to PHS sites to make sure everyone had what they needed.

"The whole world was panicking but I was in the housing office with people who had worked through the AIDS cri-

sis and the overdose crisis, and they sprung into action. It was like, *Crisis? That's what we overcome at PHS.*"

Kristina praised the support of Clinical Nurse Manager Stephanie Lai for both sourcing supplies from partner organizations and checking the quality of shipments PHS imported from overseas.

Stephanie, with a background in infection control, had immediately got to work on drafting COVID-19 best practices for staff and peers out in the field.

"The highlight for me was the way staff stepped up to the challenges, inspiring me with their dedication," said Stephanie. "In particular, mental health workers in the buildings stepped up, being creative about finding different ways they could support people and make sure everyone was safe and healthy."

Early on Medical Director Dr. Christy Sutherland created a COVID-19 working group to establish best practices and create policy.

"It's hard to face the unknown," said Dr. Sutherland. "So we started with goals that we could keep coming back to: slow the spread of COVID-19, protect staff, identify severely unwell patients, maintain essential care and off-load acute care."

A key part of the PHS strategy was “pandemic prescribing” (or safe supply) of medical-grade alternatives to street drugs. In addition to protecting against drug poisoning, “pandemic prescribing” supports self-isolation by eliminating the need to go out and access street drugs.

Drug users consulted by Dr. Sutherland suggested that adding coffee, cigarettes and cannabis to the mix would keep people comfortable enough to stay indoors. This approach, recognizing that it’s more effective to entice than enforce isolation, shaped the PHS pandemic response. Within a couple of weeks, it had been adopted as provincial guidance for risk management; coffee, tobacco and cannabis included.

“The provincial guidance supported by the Ministry of Health and the [medical] Colleges started as PHS policy,” said Dr. Sutherland. “We always have been leaders.”

Published late March, the province’s guidance document *Risk Mitigation in the Context of Dual Public Health Emergencies* established pandemic prescribing throughout B.C.

Within a couple of months PHS physicians were prescribing medical-grade street-drug alternatives to 304 people in Vancouver and 74 in Victoria, ranging in age from 19 to 74.

Meanwhile, every other part of the organization innovated to bring in pandemic responses that incorporated COVID protection whilst providing additional supports to mitigate the overdose emergency.

One difficulty was that protocols to limit guest and visitor access at PHS housing locations – (although registered visitors were allowed) – had the potential to cause tenants to use drugs alone, increasing the risk of fatal overdose.

“We have been adding consumption areas within our buildings wherever space and feasible view lines allow so that staff can observe residents using from the front desk or office directly or via camera,” said Housing Director Tanya Fader.

“It has been a balancing act between trying to keep our residents safe from ODs and any potential community outbreak of COVID-19.”

Building management have been checking on individuals known to be solo users, and some have made use of the Lifeguard app which sends a timed call to emergency services indicating something is wrong.

Management of overdose prevention sites required many quick shifts to stay current with constantly changing practice directives.

Maple Overdose Prevention Site was closed for a time due to concerns about physical distancing in a limited space, although the most pressing initial concern wasn’t space, but the use of oxygen.

Oxygen both saves lives and prevents traumatic brain injury, and is a key resource at supervised consumption sites. But the initial fear, subsequently resolved, was that bag masks would cause COVID-19 particles to aero-



FRONTLINES: PHS STAFF LEADING THE RESPONSES TO 2020'S TWIN PUBLIC HEALTH EMERGENCIES.

solize and spread across the room. Various procedural innovations were introduced including room-clearing protocols and low-flow oxygen masks.

Mobile harm reduction outreach and needle collection service Spikes on Bikes increased patrols, as did The Clean Team with its collection of garbage and syringes, following public concerns about littering during lockdown.

Meanwhile, alone of banks in the neighbourhood, Pigeon Park Savings was open during the critical early phases

of the pandemic emergency providing urgently needed banking services for the Downtown Eastside community.

And our staff stepped in to deliver mail to our residents when Canada Post stopped delivering to some of the supportive housing in Vancouver's Downtown Eastside.

All of which to say that we are approaching the challenges of the times in our traditional way: stepping in, stepping up, finding a way.



THE NALOXONE RANGER: LINDSAY KASTING TAKING HARM REDUCTION OUT TO THE COMMUNITY.

Naloxone: the art and science of reversing overdoses

Naloxone saves lives, which is why all frontline PHS workers are trained in the overdose-reversing drug.

Mobile Overdose Prevention Unit Interim Manager Lindsay Kasting oversees overdose management training for new employees, refresher sessions for experienced staff and teaches CPR.

Her sessions are a blend of medical know-how and colourful anecdotes from her own life-saving experiences after more than a decade on the PHS frontlines.

“I’ve reversed a few dozen overdoses with naloxone,” she said. “Every situation is different. Sometimes stuff goes by the book, sometimes there are complications. The feedback I get from the courses is that people say I’ve inspired confidence to respond to an overdose.”

Reversing overdoses in a time of increasingly toxic street drugs is an art and a science.

Naloxone – which is the generic term, and Narcan the branded version – works by clearing opioids from the brain’s opioid receptors, allowing the person overdosing to breathe again. (During an overdose, narcotics depress the user’s respiratory system so much that they stop breathing completely.)

As Lindsay observes in her training, the person coming

round after their near-fatal overdose is unlikely to thank someone for saving their life: they might be still intoxicated or else be experiencing rapid withdrawal.

They will need reassurance, being embarrassed at having collapsed in front of a group of strangers. Observation and medical care are vital, too – a 911 call is an integral part of the process.

More than 65,000 naloxone kits have been used to reverse overdoses across the province since their introduction here in 2012.

Lindsay is currently witnessing drug consumption at the Mobile Overdose Prevention Unit, a converted Mercedes van bringing life-saving services to Yaletown drug users.

Within the first couple of weeks in that location the team received more than 50 visitors a day, mostly for harm reduction supplies.

A first-time visitor cannot fail to observe how friendly and polite service users are; treated with respect, visitors reply in kind.

The mobile service exists to take overdose prevention to “meet people where they are at” – literally and metaphorically – and highlights the need for harm reduction services in different neighbourhoods across Vancouver.

Housing people from homeless camps with respect

Last year, PHS was asked to provide urgently needed services to those living at Vancouver's Oppenheimer Park, only to have the initial urgency compounded by the COVID-19 pandemic.

Despite extensive efforts (and significant successes) to find housing for people in Oppenheimer, by January 2020 there were more than 200 people living in unsanitary conditions at the site.

Usually, homeless camps are 'resolved' through court order. Participants leave under threat of arrest, usually to set up tents in a new location.

This dislocation serves only to further disenfranchise people who are without a safe space.

In an effort to avoid such a predictably dreadful outcome, BC Housing partnered with PHS to provide enhanced outreach services to the people in the park and do the groundwork to build good relationships with the community.

PHS Project Manager Patrick Pouponneau and Spiritual Caregiver Happy Kreter were the key staff engaged in this work.

"Tent communities are self-directed ecosystems," said Patrick. "They are a tragic reality we are facing, of people

that have been so betrayed and victimized that this is their best option, although it's not a good option.

"It's safer than sleeping on the streets, but they are unhealthy places. We should not romanticize or normalize them as anything other than shanty towns in a wealthy city, caused by extreme poverty."

Patrick and Happy began immediately after a snowstorm, starting their outreach by helping the community through cleaning up uncollected garbage and abandoned belongings from collapsed tents.

"Cleaning is a demonstration of your personal investment in the community," said Happy. "It speaks louder than any promise."

Patrick said: "Some people helped us and we got to engage with them. We listened to where people's pain points were within the day-to-day functioning of the community."

Campers ranged in age from youth to elderly, with the majority in their 30s and 40s. Many built impressive structures, and most had been homeless for years.

Homeless encampments are often shaped by anti-poverty activists and can feature harm-reduction facilities including peer-led overdose prevention tents and morn-

ing meetings where safety advice is given.

Patrick and Happy joined these and other meetings, engaging with the area's community groups and liaising at the Vancouver Fire Department and City of Vancouver parks managers' bi-weekly safety walk-throughs.

They addressed all manner of safety issues from making safety compounds for propane tanks to providing vital COVID-specific health information and protection.

Relentless efforts were required to make the province's near-impossible deadline, but by the end, our work saw 274 people from the entrenched homeless camp moved into the safety of hotels and shelters.

The peaceful resolution was marked by a closing ceremony attended by municipal, provincial, Indigenous and community leaders. During the ceremony, Patrick and Happy were recognized in a blanketing ceremony, a significant honour for both.

A growing urban phenomenon, encampments are the public face of Canada's growing homelessness crisis. The "answer" is housing. But more than that. As our work with those in "tent cities" has consistently shown, the key to successfully transitioning people to housing is respectfully building relationships of trust.

COMMUNITY HONOUR: HAPPY KRETER (LEFT) AND PATRICK POUPONNEAU WERE RECOGNIZED FOR THEIR OPPENHEIMER OUTREACH AT AN INDIGENOUS BLANKETING CEREMONY.





“This community needs more. It needs more love, more attention, it needs more outside perspective, more good energy. More people that have got a little bit something extra to give.”

Mental Health Worker Connor Kentner (left) on the PHS drive to recruit people looking to make a difference.

We are hiring auxiliary Mental Health Workers to help marginalized individuals to access services.

It's boots-on-the-ground work with people that can exhibit complex behaviour, but very personally rewarding. Info: jobs@phs.ca

Supporting a community through grief and loss

PHS Spiritual Caregiver Happy Kreter supports a community reeling from dual public health emergencies.

His multi-faith outreach supports communities dealing with tragic losses including the frequent deaths of family and friends due to a toxic drug supply. Happy's work includes memorial services, men's wellness groups and grief and loss circles.

"During 2020 there will sometimes be several memorial services a week," he said. "In a normal year there would be between three and eight a month.

"Every life is honoured and dignified. Sometimes society at large overlooks the Downtown Eastside because people are marginalized and the deaths are so frequent, but they are the consequence of poverty and dispossession."

Memorials are held at PHS buildings. Residents, friends and family are invited to participate by sharing memories and celebrating the life of the deceased. Elders accompany Happy when facilitating services for Indigenous community members.

"The congregation carries a lot of the service," he said. "The heart of it is the sharing from the people who had the relationships with the deceased."

Men's workshops came about due to a clear need felt by

men to "leave their armour at the door" and speak about the challenges of street life. (Similar groups already existed for women.)

The grief and loss sessions may cover participants' estrangement from family, and their loss of friends, loved ones or even health.

"Many have experienced the loss of a sense of dignity," said Happy. "We look to make personal connections in our community and through our spiritual traditions to regain belief in ourselves.

"My job is to uplift people's spirit by creating a space for sharing and connection. Wonder and awe are the great unlockers of wellbeing. The divine is what you are made of. When you find that, you find yourself."

You may not guess this to hear him talk, but Happy says that his radical inclusivity comes from his atheist past.

"Human beings have evolved a spiritual mind, and I'm aware of the spiritual needs of atheists."

Happy provides a low barrier approach to spiritual care, offering people of all belief structures a way to replace feelings of shame and blame, come to terms with loss and find healing from trauma.



HARM REDUCTION: DR. ASHLEY HEASLIP.

Victoria values: where hard work meets healthcare

Housing the homeless is a process: it takes compassion, hard work and wide-ranging medical support, as PHS operations in Victoria show.

PHS came to Victoria after being contracted by B.C. Housing in April 2016 to support occupants of Super InTent City, a homeless camp on the lawn of Victoria Provincial Court. However, this site was required to be cleared under a court injunction with a deadline of early August.

“The building upgrades had not been completed at the time of the injunction order,” recalled PHS Victoria Housing Manager Avery Taylor.

“The province had promised people they could move right in with anything they wanted to bring.

“There were a wide spectrum of needs, which took some managing.”

The 147-unit Johnson Street Community, opened especially for the move from the park encampment, was a new model of supportive housing in the city and so received extensive scrutiny.

It was the first time in Canada that an entire homeless camp was transferred into one housing project, and lessons were learned by all involved.

With a large group of people with diverse requirements having been moved at short notice, Johnson Street Community was “Super InTent City but indoors,” said Avery. It took time to earn residents’ trust.

“You just treat people with compassion, but have real boundaries,” said Avery.

The end result, four years on, is a successful community of tenants, made possible by wraparound supports that include mental health care, home support workers and medical facilities.

“Despite the initial skepticism, Johnson Street is a clear success,” said Avery. “Something like 50 per cent of the original tenants are still living there, people who had not been housed in years. A further 20 per cent have moved out to other PHS housing.”

An overdose prevention site opened for Johnson Street residents late 2016, and the nearby Douglas Street Community transitional housing followed early the following year, subsequently expanded with recovery facilities and a 50-unit low-barrier homeless shelter.

In spring 2020, PHS Victoria opened a temporary shelter at the Save-On-Foods Memorial Centre hockey arena, an emergency COVID-19 response centre to house people from homeless camps in the city.

“The arena was another challenging project that has been incredibly successful due to the vision and hard work we put into it,” said Avery.

“The PHS secret is not magic, it’s hard work, kindness and compassion.

“We also have the medical part, giving people support where they need it. Being homeless is so terrible to your health, with the life expectancy half that of the average in B.C.”

PHS Medical Lead Dr. Ashley Heaslip currently oversees a team of five physicians and six nurses, although when she started in Victoria in 2017 she was the only doctor.

Over the subsequent three years she has seen growing public recognition that the PHS approach of supported housing and harm reduction works.

These days, Dr. Heaslip is called in as a consultant by health and housing officials, advocating for the homeless and sharing PHS expertise with other front-line organizations.

“It’s down to persistence, patience and a lot of good, consistent work from Avery and the housing team,” she said. “It’s particularly important during the pandemic that PHS is performing in a consultative role.”

The bulk of her work remains dealing one-on-one with patients, building trust so people can talk honestly about drug use and other pressing medical matters.

Some patients have experienced difficult situations and interactions in health care, and they arrive with those experiences to the PHS clinics.

The PHS team of nurses and doctors tries to meet patients where they are at, and this can mean seeing them in their rooms, in a hallway, or at times sitting on the clinic floor if the traditional structure of a desk and office chair is triggering for them.

“We are there to support people to be in whatever space they need to be in regarding their substance use. We are trying to promote stability and harm reduction,” she said.

“The traditional model of encouraging abstinence before patients have found stability in other areas of their lives can set people up for failure.

“Some patients talk to me about wanting to be drug-free, but I don’t want anyone to feel they have to be abstinent to receive care from me”

Patients find stability through the pandemic prescribing (also known as safe supply) of medical-grade alternatives to fentanyl-laced street drugs, backed up by supports including mental health care and social services.

It is not easy to house the long-term homeless. But as PHS operations in Victoria show, with compassion and appropriate boundaries some of society’s most traumatized and stigmatized people can be brought back into housing and healthcare, and a pressing public health crisis addressed.

PHS services are made possible by our strategic partners

Our partners range from government to grassroots



Huge PHS effort nets critical housing innovation

It opened in a week-long blur of round-the-clock activity to provide housing for Oppenheimer Park campers ahead of the government's park-closure deadline.

The 33-unit Lark Hostel is a ground-breaking PHS Vancouver facility in many ways: it's a 24-hour shelter in a privately-owned building where occupants have laundry facilities, private rooms and double rooms for couples.

It provides transitional housing that offers a temporary home where longterm homeless individuals receive care and support to be able to move to permanent housing.

Some residents have already moved to supportive PHS accommodation, their places at the Lark subsequently taken by referrals from B.C. Housing and the PHS-operated New Fountain Shelter.

"The Lark is where sheltering meets housing," said PHS Project Manager Josh Delleman. "There's the shelter vision but everyone has a room with a locking door for privacy and somewhere to store their stuff.

"It's a transitional model – from homelessness to shelter to supportive housing, and then on to independent living. The Lark is where the process starts.

"Wraparound services include physical and mental health care, safe supply of medical alternatives to street drugs

and overdose response. We also have coffee and lunch, because routine encourages stability."

This support has come from frontline PHS staff including mental health workers, medical staff and social workers, who together ensured there are no service gaps.

PHS Senior Manager of Housing Duncan Higgon said the process to transform the building was a highly motivated week of hard work and long hours.

"We took the keys on a Monday and moved the first people in on the Thursday," he said. "When you know that somewhere out there is another human sleeping homeless it's a huge motivation to get things done."

Senior Maintenance Manager Phong Lam said the transformation mainly involved improvements to increase tenant comfort, safety and security, like installing an intercom system.

"The whole team joined in and it wasn't that difficult," said the long-serving staff member, who has been with PHS since 1995.

The innovation of the Lark brings adds an important piece to the PHS housing continuum that allows for successful transition to housing for those who have been homeless for a long time.



Thank you to our generous supporters

PHS Community Services Society would like to thank and acknowledge the individuals, monthly donors and organizations that gave financial gifts during 2019/20.

We are extremely grateful to all of our donors who made a difference supporting our COVID-19 relief efforts. These gifts were incredibly impactful within our community helping us with additional PPE, food security, and keeping our residents safe in isolation during the health crisis.

Although we are unable to list everyone publicly, we would like to recognize the following: **2 Guys with Knives, B2Gold Corp, Robert Bucci Family Trust, Canada Running Series, Canadian Women's Foundation, Evergreen Cannabis, Lilac and Ben Milne, The**

Rogers family, John Tsai, Vancouver Foundation, Vancouver Fraser Port Authority and Victoria Foundation.

PHS is dedicated to securing financial gifts to supplement core government funding and to continue to provide innovative programs and services in Vancouver's Downtown Eastside and Victoria.

For information on donating, joining our monthly giving program, or leaving a legacy gift, please contact **donations@phs.ca**.

PHS would like to thank and acknowledge our Board of Directors for their time, generosity and 100 per cent monetary support towards our programs and services.

Financial report

April 1, 2019 - March 31, 2020

	Replacement Reserve Fund	General Fund	2020	2019
Revenue				
BC Housing Management Commission grants	116,202	25,097,954	25,214,156	22,021,612
Vancouver Coastal Health Authority grants	-	13,742,538	13,742,538	12,914,196
Rent	-	5,603,378	5,603,378	5,167,633
Other income	-	3,768,741	3,768,741	3,766,683
Vancouver Island Health Authority grants	-	1,662,900	1,662,900	1,078,210
Other service grants	-	1,275,198	1,275,198	1,271,917
Amortization of deferred capital contributions	-	735,848	735,848	691,550
Donations and fundraising	-	166,362	166,362	137,652
Total	116,202	52,052,919	52,169,121	47,049,453
Expenses				
Staffing costs	-	30,855,393	30,855,393	27,775,875
Residential services operations	-	5,927,481	5,927,481	5,471,047
General and administrative	-	5,379,447	5,379,447	4,813,674
Repairs and maintenance	116,202	3,937,296	4,053,498	3,241,844
Building and operations	-	2,873,682	2,873,682	2,463,628
Amortization	-	1,931,622	1,931,622	1,897,264
Interest on long-term debt	-	969,399	969,399	1,025,850
Bad debts (non-rent)	-	9,375	9,375	7,769
Total	116,202	51,883,695	51,999,897	46,696,951
Excess of revenue over expenses before undernoted	-	169,224	169,224	352,502
Gain on sale of capital assets	-	241,172	241,172	-
Excess of revenue over expenses	-	410,396	410,396	352,502
Net assets, beginning of year	-	1,997,643	1,997,643	1,645,141
Net assets, end of year	-	2,408,039	2,408,039	1,997,643

**CONSOLIDATED STATE-
MENT OF OPERATIONS AND
CHANGES IN NET ASSETS**

	Replacement Reserve Fund	General Fund	2020	2019
Assets				
Current assets				
Cash	-	4,317,329	4,317,329	3,905,314
Restricted cash	2,551,069	-	2,551,069	2,385,523
Accounts receivable	-	3,490,711	3,490,711	2,394,025
Government remittances recoverable	-	67,765	67,765	52,571
Inventories and supplies	-	56,930	56,930	39,650
Prepaid expenses	-	216,440	216,440	113,933
Sub-total	2,551,069	8,149,175	10,700,244	8,891,016
Long-term prepaid lease	-	214,969	214,969	220,908
Capital assets	-	69,042,107	69,042,107	70,754,029
Total	2,551,069	77,406,251	79,957,320	79,865,953
Liabilities and fund balances				
Current liabilities				
Accounts payable and accrued liabilities	-	1,690,756	1,690,756	2,030,237
Government remittances payable	-	62,698	62,698	118,355
Salaries and dues payable	-	2,453,214	2,453,214	2,258,009
Damage deposits	-	155,702	155,702	163,196
Deferred contributions	-	5,320,267	5,320,267	3,720,300
Current portion of long-term debt	-	6,492,138	6,492,138	1,250,496
Vehicle loans	-	109,664	109,664	-
Sub-total	-	16,284,439	16,284,439	9,540,593
Long-term debt	-	32,754,020	32,754,020	39,246,593
Replacement reserve	2,551,069	-	2,551,069	2,385,523
Deferred capital contributions	-	25,959,753	25,959,753	26,695,601
Sub-total	2,551,069	74,998,212	77,549,281	77,868,310
Net assets	-	2,408,039	2,408,039	1,997,643
Total	2,551,069	77,406,251	79,957,320	79,865,953

Overview

PHS administrative and managerial expenses comprised 10.3 per cent of total expenses for the 2019-2020 fiscal year, which is congruent to other non-profit organizations across the social services sector.

Information for this briefing was drawn directly from financial statements audited by the Chartered Professional Accountants of KPMG. However, this briefing summary itself has not been audited. The full package of audited financial statements is available by request via media@phs.ca.

The Board of Directors requested a truncated version of the audit report for the membership of the society.

CONSOLIDATED STATEMENT OF FINANCIAL POSITION ASSETS



NUTRITION: PATRICK CARR AND SERGIO PEREIRA OF 2 GUYS WITH KNIVES DELIVERING TO THE RAINIER HOTEL.

Donors step up to the plate with meal deliveries

A Vancouver food delivery company teamed up with PHS to provide healthy nutrition on the go.

Patrick Carr and Sergio Pereira of 2 Guys with Knives delivered fresh, balanced meals to residents at the PHS-operated all-female Rainier Hotel.

The spring/summer deliveries were made possible by a matching donation program, with 2 Guys customers invit-

ed to support community causes by donating a meal.

Karen, who has lived at the Rainier approximately eight years, said: “We feel a sense of joy that these ‘2 Guys’ are cooking for us. Their food is presented so well, and it’s so good and healthy.

“It speaks to my heart – it feels really good to know that people are bringing us this high-quality food.”

Give a gift today

Every gift we receive impacts the lives of those who are marginalized, vulnerable and in need within the communities we serve.

Financial donations support and improve housing, health-care, harm reduction and health promotion.

For information on how to make a tax-deductible gift, please contact us at **donations@phs.ca**.

“Together, we make our community a stronger, more resilient and healthier place.”

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PHS Community Services Society: housing, healthcare, harm reduction & health promotion