

**Starting At Home In Medicine Hat - Our 5 Year Plan to End Homelessness ...
Year 1 Progress Report to the Community**



*Until
Everyone
Is Home*

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Acknowledgements

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The MHCHS would also like to thank the community members who shared their experiences and perspectives regarding our initial year of implementing our Plan. Thank you to Cal Bannow for the use of his photography and Everett Kaskamin for sharing his artwork used in this report.

➤ 1. Message from the Manager of Homeless & Community Housing, MHCHS

As a community, 2008 - 09 marked a new beginning in our understanding of the needs of our vulnerable citizens and the community responses required to end homelessness in our city. Like so many cities across North America, historical approaches to managing homelessness were failing to reduce the number of citizens impacted by this trauma...in fact the number of homeless citizens continued to increase! It was time for a new focus...a new plan...a multi-year strategy that focused on ending homelessness based on best practices, strong leadership and community based collaboration.

For a community that once believed that the incidence of homelessness was rare and primarily experienced by people en route to some other destination, we've learned a great deal about our homeless neighbours since 2008.

Homelessness in Medicine Hat has many faces...

- It's the family whose household income cannot keep up with rising costs;
- It's the senior citizen who struggles to make ends meet on a fixed income;
- It's the young person trying to make their way alone in the world because "home" has never been part of their reality;
- It's homeless neighbours that hail from all corners of the world but most of them are long standing Hatters struggling to get by;
- It's adults and youth whose access to appropriate and client centered health care, income and support services ensure that they remain trapped in poverty and homelessness;
- It's the one in ten kids and their families that live deeper and longer in poverty than their poor counterparts in other provinces across the country;
- Most importantly, it's a population of citizens with the resilience and courage to make the most of a community response dedicated to helping them move from crisis to stability; and
- It's the pool of dedicated professionals and community members who work tirelessly to create a community where everyone has access to safe permanent housing and the supports required to improve self reliance and well-being.

In our journey from managing homelessness to a focus on ending it, we've learned the benefits of courage, research, evidence informed solutions, effective coaching and mentorship as well as the value of not only recognizing our successes but, just as importantly, where improvements are still required.

The road ahead may be challenging but *Starting At Home in Medicine Hat – Our 5 Year Plan to Ending Homelessness* provides an appropriate roadmap. "Staying the course" and remaining strategic will lead to success in meeting our goals. The journey to ending homelessness and improving the southeastern corner of this province will be worth the effort. I'll be watching your progress from Ottawa...continue to impress us with your innovative spirit, collaboration and bravery in continuing to do what is needed for our neighbours, both housed and homeless. ***I thank you for the opportunity and the adventure!***

All the best,



Tracy Flaherty-Willmott



C. H. 11

> 2. Starting At Home in Medicine Hat - Our 5 Year Plan to End Homelessness - Executive Summary

In 2008 - 2009, it was estimated that there were approximately 11,000 homeless people currently living in Alberta. As has been the experience in most cities across North America, Medicine Hat also witnessed an increase in the number of citizens struggling with homelessness, despite our efforts to ensure that their basic needs were met.

Homelessness is a complex issue requiring multifaceted solutions that are as unique as the individuals struggling with this trauma. In our community, the impact of homelessness and the many affiliated social issues resulted in 1009 citizens (including 282 children) requiring emergency shelter during 2010 - 11. Although these citizens would be included in our visibly homeless population, this number does not incorporate the many citizens that make up our hidden homeless population.

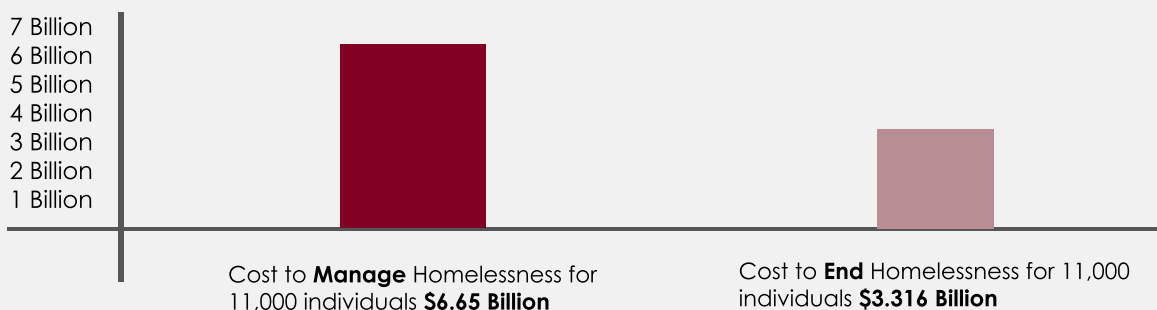
The current economic downturn has caused some individuals and families to experience the fear and uncertainty affiliated with homelessness for the very first time. Medicine Hat has worked to improve our capacity to meet the needs of our vulnerable citizens over the past ten years. Community collaborations and innovation have contributed to the evolution of our efforts to a renewed commitment to ending the trap of homelessness in our city.

Our biggest accomplishment has been the shift from managing homelessness to a focus on ending it. Housing First ensures that the provision of appropriate supports from the safety and dignity of a person's home can lead to self reliance. *Starting At Home in Medicine Hat* provides the comprehensive strategy for closing the front door into homelessness as well as opening the back door out of it.

> 3. The Costs of Homelessness - Ending Homelessness Makes Economic Sense

The social costs of homelessness are wide-ranging, however, it is increasingly being realized that so too are the economic costs. A *Plan for Alberta* noted that continuing to manage the homeless population of 11,000 over the next ten years, if no new strategies were implemented, would cost the Alberta government \$6.65 billion. These direct and indirect costs, however, can be significantly reduced.

Cost To Manage Homelessness versus the Investment Required to END It
(Based on the estimated 11,000 Homeless Individuals living in Alberta, in 2008 - 2009)



TOTAL COST SAVINGS achieved by implementing 10 Year Plan to End Homelessness based on 2009 Homeless Population \$3.334 Billion.

Source: *A Plan for Alberta: Ending Homelessness in 10 Years*, Alberta Secretariat for Action on Homelessness, October 2008.

➤ 4. Ending Homelessness in Medicine Hat – Year 1 Progress Report

In *Starting At Home in Medicine Hat*, we detailed specific initiatives that were to be achieved by the end of the first year of implementation. This chart reports on the progress achieved on each of the streams of activities dedicated to ending the trap of homelessness in our community.

★ Exceeded Target

✓ Achieved/On Schedule

🕒 Behind Schedule

Prevention Stream		
Goals/Targets	First Year Performance (Activities, Outputs and Outcomes)	Status
Ensure that persons have a place to live and access to necessary supports services/ programs. (Goal 1)	1. 113 social housing clients with tenancy issues were supported in maintaining their housing.	★
	2. 100% of Financial Administrator clients maintained housing stability throughout their time in the program.	★
	3. 100% of Financial Administrator clients had not accessed emergency shelter and 39% saw a reduction in Food Bank use.	★
	4. 43 youth were supported by the Youth Shelter Outreach Worker to return to/remain in home or find a safer housing situation.	★
	5. 74% of Housing First graduates were connected to subsidized housing options, enhancing longer term housing stability.	★
	6. Over 400 citizens at risk of homelessness accessed housing assessments to increase their housing stability.	★
	7. Advocacy was successful in ensuring that citizens with active eviction notices were eligible for Housing First supports.	✓
Community development and planning activities occur to reduce Not In My Back Yard (NIMBY) and increase public awareness of homelessness issues. (Goal 6, Target 4)	1. Community conversation resulted in 75 citizens (housed and homeless) identifying plans/priorities to end the trap of homelessness in Medicine Hat.	✓
	2. Community partners received 6 training sessions on Housing First, assessment and triage and client centered case management.	✓
	3. Community collaboration resulted in 348 citizens accessing information and supports at 2 local Project Connect events.	★
	4. Social marketing campaign launched to increase public awareness of homelessness issues.	🕒

Year 1 Challenges:

1. Appropriate and sufficient funding for homelessness prevention remains limited.
2. Cross ministerial cooperation needs to be enhanced to appropriately prevent and end youth homelessness in the province of Alberta.

Re-Housing & Stability Stream		
Targets as per 5 Year Plan	First Year Performance (Activities, Outputs and Outcomes)	Status
All homeless citizens and families have access to emergency accommodation options. (Goal 2, Target 1)	1. After 2 years of provincial funding ensuring shelter beds for all homeless citizens in the city, the Winter's Inn was closed reducing our bed count by 20. The Salvation Army's Family Support Centre began serving the needs of all citizens seeking shelter, regardless of compliance issues.	✱
	2. Inclusive community based shelter ensured fiscal stewardship and a commitment to meet community needs.	✓
	3. Salvation Army and MHCHS collaborate to ensure that all homeless families have appropriate shelter options.	✓
	4. The Inn Between Youth Shelter served 41 youth in 2010 - 11, 83% of these clients successfully returned home or to extended family.	✱
	5. Shelter bed use has been reduced in Medicine Hat between 2008 and 2010.	✱
All crisis sheltered citizens and families will have access to Housing First services with a goal of housing all homeless citizens within 21 days. (Goal 2, Target 2)	1. Shelter residents receive direct referral for housing assessment and access to re-housing supports.	✓
Expand and enhance Housing First capacity in the city to reduce people's experience of Homelessness. (Goal 3, Target 1) ¹	1. Over 270 homeless/near homeless citizens are re-housed and supported through Housing First since April 1 2009.	✱
	2. Family homelessness reduced with 150 + children being removed or diverted from homelessness in Medicine Hat since 2009.	✱
	3. Overall Success Rate: 87% of Housing First clients/families remain stably housed.	✓
	4. Housing blitz from September 2010 and March 2011 ensured the re-housing and support of 100 homeless/near homeless citizens in our city. 20% of these citizens were between the ages of 51-64 years; 31% were between 21-30 years of age.	✱
	5. For 2009-10, 29% of Housing First clients graduated to full independence.	✓

¹ The number of clients housed and supported by Housing First is currently unaudited by Housing & Urban Affairs and may therefore be subject to change. A conservative number is therefore used for this report.

Re-Housing & Stability Stream...continued

Targets as per 5 Year Plan	First Year Performance (Activities, Outputs and Outcomes)	Status
	6. Housing First service delivery standardized to ensure staff professionalism, capacity building and client service practices.	✓
	7. Housing First workers and clients focus on long term housing stability, improved wellness and increased self reliance.	✓
Provision of rent supplements dedicated to eligible Housing First clients to ensure ongoing housing stability. (Goal 3, Target 3)	1. Centralized Rental Support Fund ensures that Housing First clients remain stably housed and do not relapse back into homelessness as they await access to rental supplements.	✓
	2. Advocacy successful in securing ongoing rent supplements dedicated to graduates of the Housing First program.	✓
Implement a Homeless Information and Management System to ensure appropriate case management of clients and the tracking of demographics and needs of homeless population. (Goal 6, Target 3)	1. The incorporation of Efforts to Outcomes (ETO) data collection/case management software ensures that community needs, Housing First impacts and detailed information on homeless citizens' experiences are captured	✓

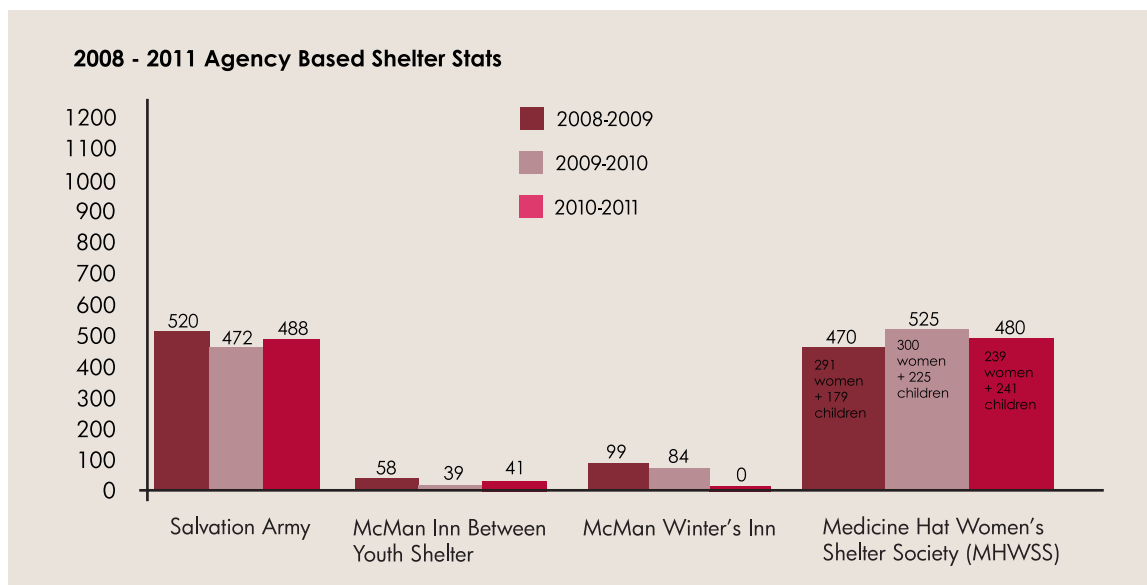
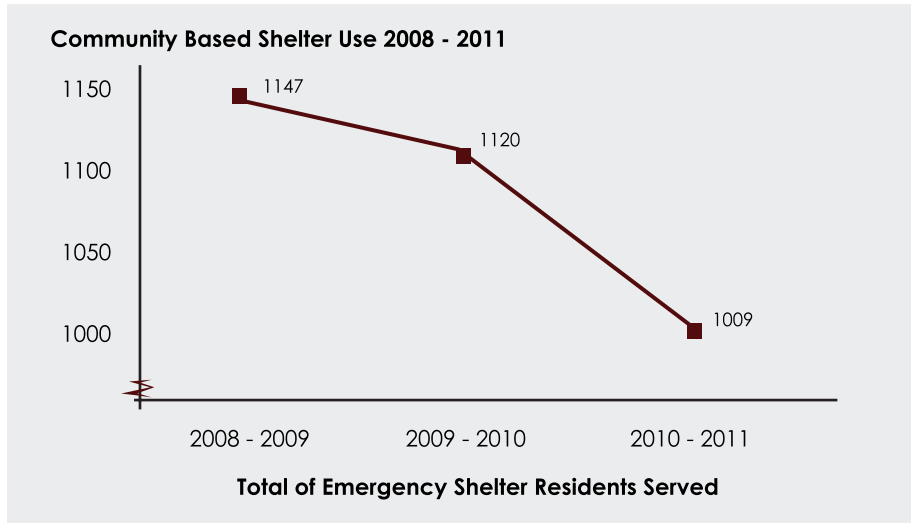
Year 1 Challenges:

1. In 2010 - 11, 665 citizens seek housing/homelessness supports. This was a 48% increase in the number of local citizens seeking housing assistance over 2009-10. This increase provided another example of the impact of the economic downturn on the increased vulnerability of citizens.
2. The need for a community based poverty reduction strategy was evident in the increased number of citizens in imminent risk of homelessness during the economic downturn.
3. As the Housing First program is not an emergency or a first-come first served program, a waiting list often meant that homeless/near homeless citizens could not be re-housed as quickly as our 21 day target.
4. Access to community and governmental services and programs (including health, income, food access, and long term supportive living) remained a challenge for Housing First clients in their journey from crisis to stability.
5. 49% of shelter referrals for housing assessments did not require the intensive supports provided through our Housing First program model, resulting in homeless citizens remaining longer in the shelter. Financial assistance and housing start-up supports required but not the follow-up supports involved in current Housing First program model.
6. The transition from 4 Housing First agencies to 2 was a challenge for staff and clients, resulting in the creation of a waiting list of homeless citizens requiring re-housing and supports.

> 5. Highlights and Insights from Year 1

A) Emergency Shelter Use is Declining in Medicine Hat 2008-11.

As has been the case throughout the province of Alberta, Medicine Hat has also seen a decline in the number of citizens seeking emergency shelter.



* These numbers depict **unique** individuals served each year.

* It must be noted that MHWSS saw an increase in shelter beds from 18 to 24 in 2009.

* In November 2010, the Salvation Army transitioned from a Dry Shelter to an emergency shelter for ALL homeless citizens.

Emergency Shelters are Not Long Term Solutions

It is recognized that emergency shelters will continue to serve a need in our community. However, the goal of our Plan is to ensure that shelters are indeed used in emergency situations as they were originally intended, not as a long term solution to homelessness. In the future, all emergency shelters and other crisis services will provide access points to re-housing supports dedicated to increasing stability and well-being from the safety and dignity of a permanent home...the only true solution to homelessness.

B) Centralized Housing Assessment & Triage...An Innovative Approach

In keeping with international best practices, Medicine Hat adopted a centralized Housing Assessment and Triage (HAT) approach in 2010 - 11. This initiative is delivered by the MHCHS Outreach Department. This HAT Program ensured that all citizens and families that were homeless and at-risk of imminent homelessness received a standardized assessment of their housing and support needs in order to determine the best re-housing program for them. This program also increased our professional ability to assess needs by incorporating the Service Prioritization Decision Assistance Tool (SPDAT), created by OrgCode Inc. as the standardized tool used with clients. The SPDAT is not just for initial assessment but also for the creation of a case planning framework for re-housing supports.

C) Housing First...Our Biggest Accomplishment & The Hardest Work

After assessing the housing and support needs of eligible housing first citizens, a referral is made to McMan or the MHWSS. Once attached to the appropriate Housing First Program, citizens and families receive the housing and support services they need to increase their stability and self reliance. Integration into their communities and access to appropriate services and supports remains a pivotal component in their journey from crisis to stability.

*Housing First
in Medicine
Hat is a
three-way
partnership:*



D) Tackling Youth Homelessness in the Hat...A Mystery to be Solved

As is the case in every Canadian city, Medicine Hat also identified that youth homelessness is an issue that requires increased attention, research and action. One of the biggest challenges in the advocacy for, and provision of, appropriate youth centered services is forming a clear image of the prevalence of youth homelessness in our community, given the fact that many youth experiencing a housing crisis remain hidden by "couch surfing" with friends.

Access to appropriate services for youth and their families is also hampered by service gaps and provincial policy barriers, especially for youth between the ages of 16 and 18. Within our city, however, we remain committed to finding solutions to this issue. Our 2008 evaluation of Outreach Projects revealed that our youth who were homeless and at-risk of homelessness were dealing with a complexity of issues that paralleled those of chronically homeless adults...a population that requires the most intense and most costly level of assistance during re-housing. Solving the mystery regarding the scope of the issue and the means to invest in an appropriate community response is a necessity.

E) Supporting Those Who Support the Homeless...Capacity Building & Coaching

Implementation of Housing First in our community requires specific skills and training that is often uncommon in our mid-sized cities. To ensure that Housing First is delivered in a professional manner and incorporates best practices and evidence informed approaches, the community has ensured that capacity building of front line staff and community based partners remains a priority in the implementation of our Plan.

Since 2009, community partners have benefitted from numerous training sessions and job shadowing opportunities designed to improve client centered approaches, Housing First delivery and appropriate assessment and case management techniques. The Housing First Steering Committee and the MHCHS remain committed to ensuring an appropriate investment in capacity building and coaching.

Iain De Jong, Managing Partner of OrgCode Inc. and former Manager of the Streets to Homes Program with the City of Toronto, has provided guidance and mentorship to Housing First programs, the MHCHS and the community over the past 2 years as we shift from managing homelessness to ending it in our city. His expertise in, and commitment to, maintaining the fidelity of the Housing First approach has ensured that the implementation of our Plan has incorporated evidence informed best practices. The MHCHS and our community partners look forward to future professional development opportunities with Iain as we capitalize on his leadership and expertise in ending homelessness. Here are some of Iain's comments regarding our progress...

From June 2010...

"There has been considerable progress in both the quality of delivery and the level of professionalism... Although the community is still in the formative stage of deploying the new service delivery design, the decisions that have been made within the community concerning the alignment of services has accelerated the progress. The leadership of the MHCHS and the active engagement of community partners in the Housing First approach to service delivery should be commended."

From November 2010...

"There is promising Housing First work occurring in Medicine Hat. One of the top communities in Alberta in its fidelity to Housing First and implementation of Housing First, the MHCHS and contracted agencies should be applauded for their delivery of Housing First services in Medicine Hat."



Starting At Home in Medicine Hat - Our 5 Year Plan to End Homelessness is based on a set of six goals...

1. Ensure that persons have a place to live and access to necessary support services/programs.
2. Ensure access to emergency shelter and interim housing options with rapid transition into permanent housing.
3. Ensure access to permanent affordable housing, with appropriate supports for those families and individuals experiencing homelessness through an expansion of the Housing First approach.
4. Ensure the coordination of services for the persons who are homeless and at-risk of homelessness.
5. Develop and increase the supply of permanent housing options.
6. Strengthen the governance structure and establish an implementation process for the Plan that builds on the strengths of the community, develops capacity, promotes collaboration, innovation and cost-effectiveness, and ensures evidence informed progress.

Medicine Hat's Vision for their Community

At our Community Conversation in October 2009 participants shared...

We want a city:

- that prevents homelessness from occurring;
- where people who are experiencing homelessness are able to access temporary shelter and rapidly transition into permanent housing;
- that possesses an adequate supply of permanent, affordable housing; options and treatment facilities, together with the necessary coordinated, wrap-around supports to ensure that homeless and those at-risk of homelessness have a safe place to live and are able to move towards independent living;
- where persons with mental health and addictions issues do not find themselves on the streets, but in permanent affordable, supported housing;
- where persons are not released from institutional care into homelessness;
- where the youth are not living on the streets; and
- where citizens pull together to respond to the complex, multifaceted issue of homelessness and near homelessness.

