SCHEDULE 1 TO THE MINUTES OF THE GENERAL PURPOSES COMMITTEE MEETING OF MONDAY, MAY 5, 2008.

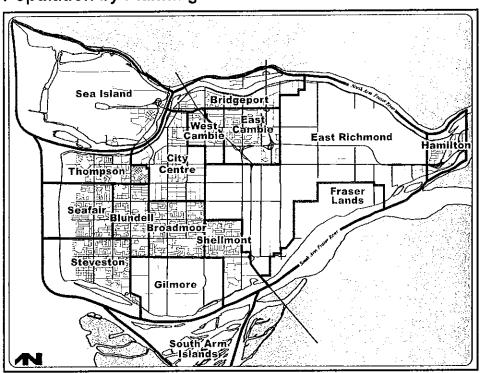
## Hamilton Delegation Address to MAYOR AND COUNCILLORS OF The City of Richmond

- 1. Hamilton continues to have one of the fastest growing populations by area. (Feb. 2008 City of Richmond Policy Planning Division)
- 2. (a) Childcare assessments have demonstrated the need for childcare in Hamilton and have made recommendations to increase spaces and expand services.
  - (2001-2006 Child Care Needs Assessment June 2002)
  - (b) Council has expressed past support for increasing child care spaces in the Hamilton area.
    - (PRCS Committee Meeting Minutes June 27, 2006)

#### **Our Questions for Council:**

- 1. What is the extent of the City's support for the Society of Richmond Children's Centres in the west Cambie area? Has this changed since the project was moved from the original location in Hamilton?
- 2. What is the City's plan to support child care in Hamilton? Would City consider providing **staff support** from appropriate departments (e.g. Social Planning Dept.) for Hamilton Community Association to prepare proposals and **financial support** to fund construction of facilities?
- 3. Can Council expedite the Feasibility Study so that we could address the need for facilities in Hamilton sooner and use portions to meet child care needs? (Note: We would ideally like to offer more programs to school aged children not requiring child care, but currently all our available space is used for child care.)
- 4. Would Council support interim options to address more immediate child care needs (e.g. Portables placed on City owned land)?
- 5. Would Council commit to an arrangement that will allow for any future considerations for the Old Firehall site be made to the benefit of the Hamilton community?

# Population by Planning Area



	Year-	end Popul	ation	X	Annual	Change	
Planning Area	2001	2005	2006	5-Year Average	Percent	Last Year	Percent
Blundell	19,000	19,300	19,400	100	0.4%	100	0.6%
Bridgeport	3,200	3,200	3,200	0	0.2%	0	-0.1%
Broadmoor	23,500	23,600	23,900	100	0.3%	300	1.2%
City Centre	32,700	38,400	40,500	1,600	4.8%	2,100	5.5%
East Cambie	10,800	10,900	11,000	0	0.3%	0	0.4%
East Richmond	3,200	3,200	3,200	0	0.0%	0	-0.6%
Fraser Lands	200	200	300	0	8.3%	100	41.5%
Gilmore	600	600	600	0	-0.1%	0	-1.5%
Hamilton	4,300	4,700	4,800	100	2.5%	100	2.9%
Sea Island	800	800	800	0	-0.1%	0	0.0%
Seafair	16,500	17,000	17,000	100	0.6%	′ 0	-0.1%
Shellmont	10,900	11,000	11,000	0	0.3%	0	-0.1%
Steveston	23,700	25,500	26,200	500	2.1%	700	2.8%
Thompson	15,900	16,500	16,600	100	0.9%	100	0.7%
West Cambie	6,400	6,900	6,900	100	1.6%	0	-0.6%
TOTAL, City of Richmond	171,600	181,900	185,400	2,800	1.6%	3,500	1.9%

Estimates prepared April 2007 by City of Richmond Policy Planning Division.

Values shown are rounded to nearest hundred. City total and absolute and percent change calculated from unrounded values.

## 2001 - 2006 Child Care Needs Assessment City of Richmond

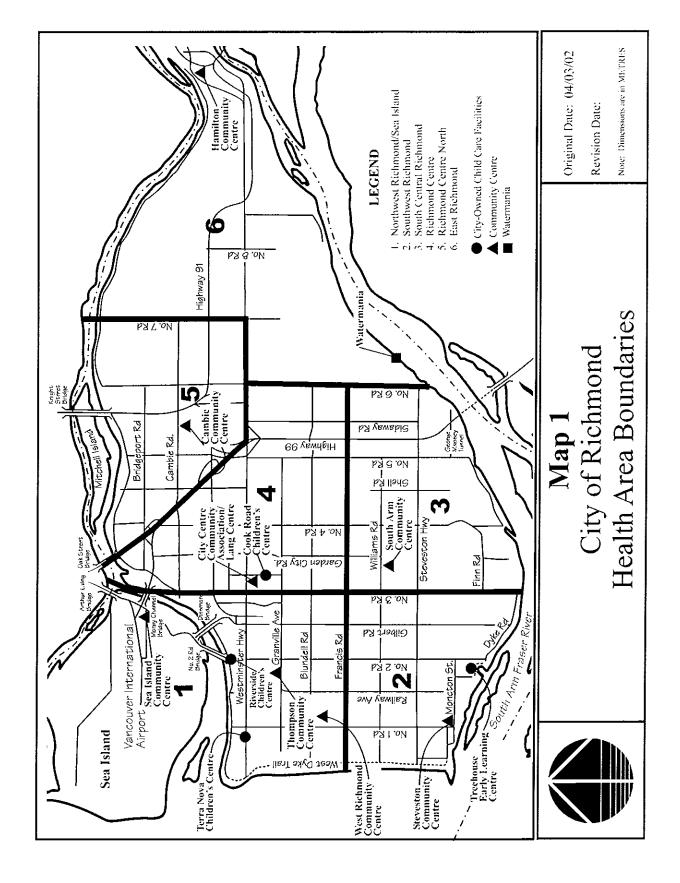
- Prepared By:

  City of Richmond

  The Needs Assessment Steering Committee of the Richmond Child Care Development Board

  Social Planning and Research Council of BC (SPARC)

June 2002



#### Health Area 6 – East Richmond

As in 1995, Health Area 6 has the lowest child care capacity relative to population in 2001. There was significant growth in the number of regulated child care spaces over the last six years, but the population of children under thirteen also increased dramatically over this period.

Growth in the population age zero to twelve is projected to slow between 2001 and 2006, although notable increases in the number of nine to twelve year olds and five year olds are expected, as is a significant drop in the number of three and four year olds.

More than half of Area 6 residents do not speak English as a first language.

TABLE E: 2001 – 2006 City-Wide and Health Area Summaries

ITEM	Health Area 1 Northwest Richmond / Sea Island	Health Area 2 Southwest Richmond	Health Area 3 South Central Richmond	Health Area 4 Richmond Centre	Health Area 5 Richmond Centre North	Health Area 6 East Richmond	Richmond Total
# of Regulated Spaces in 2001	867	781	521	589	266	88	3,112 <sup>1</sup>
2001 Child Care Spaces per 1000 Children under 13	106	147	162	124	111	89	739
2001 Population 0 – 12	8,147	5,318	3,219	4,737	2,407	994	24,822
Projected 2006 Population 0-12	8,519	4,862	2,969	5,128	2,336	1,022	24,836
% Change between 2001 and 2006	4.6%	-8.6%	-7.8%	8.3%	-2.9%	2.8%	.06%
Average Household Income (1995)	\$51,287	\$63,302	\$58,161	\$46,782	\$52,743	\$61,898	\$54,411
% of Families that are Low Income (1995)	23%	17%	17%	24%	25%	21%	23%
% of Families that are Lone-Parent (1996)	13%	12%	13%	12%	11%	9%	12%
% of Families that are ESL (1996)	47%	40%	43%	57%	63%	53%	48%

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<sup>&</sup>lt;sup>1</sup> This figure includes 820 preschool spaces, 104 childminding spaces and 25 special needs spaces not reported in Tables A or B.

Area, representing 33 percent of the population. The next largest minority-language group is Punjabi speakers, at 12 percent.

Map 7 reveals that a substantial amount of Richmond employment is concentrated throughout Area 5. Parents who prefer care arrangements near their place of employment may therefore raise the level of demand in this Area by seeking care for children who do not reside in the region.

# <u>Area 6 East Richmond (East of Number 7 Road North of Westminster Highway; East of Number 6 Road South of Westminster Highway)</u>

Area 6 experienced significant growth in the past six years in terms of both child care capacity and population. The Area gained 51 regulated child care spaces since 1995, a growth rate of 138 percent (see Table 10). However, Area 6 had the lowest service capacity relative to its population in 1995, and the number of children under thirteen rose much more dramatically in this region than elsewhere in Richmond – by 50 percent over six years. Thus, although the number of regulated spaces has doubled, child care capacity per 1000 children increased by only 59 percent, slightly less than in Area 2. Overall, Area 6 continues to have the fewest regulated spaces relative to its population (see Table 11).

TABLE 22. Health Area 6 Profile: Number of Children and Regulated Child Care Spaces (2001)

	# of Children in Health Area for whom service is age- appropriate	# of Spaces in Health Area	# of spaces in Health Area as % of Total Richmond Spaces	# of Children in Area as a % of Total Richmond Children	# of Age- Appropriate Spaces per 1000 Children
Childminding	994 children 0-12	0	0	4% of children under 13	0
Regulated Family	994 children 0-12	16	3	4% of children under 13	16
Group under 3	226 children under 3	12	13	5% of children under 3	53
Group 3 – 5	231 children 3-5	25	4	4% of children 3-5	108
Preschool	162 children 3-4	15	2	4% of children 3-4	93
Out-of-School	537 children 6-12	20	2	4% of children 6-12	37
Total Capacity (less child- minding)	994 children 0-12	88	3	4% of children under 13	89

The 50 percent rate of population growth among children zero to twelve in Area 6 since 1995 is projected to slow considerably in the next five years to a rate of 2.8 percent. In 2006, it is anticipated that Area 6 will continue to be home to roughly 4 percent of Richmond children under thirteen.

TABLE 23. Health Area 6: Projected Population by Age Group and % Change (2001-2006)

Age Group	2001 Population	2006 Population	Difference	% Change
0 to 2	226	223	-3	-1.3
3 to 4	162	148	-14	-8.6
5	69	75	6	8.7
6 to 8	240	244	4	1.7
9 to 12	297	332	35	11.8
0-12	994	1 022	28	2.8

The most significant demographic shift in Area 6 is expected among children age nine to twelve: the population of this group is projected to increase by 12 percent between 2001 and 2006. At present, Area 6 has 2 percent of out-of-school spaces, and 4 percent of Richmond children age six to twelve. The number of five year olds is also expected to rise by 9 percent in the next five years (although this rate of growth reflects the addition of just six more children in the age category). The number of three and four year olds will also drop notably by 9 percent.

1996 Census data indicate that English is not the first language of more than half (53 percent) of Area 6 residents (See Table 50). A Chinese language is the mother tongue of 31 percent of those living in the Area, while Punjabi is the first language of 8 percent of individuals.

#### IV. Summary: Demand 'Pressure Points' by Health Area

TABLE 24. Age-Appropriate Regulated Child Care Spaces per 1000 Children by Health Area (2001)

	Area 1 Northwest Richmond / Sea Island	Area 2 Southwest Richmond	Area 3 South Central Richmond	Area 4 Richmond Centre	Area 5 Richmond Centre North	Area 6 East Richmond
Regulated Family	18	26	36	11	18	16
Group Under 3	37	11	0	12	0	53
Group 3 – 5	94	83	77	184	107	108
Preschool	157	473	377	121	184	93
Out-of-School	57	72	94	91	74	37
Total Capacity	106	147	162	124	111	89

- As of 2001, Areas 1 and 6 have the lowest child care capacities per 1000 children.
- Areas 2 and 3 have the highest child care capacities per 1000 children in Richmond. These Areas are also projected to experience the most significant percentage decline in the number of children under thirteen over the next five years.

#### Location of New Spaces

Generally, any effort to expand service delivery in Richmond should prioritize Areas 1, 4, 5 and 6. These Health Areas already have significantly fewer spaces per 1000 children than Areas 2 and 3 south of Francis Road.

In addition, Areas 2 and 3 are expected to experience the most dramatic decline in children under thirteen over the next five years. Areas 1 and 4 are projected to experience the most dramatic growth. The bulk of Richmond employment is also located in Areas 1, 4 and 5, which likely heightens demand for child care in these Areas as parents seek care arrangements near their places of work.

Although Area 6 is only expected to experience a moderate increase in the number of children under thirteen, it remains the least serviced Health Area in the City by a substantial margin.

#### Preschool (3-4)

In addition, child care planners should be cautious about allocating new funds to preschools *if* this decision limits funding available for other parts of the sector. The preschool capacity in Richmond far surpasses all other service types in the City. Preschool services in Areas 2 and 3 may be especially pressed to retain full enrolment levels given their particularly high service capacity and the declining population of three-to four-year-olds.

# II. Strategies to Address High Priority Service Gaps, Parent and Provider Barriers

#### Making Child Care More Affordable for Parents and Providers

Taxation and other jurisdictional issues mean that the provincial and federal governments are best positioned to address issues of affordability by subsidizing child care fees and/or operating expenses. Nonetheless, municipalities and other stakeholders can pursue a number of strategies to enhance affordability for parents and foster economic viability for services.

### Possibilities for Municipal Support

The provision of facilities at reduced rent is one important option available to subsidize child care for parents and providers. At present, the City collects only nominal rent from operators of the four City-owned child care facilities, and provides maintenance support when required.

Focus group participants encourage the City to explore opportunities to make additional space available to child care providers at reduced cost, including by institutionalizing annual City contributions (e.g. grants) to the City's Child Care Development Fund from Casino funds or other areas of the City Council budget. This recommendation is consistent with City Council's child care implementation strategy which endorses the establishment of "a grants policy on financial support for child care operations.

their own homes for children on a temporary, more flexible basis. It was suggested that such a data base could help some parents seeking care during non-standard hours, weekends, or at the last-minute.

Monitoring Innovations in Other Jurisdictions

In addition, the City Council and Child Care Development Board should monitor the findings of:

- pilot projects in Quebec that are designed to explore child care arrangements which are better suited to the non-traditional evening, weekend or night-time child care needs of certain parents; and
- the City of North Vancouver initiative to subsidize and lease a City-owned home to a Family child care provider on the condition that she operate extended and flexible hours of care (including during evenings and on weekends).

#### Making Child Care Arrangements Available Where Needed

The City Council has the potential to play a substantial role in enhancing the availability of child care services at locations that are convenient for parents. In particular, the City Council may wish to revisit how the construction of child care amenities factors into its development approval process. At present, the City relies primarily on site-specific developments for acquiring new child care facilities. The number of spaces to be provided is generally based on the overall size of the development project.

Although negotiation of on-site child care spaces with individual developers in the mid-1990s contributed importantly to expanding Richmond's child care sector, the 1995 Needs Assessment (p. 68) reported that:

there are long-term limitations to this as an exclusive approach for a municipality like Richmond. Development may not occur in locations that are most appropriate or accessible for child care purposes. Further, the number of spaces generated by each development may not be sufficient to create a financially viable facility that can provide a continuum of care.

Community stakeholders suggest that the latter concern has grown more problematic in the past two years as the number of applications for large scale developments in Richmond have declined.

### Making City-Owned Facilities Available

The City has made some City-owned facilities available for child care (e.g., four purpose-built child care centres and some of its community centres) (See Table 56 and Map 1). As mentioned in the 1995 Richmond Child Care Needs Assessment and throughout this report, the City should continue to explore ways to make child care efficiently available through its facilities.

TABLE 56. Overview Child Care Provided From City-Owned Facilities

		1	
	City-Owned racinities	lype of Child Care Provided	# of Spaces
i			
<u>2</u>	City- Owned Child Care Facilities		
_	Riverside Children's Centre	Group (3 – 5 years old)	25
ļ	5862 Dover Crescent	Preschool (3 – 5 years old)	1
7	Terra Nova Children's Centre	Group (3 – 5 years old)	25
	6011 Blanchard Drive	Kindercare (5 – 6 years old)	
က	Treehouse Early Learning Centre	Supported Child Care (3 – 5 years old) Group (3 – 5 years old)	25
		Preschool (3 – 5 years old)	
4	Cook Road Children's Centre 8300 Cook Road	Group (3 – 5 years old)	25
Son	Community Centres		
,		1Non-Licensed Preschool – on site	18 max
<i>-</i> -	Cambie	2 Licensed Preschool – 1 on site 1 off site	38 max combine
			SO ITIBX
2	City Centre		
		1 Non-Licensed Preschool – on site	3 Classes 20 max each
ო <u>.</u>	Hamilton	1 Licensed Kinder Care – on site	40 max Out-of-School & Kinder Care
		1 Licensed Out of School Care – on site	combined
4	Sea Island	1 Licensed Preschool – on site	20 max
ı	;	2 Licensed Preschool – 1 on site 1 off site	210 max combined
റ്	South Arm	1 Licensed Kinder Care – off site 1 Licensed Out of School Care – off site	14 max 105 max
			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
6	Steveston	4 Licensed Preschool – on site	19 Classes 270 max
7.	Thompson	1 Licensed Preschool – on site	20 max
		2 Non-Licensed Preschool – on site	14 max each class
			rium.
0	Mort Dichmond	1 Licensed Preschool – on site	3 Classes 20 max each
o i		I Licensed Ninder Care – on site 1 Licensed Out of School Care – off site	50 max 63 max
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#### III. Summary of Recommendations to Key Community Stakeholders

#### (1) Action for Stakeholders

The 2001 – 2006 Needs Assessment identifies the following recommendations for the City and community partners:

#### City of Richmond

- Prioritize development of child care spaces for school-age children across the City, particularly for nine- to twelve-year olds. School-age care represents by far the most significant service gap in Richmond, followed by less significant shortages of Kindercare and Infant/Toddler spaces (see spaces below).
- Work with partners to meet the identified:
  - types of needed child care, and
  - the number of needed child care spaces.
- Consider re-employing a full-time municipal Child Care Coordinator. The City's capacity to meet its citizens' child care needs is impeded significantly in the absence of someone who assumes responsibility for child care planning that effectively coordinates the efforts and resources of community partners.
- Take the lead in organizing and institutionalizing regular child care planning sessions that bring together relevant community stakeholders.
- Prioritize making City-owned facilities (e.g., purpose built child care centres, community centres) available:
  - for child care.
  - at favourable rates.
- Explore with the community associations a more co-ordinated approach to the delivery of child care in community centres.
- Consider a policy to make regular annual City contributions to the City's Child Care Development Fund (e.g., from casino dollars and/or other City budget accounts).
- Revisit how the need for the construction of child care spaces factors into new development proposals.
- Consider adopting a developer 'Payment-in-Lieu' of providing child care space construction policy for new development.
- Explore with the School Board the benefits and challenges of implementing a capital program to purchase and locate purpose-designed, pre-fabricated modular child care units on school grounds.
- Explore the possibility of in-kind transportation subsidies (e.g., using City vehicles to transport families to child care programs).
- Request that the Province protect and enhance its funding for supported child care and work to enhance provincial funding for SCC in coming years.
- Explore the possibility of accessing federal early childhood development funds directly.