Reaching Home: Canada's Homelessness Strategy

Community Homelessness Report

Peterborough, ON

2024-2025

SECTION 1: COMMUNITY CONTEXT

Overview

CHR 1

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;
- Efforts to address homelessness for specific groups (e.g., youth); and/or,
- Efforts to meet Reaching Home minimum requirements (including a brief explanation if a minimum requirement was assessed as “Completed” in a previous CHR, but is now “Under development” or “Not yet started”).

Over the past year, the City of Peterborough continued investments into new homelessness response efforts that were introduced during the year prior. Although the efforts began in the prior year, the investments continued during this year. This included the restructure of municipally owned building/property that had served as an overflow shelter during the pandemic to be repurposed into a modular housing community, as well as United Way investing Reaching Home funding into the renovation of an old church for the purpose of becoming a community hub to support people experiencing homelessness. In addition, the City of Peterborough has made significant progress on the construction of a new, 53-unit affordable housing building that will allow for vulnerable community members to move in this year. During the reporting period, United Way was able to support the purchase of the mentioned church to allow the organization to have more impact with their work in the community. This community hub provides a significant amount of services to unhoused people in our community, including almost 75,000 meals being served during the last year, which is an average of approximately 250 meals per day. 522 unique individuals accesssed overnight shelter, with an average of 47 people staying each night. Another significant effort made during this reporting period was the

	investment of Reaching Home funding into a consultant that supported updates to our Coordinated Access System. Progress related to this project will be described throughout the report. The response to the following question was changed from the previous 2023-24 CHR: Section 2 – Question CA 4 d): The response should be "Under Development". We have documentation about the Community Entity's (CE's) role with Coordinated Access but not the roles and responsibilities of the CE Lead and Homeless Individuals and Families Information System (HIFIS) Lead. This was likely a reporting error from the previous year. We are working with Built For Zero on this item.
CHR 2 How has the community's approach to addressing homelessness changed with the implementation of Reaching Home? 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.	
	Over the past few years, the Peterborough community has shifted its strategy to better support individuals experiencing homelessness. This shift has involved a comprehensive review of the Coordinated Access system, leading to targeted plans aimed at strengthening our response and improving outcomes. Governance structures in Peterborough have matured through ongoing evaluation and adjustment. The United Way, acting as the Community Entity, and the City of Peterborough, as the Service Manager, share governance responsibilities. In the past year, this partnership was revitalized with both organizations taking on co-chair roles on the Community Advisory Board (CAB). This shared leadership model has deepened collaboration and enabled a more unified approach. Given the size of our community, many of the same agencies and leaders are involved across various decision-making tables. This overlap presents an opportunity to streamline governance processes and enhance inter-agency communication. A key step taken in the past year was amending the CAB Terms of Reference to ensure that all homeless-serving

organizations are represented. To promote diverse input, organizations are now encouraged to bring more than one representative, though voting is limited to one per organization to ensure fairness. We are also working to embed equity and inclusion into decision-making. Efforts are underway to support the meaningful involvement of individuals with lived experience, and to expand engagement with Indigenous organizations. Our longstanding partnership with the local Friendship Centre continues to shape our understanding of Indigenous homelessness and supports inclusive governance practices. Community decisions are typically made through consultation with service providers to co-identify priorities, use of comprehensive data sources such as the By Name List and Homelessness Individuals and Families Information System (as well as Point-in-Time count data when available), and formal motions requiring majority support. Since 2019, the City of Peterborough has utilized the Homelessness Individuals and Families Information System (HIFIS) to manage data within the Coordinated Access framework. This centralized system has improved data security, consent management, and reporting, allowing for the creation of a consistent By Name Priority List. To maintain data quality and ease the administrative burden on service providers, the City employs dedicated staff to oversee HIFIS. This team also provides community partners with valuable insights that inform funding decisions—such as identifying priority populations for the Reaching Home initiative. Recognizing the need for continued improvement, the community plans to strengthen data management by hiring a consultant, onboarding more agencies to HIFIS, and expanding staff training and capacity. Improving access to services has been a priority in Peterborough. Enhanced inter-agency communication has led to better referrals and a broader awareness of

	community resources. The City has previously created and distributed service maps to aid frontline staff in connecting clients with appropriate supports. As the service landscape continues to evolve, there is a need to update these resources. A refreshed system map will be created and made available to assist with referrals and navigation in the coming year. Peterborough uses the Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) and Service Prioritization Decision Assistance Tool (SPDAT) to assess individual needs and prioritize services. These tools are integrated into HIFIS, minimizing the need for individuals to repeat their stories and helping allocate housing resources through the By Name Priority List. However, challenges have emerged, including inconsistent administration of assessments due to varying levels of training and frequent staff turnover. Moving forward, additional training will be provided to frontline staff to ensure consistent and trauma-informed use of assessment tools. The City manages a centralized inventory of housing resources that supports matching individuals from the By Name List with appropriate housing options. These listings include detailed eligibility criteria and are supported by the United Way through Reaching Home-funded programs. This alignment ensures that housing opportunities are matched with community needs and priority populations. Despite these systems, the most pressing barrier remains the lack of sufficient housing. The demand for both emergency and affordable housing greatly exceeds supply, which limits the full effectiveness of Coordinated Access. Without additional housing stock, improvements to the matching process will remain constrained. Peterborough's homelessness response continues to evolve through reflection, collaboration, and a commitment to equity. While progress has been made across governance, assessment, data systems, and access points, addressing the housing shortage remains essential to achieving the full potential of Coordinated Access.

Collaboration between Indigenous and non-Indigenous partners		
CHR 3	Please select your community from the drop-down menu:	Peterborough County (ON)
	Your community: **Has only DC funding available.**	

CHR 4

a) Has there been meaningful collaboration between the DC CE and local Indigenous partners, including those that sit on your CAB, over the reporting period specific to the work of:

• Implementing, maintaining and/or improving the **Coordinated Access system**?	Under development
• Implementing, maintaining and/or improving, as well as using the **HMIS**?	Under development
• Strengthening the **Outcomes-Based Approach**?	Under development

As a reminder, meaningful collaboration with local Indigenous partners is expected for your community.

d) In your response to **CHR 4(a)** you noted that collaboration **did not occur** with Indigenous partners. As a follow up to this, please describe why collaboration **as it relates to Coordinated Access, the HMIS and/or the Outcomes-Based Approach** did not take place in more detail. Also please describe what the plan is to ensure meaningful collaboration occurs over the coming year.

Related to the coming year, your response could include information such as how Indigenous peoples will be engaged in these discussions, who will be engaged, and when it will occur.

Our community has been grateful for the ongoing support and involvement of the Nogojiwanong Friendship Centre (NFC). Previously, we have reported on their involvement in our Community Advisory Board, their projects supported by Reaching Home funding, and their work to support and train other organizations in their service provision to Indigenous People. Our collaboration Nogojiwanong Friendship Centre did take place over the reporting period, but we recognize that there are areas for improvement before we want to define our collaboration as meaningful and comprehensive. As part of our systems improvement plans for the coming year, we have identified strategies for deep and meaningful collaboration with Indigenous partners. Firstly, this begins with understanding if our collaboration should extend beyond Nogojiwanong Friendship Centre to other Indigenous service providers and leaders, or if it would be preferred and appropriate to continue working with NFC specifically. Our community will be undergoing a Coordinated Access improvement process over the coming year, and the City of Peterborough as the Systems

	Manager has made a strong commitment to working with Indigenous partners throughout these processes. As part of these improvement processes, we will be revising HIFIS policies and procedures. We will be engaging with Indigenous partners to ensure that the Coordinated Access System is informed by Indigneous partners and that service providers are trained and supported in providing culturally appropriate services to Indigenous People. The Coordinated Access System improvement process began over the reporting period with the hiring of two data positions in Social Services at the City of Peterborough, as well as the hiring of a consultant to support HIFIS improvements. This year's Reaching Home funding agreement with NFC was written to identify that the Community Entity and Systems Manager will seek NFC's lead on data and Coordinated Access practices, rather than enforcing standardized practices that were developed without meaningful engagement. Over the coming year the engagements with Indigenous partners will inform future contracting practices when funding Indigenous led organizations.

CHR 5	a) Specific to the completion of this Community Homelessness Report (CHR), did ongoing, meaningful collaboration take place with the local Indigenous partners, including those that sit on your CAB?	Yes
	As a reminder, meaningful collaboration on the CHR with local Indigenous partners is expected for your community.	
	b) In your response to **CHR 5(a)** you noted that collaboration occurred with Indigenous partners. As a follow up to this, please indicate which of the following activities took place:	
	• Engagement with Indigenous partners took place in the early stages of CHR development, to determine how collaboration should be undertaken for the CHR.	No
	• Collaboration with Indigenous partners took place when developing and finalizing the CHR.	Yes
	• Indigenous partners reviewed and approved the final CHR.	Yes

Note: As applicable, these activities should be described in further detail in CHR 5(c). This list is not meant to be exhaustive. Other relevant activities not listed here can be described in CHR 5(c).

c) In your response to **CHR 5(a)** you noted that collaboration **occurred** with Indigenous partners. As a follow up to this, please describe the collaboration that took place in more detail **related to the completion of this CHR.**

Your response could include information such as how Indigenous peoples were engaged in these discussions, when collaboration occurred, who it was with, and what sections of the CHR were informed by Indigenous input and/or perspectives.

Nogojiwanong Friendship Centre (NFC) has been an active member of our Community Advisory Board for a number of years. NFC has taken a lead role in providing outreach and support services to Indigenous People experiencing homelessness in our community. NFC has been consulted on the entire draft Community Homelessness Report (CHR) and invited to discuss changes separately from the broader Community Advisory Board. Their final review and approval of the CHR has also been sought outside of the Community Advisory Board meeting, with the entire CAB's approval being contingent on NFC's approval of the CHR. In alignment with the systems improvements described in the above section, we have plans over the coming year for meaningful engagement with Indigenous partners. As we improve our engagement and collaboration we will understand Indigenous partners' perspectives on their involvement with the CHR. Without first establishing these relationships and meaningful engagement with Indigenous partners, it was not appropriate for us to seek their early engagement for the CHR during this year's process.

End of Section 1

SECTION 2: COORDINATED ACCESS SELF-ASSESSMENT

Note: It is expected that communities will continuously work to improve their Coordinated Access system over time. If your community is working to improve a specific Coordinated Access requirement that had been self-assessed as met in a previous CHR, you should still select "Yes" from the drop-down menu for this CHR.

Governance and Partnerships

Note: For communities that receive both Designated Communities (DC) and Indigenous Homelessness (IH) funding, this section is specific to the **DC Community Advisory Board (CAB)**.

CA 1	Communities must maintain an integrated, community-based governance structure that supports a transparent, accountable and responsive Coordinated Access system, with use of an HMIS. The CAB must be represented in this structure in some way.	
	a) Is an integrated, community-based governance structure in place that supports a transparent, accountable and responsive Coordinated Access system and use of the local HMIS?	Under development
	b) Have Terms of Reference for the integrated, community-based governance structure been documented and, if requested, can they be made publicly available?	Under development
CA 2	Does the integrated governance structure that supports Coordinated Access and use of HMIS include representation from the following: • Federal Homelessness Roles:	
	→ Community Entity:	Not yet
	→ Community Advisory Board:	Not yet

→ Housing, Infrastructure and Communities Canada (HICC):	Not yet
→ Organization that fulfills the role of Coordinated Access Lead:	Not yet
→ Organization that fulfills the role of HMIS Lead:	Not yet
• Homelessness roles from other orders of government:	
→ Provincial or territorial government:	Not yet
→ Local designation(s) relative to managing provincial or territorial homelessness funding, as applicable (e.g., Service Manager in Ontario):	Not yet
→ Municipal government:	Not yet
→ Local designation(s) relative to managing municipal homelessness funding, as applicable:	Not yet
• Local groups with a mandate to prevent and/or reduce homelessness, as applicable:	Not yet
• Local Indigenous partners:	Not yet

	• Population groups the Coordinated Access system intends to serve (e.g., providers serving youth experiencing homelessness):	Not yet
	• Types of service providers that help prevent homelessness and those that help people transition from homelessness to safe, appropriate housing in the community:	Not yet
	• People with lived experience of homelessness:	Not yet
CA 3	Is there a document that identifies how 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? At minimum, the following roles and groups must be included: • Community Entity; • Community Advisory Board; • Coordinated Access Lead and HMIS Lead; • Provincial or territorial and 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.	Under development
CA 4	a) Has a Coordinated Access Lead organization been identified?	Yes
	b) Has an HMIS Lead organization been identified?	Yes
	c) 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

	d) Have Coordinated Access Lead and HMIS Lead roles and responsibilities been documented and, if requested, can this documentation be made publicly available?	Under development
CA 5	Has there been meaningful collaboration between the DC CE and local Indigenous partners, including those that sit on your CAB, over the reporting period specific to the work of implementing, maintaining and/or improving the Coordinated Access system? Note: The response to this question is auto-populated from CHR 4(a).	Under development
CA 6	a) Consider the CAB expectations outlined below. Is the CAB currently fulfilling expectations related to its role with addressing homelessness in the community?	Under development

Background: The Reaching Home Directives outline expectations specific to the CAB and its role with addressing homelessness in the community. These expectations are summarized below under four roles.

Community-Based Leadership: To support its role, collectively, the CAB:

- Is representative of the community;
- Has a comprehensive understanding of the local homelessness priorities in the community; and,
- Has in-depth knowledge of the key sectors and systems that affect local priorities.

Planning:

- In partnership with the Community Entity, the CAB gathers all available information related to local homelessness needs in order to set direction and priorities, understand what is working and what is not, and develop a coordinated approach to meet local priorities.
- The CAB helps to guide investment planning, including developing the Reaching Home Community Plan and providing official approval, as well as assessing and recommending projects for Reaching Home funding to the Community Entity.

Implementation and Reporting:

- The CAB engages in meaningful collaboration with key partners, including other orders of government, Indigenous partners, as well as entities that coordinate provincial or territorial homelessness initiatives at the local level, where applicable.
- The CAB coordinates efforts to address homelessness at the community level by supporting the Community Entity to implement, maintain, and improve the Coordinated Access system, actively use the local HMIS, as well as prevent and reduce homelessness using an Outcomes-Based Approach.
- The CAB approves the Reaching Home Community Homelessness Report.

Alignment of Investments:

- CAB members from various orders of government support alignment in investments (e.g., they share information on existing policies and programs, as well as updates on funding opportunities and funded projects).
- CAB members provide guidance to ensure federal investments complement existing policies and programs.

b) In what ways is the CAB not yet fulfilling expectations?

	We have made efforts over the past couple of years to increase representation on our CAB to ensure that it is representative of the community, has understandings of the key priorities and systems that impact our local priorities. We are continuing to reevalaute our CAB to ensure it includes broad representation. Our CAB has significant involvement in funding decision making processes. Applications for Reaching Home funding are independently scored by members of the CAB, then the CAB meets to determine how to make funding decisions, and then reviews each of the applications as a group before deciding on the successful applicants. Our CAB has room to grow in terms of the oversight and implementation of the Coordinated Access System, as well as planning in regards to setting the direction of our local response to homelessness. During this coming year, we plan on investing in a third-party facilitator who can support us in working as a CAB to determine and follow through on specific priorities locally. In addition, a consultant will be hired to assess and improve the overall governance of the Coordinated Access System, which will help clarify the role of the CAB in this work as well.	
CA 7	Are the following CAB documents being maintained **and** are they available upon request?	
	• Terms of Reference.	Yes
	• Engagement strategy that explains how the CAB intends to: → Achieve broad and inclusive representation; → Coordinate partnerships with the necessary sectors and systems to meet its priorities (e.g., beyond the homeless-serving sector); and, → Integrate local efforts with those of the province or territory.	Yes
	• Procedures for addressing real and/or perceived conflicts of interest (e.g., members recuse themselves when they have ties to proposed projects), including the membership of elected municipal officials.	Yes

	• Procedures for assessing and recommending project proposals for federal funding under Reaching Home (e.g., supporting a fair, equitable, and transparent assessment process as set out by the Community Entity).	Yes
	• Exclusive and shared responsibilities between the CAB and Community Entity.	Yes
	• Membership terms and conditions, including: → Recruitment processes; → Length of tenure; → Attendance requirements; → Delegated tasks; and, → Having at least two seats available for the alternate Community Entity and CAB/Regional Advisory Board (RAB) member, where applicable.	Yes
CA 8	a) Do all service providers receiving funding under the Designated Communities (DC) or Territorial Homelessness (TH) stream participate in the Coordinated Access system?	Yes
	b) Has participation in the Coordinated Access system been 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) Has participation been 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
Systems Map and Resource Inventory		
CA 9	a) A systems map identifies and describes the service providers that participate in the Coordinated Access system. Does the community have a current systems map **and**, if requested, can it be made publicly available?	Under development
	b) Does the systems map include the following elements:	
	→ Name of the organization and/or service provider:	Not yet
	→ Type of service provider (e.g., emergency shelter, supportive housing):	Not yet
	→ Funding source(s):	Not yet
	→ Eligibility for service (e.g., youth):	Not yet
	→ Capacity to serve (e.g., number of units):	Not yet
	→ Role in the Coordinated Access system (e.g., access point):	Not yet
	→ Role with maintaining quality data used for a Unique Identifier List (e.g., keep data up-to-date for housing history):	Not yet
	→ If the service provider currently uses the HMIS:	Not yet
	c) Over the last year, was the systems map used to guide efforts to improve:	

	→ The Coordinated Access system (e.g., identify opportunities to increase participation):	Not yet
	→ Use of the HMIS (e.g., identify opportunities to onboard new service providers):	Not yet
	→ Data quality (e.g., increase data comprehensiveness):	Not yet
CA 10	a) Are all housing and related resources funded under the DC or TH stream included in the Resource Inventory? This means that they fill vacancies using the Unique Identifier List, following the vacancy matching and referral process.	Yes
	b) For each housing and related resource in the Resource Inventory, have eligibility criteria been documented?	Yes
	c) For each housing and related resource in the Resource Inventory, have prioritization criteria, and the order in which they are applied, been documented **and**, if requested, can this documentation be made available? At minimum, depth of need (i.e., acuity) must be included as a factor in prioritization.	Yes
Service Navigation and Case Conferencing		
CA 11	a) Are there processes in place to ensure that people are being supported to move through the Coordinated Access process? This is often referred to as service navigation or case conferencing.	Yes
	b) Have these processes been documented **and**, if requested, can this documentation be made available?	Yes
	c) Do the processes include expectations for the following:	

	→ Helping people to identify and overcome barriers to accessing appropriate services and/or housing and 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 and related resources).	Yes
Access Points to Service		
CA 12	a) Are access points available in some form throughout the geographic area covered by the DC or TH funded region, so that people experiencing or at-risk of homelessness can be served regardless of where they are in the community?	Yes
	b) Have access points been documented **and** is this information publicly available?	Yes
CA 13	a) Are there processes in place to **monitor** if there is **easy**, **equitable** and **low-barrier** access to the Coordinated Access system **and** to respond to any issues that emerge, as appropriate?	Yes
	b) Have these processes been documented **and**, if requested, can this documentation be made available?	Under development
Initial Triage and more In-Depth Assessment		
CA 14	a) Is the triage and assessment process documented in one or more policies/protocols?	Yes
	b) Does the **documented** triage and assessment process address the following and, if requested, can the documentation be made available:	

→	**Consents:** Ensuring that people have a clear understanding of the Coordinated Access system, as well as how their personal information will be shared and stored. Includes addressing situations where people may benefit from services, but are not able or willing to give their consent.	Yes
→	**Intakes:** Documenting that people have connected or reconnected with the Coordinated Access system and have been entered into the HMIS, including obtaining or reconfirming consents, creating or updating client records, and entering transactions in the HMIS.	Yes
→	**Initial triage:** Ensuring safety and meeting basic needs (e.g., food and shelter), and guiding people through the process of stopping an eviction (homelessness prevention) or finding somewhere to stay that is safe and appropriate besides shelter (shelter diversion).	Yes
→	**More in-depth assessment:** Gathering information to gain a deeper understanding of people's housing-related strengths, depth of need, and preferences, including through the use of a common assessment tool(s) to inform prioritization for vacancies in the Resource Inventory.	Yes
→	**Community referrals:** Gathering information to understand what services people are eligible for and identifying where they can go to get their basic needs met, get help with a housing plan and/or connect with other related resources.	Yes

	→ **Housing plans:** Documenting people's progress with finding and securing housing (with appropriate subsidies and/or supports, as applicable).	Yes
	→ **Using a person-centered approach:** Tailoring use of common tools to meet the needs and preferences of different people or population groups (e.g., youth), while also maintaining consistency in process across the Coordinated Access system.	Yes
CA 15	a) Is a common, unified triage and assessment process being applied across all population groups in the community **and**, if requested, can this documentation be made available?	Yes
	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
Vacancy Matching and Referral with Prioritization		

CA 16	a) Is the vacancy matching and referral process documented in one or more policies/protocols?	Yes
	b) Does your **documented** vacancy matching and referral process address the following:	
	→ **Roles and responsibilities:** Describing who is responsible for each step of the process, including data management.	Yes
	→ **Prioritization:** Identifying how prioritization criteria is used to determine an individual or family's relative priority on the Priority List (a subset of the broader Unique Identifier List) when vacancies become available (i.e., how the Priority List is filtered and/or sorted).	Yes
	→ **Referrals:** What information to cover when referring an individual or family that has been matched and how their choice will be respected, including allowing individuals and families to reject a referral without repercussions.	Yes
	→ **Offers:** What information to cover when a provider is offering a vacancy to an individual or family that has been matched and tips for making informed decisions about the offer.	Yes
	→ **Challenges:** How concerns and/or disagreements about prioritization and referrals will be managed, including criteria by which a referral could be rejected by a provider following a match.	Yes
	→ **Resource Inventory management:** Steps to track real-time capacity, transitions in/out of units, occupancy/caseloads, progress with referrals/offers, and housing outcomes.	Yes

CA 17	Are vacancies from the Resource Inventory filled using a Priority List, following the vacancy matching and referral process?	Yes

Section 2 Summary Tables

The tables below provides a summary of the work your community has done so far to meet the Reaching Home minimum requirements under the **Coordinated Access and CAB Directives**.

	Completed	Started	Not Yet Started
Total	9	7	1

Coordinated Access	Completed (score)	Completed (%)
Governance and partnerships (out of 8 points)	2	25%
System map and Resource Inventory (out of 2 points)	1	50%
Service navigation and case conferencing (out of 1 point)	1	100%
Access points (out of 2 points)	1	50%
Initial triage and more in-depth assessment (out of 2 points)	2	100%
Vacancy matching and referral with prioritization (out of 2 points)	2	100%
All (out of 17 points)	**9**	**53%**

End of Section 2

SECTION 3: HOMELESSNESS MANAGEMENT INFORMATION SYSTEM AND OUTCOMES-BASED APPROACH SELF-ASSESSMENT		
Context		
CHR 7	a) In your community, is the Homeless Individuals and Families Information System (HIFIS) the Homelessness Management Information System (HMIS) that is being used?	Yes
<u>Note:</u> Throughout Section 3 and Section 4 of this CHR, questions that ask about the "HMIS" or the "dataset" refer to the HMIS identified in question CHR 7.		
Homelessness Management Information System (HMIS)		
HIFIS 1	Is an HMIS being **actively used** to manage individual-level client data (i.e., person-specific data) and service provider information for Coordinated Access and for the Outcomes-Based Approach? This includes using the HMIS to generate data for the Unique Identifier List and outcome reporting.	Yes
HIFIS 2	a) 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 for the Outcomes-Based Approach?	Under development
	b) Over the last year, were **other** non-Reaching Home-funded providers that serve people experiencing or at-risk of homelessness encouraged to actively use the HMIS? They may or may not have agreed to do so at this time.	Yes

HIFIS 3	a) Has the Community Entity signed the latest Data Provision Agreement (find the latest version **here**, which includes the Racial Identity field in the annex) with Housing, Infrastructure and Communities Canada (HICC)? This may have been done in a previous year.	Yes
	b) Are local agreements in place to manage privacy, data sharing and client consent related to the HMIS? These agreements must comply with municipal, provincial/territorial and federal laws and include: • A Community Data Sharing Agreement; and, • A Client Consent Form.	Yes
	c) 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?	Under development
HIFIS 4	Has the Community Entity updated HIFIS to the latest version that was most recently confirmed as mandatory by HICC?	Yes
HIFIS 5	Has there been meaningful collaboration between the DC CE and local Indigenous partners, including those that sit on your CAB, over the reporting period specific to the work of implementing, maintaining and/or improving, as well as the use of the HMIS? Note: The response to this question is auto-populated from CHR 4(a).	Under development
Data Uniqueness		
OBA 1	a) Does the dataset include people currently experiencing homelessness that have interacted with the homeless-serving system?	Yes

	b) Do people appear only once in the dataset?	Yes
	c) Do people give their consent to be included in the dataset?	Yes
OBA 2	Is there a **written policy/protocol** (“Inactivity Policy”) that describes how **interaction with the homeless-serving system** is **documented**? The policy/protocol must: • 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
OBA 3	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 must: • 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
	Data Consistency	
OBA 4	To support Coordinated Access, is the HMIS used to generate data for a Unique Identifier List?	Yes

OBA 5	Is the HMIS used to collect data for setting baselines, setting reduction targets and tracking progress for the following community-level outcomes:	
	→ Overall homelessness:	Yes
	→ Newly identified as experiencing homelessness:	Yes
	→ Returns to homelessness:	Yes
	→ Indigenous homelessness:	Yes
	→ Chronic homelessness:	Yes
Data Timeliness		
OBA 6	Is the dataset updated as soon as new information is available about a person for:	
	→ Interaction with the system (e.g., changes from “active” to “inactive”).	Yes
	→ Housing history (e.g., changes from “homeless” to “housed”).	Yes
	→ 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).	Yes
OBA 7	Is data readily available and accessible, so that it can be used for Coordinated Access, the Outcomes-Based Approach and to drive the prevention and reduction of homelessness more broadly?	Yes
Data Completeness		

OBA 8	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 in the dataset?	Yes
OBA 9	Are processes in place to ensure that data for every person in the dataset is as complete as possible for:	
	→ Interaction with the system:	Yes
	→ Housing history (including data about where people were staying immediately before becoming homeless and, once they've exited, where they went):	Yes
	→ Indigenous identity:	Yes
Data Comprehensiveness		
OBA 10	Does the dataset include all household types (e.g., singles and families experiencing homelessness)?	Yes
OBA 11	Does the dataset include people experiencing sheltered homelessness (e.g., staying in emergency shelters)?	Yes
OBA 12	Does the dataset include people experiencing unsheltered homelessness (e.g., people living in encampments)?	Yes
CHR 9	The following questions aim to help consider other factors that may impact data comprehensiveness. They do not directly assess progress with the minimum requirements.	
	a) Does the dataset include the following household types, as much as possible right now:	
	→ Single adults:	Yes

→ Unaccompanied youth:	Yes
→ Families	Yes – All family members including dependents
b) Does the dataset include people staying in the following types of shelter:	
→ Permanent emergency shelter:	Yes
→ Seasonal or temporary emergency shelter:	Yes
→ Hotels/motel stays paid for by a service provider:	Yes
→ Domestic violence shelters:	Not applicable
c) Does the dataset include the following groups of people who have interacted with the system:	
→ People that identify as Indigenous:	Yes
→ People as soon as they interact with the system:	Yes – people are added on the first day
→ People experiencing hidden homelessness:	Yes
→ People staying in transitional housing:	Yes
→ People staying in public institutions who do not have a fixed address (e.g., jail or hospital):	Yes

OBA 13	Under Reaching Home, at minimum, a comprehensive dataset includes all household types (OBA 10), people experiencing sheltered homelessness (OBA 11) and people experiencing unsheltered homelessness (OBA 12), as applicable. Consider your answers to questions OBA 10, OBA 11, OBA 12 and CHR 9. Does the dataset include everyone currently experiencing homelessness that has interacted with the homeless-serving system, as much as possible right now?	Yes
Data Use		
OBA 14	**Note:** For the purpose of this CHR, the dataset can only be used for monthly reporting if there is at least one full month of data available, and for annual reporting if there is at least one full fiscal year of data available.	
	a) **<u>Can the dataset be used to set</u>** monthly and annual baselines and reduction targets for the following community-level outcomes:	
	→ Overall homelessness:	Yes
	→ Newly identified as experiencing homelessness:	Yes
	→ Returns to homelessness:	Yes
	→ Indigenous homelessness:	Yes
	→ Chronic homelessness:	Yes
	b) **<u>Is the dataset being used to set</u>** monthly and annual baselines and reduction targets for the following community-level outcomes:	
	→ Overall homelessness:	Yes
	→ Newly identified as experiencing homelessness:	Yes

	→ Returns to homelessness:	Yes
	→ Indigenous homelessness:	Yes
	→ Chronic homelessness:	Yes
OBA 15	Is data used to inform action related to preventing and reducing homelessness?	Under development
	b) How is data being used to inform action? Please provide specific examples. Your response should include: • Examples of how data is used to develop and/or update clear plans of action for reaching your reduction targets; and/or, • Examples of how data is used to inform action in policy-making, program planning, performance management, investment strategies and/or service delivery.	
	When we have Reaching Home funding to allocate, we will see if there are any trends in the HIFIS and/or Point in Time Count data that could inform what priorities should be targetted with the funding. Often, the populations identified are single adult men, Indigenous People, and those experiencing chronic homelessness because our unhoused population is largely made up of these groups. There is room for improvement with this practice, as identifying priority populations/trends in the data for the purpose of funding allocations has limited effectiveness. For example, we may identify these groups based on the data, but projects serving other populations are eligible and often are selected to receive funding based on the need they have demonstrated. In addition, targetting specific population groups when allocating funding does not create a comprehensive strategic approach to addressing need, since we do not evaluate reductions in homelessness specific to those populations as a result of the projects receiving Reaching Home funding. To improve how we use data to inform action, we plan on investing Reaching Home funding into hiring a consultant that will host facilitated conversations with our CAB. These conversations will help us determine how we establish priorities as a group, what our short term priorities are for the next 2 years of funding, and how we want to evaluate these priorities over time.	
CHR 10	The following questions aim to determine how you will report data in Section 4 of your CHR.	

	a) What is the earliest you can report monthly data in Section 4 of your CHR, inclusively?	March 2020
	b) What is the earliest you can report annual data in Section 4 of your CHR, inclusively?	2019-20
	c) What methodology will you use to set baselines, set reduction targets and track progress on core Reaching Home outcomes in this CHR? **Reminder:** To meet **Outcomes-Based Approach Minimum Requirement 8**, you must use the federal methodology to set baselines, set reduction targets and track progress for the five core Reaching Home outcomes. For HIFIS users, this means using the "Community Outcomes" report in HIFIS. For non-HIFIS users, this means using a report equivalent to the "Community Outcomes" report in HIFIS.	HIFIS: "Community Outcomes" report
Partnerships		
OBA 16	Has there been meaningful collaboration between the DC CE and local Indigenous partners, including those that sit on your CAB, over the reporting period specific to the work of strengthening the Outcomes-Based Approach? Note: The response to this question is auto-populated from CHR 4(a).	Under development
Data quality improvement		
OBA 17	a) Are efforts being made to improve data quality?	Yes

	b) How was data quality improved? Please provide specific examples. Your response could reference one or more dimensions of data quality: • Data uniqueness • Data consistency • Data timeliness • Data completeness • Data comprehensiveness	
	Several efforts were made to improve data quality over the reporting period. These improvements include the hiring of a consultant to support upgrades to local use of HIFIS, issuing new consent forms for all individuals in HIFIS, onboarding more organizations as users of HIFIS, and updating HIFIS to the latest version. The work done by the consultant resulted in being able to update our client consent forms, which previously posed a barrier based on how they were originally written when we started using HIFIS. The previous consent forms listed specific organizations, meaning that individuals were only giving consent for a limited number of specific organizations to have access to their information in HIFIS. This limited how HIFIS was used locally - alternate methods were developed to ensure as many homeless-serving organizations were feeding data into HIFIS, but using this workaround method compromised data consistency, timeliness, and comprehensiveness. Now that the consent form has been revised to be more open ended, additional local homeless-serving organizations are being trained and onboarded as HIFIS users. Their direct use of HIFIS has and will continue to greatly improve all dimensions of data quality locally, and we will continue to train organizations to ensure that HIFIS is being used consistently across our local sector. Lastly, updating to the most recent version of HIFIS has improved functionality and will result in further improvements across all dimensions of data quality.	
Reporting on other Community-Level Outcomes		
CHR 11	a) Beyond the five mandatory core outcomes under Reaching Home, do you wish to include 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 include any additional annual community-level outcomes for this CHR? **Reminder:** Reporting on additional community-level outcomes is optional.	No

Section 3 Summary Tables

The tables below provides a summary of the work your community has done so far to meet the Reaching Home minimum requirements under the **HIFIS Directive**.

	Completed	**Started**	**Not Yet Started**
Total	2	3	0

Homelessness Management Information System	**Completed (score)**	**Completed (%)**
Homelessness Management Information System (out of 5 points)	2	40%
All (out of 5 points)	**2**	**40%**

The tables below provides a summary of the work your community has done so far to meet the Reaching Home minimum requirements under the **Outcomes-Based Approach Directive**.

	Completed	**Started**	**Not Yet Started**
Total	15	2	0

Outcomes-Based Approach	**Completed (score)**	**Completed (%)**
Data uniqueness (out of 3 points)	3	100%
Data consistency (out of 2 points)	2	100%
Data timeliness (out of 2 points)	2	100%
Data completeness (out of 2 points)	2	100%

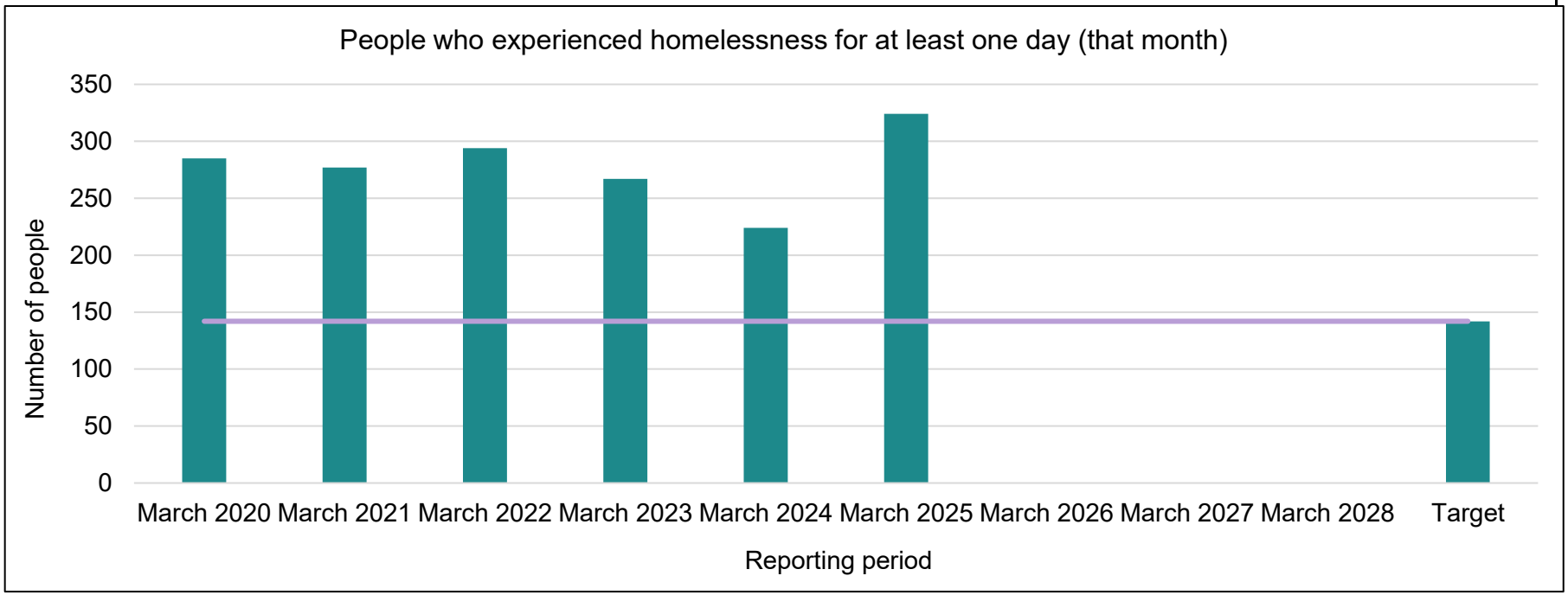
Data comprehensiveness (out of 4 points)	4	100%
Data use (out of 2 points)	1	50%
Partnerships (out of 1 point)	0	0%
Data quality improvement (out of 1 point)	1	100%
All (out of 17 points)	**15**	**88%**

End of Section 3

SECTION 4: COMMUNITY-LEVEL OUTCOMES AND TARGETS

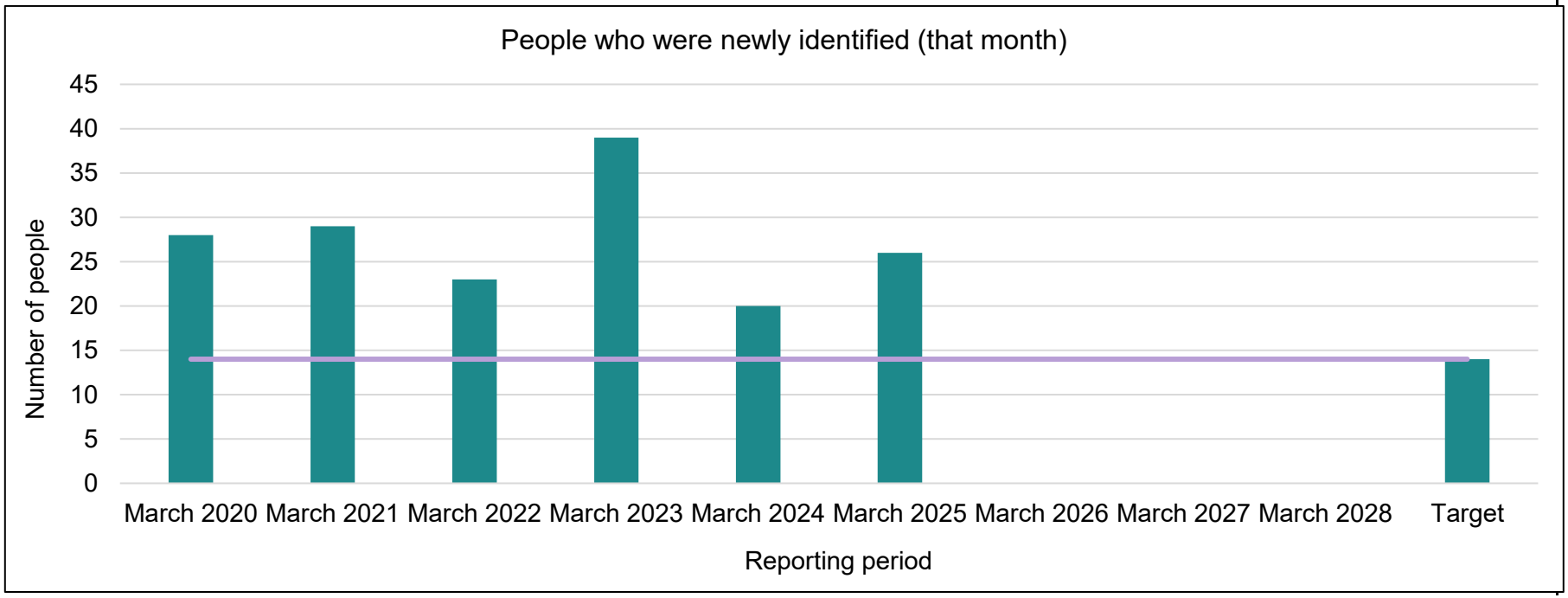
Using person-specific data to set baselines, set reduction targets and track progress – Monthly data

O1(M) Outcome #1: Fewer people experience homelessness (homelessness is reduced overall)										
Given your answers in Section 3, you can report monthly result(s) for Outcome #1 using your person-specific data.										
	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	**Target**
People who experienced homelessness for at least one day (that month)	285	277	294	267	224	324				142



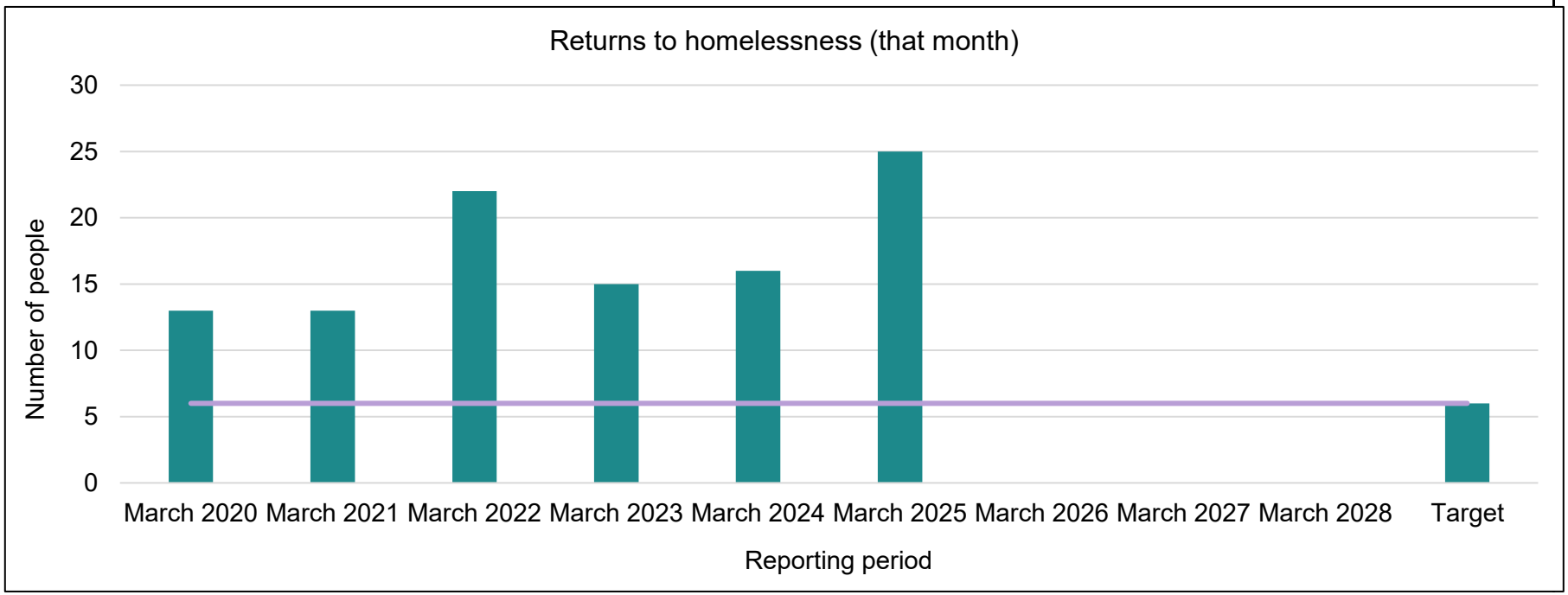
O1(M)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	March 2020
	Overall homelessness will decrease by 50% between March 2020 and March 2028.	
	b) Please use the comment box below to: • As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target. • As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank. • Optionally, provide any additional context on your data.	
	Please insert comments here	

O2(M) Outcome #2: Fewer people were newly identified (new inflows to homelessness are reduced)										
Given your answers in Section 3, you can report monthly result(s) for Outcome #2 using your person-specific data.										
	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	**Target**
People who were newly identified (that month)	28	29	23	39	20	26				14



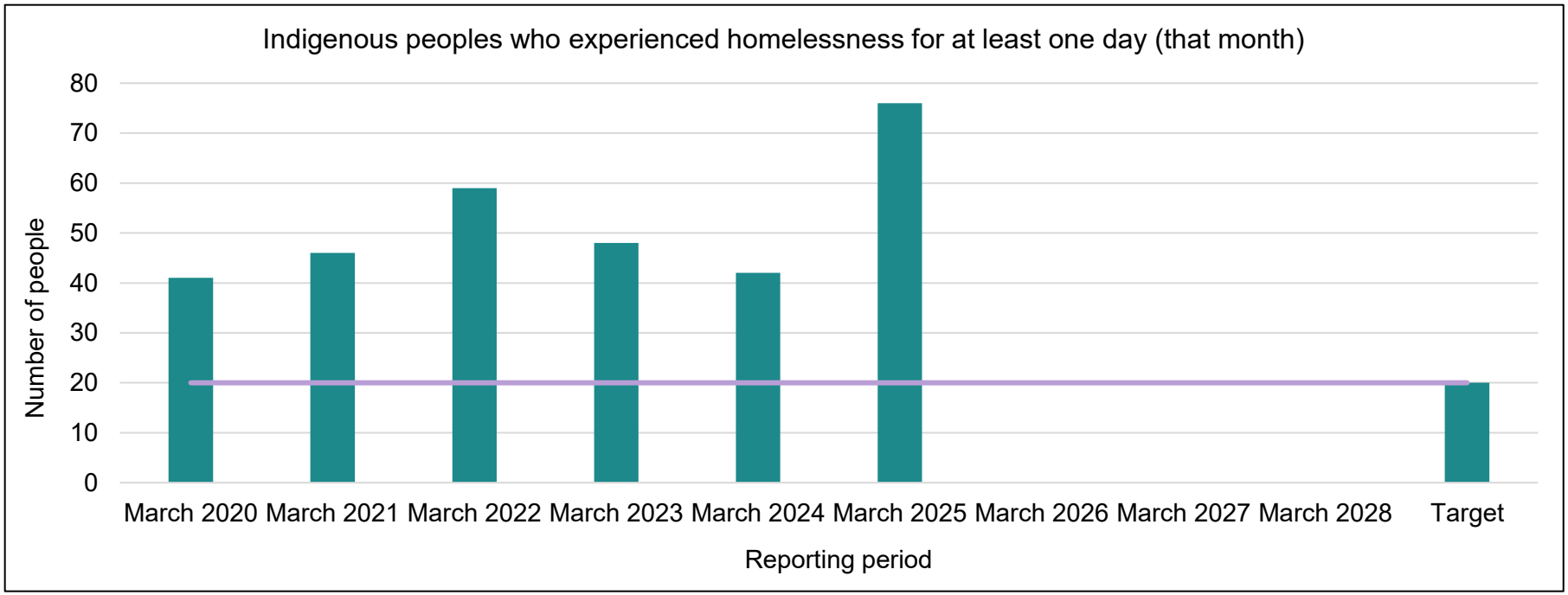
O2(M)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	March 2020
	New inflows to homelessness will decrease by 50% between March 2020 and March 2028.	
	b) Please use the comment box below to: • As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target. • As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank. • Optionally, provide any additional context on your data.	
	Please insert comments here	

O3(M) Outcome #3: Fewer people return to homelessness (returns to homelessness are reduced)										
Given your answers in Section 3, you can report monthly result(s) for Outcome #3 using your person-specific data.										
	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	**Target**
Returns to homelessness (that month)	13	13	22	15	16	25				6



O3(M)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	March 2020
	Returns to homelessness will decrease by 54% between March 2020 and March 2028.	
	b) Please use the comment box below to: • As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target. • As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank. • Optionally, provide any additional context on your data.	
	Please insert comments here	

O4(M) Outcome #4: Fewer Indigenous peoples experience homelessness (Indigenous homelessness is reduced)										
Given your answers in Section 3, you can report monthly result(s) for Outcome #4 using your person-specific data.										
	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	**Target**
Indigenous peoples who experienced homelessness for at least one day (that month)	41	46	59	48	42	76				20



O4(M)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	March 2020

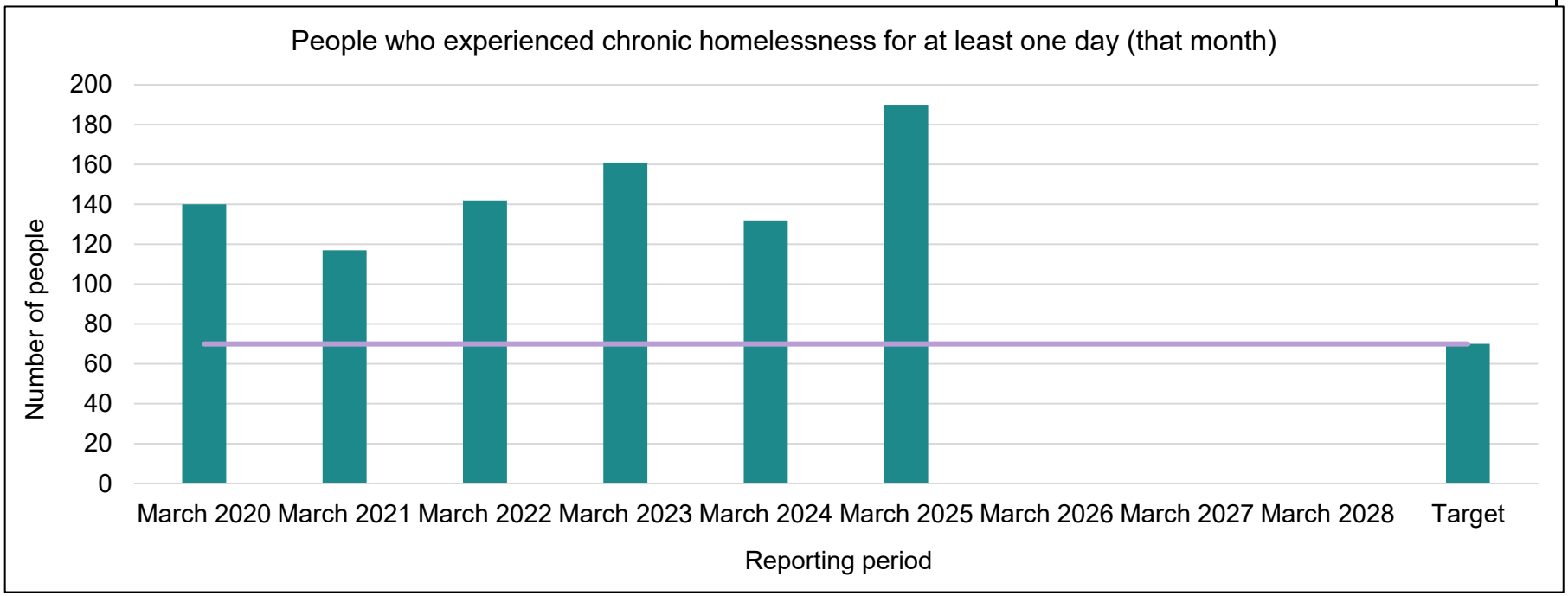
Indigenous homelessness will decrease by 51% between March 2020 and March 2028.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- As applicable, explain how Indigenous partners were engaged in the process of setting the baseline, setting the target, reporting on the outcome and/or interpreting the results.
- Optionally, provide any additional context on your data.

Please insert comments here

O5(M) Outcome #5: Fewer people experience chronic homelessness (chronic homelessness is reduced)										
Given your answers in Section 3, you can report monthly result(s) for Outcome #5 using your person-specific data. Note: As applicable, your target must be, at minimum, a 50% reduction from your baseline.										
	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	**Target**
People who experienced chronic homelessness for at least one day (that month)	140	117	142	161	132	190				70



O5(M)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	March 2020

Chronic homelessness will decrease by 50% between March 2020 and March 2028.

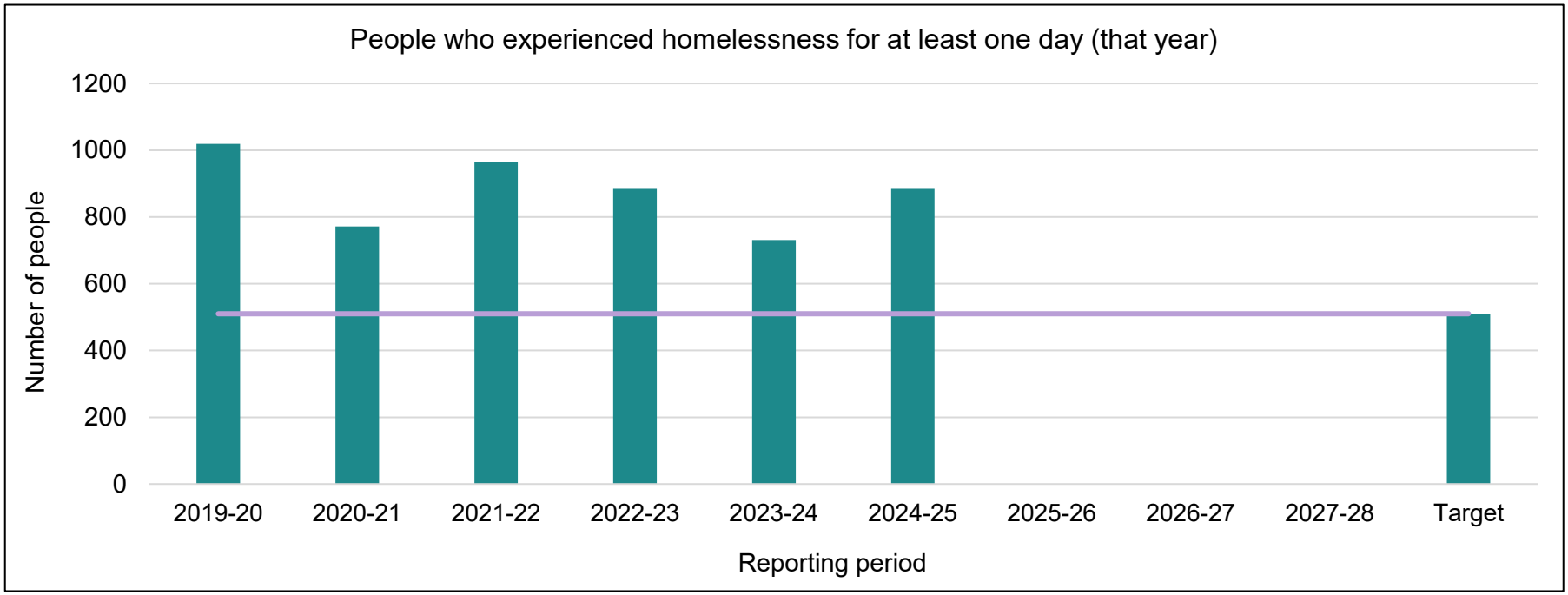
b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

Please insert comments here

Using person-specific data to set baselines, set reduction targets and track progress – Annual data

O1(A)	**Outcome #1: Fewer people experience homelessness (homelessness is reduced overall)**									
Given your answers in Section 3, you can report annual result(s) for Outcome #1 using your person-specific data.										
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	**Target**
People who experienced homelessness for at least one day (that year)	1019	772	964	884	731	884				510



O1(A)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	2019-20

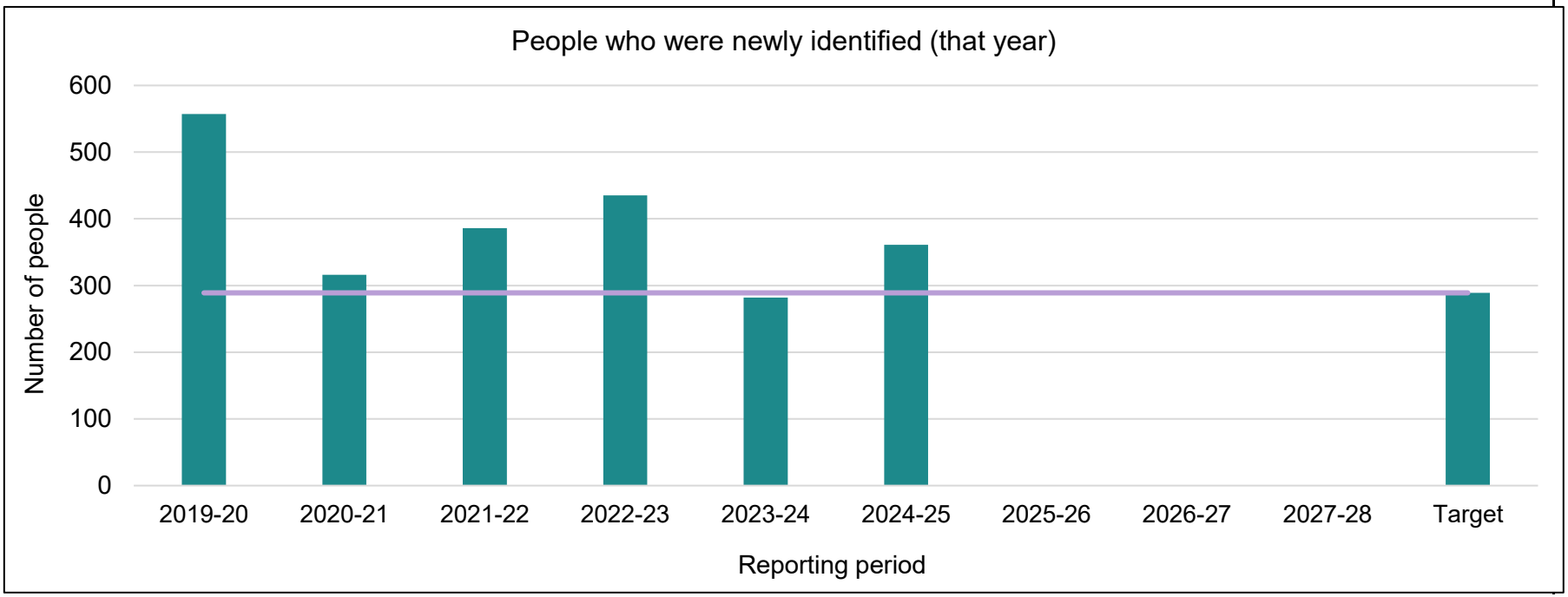
Overall homelessness will decrease by 50% between 2019-20 and 2027-28.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

Please insert comments here

O2(A)	Outcome #2: Fewer people were newly identified (new inflows to homelessness are reduced)									
Given your answers in Section 3, you can report annual result(s) for Outcome #2 using your person-specific data.										
	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)	557	316	386	435	282	361				289



O2(A)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	2019-20

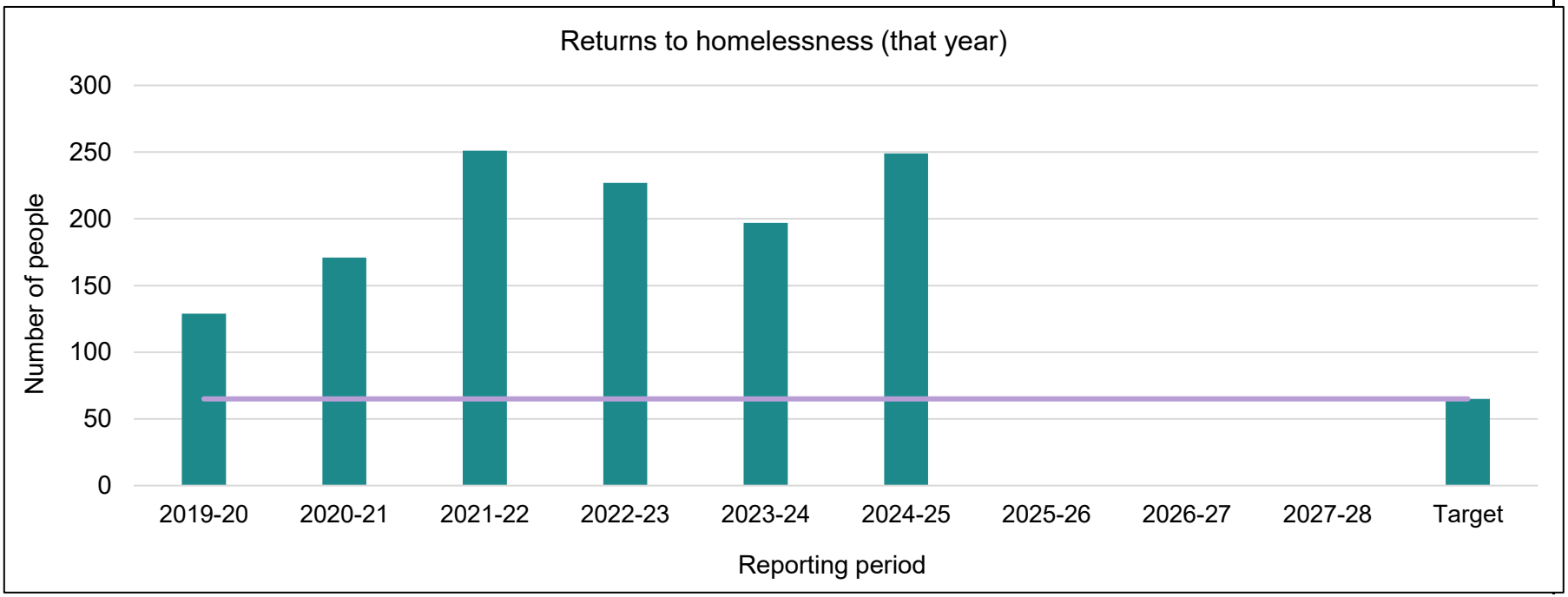
New inflows to homelessness will decrease by 48% between 2019-20 and 2027-28.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

Please insert comments here

O3(A)	Outcome #3: Fewer people return to homelessness (returns to homelessness are reduced)									
Given your answers in Section 3, you can report annual result(s) for Outcome #3 using your person-specific data.										
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	**Target**
Returns to homelessness (that year)	129	171	251	227	197	249				65



O3(A)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	2019-20

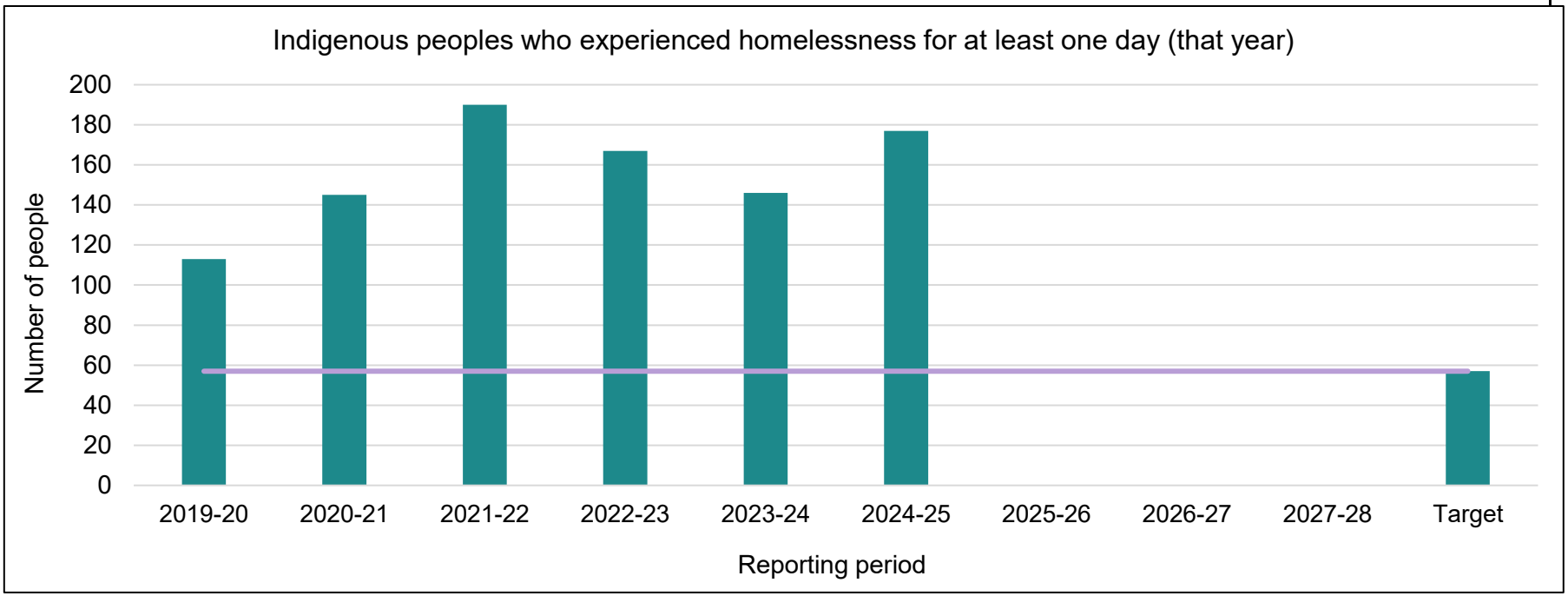
Returns to homelessness will decrease by 50% between 2019-20 and 2027-28.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

Please insert comments here

O4(A)	Outcome #4: Fewer Indigenous peoples experience homelessness (Indigenous homelessness is reduced)									
Given your answers in Section 3, you can report annual result(s) for Outcome #4 using your person-specific data.										
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	**Target**
Indigenous peoples who experienced homelessness for at least one day (that year)	113	145	190	167	146	177				57



O4(A)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	2019-20

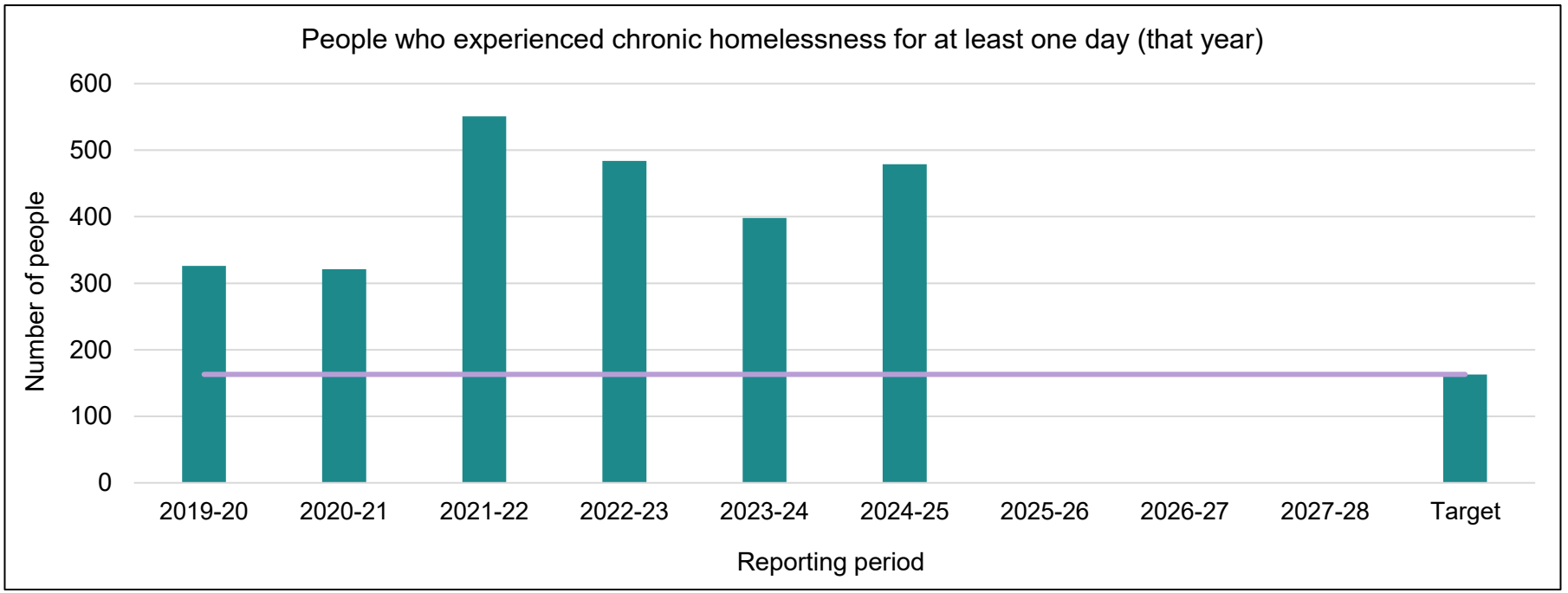
Indigenous homelessness will decrease by 50% between 2019-20 and 2027-28.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- As applicable, explain how Indigenous partners were engaged in the process of setting the baseline, setting the target, reporting on the outcome and/or interpreting the results.
- Optionally, provide any additional context on your data.

Please insert comments here

O5(A)	Outcome #5: Fewer people experience chronic homelessness (chronic homelessness is reduced)									
Given your answers in Section 3, you can report annual result(s) for Outcome #5 using your person-specific data. *Note: As applicable, your target must be, at minimum, a 50% reduction from your baseline.*										
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	**Target**
People who experienced chronic homelessness for at least one day (that year)	326	321	551	484	398	479				163



O5(A)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	2019-20

Chronic homelessness will decrease by 50% between 2019-20 and 2027-28.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

Please insert comments here

End of Section 4a