Reaching Home: Canada's Homelessness Strategy Community Homelessness Report

Calgary 2023-2024

TEMPLATE FOR COMMUNITIES

SECTION 1: COMMUNITY CONTEXT

Overview

1.1 a) Highlight any efforts and/or issues related to the work that your community has done to **prevent and/or reduce homelessness** and **improve access to safe, appropriate housing** over the last year.

Your response could include information about:

· Homelessness prevention and shelter diversion efforts;

- Housing move-ins;
- · New investments in housing-related resources;
- · Gaps in services;
- · Collaboration with other sectors; and/or,
- · Efforts to address homelessness for specific groups (e.g., youth).

In the fiscal year 2024, our supportive housing programs continued to assist a significant number of individuals and households, with an average of 1,815 people housed each day, compared to 1,783 in the previous fiscal year (FY23). Despite this ongoing support, the demand for assistance has grown. For example, our Coordinated Access and Assessment Triage list, which helps align program match, has increased from 1,532 individuals at the beginning of FY23 to 2,184 individuals currently. Notably, this growth is primarily driven by a 57% increase in families and a 44% increase in single adults seeking assistance. Additionally, there has been a rise in the number of individuals or households on the triage list who frequently sleep outdoors, increasing from 593 to 756 over the same period.

A concerning trend in what we have seen is the significant increase in refugee claimants using adult emergency shelters. From the first quarter of FY23 to the most recent full quarter (Q3 FY24), there has been a more than tenfold increase in the number of refugee claimants seeking shelter.

b) What **impact** did these efforts and/or issues have on your community-level outcomes over the last year (as reported in Section 4, if applicable)? This impact may or may not be directly related to the efforts and/or issues identified in 1.1(a). Please enter "N/A" if the impact is not known at this time.

Vacancy Rates

In 2023, the average rent prices in Calgary spiked by 17.2% compared to the previous year, marking one of the highest increases ever recorded. This rapid increase is likely to push more people into seeking assistance from homeless services if it continues. Despite a rise in the number of new rental housing constructions over the past three years, the rental market remains tight due to ongoing population growth. It's anticipated that housing creation will need to escalate further before any easing in the rental market can be seen.

Calgary's rental market vacancy rate dropped to 1.4% in 2023, the lowest it's been in the past decade. This marks the third consecutive year of decreasing vacancy rates. This tightening rental market trend aligns with feedback received by CHF from partner agencies. In terms of unit types, bachelor apartments had the lowest vacancy rates at 0.70%, followed by units with three or more bedrooms at 1.00%. These low vacancy rates are posing challenges for housing programs, especially considering the increased demand reported by CHF for families (a 57% increase) and adult singles (a 44% increase).

1.2

How has the community's approach to addressing homelessness changed over the last few years?

Communities are strongly encouraged to use the "*Reflecting on the Changing Response to Homelessness*" worksheet to help them reflect on how the approach has changed and the impact of these changes at the local level.

The most significant change we've observed relates to the critical shortage of affordable housing in Calgary. This shortage, compounded by increasing economic pressures, has led to a level of homelessness previously unseen in the city. Consequently, we've had to reassess our funding approach to redirect resources towards addressing the growing complexity of the issue and addressing staffing shortages and wage disparities in our sector.

As of December 21, 2023, only 1,269 spots in affordable housing have been filled, resulting in a housing occupancy rate of 73%. Our target is to maintain a 90% occupancy rate, which would mean having 1,564 individuals housed at any given time during a quarter.

To reach this target, the Calgary Homeless Foundation (CHF) needs to reduce the number of scattered site spots by 177, making 1,560 spots available. Currently, there are 1,269 spots occupied in scattered site housing.

Conabolation between magenous and Non-magenous Fatthers				
1.3	Please select your c	ommunity from the drop-down menu:	Calgary (AB)	
	Has IH funding available. Your community: The DC CE and IH CE are distinct organizations. The DC CAB and IH CAB are distinct groups.			
		The IH CE is Stoney Nakoda - Tsuut'ina Tribal Cou	ncil (G4).	
1.4 a) Specific to Coordinated Access, the HMIS and the Outcomes-Based Approach, has there been ongoing, meaningful collaboration between the DC CE and the IH CE and IH CAB, as well as local Indigenous organizat including those that sit on your CAB, over the reporting period?		, 0 0,		
	As a reminder, meaningful collaboration with the IH CE and IH CAB, as well as local Indigenous organizations is			

Collaboration between Indigenous and Non-Indigenous Partne

As a reminder, meaningful collaboration with the IH CE and IH CAB, as well as local Indigenous organizations is expected for your community.

→ Coordinated Access:	Not yet
→ HMIS:	Yes
→ Outcomes-Based Approach:	Not yet

Reminder!

See the CHR Reference Guide (pg.10) on the <u>CHR Reporting Tools e-course</u> for the definition of meaningful collaboration used in the CHR. b) In your response to 1.4(a) you noted that collaboration has occurred with Indigenous partners related to at least one of the following: Coordinated Access, the HMIS and/or the Outcomes-Based Approach. As a follow up to this, please indicate if any of the following activities took place:

• Indigenous partners have roles and responsibilities related to governance for the Coordinated Access system and/or the HMIS throughout the lifecycle of these systems (implementation, maintenance and improvement).

	→ Coordinated Access:	No
	→ HMIS:	No
•	The perspectives of Indigenous partners are integrated into the work of the HMIS and the Outcomes-Based Approach.	f the Coordinated Access system, use o
	→ Coordinated Access:	No
	→ HMIS:	No

→ Outcomes-Based Approach:	Yes
s participate in Coordinated Access, use the HMIS	and/or participate in the Outcomes-

 Indigenous partners Based Approach. -

→ Coordinated Access:	No
→ HMIS:	Yes
→ Outcomes-Based Approach:	Yes

of

Note: As applicable, these activities should be described in further detail in 1.4(c). This list is not meant to be exhaustive. Other relevant activities not listed above should be described in 1.4(c).

c) In your response to 1.4(a) you noted that collaboration has occurred with Indigenous partners. As a follow up to this, please describe the collaboration that took place in more detail. Your response must include the following elements:

When it occurred (e.g. "in February 2024" or "on an ongoing basis since 2022");
Who it was with (e.g. "the IH CE", "organization A");

• What aspects of Coordinated Access, the HMIS and/or the Outcomes-Based Approach were discussed; and, · How Indigenous perspectives influenced the outcome.

From an outcomes perspective, Miskanawah, our partners, have been at the forefront of promoting cultural evaluation and measurement capacity building. According to Miskanawah, while settler governments and systems are beginning to introspect and consider changes internally, there's an opportunity for Indigenous people, communities, and organizations to offer tangible examples of how colonial processes could be redefined through more progressive and relevant approaches for the individuals they serve. The Oral Truth Ceremony has become integral to our collaboration with Miskanawah, and its impact extends to shaping our internal evaluation practices, such as how we frame evaluation narratives.

Since April 1st 2023 we have begun to better understand and incorporate cultural evaluation.

HMIS

Progress on providing G4 STONEY NAKODA - TSUUT'INA TRIBAL COUNCIL (G4) access to our HMIS data has been gradual. We prioritized establishing appropriate governance to safeguard all information before granting

d) In your response to 1.4(a) you noted that collaboration did **not** occur with Indigenous partners. As a follow up to this, please describe why collaboration did not take place in more detail and how collaboration will happen over the coming year. Your response must include the following elements:

- Related to the past year (2023-24), why meaningful collaboration with Indigenous partners did not take place.
- Related to the coming year (2024-25):
- o When it will occur (e.g. "Over the coming year", "in Summer 2024");
- o Who it will be with (e.g. "the IH CE", "organization A"); and,
- o What aspects of Coordinated Access, the HMIS and/or the Outcomes-Based Approach will be discussed.

	We've consistently extended collaboration opportunities to the Indigenous Cl staff member attends meetings at the Aboriginal Standing Committee on Ho	
	Additionally, the Indigenous CE's executive leadership has been invited to co Service Questionnaire (NSQ) triage tool and participate as a member of the extended an invitation for an executive steering committee position on our C Additionally, we've offered them data and analytics dashboards to support th reached out to understand if brainstorming or funding strategy work would be	Community Advisory Board. We've also oordinated Extreme Weather Response eir data collection efforts. Lastly, we hav
	While not every offer has resulted in clear collaboration, we remain hopeful the beneficial ways when the time arises. Nevertheless, we maintain strong relate any approximation and olders in the city pooking their guidance on toth and pooking their guidance on tothe pooking their guidance on toth	ionships with Indigenous-led
1.5	a) Specific to the completion of this Community Homelessness Report (CHR), did ongoing, meaningful collaboration take place with the IH CE and IH CAB, as well as local Indigenous organizations, including those that sit on your CAB?	Yes
	As a reminder, meaningful collaboration on the CHR with the IH CE and IH CAB, as well as local Indigenous organizations is expected for your community.	
	b) In your response to 1.5(a) you noted that collaboration occurred with Indig please indicate which of the following activities took place:	enous partners. As a follow up to this,

•	Engagement with Indigenous partners took place in the early stages of CHR development, to determine how collaboration should be undertaken for the CHR.	Yes
•	Collaboration with Indigenous partners took place when developing and finalizing the CHR.	Yes
•	Indigenous partners reviewed and approved the final CHR.	Yes
	: As applicable, these activities should be described in further detail in ustive. Other relevant activities not listed here should be described in 1	
pleas • H • V • V	your response to 1.5(a) you noted that collaboration occurred with Indig se describe the collaboration that took place in more detail. Your respon ow were Indigenous peoples engaged in these discussions; /hen did the collaboration occur; /ho it was with (e.g. "the IH CE", "organization A"); and, /hat sections of the CHR were informed by Indigenous input and/or per-	se must include the following elements
Repo Indig gaine	e offered the Indigenous CAB and CE the chance to review and offer in ort (CHR),of which a copy of the CHR was provided on May 13th. We ha neous CAB an invitation to discuss/ strategize the community plan as it ad in this endeavour, however, we will continue to ask. It's worth noting adigenous CE executive team is on the CAD-D.	ave also offered the Indigenous CE and is created. No commitment has been
L		
	d the IH CAB sign-off on this CHR?	No nent will take place with the IH CAB
b) Ex durir • R • R • R	d the IH CAB sign-off on this CHR? plain why IH CAB sign-off was not obtained and describe how engagen g next year's CHR process in more detail. Your response must include elated to the 2023-24 CHR process, why IH CAB sign-off was not obtain elated to next year's CHR process (2024-25): When the IH CAB will be engaged; and, How they will be engaged.	I nent will take place with the IH CAB the following elements:
b) Ex durir • R • R o	plain why IH CAB sign-off was not obtained and describe how engagen g next year's CHR process in more detail. Your response must include elated to the 2023-24 CHR process, why IH CAB sign-off was not obtain elated to next year's CHR process (2024-25): When the IH CAB will be engaged; and,	I nent will take place with the IH CAB the following elements:
b) Ex durir • R • R o	cplain why IH CAB sign-off was not obtained and describe how engagen g next year's CHR process in more detail. Your response must include elated to the 2023-24 CHR process, why IH CAB sign-off was not obtain elated to next year's CHR process (2024-25): When the IH CAB will be engaged; and, How they will be engaged. On May 29, 2024, the CHF received feedback from the IH-	I nent will take place with the IH CAB the following elements:
b) Ex durir • R • R • R	cplain why IH CAB sign-off was not obtained and describe how engagen g next year's CHR process in more detail. Your response must include elated to the 2023-24 CHR process, why IH CAB sign-off was not obtain elated to next year's CHR process (2024-25): When the IH CAB will be engaged; and, How they will be engaged. On May 29, 2024, the CHF received feedback from the IH-	I nent will take place with the IH CAB the following elements:
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b) Ex durir • R • R • R	cplain why IH CAB sign-off was not obtained and describe how engagen g next year's CHR process in more detail. Your response must include elated to the 2023-24 CHR process, why IH CAB sign-off was not obtain elated to next year's CHR process (2024-25): When the IH CAB will be engaged; and, How they will be engaged. On May 29, 2024, the CHF received feedback from the IH-	I nent will take place with the IH CAB the following elements:

Calgary Homeless Foundation Website

End of Section 1

SECTION 2: COORDINATED ACCESS AND HOMELESSNESS MANAGEMENT INFORMATION SYSTEM (HMIS) SELF-ASSESSMENT

Governance and Partnerships			
 a) Is there a governance structure for the Coordinated Access system and the HMIS? 	Yes		
 b) Is there a representative governance structure in place? Membership should include people that represent the following: Population groups the Coordinated Access system intends to serve; Types of service providers that help prevent homelessness and those that help people transition from homelessness to stable, appropriate housing; Indigenous partners (more than a single representative, wherever possible); People with lived experience of homelessness; and, Provincial/territorial and municipal governments. 	Yes		
 c) Is an integrated governance structure in place, where various homeless-serving sector roles and groups are aligned in support of the community's overall goals to prevent and reduce homelessness? These roles and groups should include: Community Entity; Community Advisory Board; Coordinated Access Lead and HMIS Lead roles; Provincial/territorial and/or municipal designations relative to managing homelessness funding, as applicable; Local groups with a mandate to prevent and/or reduce homelessness, as applicable; and, Local Indigenous partners, including Indigenous service delivery organizations, as applicable. 	Yes		
d) Is there a document that describes how the various homeless-serving sector roles and groups are integrated and aligned in support of the community's overall goals to prevent and reduce homelessness and, if requested, can this documentation be made publicly available?	Yes		
e) Have Terms of Reference for the governance structure been documented and, if requested, can they be made publicly available?	Yes		
2.2 a) Has a Coordinated Access Lead organization and an HMIS Lead organization been identified?	Yes		
The following questions are new for this year and ask about the roles and responsibilities for the Coordinated Access Lead and HMIS Lead, as well as related documentation. These questions are not used to assess progress with meeting minimum requirements for the 2019-2024 funding cycle.			
 b) Do the Coordinated Access Lead and HMIS Lead collaborate to: Improve service coordination and data management; and, Increase the quality and use of data to prevent and reduce homelessness? 	Yes		
c) Have Coordinated Access Lead and HMIS Lead roles and responsibilities been documented and, if requested, can this documentation be made publicly available?	Yes		
 a) Do all service providers receiving funding through the Designated Communities (DC) or Territorial Homelessness (TH) stream participate in the Coordinated Acces system? 	s Yes		

	The following questions are new for this year and ask if broad participation in the Coordinated Access system is being encouraged. These questions are not used to assess progress with meeting minimum requirements for the 2019-2024 funding cycle.			
	b) Over the last year, was participation in the Coordinated Access system encouraged from providers that serve people experiencing or at-risk of homelessness, and do not receive Reaching Home funding? They may or may not have agreed to participate at this time.	Yes		
	c) Over the last year, was participation encouraged from providers that could fill vacancies through the Coordinated Access system (e.g., they have housing units, subsidies and/or supports that could be accessed by people experiencing homelessness), and do not receive Reaching Home funding? They may or may not have agreed to participate at this time.	Yes		
	Homelessness Management Information System (HMIS)		
2.4	a) Does your community have an HMIS to manage individual-level client data (i.e., person-specific data) and service provider information for Coordinated Access and the Outcomes-Based Approach?	Yes		
	b) In your community, is the Homeless Individuals and Families Information System (HIFIS) the HMIS that is being used?	No		
	c) Which HMIS is being used?			
	Wellsky Service Point			
	d) When was it implemented?			
	5/11/2010			
	The following questions are new for this year and ask about active use of the HMIS, as well as processes for ensuring that Indigenous partners can access the HMIS data and/or reports they need to help the people they serve. These questions are not used to assess progress with meeting minimum requirements for the 2019-2024 funding cycle.			
	e) In your community, are all Reaching Home-funded service providers actively using the same HMIS to manage individual-level client data (i.e., person-specific data) and service provider information for Coordinated Access and the Outcomes- Based Approach? This includes using the HMIS to generate data for the Unique Identifier List and outcome reporting.	Yes		
	f) Over the last year, were other non-Reaching Home-funded providers that serve people experiencing or at-risk of homelessness in the community encouraged to actively use the HMIS? They may or may not have agreed to do so at this time.	Yes		
	g) Are processes in place that ensure there are no unnecessary barriers preventing Indigenous partners from accessing the HMIS data and/or reports they need to help the people they serve?	Yes		
2.5	Has your community signed a Data Provision Agreement with the Department?			
	Reminder: The Data Provision Agreement is an agreement between the Community Entity and the Department that outlines the roles and responsibilities between both parties, as well as authorizes the Department's collection of certain non-directly identifiable data fields.	Not yet started		

2.6	Do you have a set of local agreements to manage privacy, data sharing and client consent related to your HMIS that comply with municipal, provincial/territorial and federal laws? This includes: • A Community Data Sharing Agreement; and, • A Client Consent Form.	Yes	
2.7	Have you established safeguards to ensure the data collected in your HMIS is secured from unauthorized access?	Yes	
	Access Points to Service		
2.8	a) Are access points available in some form throughout the geographic area covered by the DC or TH funded region, so that people can be served regardless of where they are in the community?	Yes	
	The following question is new for this year and asks about documentation for access points. It is not used to assess progress with meeting minimum requirements for the 2019-2024 funding cycle.		
	b) Have access points been documented and is this information publicly available?	Yes	
2.9	a) Are there processes in place to monitor if there is easy and equitable access to the Coordinated Access system and to respond to any issues that emerge, as appropriate?	Yes	
	The following question is new for this year and asks if the processes used to monitor and respond to access issues are documented and can be made available. It is not used to assess progress with meeting minimum requirements for the 2019-2024 funding cycle.		
	b) Have these processes been documented and, if requested, can this documentation be made available?	Yes	
2.10	Are there processes in place that ensure no one is denied access to service due to perceived housing or service barriers?	Yes	
	Triage and Assessment		
2.11	a) Is the triage and assessment process documented in one or more policies/protocols?	Yes	
	The following question is new for this year and asks if specific elements of triage and assessment are covered in the documentation. It is not used to assess progress with meeting minimum requirements for the 2019-2024 funding cycle.		
	b) Does your documented triage and assessment process address the following:		
	→ Consents?	Yes	
	→ Intakes?	Yes	
	 → Initial triage? → More in-depth assessment? 	Yes	
	$\rightarrow \text{ Community referrals?}$	Yes	
	→ Housing plans?	Yes	
	→ Using a person-centred approach?	Yes	
2.12	The following question is not new for this year, but was revised to provide furthe	er flexibility.	
	a) Is a common, unified triage and assessment process being applied across all population groups in the community?	Yes	
	The following question is new for this year and asks for more information from commusing more than one triage and/or assessment tool. This question is not used to as with meeting minimum requirements for the 2019-2024 funding cycle	sess progress	

	 b) If more than one triage and/or assessment tool is being used, is there a protocol in place that describes: 		
	→ When each tool should be used (e.g., tools used only for youth verses those that can be used with more than one population group)	Not applicable – Only use one tool	
	→ When a person/family could be asked to complete more than one tool (e.g., if an individual becomes part of a family or a youth becomes an adult).	Not applicable – Only use one tool	
	→ How the matching process will be managed in situations where more than one person/family is eligible for the same vacancy and, because data to inform prioritization was collected using different tools, results are not the same (e.g., one tool gives a higher score for depth of need than the other).	Not applicable – Only use one tool	
	Resource Inventory		
2.13	Are all housing-related resources funded through the DC or TH stream included in the Resource Inventory?	Yes	
2.14	For each housing-related resource in the Resource Inventory, have eligibility requirements been documented?	Yes	
2.15	For each housing-related resource in the Resource Inventory, have prioritization criteria, and the order in which they will be applied, been documented? At minimum, depth of need (i.e., acuity) must be included as a factor in prioritization.	Yes	
	Vacancy Matching and Referral with Prioritization		
2.16	a) Is the vacancy matching and referral process documented in one or more policies/protocols?	Yes	
	The following question is new for this year and asks about your vacancy and matching process. It is not used to assess progress with meeting minimum requirements for the 2019-2024 funding cycle.		
	b) Does your documented vacancy matching and referral process address the follow		
	→ Roles and responsibilities?	Yes	
	$\rightarrow \text{Prioritization?}$	Yes	
	→ Referrals?	Yes	
	→ Offers? → Challenges?	Yes	
	→ Resource Inventory management?	Yes	
2.17	Do the vacancy matching and referral policies/protocols specify how individual choice in housing options will be respected (allowing individuals and families to reject a referral without repercussions) and do they include processes specific to dealing with vacancy referral challenges, concerns and/or disagreements (including	Yes	
	refusals of referrals)?		
2.18	refusals of referrals)? a) Are vacancies from the Resource Inventory filled using a Priority List, following the vacancy matching and referral process?	Yes	
2.18	a) Are vacancies from the Resource Inventory filled using a Priority List, following	is generated.	
2.18	a) Are vacancies from the Resource Inventory filled using a Priority List, following the vacancy matching and referral process? The following questions are new for this year and ask about how the Priority List of the	is generated.	

System Map			
The following questions are new for this year and ask about the community's system ma assess progress with meeting minimum requirements for the 2019-20			
2.19 a) Does your community have a current system map? A system map identifies ar describes the service providers that participate in the Coordinated Access system			
b) Does your system map include the following elements:			
\rightarrow Name of the organization and/or service provider?	Yes		
→ Type of service provider (e.g., emergency shelter, supportive housing)?	Yes		
→ Funding source(s)?	Yes		
→ Eligibility for service (e.g., youth)?	Yes		
\rightarrow Capacity to serve (e.g., number of units)?	Yes		
→ Role in the Coordinated Access system (e.g., access point)?	Yes		
→ Role with maintaining quality data used for a Unique Identifier List (e.g., keep data up-to-date for housing history)?	st Yes		
\rightarrow If the service provider currently uses the HMIS?	Yes		
c) Can the system map be made publicly available, if requested?	Yes		
d) Over the last year, has your community used its system map to guide efforts to			
→ Improve the Coordinated Access system (e.g., identify opportunities to increase participation)?	Yes		
→ Improve use of the HMIS (e.g., identify opportunities to onboard new service providers)?	Yes		
→ Improve data quality (e.g., increase data comprehensiveness)?	Yes		
Service Navigation and Case Conferencing			
	The following questions are new for this year and ask about service navigation and case conferencing. These questions are not used to assess progress with meeting minimum requirements for the 2019-2024 funding cycle.		
a) Are there processes in place to ensure that people experiencing homelessness through the Coordinated Access process (referred to as service navigation and/or			
These processes should include expectations for the following:			
→ Helping people to identify and overcome barriers to accessing appropriate services and/or housing-related resources.	Yes		
→ Keeping people's information up-to-date in the HMIS (e.g., interaction with the system, housing history, as well as data used to inform eligibility and prioritization for housing-related resource			
b) Have service navigation and case conferencing processes been documented and, if requested, can this documentation be made publicly available?	Yes		
Section 2 Summary Tables			
The table below provides a summary of the work your community has done so far to meet the Reaching Home minimum requirements for Coordinated Access and an HMIS			

	Completed		Not Yet Started
Total	17	0	1

The table below shows the percentage of minimum requirements completed for each core component.

	Governance and Partnerships	HMIS	Access Points to Service	Triage and Assessment	Resource Inventory	Vacancy Matching and Referral with Prioritization
Percentage Completed	100%	75%	100%	100%	100%	100%

Section 2 Summary Comment
2.21 Highlight efforts and/or issues related to the work your community has done over the last year related to the Reaching Home minimum requirements for Coordinated Access and an HMIS.
Your response should include:
 An update about your community's efforts to implement, maintain and/or improve the Coordinated Access system and the HMIS; INFORMATION ADOUT CHANGES MADE TO THE COORDINATED ACCESS SYSTEM AND/OF HIVES RELATED TO ONE OF more minimum requirements that were identified as "completed" in a previous CHR, if applicable; and
iflidrmation about now people with lived experience of nomelessness were engaged or will be engaged in one or more aspects of the Coordinated Access system or HMIS (e.g., taking on a governance role)
Your Summary Comment is an opportunity to provide additional context about your Section 2 Summary Tables results.
Our Coordinated Access & Assessment NSQ tool has been in place since 2018. Since then there have been technology improvements in the process. In the past year we have begun to explore the next evolution of Coordinated Access & Assessment. This is from both the tool perspective, the current frameworks in place, as well as technology automations towards data quality.
End of Section 2

SECTION 3: OUTCOMES-BASED APPROACH SELF-ASSESSMENT

Part	A) Having person-specific data for homelessness that is real-time and comprehensive an progress against targets for outcomes	d being able to track			
	Step 1. Maintain person-specific data for homelessness				
3.1	a) Is person-specific data managed in a single database in your community (e.g., HIFIS)?	Yes			
	b) What is the database used to manage person-specific data?	Other HMIS			
3.2	Does the dataset include people who are currently experiencing homelessness?	Yes			
3.3	Do people give their consent to be included in the dataset?	Yes			
3.4	Do people appear only once in the dataset?	Yes			
	Step 2. Maintain real-time data				
3.5	Is data about people experiencing homelessness updated monthly at minimum?	Yes			
	Step 3. Maintain comprehensive data				
3.6	a) Does the dataset include the following household types:				
	\rightarrow Single adults?	Yes			
	\rightarrow Unaccompanied youth?	Yes			
	→ Families?	Yes			
	b) Does the dataset include family members like dependents, or just the head of household?	All family members including dependents			
3.7	Does the dataset include everyone that identifies as Indigenous that has interacted with the system in some way?	Yes			
3.8	Are people added to the dataset as soon as they interact with the system?	Yes – people are added on the first day			
3.9	Does the dataset include everyone staying in emergency shelter, including:				
	→ Permanent emergency shelter?	Yes			
	→ Seasonal or temporary emergency shelter?	Yes			
	→ Hotels/motel stays paid for by a service provider?	Not yet started			
	→ Hostels?	Not yet started			
	→ Domestic violence shelters?	Not yet started			
3.10	Does the dataset include everyone being served through outreach at all locations (hotspots) where people are living unsheltered?	Yes			
3.11	Does the dataset include everyone experiencing hidden homelessness that has interacted with the system in some way?	Yes			
3.12	Does the dataset include everyone staying in transitional housing?	Yes			

3.13	Does the dataset includ address (e.g., jail or ho				Yes	
8.14	Under the Outcomes-B homelessness.	Under the Outcomes-Based Approach, data comprehensiveness refers to data that reflects community-level homelessness.				
	Compared to other sou it accurately reflect con					
	Communities are strong them reflect on the com			ommunity-Level Data"	worksheet to help	
	Our data is sourced fro funded and unfunded p comprehensive approa leverage this informatic Home initiatives.	rograms. Additionally, w ch allows us to ingest d	ata from external sourc	developed data wareho es as well as our own H	use. This IMIS data. We	
		ed on key demographic	and within our HMIS, we information provided by matching of records.			
	Another way we have a identify all interactions a allows us to analyze sy	an individual has within	our Homeless Serving	System of Care. This c		
.15	Consider your answers everyone currently exp the system in some wa	eriencing homelessnes			Yes	
		Step 4: Track outco	mes and progress aga	ainst targets		
.16	When did the dataset b	ecome real-time and c	omprehensive?			
	Note: If you do not kno	w the exact day. select	the first day of the mon	th.		
	,		Year:		2018	
		\rightarrow	Month:		04	
		\rightarrow	Day:		01	
	Date the dataset became real-time and comprehensive: 4/1/2018					
	Has ye	our data been in place	long enough to repo	t on monthly outcome	es for:	
	March 2020	March 2021	March 2022	March 2023	March 2024	
	Yes	Yes	Yes	Yes	Yes	
	Has your data been in place long enough to report on annual outcomes for:					
	2019-20	2020-21	2021-22	2022-23	2023-24	
	Yes	Yes	Yes	Yes	Yes	
.17	Can <u>monthly data</u> be g	enerated for the follow	ing core outcomes:			
			-			
	a) Outcome #1: People	e who experienced hom	lelessness for at least o	one day (that month)	Yes	

	b) Outcome #2: People who were newly identified (that month)	Yes
	c) Outcome #3 : Returns to homelessness (that month)	Yes
	d) Outcome #4: Indigenous peoples who experienced homelessness for at least one day (that month)	Yes
	e) Outcome #5: People who experienced chronic homelessness for at least one day (that month)	Yes
3.18	Does your community have a target to report in Section 4 for the following monthly core out	comes:
	a) Outcome #1: People who experienced homelessness for at least one day (that month)	Yes
	b) Outcome #2: People who were newly identified (that month)	Yes
	c) Outcome #3 : Returns to homelessness (that month)	Yes
	d) Outcome #4: Indigenous peoples who experienced homelessness for at least one day (that month)	Yes
	e) Outcome #5: People who experienced chronic homelessness for at least one day (that month)	Yes
3.19	Can annual data be generated for the following core outcomes:	
	a) Outcome #1: People who experienced homelessness for at least one day (that year)	Yes
	b) Outcome #2: People who were newly identified (that year)	Yes
	c) Outcome #3 : Returns to homelessness (that year)	Yes
	d) Outcome #4: Indigenous peoples who experienced homelessness for at least one day (that year)	Yes
	e) Outcome #5: People who experienced chronic homelessness for at least one day (that year)	Yes
3.20	Does your community have a target to report in Section 4 for the following annual core outco	mes:
	a) Outcome #1: People who experienced homelessness for at least one day (that year)	Yes
	b) Outcome #2: People who were newly identified (that year)	Yes
	c) Outcome #3 : Returns to homelessness (that year)	Yes
	d) Outcome #4: Indigenous peoples who experienced homelessness for at least one day (that year)	Yes
	e) Outcome #5: People who experienced chronic homelessness for at least one day (that year)	Yes
	Part B) Additional information	
The	ese questions are not used to assess progress with meeting the requirement to transitio Based Approach within the 2019-2024 funding cycle.	n to an Outcomes-
	Interaction with the homeless-serving system data ("activity" and "inactivit	y")

3.21	Communities need data about people's interaction with the system to calculate inflows to hor outflows from homelessness. More specifically, person-specific data needs to track: • When people first interacted with the system (i.e., they were "newly identified"); and, • When people's interaction with the system changes (e.g., they become "inactive" or return	
	 a) Is there a written policy/protocol ("Inactivity Policy") that describes how interaction with the system is documented? The policy/protocol should: Define what it means to be "active" or "inactive"; Define what keeps someone "active" (e.g., data entry into specific fields in HIFIS); Specify the level of effort required by service providers to find people before they are made/confirmed as "inactive"; Explain how to document a person's first time as "active", as well as changes in "activity" or "inactivity" over time; and, Explain how to check for data quality (e.g., run a report that shows the clients that are about to become inactive and work with outreach workers to update their files and keep them active, as needed). 	Yes
	b) As outlined in the Inactivity Policy, how long do people stay "active" before their state changes to "inactive" in the database, if they have no further interaction with the system?	90 days
	c) Are processes in place to ensure that data about people's interaction with the system is as complete as possible?	Yes
	d) How complete is data about people's interaction with the system?	Complete
	Housing history data	
3.22	 Communities need data about where people are staying or living to calculate inflows to home from homelessness. More specifically, person-specific data needs to track: Where people were <i>before</i> they became homeless (e.g., people who were evicted from s and went to stay with a friend temporarily); and, Where people went <i>after</i> they exited homelessness (e.g., people who returned to a family) 	upportive housing
	 a) Is there a written policy/protocol that describes how housing history is documented (e.g., as part of a broader data entry guide for the HMIS)? The policy/protocol should: Define what it means to be "homeless" or "housed" (e.g., define a housing continuum that shows which housing types align with a status of "homeless" versus "housed"); Explain how to enter housing history consistently; and, Explain how to check for data quality (e.g., run a report that shows the percentage of clients that have complete housing history, so that "unknown" fields can be updated). 	Yes
	b) Are processes in place to ensure that data about housing history is as complete as possible?	Yes
	c) How complete is housing history data?	Complete

	Coordinated Access data				
3.23	a) Are processes in place to ensure that all relevant and necessary data for filling vacancies is complete? For example, is data used to determine if someone is eligible and can be prioritized for a vacancy complete for each person?	Yes			
	b) How complete is all relevant and necessary data for filling vacancies?	Complete			
	Demographic data				
3.24	a) Is the database used to track the following demographic data:				
	→ Indigenous identity (mandatory for Reaching Home)?	Yes			
	→ Age?	Yes			
	→ Household type (e.g., single or family)?	Yes			
	→ Gender identity?	Yes			
	\rightarrow Veteran status?	Yes			
	→ Other (please define)?	Yes			
	Please define other social demographics collected here:				
	We also collect data on self-reported citizenship demographics. This information has proven understanding the distinct trends among Canadian Citizens, Permanent Residents, Refugee groups.				
	b) How complete is data on Indigenous identity? For example, if someone is currently experiencing homelessness, is Indigenous identity always documented?	Complete			
	Timely data				
3.25	Once new information is available about a person, on average, how long does it take for changes to be updated in the database for the following:				
	→ Interaction with the system (e.g., changes from "active" to "inactive")?	Within 24 hours			
	→ Housing history (e.g., changes from "homeless" to "housed")?	Within 24 hours			
	 Data that is relevant and necessary for Coordinated Access (e.g., → data used to determine who is eligible and can be prioritized for a vacancy)? 	Within 24 hours			

	Data collection and entry processes		
3.26	Describe the process(es) used by service providers to collect and enter data about people cu homelessness into the database.	rrently experiencing	
	The data collection process is highly adaptable, varying based on the program model and age efforts focus on aligning data collection workflows with reality to enhance user experience.	ency. Our continuous	
	As a result, we employ a diverse range of data collection methods. Most prominently, we leverage our HMIS, which serve as a robust case management platform. Additionally, we allow programs capable of data exports to utilize internal platforms and transmit relevant data. This approach not only reduces the burden on front-line staff by minimizing data entry duplication but also ensures better data quality.		
	Subsequently, these varied data collection methods are transformed within our data backend enables us to construct a comprehensive interaction history for individuals within our participa model.		
	Furthermore, we prioritize data quality by automatically identifying issues in the inputted data. arises, the responsible program is promptly identified. To reinforce this commitment, we've es agreements with funded programs, mandating that all data be inputted within 10 business day identified issues corrected within the same timeframe.	stablished contract	
	Outcome reporting		
3.27	a) Beyond the five mandatory core outcomes under Reaching Home, do you wish to included any additional <u>monthly</u> community-level outcomes for this CHR? Reminder: Reporting on additional community-level outcomes is optional.	No	
	b) Beyond the five mandatory core outcomes under Reaching Home, do you wish to included any additional <u>annual</u> community-level outcomes for this CHR? Reminder: Reporting on additional community-level outcomes is optional.	No	
3.28	Beyond the mandatory reporting for March of every year, do you wish to report month-over- month data for one or more of the five mandatory core outcomes under Reaching Home in this CHR? Reminder: Reporting month-over-month community-level outcomes is optional.	Yes	
	Please use tab "4c. Optional Month-Over-Month" to report on these outcome	es.	
	Section 3 Summary Tables		

Step 1: Maintain person-specific data	Step 2: Maintain real- time data	Step 3: Maintain comprehensive data	
Yes	Yes	Yes	

Step 4: Can report <u>monthly</u> outcomes and set targets using data (reporting monthly data in Section 4 is mandatory for 2023-24 CHRs)

Dataset was in place as of January 1, 2024 (or earlier)	Can generate monthly data	Has set targets	Has an Outcomes- Based Approach in place
	Outcome 1: Yes	Outcome 1: Yes	
	Outcome 2: Yes	Outcome 2: Yes	
Yes	Outcome 3: Yes	Outcome 3: Yes	Yes
	Outcome 4: Yes	Outcome 4: Yes	
	Outcome 5: Yes	Outcome 5: Yes	

Step 4: Can report <u>annual</u> outcomes and set targets using data (reporting annual data in Section 4 is mandatory once annual data can be generated)

Dataset was in place as of April 1, 2023 (or earlier)	Can generate annual data	Has set targets	Has an Outcomes- Based Approach in place
	Outcome 1: Yes	Outcome 1: Yes	
	Outcome 2: Yes	Outcome 2: Yes	
Yes	Outcome 3: Yes	Outcome 3: Yes	Yes
	Outcome 4: Yes	Outcome 4: Yes	
	Outcome 5: Yes	Outcome 5: Yes	

Section 3 Summary Comment

3.29 Highlight efforts and/or issues related to your community's work to implement, maintain or improve the Outcomes-Based Approach under Reaching Home.

Your response should include:

- Efforts to start collecting, maintain and/or improve person-specific data over the last year; and.
- Plans to start collecting, maintain and/or improve person-specific data over the next year.

Your Summary Comment is an opportunity to provide additional context about your Section 3 Summary Tables results.

Since the inception of our Reaching Home agreement, we have been steadfast in enhancing our data capabilities and refining the Outcomes-Based Approach within the Reaching Home framework.

Over the past year, our primary focus has been on augmenting our participant journey data model. We achieved this by incorporating outreach programs and establishing a Covid-19 isolation shelter (ASIS) as integral components. Consequently, this update has influenced some of the numbers reported in our outcomes report, which is a more accurate reflection of reality over the previous year's (CHR). This had been identified as a potential improvement in last fiscal's report.

One potential enhancement we are actively exploring is deterministic matching across our ClientUID_CHFs. By implementing this approach, we aim to minimize duplication rates, especially when dealing with slightly varied names or demographic information.

End of Section 3

SECTION 4: COMMUNITY-LEVEL OUTCOMES AND TARGETS

te: In Section 4, a melessness.					e the prevo community					: data on
a) Under Ro data is avai										
ls data read Outcomes-	lily available	e and acces	ssible, so th	nat it can be	e used for (Coordinated	l Access, ti	ne	Y	es
broadly?										
b) Under Ro policy-maki service deli	ng, program								used data	
Over the las reducing ho	st year, did y melessness	your comm s?	unity use d	lata to infor	m actions r	elated to p	reventing a	nd	act	ions
targets; • Example	es of how da	ata was use ata was use	ed to develo ed to inform	op and/or u n action in p	pdate clear	r plans of a	ction for re	aching you	r reduction	include:
While the H robust data Top-Level F	warehouse									it is our
We rely on (CHR). The Internal Das Our internal the warehou	HMIS data se figures a hboards: dashboard	ire essentia is, which tra	al for ongoir ack current	ng reporting and histori	g to the Go cal program	vernment o n performa	f Alberta. nce, are bu			
In-Depth Ar We conduc housing pro system plar System Pla	alysis: t deeper div grams. By i ining, and o	ves into spe integrating	ecific topics our data wi	. For instan	ice, we reci	ently explor	ed occupa			
Our data int Placement We leverag processes. In addition,	Committee e the data t	Dashboard o create pl	ls: acement co	ommittee d	ashboards,	supporting	our Coord	inated Acc	ess & Asse	essment
analysis an		provido da	data to pri	ogramo, on	abiling onge	nig opoid	ional analo	1000, 010	ogio piùi ili	
									on-specific	data.
I(M) Outcome # Given your	answers in March	Section 3, March	<i>you can re</i> March	port month March	<i>ly result(s)</i> March	for Outcon March	ne #1 using March	your perso March	March	data. Target
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Given your ople who perienced melessness for at ist one day (that onth)	March 2020 3976 vour baselin s may be th	Section 3, March 2021 3130 e year? Th he first year	you can re March 2022 4401 e baseline	March 2023 5796 is the year	ly result(s) March 2024 6268 from which	for Outcom March 2025 you measu	March 2026	March 2027	March	Target
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Given your ople who berienced melessness for at st one day (that inth) ((M) a) What is y change. Thi you have th	Answers in March 2020 3976 rour baselin s may be th e most cont Dverall hom this Outcor	Section 3, March 2021 3130 e year? Th he first year fidence in y melessness	you can re March 2022 4401 e baseline r you submi our data. s will decre	March 2023 5796 is the year itted outcor	ly result(s) March 2024 6268 from which nes, but co	for Outcom March 2025 you measu uld be the	March 2026 Jre year where	March 2027	March 2028 March 2020	Target 1988
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.,						ess (home result(s) for				specific da	ta.
		2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	0005.00	2026-27	2027-28	T
		2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
eople who xperienced omelessnes ast one day hat year)	ss for at	13593	9689	11745	15348	17717					6797
cł	, hange. Th		the first yea	ar you subr	nitted outco	r from whic omes, but c				2019-20	
		Overal	homeless	ness will o	decrease b	y 50% bet	ween 2019	9-20 and 2	027-28.]
		s this Outo							Oth	er process/	ítool
Ti w de in c)	his is cald rith the HS erived Cli the time) Has the	SSC across entUID_CF period. and	raging our a wide var IF. This spe then cour eported for	participant riety of prog acific outco ting the dis this Outco	journey ma gram mode me was ca <u>stinct Client</u> me from 20	ls. The prin	nary way a checking if across all	n individual episodes v appropriate	is identified were active episodes	ode individu d is through for at least me of the d changed	the one day
						it data has	changed	and why.			
d)) Has the	target you	set change	ed from you	ir previous	CHR?			No, the ta	rget has no	t changed
						reminder, n e use "N/A'		uld be left		was not use nore data p	
										plicable. Yo r CHR Sum	
oi ho	ur particip omelessn	ant journe; iess status,	/ data mod whether th	el. This stra ney are curi	ategic inclu rently expe	, sion expan	ds our abilit melessness	y to determ s, new to ho	nine an indi omelessne	ss, or returr	,
2(A) O	utcome	#2: Fewer	people we	ere newly i	dentified (new inflow	s to home	lessness a	are reduce	d)	
Give	en your ar	nswers in S	ection 3, y	ou can rep	ort annual i	result(s) for	Outcome	#2 using yo	our person-	specific da	ta.

4.2(A) Outcome	#2: Fewer	people w	ere newly i	identified (new inflov	vs to home	lessness	are reduce	d)	
Given your a	nswers in S	Section 3, y	ou can rep	ort annual	result(s) fo	r Outcome	#2 using yo	our person-	specific da	ta.
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
People who were newly identified (that year)	4834	3323	4770	6066	6997					2412

10(11)								1			1.0(4)											
	s your baseli his may be t the most cor	he first yea	r you subm					•	March 202	20	4.2(A)	change. 1		the first ye	ar you sub	e is the yea mitted outc ur data.					2019-20	1
Ne	w inflows to	homeless	sness will o	lecrease b	oy 52% bet	ween Mare	ch 2020 ar	nd March 2	028.				New inflov	vs to hom	elessness	will decrea	ise by 50%	between	2019-20 ai	nd 2027-2	8.	
	as this Outco							Oth	ner process	s/tool			as this Outo							Otl	her proces	s/tool
This is ca with the H ClientUID	scribe how t culated leve SSC across _CHF. This	aging our p a wide vari specific outo	participant j iety of prog come was o	ourney mai ram model: calculated b	s. The prim by checking	ary way an	individual i	s identified	is through	the derived		This is ca with the H derived C	ISSC acros	eraging our s a wide va HF. This sp	r participan ariety of pro ecific outco	t journey m gram mode ome was ca	els. The prin Iculated by	mary way a	an individual	l is identifie	d is throug	h the
c) Has th applicable	and countin e data you re e) changed fr	ported for t om your pr	his Outcom evious CHF	ne from Ma R?	rch 2020 to			Yes, so	ome of the changed			c) Has the applicable	e data you i e) changed	eported for from your p	r this Outco previous Cl		019-20 to 2			Yes, so	ome of the changed	
	e the comment					changeu a	ind why.	Yes, the	e target has	s changed		-				xplain wh		s changeu	and wriy.	Yes, the	e target has	s changed
e) Was "I	se the com I/A" used for ou cannot re	one or mo	re data poir	nts? As a re	eminder, no				was used ore data p			e) Was "N	V/A" used fo	or one or m	ore data p	oints? As a c cell, pleas	reminder, r	no cells sho	-		was not us more data	sed for one point
Please us use the c Our data participar status, wi	the comment box omment box has had a ch t journey dat hether they a d in the prior	ng commen to provide a ange due tr a model. Ti re currently	nt box to pro any addition o the integr his strategio experienci	ovide conte nal context ation of out c inclusion e ng homeles	xt to your re on your dat treach prog expands ou ssness, nev	esponses ir ta that you grams and t ir ability to o w to homele	wish to incl the Covid-1 determine a essness, or	ude in your 9 isolation an individua	CHR Sum shelter (AS	mary. SIS) into our ssness		Use the concern our data our partic homeless	omment bo has had a c ipant journe ness status	hange due y data moo , whether t	e any additi to the inte del. This str hey are cu	provide cont onal contex gration of o rategic inclu rrently expe ars CHF re	t on your d utreach pro sion expan riencing ho	ata that you grams and ds our abili melessnes	the Covid- ty to detern s, new to h	19 isolation 19 isolation nine an ind omelessne	n shelter (A lividual's ess, or retu	mmary. ASIS) into
4.3(M) Outcome	#3: Fewer	people retu	urn to hom	elessness	(returns to	o homeles	sness are	reduced)			4.3(A)	Outcome	#3: Fewe	. beoble te	turn to ho	melessnes	s (returns	to homele	ssness are	e reduced))	
Given your	answers in S	Section 3, y	ou can rep	ort monthly	result(s) fo	or Outcome	e #3 using y	our persor	n-specific d	lata.	G	iven your a	inswers in S	Section 3, y	/ou can rep	oort annual	result(s) fo	r Outcome	#3 using y	our person	-specific d	ata.
Returns to	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	Target	Returns to		2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
(that month)	583	479	599	795	926					292	homeless (that year	ness	6209	4160	5127	6996	7970					3105
change. 1	s your baseli his may be t the most cor	he first yea	r you subm						March 202	20	4.3(A)	change. 1	s your base his may be a have the r	the first ye	ar you sub	e is the yea mitted outc ur data.	r from whic omes, but o	ch you mea could be the	isure e year		2019-20)
	Returns to h	omelessne	ess will de	crease by	50% betwo	een March	2020 and	March 202	8.				Returns	to homele	essness wi	ill decreas	e by 50% b	etween 20)19-20 and	2027-28.		
	as this Outco							Oti	ner process	s/tool			as this Outo							Otl	her proces	s/tool
This is ca with the H ClientUID	scribe how t culated leve SSC across _CHF. This s previous epis	aging our p a wide vari specific out	participant j iety of prog come was o	ourney mai ram model: calculated b	s. The prim by checking	ary way an if an episo	individual i de occureo	s identified d > 90 days	is through after the la	the derived		This is ca with the H derived C	ISSC acros	eraging our s a wide va HF. This sp	r participan ariety of pro becific outco	t journey m gram mode ome was ca en counting	els. The prin Iculated by	mary way a checking i	an individual f an episod	l is identifie e occured	ed is throug > 90 days	h the after the
applicable	e data you re) changed fr se the comm	om your pr	evious CHF	۲?				Yes, so	ome of the changed			applicable	e) changed	from your p	previous CH	ome from 20 HR? explain wh				Yes, so	ome of the changed	
d) Has th	e target you	set change	d from your	previous C	CHR?			Yes, the	e target has	s changed		d) Has th	e target you	set chang	ed from yo	ur previous	CHR?			Yes, the	e target has	s changed
e) Was "I	VA" used for ou cannot re	one or mo	re data poir	nts? As a re	eminder, no	cells shou			was not us more data			e) Was "N	I/A" used fo	or one or m	ore data p	pints? As a c cell, pleas	reminder, r	no cells sho			was not us more data	
use the c	e the following	to provide a	any additior	nal context	on your dat	ta that you	wish to incl	ude in your	CHR Sum	mary.		use the c	omment bo	x to provide	e any additi	provide cont onal contex	t on your d	ata that you	u wish to inc	clude in you	ur CHR Su	mmary.
participar status, wi	has had a ch t journey dat nether they a d in the prior	a model. Tl re currently	his strategio experienci	c inclusion e	expands ou ssness, nev	ir ability to o v to homele	determine a essness, or	an individua	I's homeles	ssness		our partic homeless	ipant journe ness status	y data moo , whether t	del. This str hey are cu	gration of o ategic inclu rrently expe ars CHF re	sion expan riencing ho	ds our abili melessnes	ty to detern s, new to h	nine an ind omelessne	lividual's ess, or retu	
1.4(M) Outcome		-					-				4.4(A)					experienc			· · · ·			
Given your	answers in S	1	1	1	1	1	1	1	1	lata.	G	iven your a	inswers in S	Section 3, y	/ou can rep	oort annual	result(s) fo	r Outcome	#4 using y	our person	-specific d	ata.
	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	Target			2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
ndigenous people: /ho experienced omelessness for east one day (that honth)	at 1321	1234	1624	2056	2022					661	who expe	ness for at day	4285	3521	4208	5034	5358					2143
change.	s your baseli his may be t the most cor	he first yea	r you subm	is the year itted outcor	from which mes, but co	n you meas ould be the	ure year where	•	March 202	20	4.4(A)	change. 1		the first ye	ar you sub	e is the yea mitted outc ur data.					2019-20)
I	ndigenous I	omelessn	ess will de	crease by	50% betw	een March	1 2020 and	March 202	28.				Indigeno	ous homele	essness w	ill decreas	e by 50% t	oetween 20	019-20 and	l 2027-28.		
b) How w	as this Outco	me genera	ited?					Oti	ner process	s/tool		b) How w	as this Outo	ome gene	rated?					Oti	her proces	s/tool
This is ca with the H ClientUID	escribe how t culated level SSC across _CHF. This s _CHF was o	aging our p a wide vari specific out	participant j iety of prog	ourney mai ram model: calculated v	s. The prim with the san	ary way an ne methode	i individual i ology as ou	s identified tcome #1,	is through			This is ca with the H derived C	ISSC acros	eraging our s a wide va HF. This sp	r participan ariety of pro pecific outco	nerated. t journey m igram mode ome was ca ividual had	els. The prin Iculated wi	mary way a th the same	an individual e methodol	l is identifie ogy as out	d is throug	h the
applicable	e data you re) changed fr	om your pr	evious CHF	۲?				Yes, so	ome of the changed			applicable	e) changed	from your p	previous CH					Yes, so	ome of the changed	
	e the commeter target you					cnanged a	ma wny.	Yes, the	e target has	s changed		-				explain wh		s cnanged	and why.	Yes, the	e target has	s changed
Please u	se the comm	nent box b	elow to ex	plain why	the target	has chang	jed.					Please u	se the com	ment box	below to e	explain wh	y the targe	t has char	nged.			

	e) Was "N/A blank. If you						cells shoul	d be left		was not us nore data	ed for one point			I/A" used fo ou cannot r						ould be left		was not use nore data p	
	f) Were Indig target, report						baseline, se	etting the		No				idigenous p porting on t					e baseline,	setting the		No	
	Please use	the followin	g commen	t box to pro	vide conte	xt to your n	esponses in	ıc),d),e) a	and f), as a	pplicable. \	You can									in c), d), e)			
	also use the Our data ha participant jo	s had a cha	box to prov ange due to	ide any ad	ditional cor ation of out	ntext on you treach prog	r data that	you wish to he Covid-1	9 isolation	your CHR shelter (AS	Summary. SIS) into our		Summary Our data	has had a c	hange due	to the inte	gration of o	utreach pro	ograms and	at you wish I the Covid- ty to detern	19 isolatior	shelter (As	
	status, whet referenced i	her they ar	e currently	experiencir	ng homeles	ssness, nev	v to homele	ssness, or					homeless	ness status	, whether t	hey are cu	rently expe	riencing ho	melessnes	s, new to horovement t	omelessne	ss, or return	ning to it.
4.5(M)	Outcome #	5: Fewer p	eople exp	erience ch	ronic hom	relessness	(chronic h	omelessn	ess is redu	uced)		4.5(A)	Outcome	#5: Fewe	r people ex	perience	chronic ho	melessnes	ss (chronic	homeless	ness is re	duced)	
	Given your an Ne						or Outcome 50% reduc				lata.		Given your a N							#5 using yo ction from y			ta.
		March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	Target			2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
homele	who need chronic ssness for at e day (that	556	260	326	452	533					278		nced chronic ssness for at ie day	1192	689	554	821	1078					550
4.5(M)	a) What is y change. This you have the	s may be th	ne first year	you subm						March 202	20	4.5(A)	change. T	s your base his may be a have the r	the first ye	ar you sub	mitted outc					2019-20	
	C	hronic ho	melessnes	s will decr	ease by 5	0% betwee	en March 2	020 and M	arch 2028					Chroni	ic homeles	sness will	decrease	by 54% be	etween 201	9-20 and 2	027-28.]
	b) How was Please desc	ribe how th	nis outcome	e was gene						er process			Please de	as this Outo escribe how	this outcor	ne was gei						er process	
	Unlike other calculates if number is th	the recent	history of the	he individua	al (based u	pon Clientl	JID_CHF) w	ould count	them as cl	hronic. The	e total		calculates	if the rece	nt history of	f the individ	ual (based	upon Clien	tUID_CHF	. For each s would cour time perio	nt them as	chronic. Th	e total
	c) Has the d applicable) o					rch 2020 to	March 202	3 (where	No, no	ne of the c changed				e data you r e) changed				019-20 to 2	2022-23 (w	nere	No, no	ne of the da changed	ata has
	d) Has the ta	arget you s	et changed	I from your	previous C	CHR?			No, the ta	irget has n	ot changed		d) Has the	e target you	ı set chang	ed from yo	ur previous	CHR?			No, the ta	rget has no	ot changed
	e) Was "N/A blank. If you						cells shoul	d be left		was not us nore data	ed for one point			I/A" used fo ou cannot r						ould be left		was not use nore data p	
	Please use t use the com	ment box t	o provide a	iny addition	al context	on your dat	a that you v	vish to inclu	ide in your	CHR Sum	mary.		use the co	omment bo	x to provide	e any additi	onal contex	t on your d	ata that yo	in c), d) an u wish to inc	lude in you	r CHR Sun	nmary.
	As part of ou outreach inte remains bas	eractions, i	n determini	ng an indiv									outreach		, in determ	ining an inc				inclusion of tly, for this f			
	f) What defi												· ·						·	alculate this			
	Chronicity is preceding 1		d by the inc	dividual hav	ing more t	han 180 sh	elter stays i	n the prece	eding 365 d	ays, or 54	6 in the			is determii 1,095 day		individual h	aving more	than 180 s	shelter stay	s in the pred	ceding 365	days, or 54	16 in the
				<u>.</u>	End of S	Section 4	a	<u>.</u>									End of S	Section 4	a				

SECTION 4: OPTIONAL C Use outcome data to monitor progress against additional community-level outcomes – Monthly Data Reporting	COMMUNITY-LEVEL OUTCOMES Use outcome data to monitor progress against additional community-level outcomes – Annual Data Reporting
Your answers in Section 3 indicate that your community currently does not have person-specific data that is real-lime and comprehensive and/or with enough data and/or with the capacity and/or want to generate monthly baselines and set targets for additional outcomes.	Your answers in Section 3 indicate that your community currently does not have person-specific data that is real-time and comprehensive and/or with enough data and/or with the capacity and/or want to generate annual baselines and set targets for additional outcomes.
1 09	
08	0.8
0.5	0.5
03	03
0 March 2020 March 2021 March 2022 March 2023 March 2024 March 2025 March 2026 March 2027 March 2028 Target	0 2019-20 2020-21 2021-22 2022-23 2023-24 2024-25 2025-26 2026-27 2027-28 Target
0.8 0.7 0.6	0.8
05	0.5
03 02 01	0.3
0 March 2020 March 2021 March 2022 March 2023 March 2024 March 2025 March 2026 March 2027 March 2028 Target	0 2019-20 2020-21 2021-22 2022-23 2023-24 2024-25 2025-26 2026-27 2027-28 Target
0.9 0.8 0.7	09
0.7 0.6 0.5	0.7 0.8 0.5
0.4	0.4
02	02 0.1 0
U March 2020 March 2021 March 2022 March 2023 March 2024 March 2025 March 2026 March 2027 March 2028 Target	U 2019-20 2020-21 2021-22 2022-23 2023-24 2024-25 2025-26 2026-27 2027-28 Target



End of Section 4b	End of Section 4b

SECTION 4: OPTIONAL MONTH-OVER-MONTH COMMUNITY-LEVEL REPORTING

Use outcome data to monitor progress against core community-level outcomes - Monthly Data Reporting

	Outcome #1: Fewer people experience homelessness (homelessness is reduced overall)														
	April 2023	May 2023	June 2023	July 2023	Aug. 2023	Sept. 2023	Oct. 2023	Nov. 2023	Dec. 2023	Jan. 2024	Feb. 2024	Mar. 2024			
People who experienced homelessness for at least one day (that month)	5711	5862	5820	5843	5894	5790	5943	5953	6128	6200	6190	6268			

Please use the comment box to provide additional information about your data, as applicable.

This is calculated leveraging our participant journey mart. This datamart tracks all interactions/episode individuals had with the HSSC across a wide variety of program models. The primary way an individual is identified is through the derived ClientUID_CHF. This specific outcome was calculated by checking if episodes were active for at least one day in the time period, and then counting the distinct ClientUID_CHF's across all appropriate episodes.

Outcome #2: Fewer people were newly identified (new inflows to homelessness are reduced)

	April 2023	May 2023	June 2023	July 2023	Aug. 2023	Sept. 2023	Oct. 2023	Nov. 2023	Dec. 2023	Jan. 2024	Feb. 2024	Mar. 2024
People who were newly identified (that month)	536	595	547	570	662	619	607	521	599	581	606	554

Please use the comment box to provide additional information about your data, as applicable.

This is calculated leveraging our participant journey mart. This datamart tracks all interactions/episode individuals had with the HSSC across a wide variety of program models. The primary way an individual is identified is through the derived ClientUID_CHF. This specific outcome was calculated by checking if an episode was the first ever recorded for an individual, and counting the number of appropriate episodes.

	Outcome #3: Fewer people return to homelessness (returns to homelessness are reduced)													
	April 2023	May 2023	June 2023	July 2023	Aug. 2023	Sept. 2023	Oct. 2023	Nov. 2023	Dec. 2023	Jan. 2024	Feb. 2024	Mar. 202		
Returns to homelessness (that month)	709	754	758	711	733	686	874	855	887	867	876	926		
Please use the com	ease use the comment box to provide additional information about your data, as applicable.													

This is calculated leveraging our participant journey mart. This datamart tracks all interactions/episode individuals had with the HSSC across a wide variety of program models. The primary way an individual is identified is through the derived ClientUID_CHF. This specific outcome was calculated by checking if an episode occured > 90 days after the last end date of a previous episode, and then counting the distince ClientUID_CHFs associated with the episode.

C	outcome #4	4: Fewer In	digenous	peoples ex	perience l	nomelessn	ness (Indig	enous hon	nelessnes	s is reduce	d)	
	April 2023	May 2023	June 2023	July 2023	Aug. 2023	Sept. 2023	Oct. 2023	Nov. 2023	Dec. 2023	Jan. 2024	Feb. 2024	Mar. 2024

Indigenous peoples who experienced homelessness for at least one day (that month)	2004	2027	2003	1938	1980	1882	1940	1866	1978	1993	2011	2023
Please use the com	ment box to	provide ad	ditional info	ormation ab	out your da	ta, as appl	icable.					
This is calculated lev variety of program m the same methodolo	odels. The	primary wa	y an individ	dual is iden	tified is throu	ugh the de	rived Client	UID_CHF.	This specif	ic outcome	was calcul	ated with
	Outcon	ne #5: Few	er people	experience	e chronic h	omelessn	ess (chron	ic homeles	ssness is I	reduced)		
	April 2023	May 2023	June 2023	July 2023	Aug. 2023	Sept. 2023	Oct. 2023	Nov. 2023	Dec. 2023	Jan. 2024	Feb. 2024	Mar. 2024
People who experienced chronic homelessness for at least one day (that month)	471	459	450	432	437	479	531	514	499	557	530	533
Please use the com	ment box to	provide ad	ditional info	ormation ab	out your da	ta, as appl	icable.			•		
												ory of the

End of Section 4c

COMMUNITY HOMELESSNESS REPORT SUMMARY

Calgary

2023-2024

The Community Homelessness Report (CHR) is an annual Reaching Home reporting deliverable that supports communities to prevent and reduce homelessness using a more coordinated, systems-based and data-driven response. The CHR was designed to support local discussions and decision making, using all of the information about homelessness currently available at the community level. Communities are encouraged to use their CHR data to develop clear plans of action that help them to reach their homelessness reduction targets and to leverage the collective efforts of service providers working across the community, regardless of how they are funded.

This is a summary of the CHR for the 2023-24 reporting cycle. It shows the community's self-assessment of Reaching Home implementation, which includes the following key components:

• meaningful collaboration between Indigenous and non-Indigenous partners (see Section 1);

• community-level governance, coordinated service delivery (Coordinated Access) and use of a Homelessness Management Information System or HMIS (see Section 2); and,

• an Outcomes-Based Approach (tracking community-level outcomes and progress against targets using person-specific data; see Section 3).

If the community was able to report on outcomes and targets, this CHR Summary also includes results for each of the five core outcomes of Reaching Home (see Section 4).

Section 1. Community Context – Collaboration between Indigenous and Non-Indigenous Partners

a) Specific to Coordinated Access, the HMIS and the Outcomes-Based Approach, has there been ongoing, meaningful collaboration between the DC CE and the IH CE and IH CAB, as well as local Indigenous organizations, including those that sit on your CAB, over the reporting period?

→ Coordinated Access:	Not yet
→ HMIS:	Yes
→ Outcomes-Based Approach:	Not yet

Describe this collaboration in more detail.

From an outcomes perspective, Miskanawah, our partners, have been at the forefront of promoting cultural evaluation and measurement capacity building. According to Miskanawah, while settler governments and systems are beginning to introspect and consider changes internally, there's an opportunity for Indigenous people, communities, and organizations to offer tangible examples of how colonial processes could be redefined through more progressive and relevant approaches for the individuals they serve. The Oral Truth Ceremony has become integral to our collaboration with Miskanawah, and its impact extends to shaping our internal evaluation practices, such as how we frame evaluation narratives.

Since April 1st 2023 we have begun to better understand and incorporate cultural evaluation.

Describe how this collaboration will happen over the coming year in more detail.

We've consistently extended collaboration opportunities to the Indigenous CE and CAB and will continue. Presently, a staff member attends meetings at the Aboriginal Standing Committee on Housing and Homelessness.

Additionally, the Indigenous CE's executive leadership has been invited to contribute to redesigning our Needs Service Questionnaire (NSQ) triage tool and participate as a member of the Community Advisory Board. We've also extended an invitation for an executive steering committee position on our Coordinated Extreme Weather Response. Additionally, we've offered them data and analytics dashboards to support their data collection efforts. Lastly, we have reached out to understand if brainstorming or funding strategy work would be desired by the

a) Specific to the completion of this Community Homelessness Report (CHR), did ongoing, meaningful collaboration take place with the IH CE and IH CAB, as well as local Indigenous organizations, including those that sit on your CAB?	Yes
Describe this collaboration in more detail.	
We've offered the Indigenous CAB and CE the chance to review and offer input on the Communi	ity Homele

We've offered the Indigenous CAB and CE the chance to review and offer input on the Community Homelessness Report (CHR),of which a copy of the CHR was provided on May 13th. We have also offered the Indigenous CE and Indigenous CAB an invitation to discuss/ strategize the community plan as it is created. No commitment has been gained in this endeavour, however, we will continue to ask. It's worth noting that Indigenous representation, including the Indigenous CE executive team is on the CAD-D.

Did the IH CAB sign-off on this CHR?

Explain why IH CAB sign-off was not obtained and describe how engagement will take place with the IH CAB during next year's CHR process in more detail.

No

On May 29, 2024, the CHF received feedback from the IH-CAB Co-Chairs indicating they were unwilling to sign off on the CHR unless further collaboration could be established on the co-development of the CHR report. They cited that throughout the 2023-2024, that no meaningful collaboration occurred between the designated and Indigenous homeless communities reflecting a shared and trustworthy purpose to achieve collaborative visible and impactful outcomes in the sector.

In, response, the CHF has acknowledged a need to understand how meaningful collaboration can be achieved in the future. CHF has provided a re-affirmed commitment of the goal to engage in more intentional dialogues with the IH community to understand how a co-developed approach can be achieved more successfully for the future

Section 2. Coordinated Access and Homelessness Management Information System (HMIS) Self-Assessment

Section 2 Summary Tables

The table below provides a summary of the work your community has done so far to meet the Reaching Home minimum requirements for Coordinated Access and an HMIS under the 2019-2024 Reaching Home funding cycle.

	Completed	Started	Not Yet Started
Number of minimum requirements	17	0	1

The table below shows the percentage of minimum requirements completed for each core Coordinated Access component.

Governance and Partnerships	HMIS	Access Points to Service	Triage and Assessment	Resource Inventory	Vacancy Matching and Referral with Prioritization
100%	75%	100%	100%	100%	100%

Section 2 Summary Comment

Highlight efforts and/or issues related to the work your community has done over the last year related to the Reaching Home minimum requirements for Coordinated Access and an HMIS.

Our Coordinated Access & Assessment NSQ tool has been in place since 2018. Since then there have been technology improvements in the process. In the past year we have begun to explore the next evolution of Coordinated Access & Assessment. This is from both the tool perspective, the current frameworks in place, as well as technology automations towards data quality.

		Section	3. Outcomes-Based	Approach	n Self-Assessment	t	
			Section 3 Su	mmary Ta	ble		
The ta	bles below provide a	•	of the work your com under the 2019-2024	•			Outcomes-Based
	Step 1: Maintain p specific dat		Step 2: Maintain r data	eal-time	Step 3: Mai comprehensi		
	Yes		Yes		Yes		
		•	report monthly outc othly data in Section		• •		
	was in place as of 1, 2024 (or earlier)		an generate onthly data	На	s set targets		Outcomes-Based roach in place
		Ou	tcome 1: Yes	Ou	tcome 1: Yes		
		Ou	tcome 2: Yes	Ou	utcome 2: Yes		
	Yes	Ou	tcome 3: Yes	Ou	tcome 3: Yes		Yes
		Ou	tcome 4: Yes	Ou	tcome 4: Yes		
		Ou	tcome 5: Yes	Ou	tcome 5: Yes		
	04		report appual outco			-1-4-	

Step 4: Can report annual outcomes and set targets using data (reporting annual data in Section 4 is mandatory once annual data can be generated)

Dataset was in place as of April 1, 2023 (or earlier)	Can generate annual data	Has set targets	Has an Outcomes-Based Approach in place
	Outcome 1: Yes	Outcome 1: Yes	
	Outcome 2: Yes	Outcome 2: Yes	
Yes	Outcome 3: Yes	Outcome 3: Yes	Yes
	Outcome 4: Yes	Outcome 4: Yes	
	Outcome 5: Yes	Outcome 5: Yes	

Summary Comment

Highlight efforts and/or issues related to your community's work to implement, maintain or improve the Outcomes-Based Approach under Reaching Home.

Since the inception of our Reaching Home agreement, we have been steadfast in enhancing our data capabilities and refining the Outcomes-Based Approach within the Reaching Home framework.

Over the past year, our primary focus has been on augmenting our participant journey data model. We achieved this by incorporating outreach programs and establishing a Covid-19 isolation shelter (ASIS) as integral components. Consequently, this update has influenced some of the numbers reported in our outcomes report, which is a more accurate reflection of reality over the previous year's (CHR). This had been identified as a potential improvement in last fiscal's report.

One potential enhancement we are actively exploring is deterministic matching across our ClientUID_CHFs. By implementing this approach, we aim to minimize duplication rates, especially when dealing with slightly varied names or demographic information.

In addition to our ongoing efforts to bolster data capabilities, we continually refine our data definitions. These refinements may impact the duration an individual is considered active and influence how we calculate chronicity.

Additional information - Timely data

Once new information is available about a person, on average, how long does it take for changes to be updated in the database for the following:

\rightarrow Interaction with the system (e.g., changes from "active" to "inactive")?	Within 24 hours
→ Housing history (e.g., changes from "homeless" to "housed")?	Within 24 hours
→ Data that is relevant and necessary for Coordinated Access (e.g., data used to determine who is eligible and can be prioritized for a vacancy)?	Within 24 hours

Additional information - Data collection and entry processes

Describe the process(es) used by service providers to collect and enter data about people currently experiencing homelessness into the database.

The data collection process is highly adaptable, varying based on the program model and agency. Our continuous efforts focus on aligning data collection workflows with reality to enhance user experience.

As a result, we employ a diverse range of data collection methods. Most prominently, we leverage our HMIS, which serve as a robust case management platform. Additionally, we allow programs capable of data exports to utilize internal platforms and transmit relevant data. This approach not only reduces the burden on front-line staff by minimizing data entry duplication but also ensures better data quality.

Subsequently, these varied data collection methods are transformed within our data backend. This transformation

Section 4. Community-Level Outcomes and Targets – Monthly

Outcome #1: Fewer people experience homelessness (homelessness is reduced overall)



Has the target you set changed from your previous CHR?	Yes, the target has changed
Was "N/A" was used for one or more data points?	No, N/A was not used for one or more data point
Please use the following comment box to provide context on your data.	
Our data has had a change due to the integration of outreach programs and the Co	vid-19 isolation shelter (ASIS) in



Has the data you reported for this Outcome from March 2020 to March 2023 changed from your previous CHR?	Yes, some of the data has changed
Has the target you set changed from your previous CHR?	Yes, the target has changed
Was "N/A" was used for one or more data points?	Yes, N/A was used for one of more data point
Please use the following comment box to provide context on your data.	
Our data has had a change due to the integration of outreach programs and the Cov	vid-19 isolation shelter (ASIS) i



Has the data you reporte changed from your previ	ed for this Outcome from March 2020 to March 2 ious CHR?	2023 Yes, some of the data h changed
Has the target you set cl	hanged from your previous CHR?	Yes, the target has chang
Was "N/A" was used for	one or more data points?	No, N/A was not used for or more data point



How was this Outcome generated?	Other process/tool
This is calculated leveraging our participant journey mart. This datamart tracks all in	teractions/episode individu
Has the data you reported for this Outcome from March 2020 to March 2023 changed from your previous CHR?	Yes, some of the data l changed
Has the target you set changed from your previous CHR?	Yes, the target has char
Was "N/A" was used for one or more data points?	No, N/A was not used for or more data point
Were Indigenous partners engaged in the process of setting the baseline, setting the target, reporting on the outcome and/or interpreting the results?	No
Please use the following comment box to provide context on your data.	•
Our data has had a change due to the integration of outreach programs and the Cov	vid-19 isolation shelter (AS



0 March 2020 March 2021 March 2022 March 2023 March 2024 March 2025 March 2026 March 2027 March 2028 Target Reporting period

March 2020



How was this Outcome generated?	Other process/tool
Unlike other outcomes, this outcome is solely calculated on our shelter data. For	r each shelter visit, our warehou
Has the data you reported for this Outcome from March 2020 to March 2023 changed from your previous CHR?	No, none of the data has changed
Has the target you set changed from your previous CHR?	No, the target has not changed
Was "N/A" was used for one or more data points?	No, N/A was not used for o or more data point
Please use the following comment box to provide context on your data.	

f) What definition of "chronic homelessness" does your community use to calculate this Outcome?
 Chronicity is determined by the individual having more than 180 shelter stays in the preceding 365 days, or 546 in the state of the preceding 365 days.

Section 4. Community-Level Outcomes and Targets – Annual



How was this Outcome generated?	Other process/t
This is calculated leveraging our participant journey mart. This datama	art tracks all interactions/episode indi
Has the data you reported for this Outcome from 2019-20 to 2022-23 from your previous CHR?	changed Yes, some of the da changed
Has the target you set changed from your previous CHR?	No, the target has changed
Was "N/A" was used for one or more data points?	No, N/A was not used or more data po
Please use the following comment box to provide context on your data	a.



O#2(A)	What is your baseline year?	2019-20						
	New inflows to homelessness will decrease by 50% between 2019-20 and 2027-28.							
	How was this Outcome generated?	Other process/tool						
	This is calculated leveraging our participant journey mart. This datamart tracks all in	teractions/episode individuals h						
	Has the data you reported for this Outcome from 2019-20 to 2022-23 changed from your previous CHR?	Yes, some of the data has changed						
	Has the target you set changed from your previous CHR?	Yes, the target has changed						
	Was "N/A" was used for one or more data points?	No, N/A was not used for one or more data point						
	Please use the following comment box to provide context on your data.							
	Our data has had a change due to the integration of outreach programs and the Co	<i>v</i> id-19 isolation shelter (ASIS) in						

Outcome #3: Fewer people return to homelessness (returns to homelessness are reduced)										
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
Returns to homelessness (that year)	6209	4160	5127	6996	7970					3105



Outcome #4: Fewer Indigenous peoples experience homelessness (Indigenous homelessness is reduced)										
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target



Outcome #5: Fewer people experience chronic homelessness (chronic homelessness is reduced)



Community Advisory Board (CAB)

Designated Communities/Territorial Homelessness

Note: You may list more than one name/organization for each sector, and you may list a name/organization in more than one sector, as applicable. INFC will not sell, distribute, trade or transfer your information to other government departments, businesses, institutions, organizations or individuals outside INFC for any other purposes, unless required by law.

Sector	CAB Members (name and/or organization)
Infrastructure Canada (Ex-Officio Member)	
Community Entity (Ex-Officio Member)	
Provincial/Territorial government	
Local/Municipal government	
Indigenous government	
Individuals with lived experience of homelessness	
Indigenous Peoples, nations and organizations,	
Friendship Centres	
Indigenous housing organizations	
Youth and/or child serving organizations, including	
Child Welfare agencies	
Organizations serving survivors of domestic	
violence and their families	
Seniors and senior serving organizations	
Newcomers and newcomer serving organizations	
The private sector	
Police and correctional services	
Landlord associations and/or the housing sector	
Health organizations, including hospitals and other public health institutions, and organizations focused on mental health and addictions	
Veterans Affairs Canada and/or Veterans-serving organizations	
Organizations serving individuals experiencing, or at risk of experiencing homelessness	
Other	

the attached Community Homelessness Report, and that a majority of CAB members approve of its content.

Signature	DD)
Signature	DD)

Name

Signature

DD)

Indigenous Homelessness (as applicable)

Note: You may list more than one name/organization for each sector, and you may list a name/organization in more than one sector, as applicable. INFC will not sell, distribute, trade or transfer your information to other government departments, businesses, institutions, organizations or individuals outside INFC for any other purposes, unless required by law.

Sector	CAB Members (name and/or organization)
Infrastructure Canada (Ex-Officio Member)	
Community Entity (Ex-Officio Member)	
Provincial/Territorial government	
Local/Municipal government	
Indigenous government	
Individuals with lived experience of homelessness	
Indigenous Peoples, nations and organizations,	
Friendship Centres	
Indigenous housing organizations	
Youth and/or child serving organizations, including	
Child Welfare agencies	
Organizations serving survivors of domestic	
violence and their families	
Seniors and senior serving organizations	
Newcomers and newcomer serving organizations	
The private sector	
Police and correctional services	
Landlord associations and/or the housing sector	
Health organizations, including hospitals and other public health institutions, and organizations focused on mental health and addictions	
Veterans Affairs Canada and/or Veterans-serving organizations	
Organizations serving individuals experiencing, or at risk of experiencing homelessness	
Other	

the attached Community Homelessness Report, and that a majority of CAB members approve of its content.

Name	Signature	DD)

Community Advisory Board (CAB)

Name	Signature	DD)
Name	Signature	DD)