COMMUNITY HOMELESSNESS REPORT SUMMARY
MEDICINE HAT **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:	Yes
→ HMIS:	Yes
→ Outcomes-Based Approach:	Yes

Describe this collaboration in more detail.

In August 2023, Medicine Hat Community Housing Society launched the highly anticipated Decolonization and Indigenization of the Homeless System of Care project. This project set out to assess the current system of care and provide a reconciliation strategy that will include recommendations and an implementation plan of practices that support decolonization and Indigenization as outlined in the Truth and Reconciliation Commission 94 Calls to Action.

Western Management Consultants (WMC) received the contract and promptly began working with CE staff and the Indigenous Liaison for the project to create a detailed work plan, which included delivering a final report by March 31, 2024.

Phase 1, "Intake," commenced in early September 2023 and included a complete review and analysis of Housing Link's (Medicine Hat's Coordinated Access) intake assessments, policies, and procedures. This phase also included internal stakeholder interviews and surveys, as well as engagement with elders, knowledge keepers (sharers), and Indigenous and non-Indigenous individuals with lived experience through interviews and sharing circles.

Phase 2 sought to analyze the engagement of external community stakeholders (those who refer to Housing Link) with the homeless-serving system of care. Confidential interviews and surveys were added to phase 1 data

compilation.

The final phase involved a community-wide assessment of the current system and its policies and procedures through confidential surveys made available to anyone who has experienced homelessness, those currently homeless, or those experiencing housing instability. Key to the project were the voices, experiences, and knowledge gathered by those who have touched the system, which will allow for the journey forward to eliminate perceived discrimination, reduce barriers, and create a more equitable system and process. Surveys were promoted and made available online and in person at the Medicine Hat Community Housing Society office, the Miywasin Friendship Centre, and the Medicine Hat Public Library.

The final report and Decolonization Guide will be made public in late spring of 2024.

In late 2023, after working with Social Solutions to overcome challenges with fully integrating the Indigenous Coordinated Access from Miywasin Friendship Centre, the CE was able, in January 2024, to input the data into the Homeless Management Information System (Efforts to Outcomes - ETO). Work continues with CE providing training to Miywasin Friendship Centre on how to input and update data. This integration will allow for concise reporting and data to further improve the system of care.

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.
The Indigenous Community Advisory Board (CAB) was provided the Community Homelessness Report (CHR) for review prior to submission.

Did the IH CAB sign-off on this CHR?	Yes

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	18	0	0

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%	100%	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.
The Homeless Management Information Systems (HMIS) - Efforts to Outcomes (ETO) database has over 4,447 unique individuals in the system since its implementation in 2007. This does not include youth who have been assisted through various homeless-serving programs in the community, though these numbers are reported monthly and publicly. In 2015, Medicine Hat began participating in Built for Zero and was confirmed to reach functional zero, chronic homelessness in May 2021 following a rigorous process from the Canadian Alliance to End Homelessness to verify data. The community maintained the functional zero status for seven months and then began to see rates of chronic homelessness climb. Challenges that were experienced in 2022-2023 when the ETO database was no longer supported by Internet Explorer and impacted and delayed the CE's efforts to bring Miywasin Friendship Centre into the Coordinated Access System were resolved. Beginning late 2023 and January 2024 to the present, the CE was able to integrate Miywasin Friendship Centre into the database and input historical data into the system. The CE continues to work with Miywasin on system training and inputting of participant data. The CE/CBO was notified in late 2023 that the Government of Alberta would not continue with Efforts to Outcomes (ETO) past April 2025. Communities will be able to independently decide whether to continue with ETO or move to a different database like HIFIS. MHCHS is looking at a community-wide database; however, it is not willing to lose the data contained in ETO by moving to a different database.

Section 3. Outcomes-Based Approach Self-Assessment

Section 3 Summary Table

The tables below provide a summary of the work your community has done so far to transition to an Outcomes-Based Approach under the 2019-2024 Reaching Home funding cycle.

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

Step 4: Can report monthly 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**
Yes	Outcome 1: Yes	Outcome 1: Yes	Yes
	Outcome 2: Yes	Outcome 2: Yes	
	Outcome 3: Yes	Outcome 3: Yes	
	Outcome 4: Yes	Outcome 4: Yes	
	Outcome 5: Yes	Outcome 5: Yes	

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**
Yes	Outcome 1: Yes	Outcome 1: Yes	Yes
	Outcome 2: Yes	Outcome 2: Yes	
	Outcome 3: Yes	Outcome 3: 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.
Medicine Hat maintains a clean and rich database that allows for real-time, data-driven decisions regarding the Homeless System of Care. This allows the CE to adjust programming and supports to best meet the needs of each individual experiencing homelessness or housing instability in the community. This strong focus on data and quality of services has allowed Medicine Hat to evolve the system of care and course correct when needed.

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:

→ 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.

When individuals enter the system of care through Coordinated Access, an intake interview is conducted by Housing Link workers, which assesses their level of housing support needed, eligibility, and interest in available supports. Assessments are completed in person, over the phone, in the office, or in the community at hospitals, shelters, or remand. Once this interaction with the system has occurred, Housing Link workers enter all information into Efforts to Outcomes (ETO), the HMIS used in Medicine Hat. Each time an interaction between the system and an individual takes place, efforts are inputted into the database. Such efforts provide all relevant and updated information. Some service providers also utilize Excel and narrative reporting in addition to ETO. This combination allows for reporting that is rich in data and context.

Section 4. Community-Level Outcomes and Targets – Monthly

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

	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)	25	61	28	30	21					12

People who experienced homelessness for at least one day (that month)
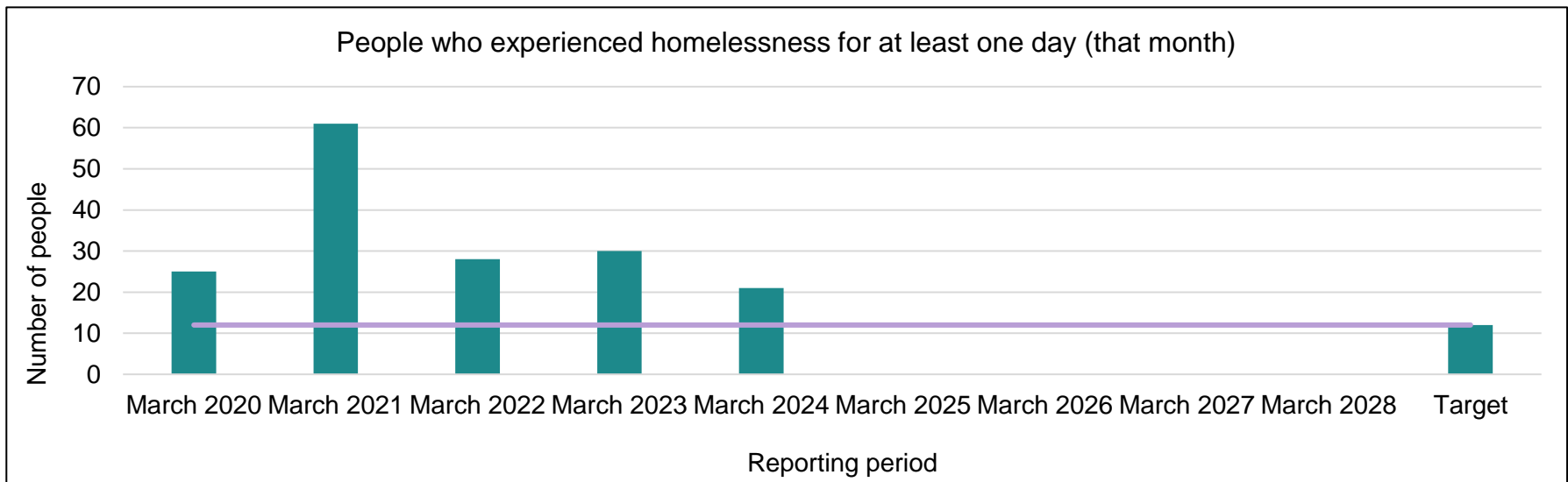
O#1(M)	What is your baseline year?	March 2020
	Overall homelessness will decrease by 52% between March 2020 and March 2028.	
	How was this Outcome generated?	Other HMIS custom report
	Has the data you reported for this Outcome from March 2020 to March 2023 changed from your previous CHR?	No, none of 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 one or more data point

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

	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)	8	13	14	8	8					4

People who were newly identified (that month)
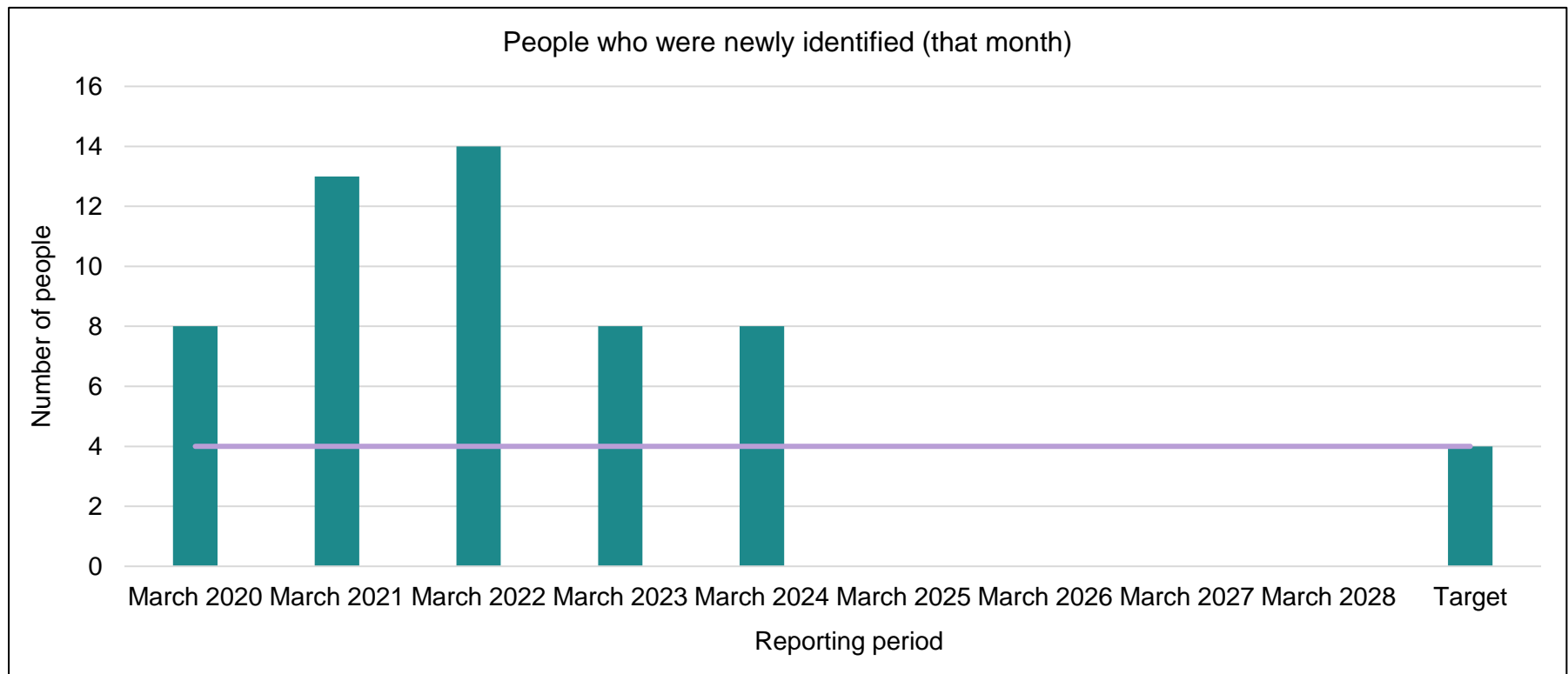
O#2(M)	What is your baseline year?	March 2020
	New inflows to homelessness will decrease by 50% between March 2020 and March 2028.	
	How was this Outcome generated?	Other HMIS custom report
	Has the data you reported for this Outcome from March 2020 to March 2023 changed from your previous CHR?	No, none 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 one or more data point

Outcome #3: Fewer people return to homelessness (returns to homelessness are reduced)
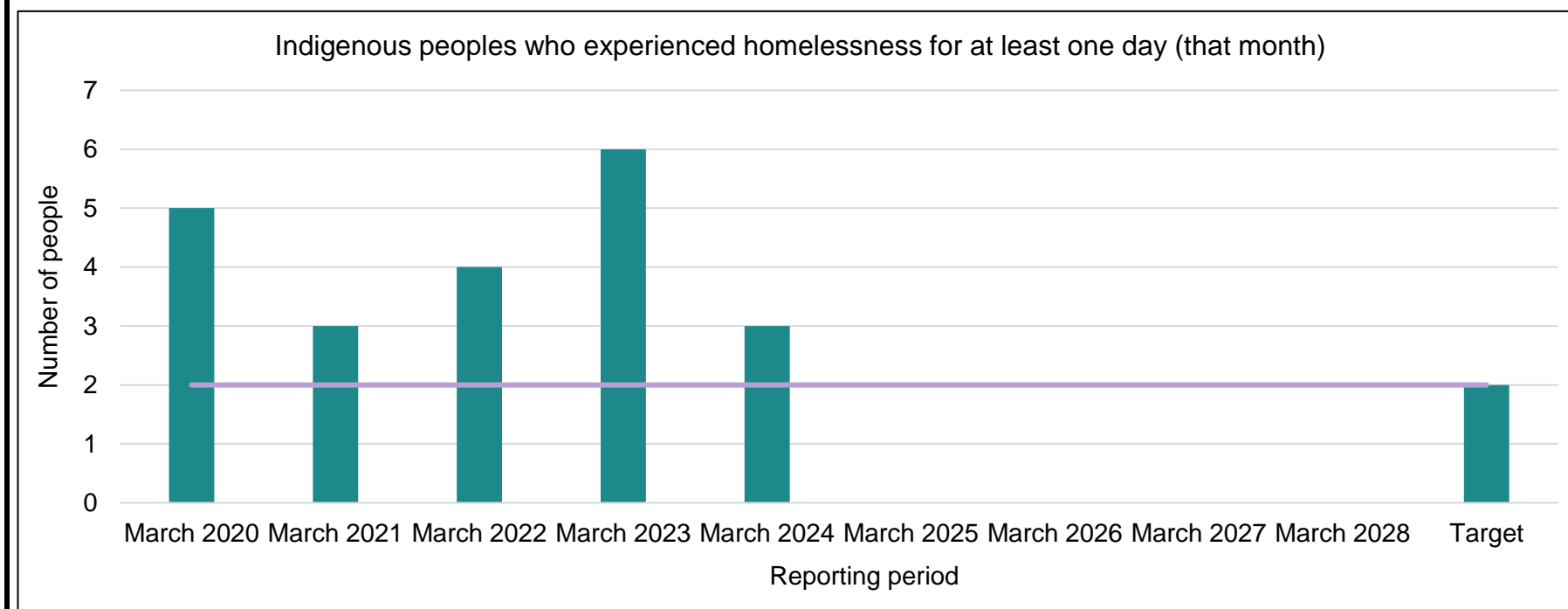
	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	Target
Returns to homelessness (that month)	6	6	3	7	2					2

Returns to homelessness (that month)
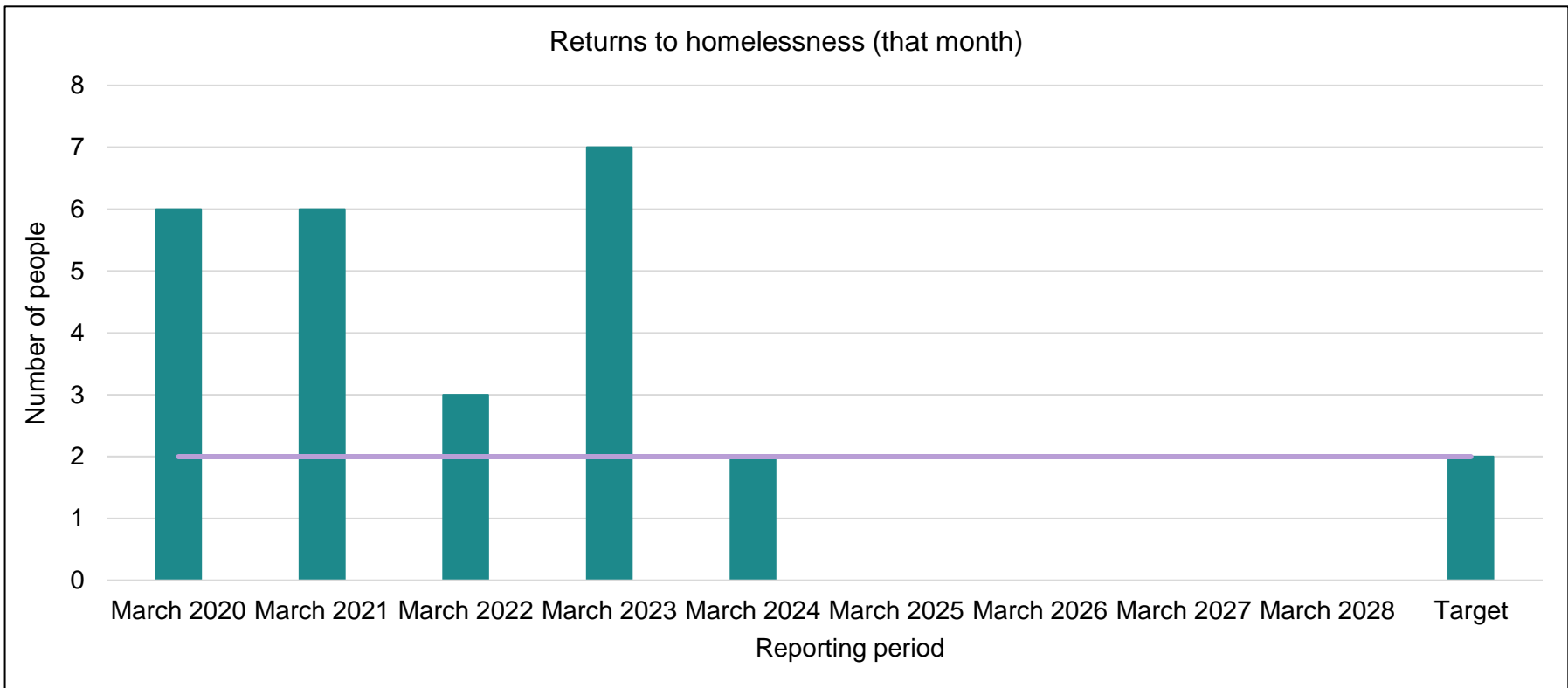
O#3(M)		
	What is your baseline year?	March 2020
	Returns to homelessness will decrease by 67% between March 2020 and March 2028.	
	How was this Outcome generated?	Other HMIS custom report
	Has the data you reported for this Outcome from March 2020 to March 2023 changed from your previous CHR?	No, none 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 one or more data point

Outcome #4: Fewer Indigenous peoples experience homelessness (Indigenous homelessness is reduced)
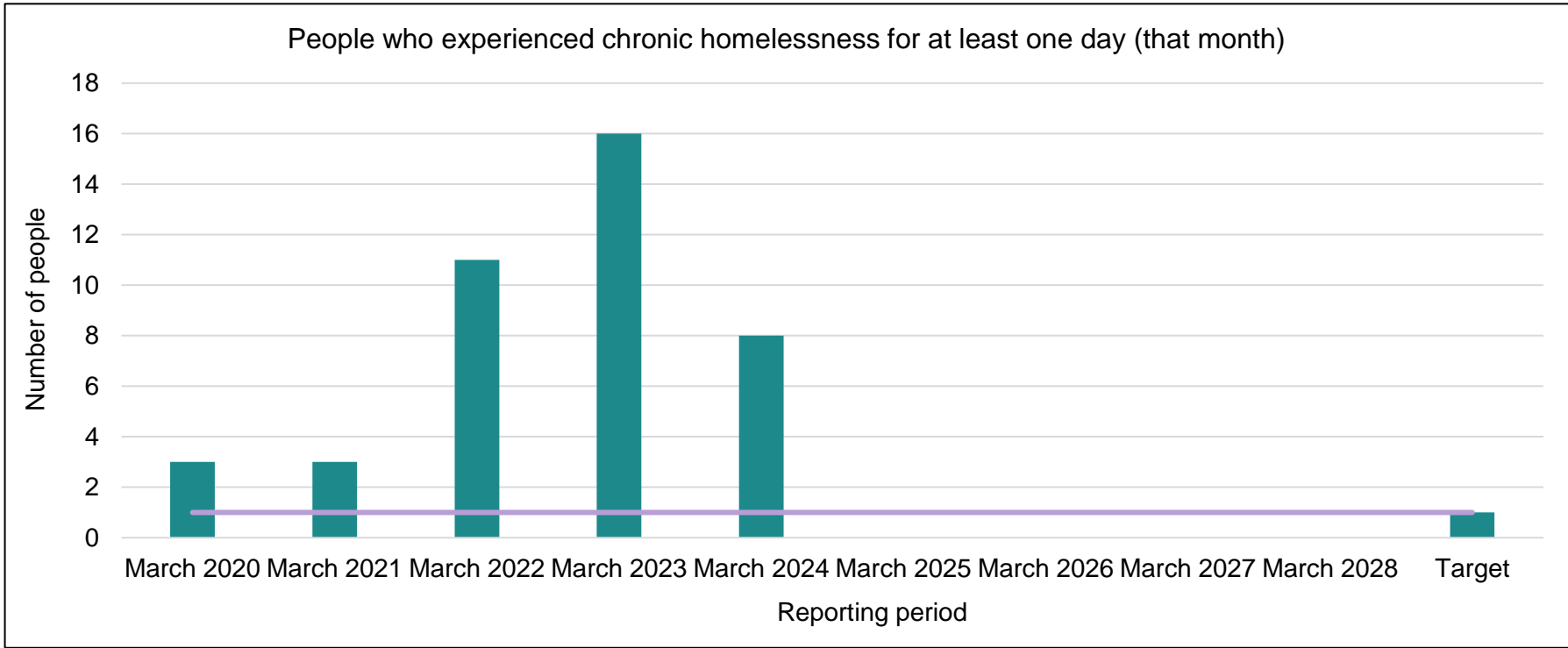
	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	Target
Indigenous peoples who experienced homelessness for at least one day (that month)	5	3	4	6	3					2

Indigenous peoples who experienced homelessness for at least one day (that month)

Number of people — Reporting period

O#4(M)	What is your baseline year?	March 2020
	Indigenous homelessness will decrease by 60% between March 2020 and March 2028.	
	How was this Outcome generated?	Other HMIS custom report
	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 one 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?	Yes
	Please use the following comment box to provide context on your data.	
	The CE meets regularly with the IH CE (The Miywasin Friendship). In addition, representatives from Miywasin Centre are members of the CAB, and the DC CE is holding a non-voting chair on the IH CAB. Before submission, the CHR was reviewed and approved by the IH CAB.	

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

	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)	3	3	11	16	8					1

People who experienced chronic homelessness for at least one day (that month)

O#5(M)	What is your baseline year?	March 2020

Chronic homelessness will decrease by 67% between March 2020 and March 2028.

How was this Outcome generated?	Other HMIS custom report
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?	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.

The target was changed to reflect a decrease of more than a 50% reduction in chronic homelessness between 2019-20 and 2027-28.

f) What definition of "chronic homelessness" does your community use to calculate this Outcome?

Medicine Hat calculates the outcomes using the federal definition of chronic homelessness. This definition refers to any individual who is currently experiencing homelessness and has either experienced homelessness for six months or more over the past year and/or has recurrent experiences of homelessness over the past three years (18 months in total).

Section 4. Community-Level Outcomes and Targets – Annual

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

	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)	460	396	330	334	245					140

People who experienced homelessness for at least one day (that year)
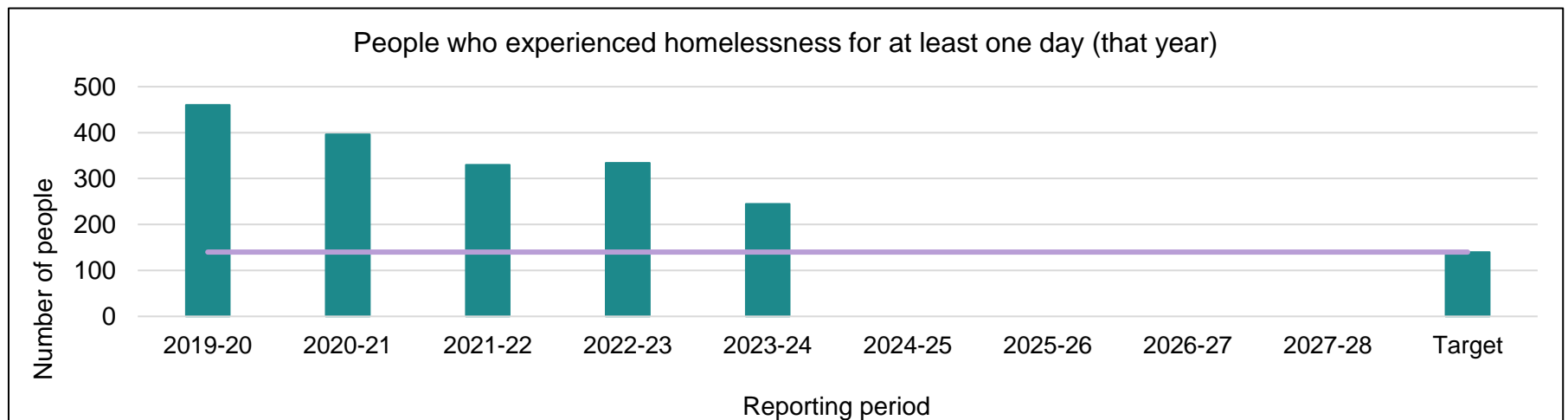
O#1(A)	What is your baseline year?	2019-20
	Overall homelessness will decrease by 70% between 2019-20 and 2027-28.	
	How was this Outcome generated?	Other HMIS custom report
	Has the data you reported for this Outcome from 2019-20 to 2022-23 changed from your previous CHR?	No, none of the data has changed
	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 one or more data point

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

	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)	147	157	138	143	138					70

People who were newly identified (that year)
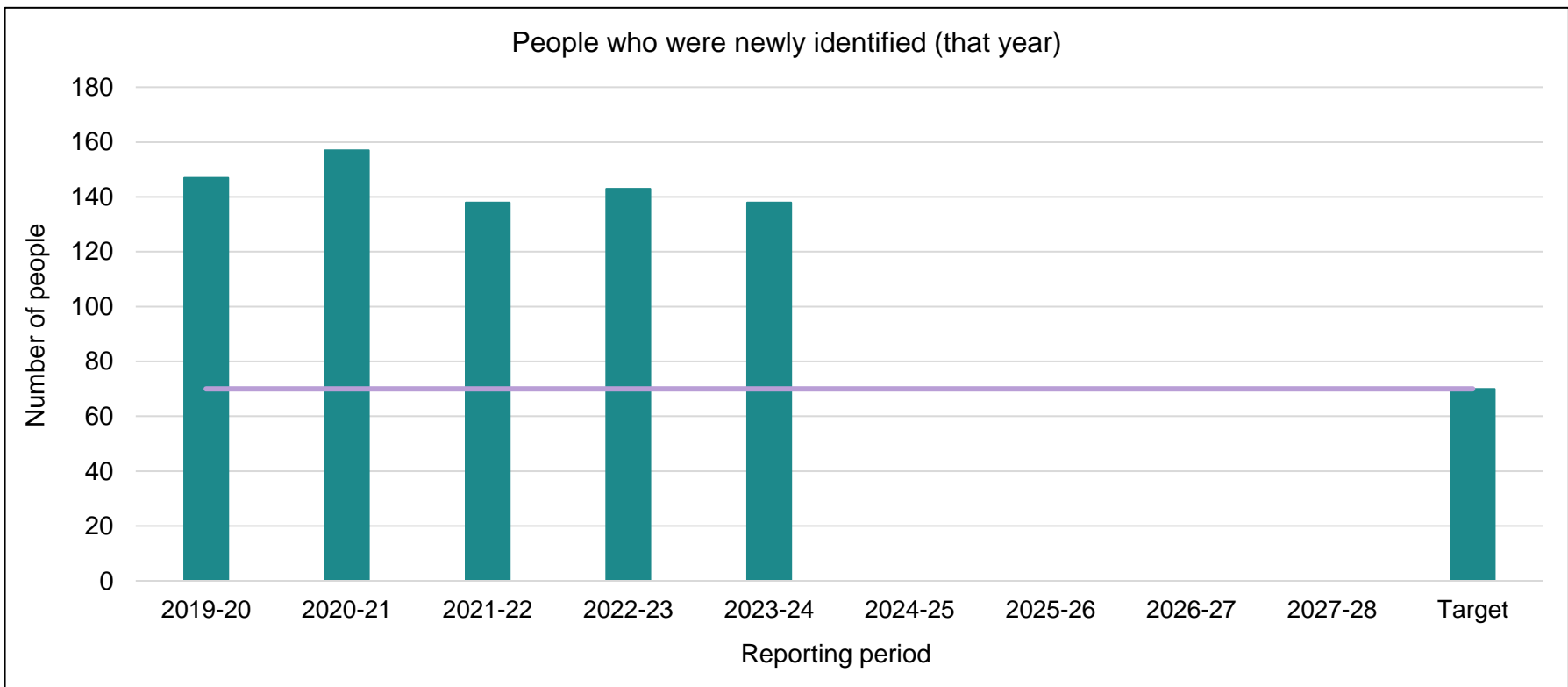
O#2(A)	What is your baseline year?	2019-20
	New inflows to homelessness will decrease by 52% between 2019-20 and 2027-28.	
	How was this Outcome generated?	Other HMIS custom report
	Has the data you reported for this Outcome from 2019-20 to 2022-23 changed from your previous CHR?	No, none of the data 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 one or more data point

Outcome #3: Fewer people return to homelessness (returns to homelessness are reduced)
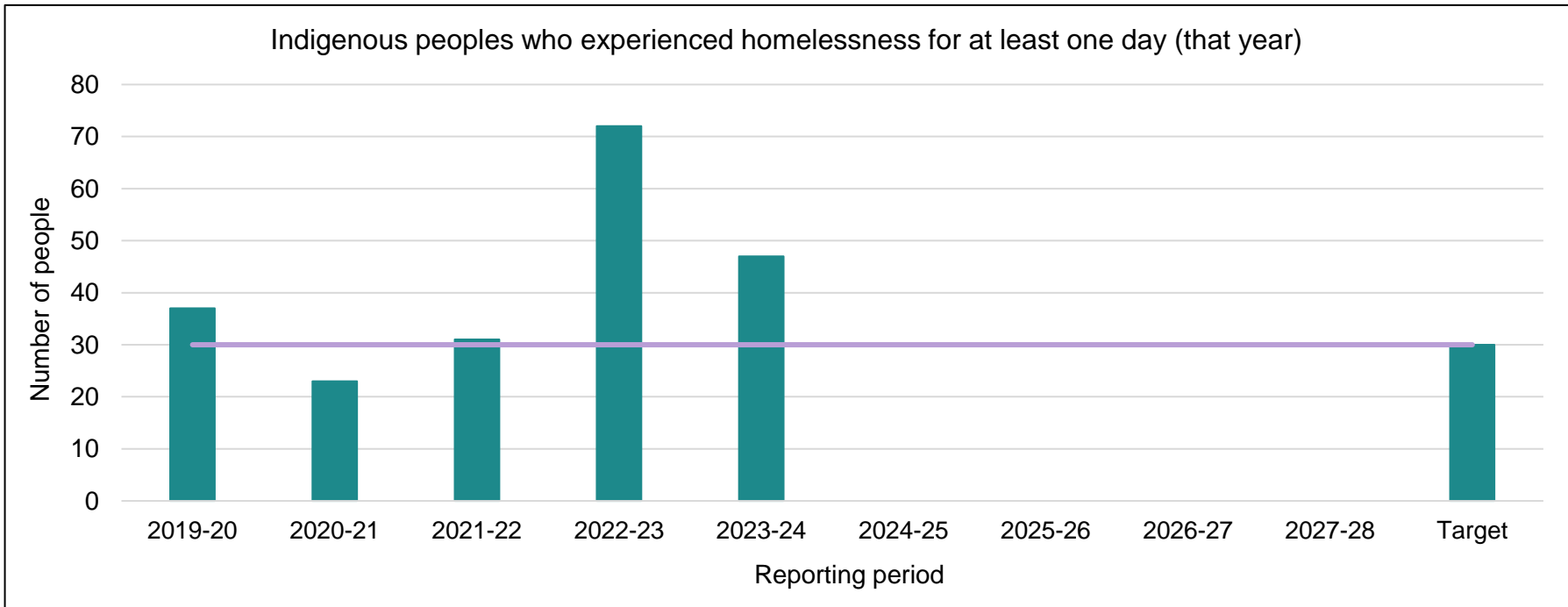
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
Returns to homelessness (that year)	102	20	27	49	42					21

Returns to homelessness (that year)
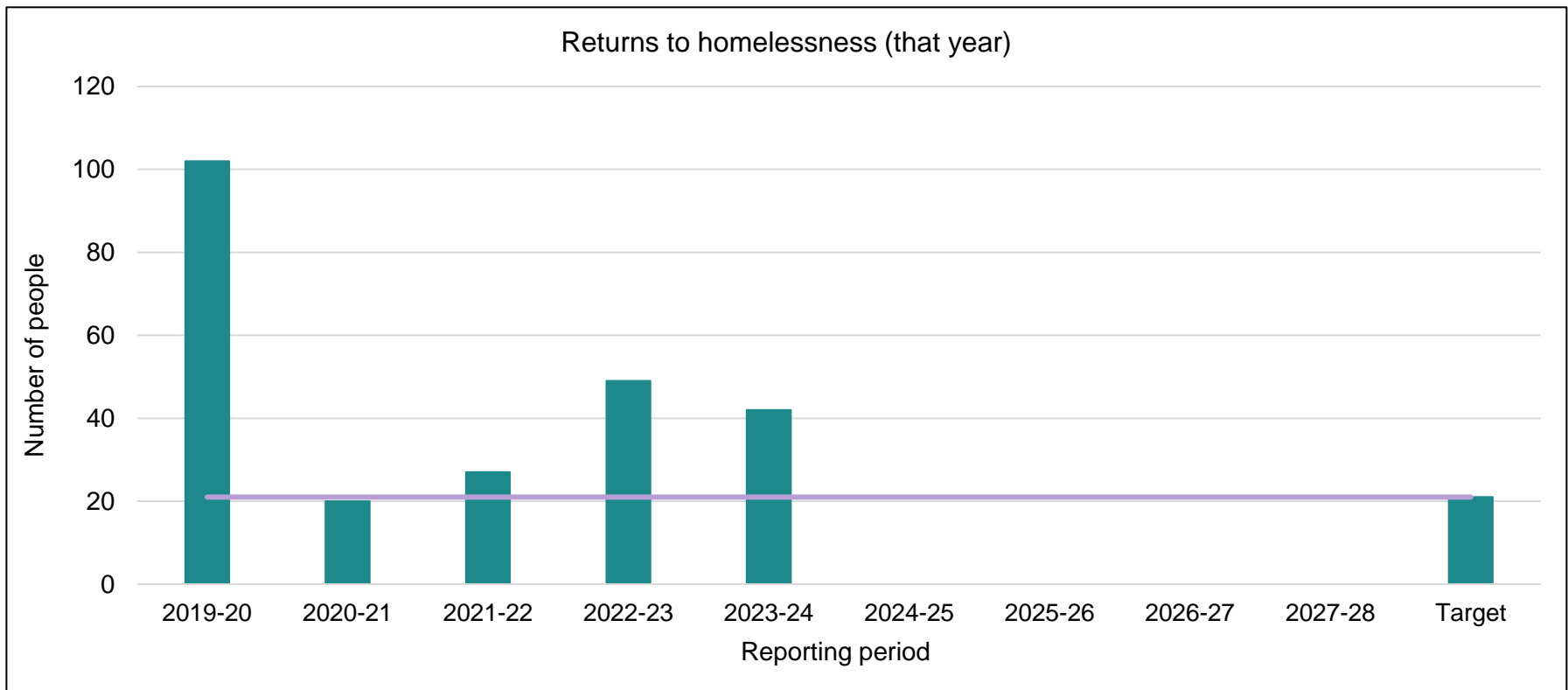
O#3(A)	What is your baseline year?	2019-20
	Returns to homelessness will decrease by 79% between 2019-20 and 2027-28.	
	How was this Outcome generated?	Other HMIS custom report
	Has the data you reported for this Outcome from 2019-20 to 2022-23 changed from your previous CHR?	No, none of the data has 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 one or more data point

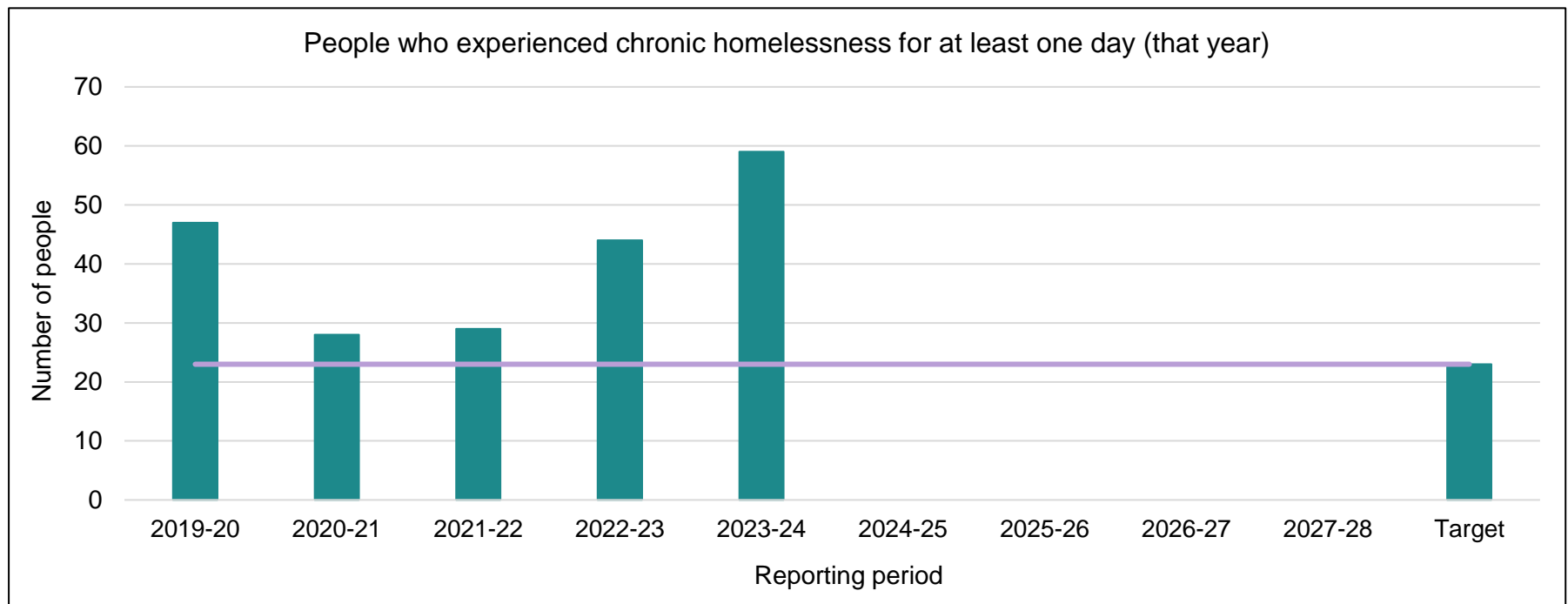| Outcome #4: Fewer Indigenous peoples experience homelessness (Indigenous homelessness is reduced) |
|---|

	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
Indigenous peoples who experienced homelessness for at least one day (that year)	37	23	31	72	47					30

Indigenous peoples who experienced homelessness for at least one day (that year)

O#4(A)	What is your baseline year?	2019-20
	Indigenous homelessness will decrease by 19% between 2019-20 and 2027-28.	
	How was this Outcome generated?	Other HMIS custom report
	Has the data you reported for this Outcome from 2019-20 to 2022-23 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 one 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?	Yes
	Please use the following comment box to provide context on your data.	
	The CE meets regularly with the IH CE (The Miywasin Friendship). In addition, representatives from Miywasin Centre are members of the CAB, and the DC CE is holding a non-voting chair on the IH CAB. Before submission, the CHR was reviewed and approved by the IH CAB.	

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

	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)	47	28	29	44	59					23

People who experienced chronic homelessness for at least one day (that year)

O#5(A)

What is your baseline year?	2019-20

Chronic homelessness will decrease by 51% between 2019-20 and 2027-28.

How was this Outcome generated?	Other HMIS custom report
Has the data you reported for this Outcome from 2019-20 to 2022-23 changed from your previous CHR?	No, none 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.

The target was changed to reflect a decrease of 51% reduction in chronic homelessness between 2019-20 and 2027-28.

What definition of "chronic homelessness" does your community use to calculate this Outcome?

Medicine Hat calculates the outcomes using the federal definition of chronic homelessness. This definition refers to any individual who is currently experiencing homelessness and has either experienced homelessness for six months or more over the past year and/or has recurrent experiences of homelessness over the past three years (18 months in total).