Reaching Home: Canada's Homelessness Strategy

Community Homelessness Report

City of Ottawa

2024-2025

TEMPLATE FOR COMMUNITIES

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").

System Overview:
The framework that guides the City's efforts to address local housing and homelessness needs is its 10-Year Housing and Homelessness Plan 2020 to 2030.

In fiscal 2024-25, community agencies continued to support the City's integrated homelessness and housing system. These partners worked diligently to prevent and reduce homelessness, responding to an increasingly complex and challenging service environment. These challenges included an unprecedented inflow of newcomers and an increasing prevalence of mental health and additional complexities in the community. Funded agencies provided services such as street outreach; emergency shelter; diversion and case management in shelters; Housing First programs; housing support services (including resource centres in social housing, supportive and transitional housing and rooming house supports); residential services homes; general housing assistance (including housing search and prevention of housing loss including paralegal assistance), financial trusteeship services, and in-reach to correctional institutions and psychiatric hospitals for those who will soon be released and who do not have housing. The service system is supported by many groups including but not limited to the ones listed elsewhere in this document.

The city has continued to see very low rental vacancy rates of affordable rentals which added additional complexities when trying to help people move from the shelter system into stable housing. These factors were combined with insufficient provincial social assistance rates that have not kept up with the costs of housing or other basic needs. These challenges particularly impact priority populations including Indigenous peoples, veterans, youth, older adults, women, people with disabilities and newcomers.

With the increasing demands on the shelter system, including the influx of newcomers, the City has been making progress on moving people out of overflow community centres and motels, increasing on-site supports, and collaboration with partners to prevent and/or reduce homelessness and improve access to safe, appropriate housing over the last year. These initiatives have been implemented to support overflow in both the family and singles shelter system. Highlights include:

Lanark Overnight Respite
The federal government provided, starting in winter 2023-24, a vacant federal office building on Lanark Avenue to serve as a Temporary Emergency Overnight Centre. This space was set up to address increased overflow in the shelters to provide a safe overnight space for those who have no other place to shelter during the evening and overnight hours. The site serves up to 43 people each night.
Corkstown Road Transitional Housing Program
The City has leased and occupied a former seniors' residence that provides 170 rooms for a family transitional housing program. Supports are provided on-site such as health services, newcomer support services and children's services, as well as programming. This is instead of clients being in 28 hotels across the City, to which staff had to travel, and where there was no space for programs.
230 Queen St. -- Transitional Housing Program
The City has leased an office building for 10 years and will be converting it to a transitional housing program. The new site will support mainly single male newcomers, providing single units with doors. It will open in mid-2025 with 142 beds with supports on site including settlement services. With "transitional housing", the stay is intended to be less than one year. Clients at the site must be willing to participate in the programming, which will be focused on supporting newcomers to settle in Ottawa.
1754 St. Joseph Blvd. in Orleans
The City has purchased a former convent in Orleans which will provide 140 beds of transitional housing for Newcomer single adults, aged 18 and older starting in Q2 2025.

Scattered Site Transitional Housing Programs

The City has funded Matthew House, Carty House, Stepstone House, Capital Rainbow Refuge and Samaritan House, which provide transitional housing for asylum seekers at houses scattered throughout the City. Carty House has recently entered into a lease agreement for the former St. Mary's Home family shelter site. These transitional Housing programs provide cost effective housing supports using a peer-to-peer model.

YMCA

• Families previously staying at the YMCA were moved to the Corkstown Transitional Housing program. This space was then renovated to accommodate individual newcomer adults to relieve overflow pressure and open space at the Physical Distancing - Emergency Overflow Centre (PD-EOCs). Currently there are 148 clients receiving service (in addition to 20 already in the Women's THP, 17 in Youth Housing, and 43 in the Try Housing supportive housing program, all funded by the City), and 76 more spaces will come online once renovations on two additional floors are completed.

Day Programs

Center 507 developed a 24-hour housing-focused Day Program beginning in the winter of 2023-24. Belong Ottawa was also funded, starting then, to provide additional hours at two Day Programs.

Kilborn Supportive Housing Hub

The City purchased this nine-acre property that contains a very large building that will be redeveloped as a supportive housing hub in about three years. It needs significant renovations and retrofits. The community will be consulted and will be part of the future visioning for the site.

John Howard Society – 494 Lisgar - Supportive Housing

This new supportive housing building opened in January 2024, with 29 units with comprehensive on-site housing support and case management services. The site will support vulnerable adult women, trans women and gender-diverse people and will also prioritize housing Indigenous women, who will be allotted 70% of the units.

Cornerstone – 44 Eccles Supportive Housing

This new supportive housing building opened in March 2024, with 46 private self-contained studio units with kitchens. Clients will be low to moderate acuity. On-site housing supports are provided 24/7 addressing the following key life domains: housing, finances and recovery.

Ottawa Aboriginal Coalition (OAC) – 250 Forestglade

In May 2024, Council approved the transfer of the parcel at 250 Forestglade Crescent to the OAC for the purposes of developing transitional housing for Inuit women and their children who are fleeing domestic violence.

Future supportive housing

For the future (approximately 2026), capital funding is being provided to support development of 10 units for Interval House's domestic violence shelter and 70 units for Shepherds of Good Hope's 1083 Merivale Road. Also, Shepherds of Good Hope opened a new supportive housing building at 216 Murray Street in May 2025.

Unsheltered Response

The City resolved over 450 encampment sites in 2024 in collaboration with outreach teams. The outreach teams assess residents' needs and willingness to engage, and link them to housing and health supports with their focus on housing clients and diverting clients from homelessness.

Coordinated Access, HIFIS and the new data dashboards

The coordinated access system has evolved to prioritize access for the following priority groups: Chronic Homelessness; Leaving Provincial Institutions; Youth; Veterans; and Street Homelessness. There is also an Indigenous priority and the City works with the Indigenous Coordinated Access system, which is operated by Wabano. The expansion of this system is providing more information on homeless individuals, which helps Coordinated Access personnel to make more targeted prioritization decisions and includes dashboards that provide better insight into the homelessness situation in real time, leading to improvements in the system through data-led decision making.

Support and Training for Agency Staff

The City of Ottawa is committed to supporting homelessness service agencies with training sessions, workshops, support and collaborative opportunities through the Homelessness Community Capacity Building Training (CCBT) Program. Training is divided into four main categories: Understanding Client Challenges; Methods and Skills for Helping Clients; Information Awareness and Resources; Networking, and Self-Care and Burnout Prevention. In the last year there were 92 days of training with 1,274 people in attendance. These sessions helped strengthen the sector's collective approach to resolving homelessness and addressing issues such as mental health and addiction, support with tax filing as it relates to clients' housing benefits, and strategies on creating psychological safety in the workplace to support with burnout and fatigue among community workers.

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. |

Ottawa's approach to addressing homelessness has changed in many ways over the past year in reaction to the changing housing and homelessness landscape.

Integrated Transition to Housing Strategy (ITHS)

The City's ITHS continues to drive systemic change with a strong focus on transitional housing through the addition of new facilities that will act as transitional housing. The ITHS also broadens the spectrum of options available to clients, offering supports specific to their unique service needs. The initiatives being implemented are cost effective and sustainable to leverage the maximum funding amounts available through current federal funding and strategically position the City to respond with owned assets, resulting in lower operational costs over the long term.

Overflow capacity and needs

The City continues to operate Physical Distancing - Emergency Overflow Centres (PD-EOCs) and overnight emergency space at 250 Lanark Avenue to address the overflow capacity in response to the influx of newcomers and refugee claimants. While the numbers are decreasing, these sites may still be required through winter 2025-2026. Most clients will be moved to other shelter and transitional housing options, but it will not be possible to move all newcomer clients out of community shelters and PD-EOCs until the scattered unit initiative of the Newcomer Reception System and/or alternate options are fully realized. Currently there are on average 120 clients staying at the City's PD-EOCs and 35 on average per night accessing 250 Lanark. This is a decrease of roughly 35% from last year. Within the rest of the sector, shelter partners continue to use overflow space and have added capacity wherever possible. Through the winter and spring all shelters were full, the Mission consistently has overflow and the day program at Centre 507 consistently serves 50+ people a night. However, the numbers of newcomer singles are seeing a decrease, and more facilities are becoming available such as the replacement of family shelter with transitional housing for newcomer individuals at the YMCA and the opening of 230 Queen and 1754 St. Joseph Blvd.

Housing and Homelessness Leadership Table (HHLT)

The HHLT is a collaborative initiative developed through a co-design process between the City of Ottawa's Housing

Services and the housing and homelessness sector over the past two years. As an Advisory Committee to the General Manager of Community and Social Services at the City, the HHLT is tasked with planning, designing and overseeing the implementation of an integrated housing and homelessness system. This includes working with related sectors to ensure access to affordable, suitable and adequate housing while actively reducing homelessness.

Training and Supports

Ottawa continues to adapt its Homelessness Community Capacity-building (CCB) training program for staff working in the system to meet their emerging needs. Examples include "Community Tax Clinics", which trained people at four agencies in February 2022 on how to complete tax filings on behalf of their clients. This was needed because having a CRA "Notice of Assessment" is required when clients apply for, and renew, their Housing Allowance/ Supplement and apply to be on the Centralized Wait List at Ottawa's Social Housing Registry. Another example is a program for managers and supervisors called "Management Strategies for Creating Psychological Safety in the Workplace", aimed to support the issues of burnout and fatigue that are common amongst community workers.

Data Collection and approach

Through the 2024 Point in Time count in October 2024, the City has been able to collect significant data regarding people experiencing homelessness in the community and identify specific area of needs and investment. This data has been shared across the sector to support program implementation, funding applications and recommendations. Working with staff , the City continues to make significant strides towards improving data gathering methods and data accuracy. These changes have allowed Ottawa to incorporate data-informed decision making in all aspects of service delivery. Over the past few years, Ottawa has onboarded the majority of funded community agencies onto the HIFIS data system and provided ongoing training to support its use.

Ottawa has adapted to meet all federal and provincial reporting requirements by mapping what information must be entered into HIFIS for each client to cross-reference them across the service system. City staff provide ongoing training on HIFIS data entry requirements. Reports were developed to help community agencies and City staff access and utilize Ottawa's homelessness data for daily operations and decision making. Processes were also developed for agencies or programs that were unable to input information into HIFIS, such as agencies that are custodians of legal or health information or serving women fleeing abuse.

To ensure those agencies were not missed in the overall framework, methods were developed to cross-reference data with the other systems where that information is collected. The changes have allowed for an important evolution of the City's approach into a system that prioritizes flexibility, system coordination, and data-informed approaches.

Collaboration between Indigenous and non-Indigenous partners

CHR 3	Please select your community from the drop-down menu:	Ottawa (ON)

	Your community:	**Has IH funding available.** **The DC CE and IH CE are distinct organizations.** **The DC CAB and IH CAB are distinct groups.** **The IH CE is the Ontario Federation of Indigenous Friendship Centres (OFIFC).**

CHR 4

a) Has there been meaningful collaboration between the DC CE and the IH CE and IH CAB, as well as 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**?	Yes
• Implementing, maintaining and/or improving, as well as using the **HMIS**?	Yes
• Strengthening the **Outcomes-Based Approach**?	Yes

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

b) In your response to **CHR 4(a)** you noted that collaboration has occurred with Indigenous partners related to **at least one** of the following: Coordinated Access, the HMIS and/or the Outcomes-Based Approach. As a follow up to this, please indicate **if any** of the following activities took place:

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

➔ Coordinated Access:	Yes
➔ HMIS:	Yes

- Indigenous partners participate in Coordinated Access, use the HMIS and/or participate in the Outcomes-Based Approach.

➔ Coordinated Access:	Yes
➔ HMIS:	Yes
➔ Outcomes-Based Approach:	Yes

Note: As applicable, these activities should be described in further detail in CHR 4(c). This list is not meant to be exhaustive. Other relevant activities not listed above should be described in CHR 4(c).

c) In your response to **CHR 4(a)** you noted that collaboration has **occurred** with Indigenous partners. As a follow up to this, please describe the collaboration that took place in more detail **as it relates to Coordinated Access, the HMIS and/or the Outcomes-Based Approach.**

Your response could include information such as when collaboration occurred, who it was with, what aspects of Coordinated Access, the HMIS and/or the Outcomes-Based Approach were discussed, and how Indigenous perspectives influenced the outcome.

The Indigenous community is leading the discussions surrounding the use of data for their population and the City is providing the supports to achieve those goals. The goals include having Indigenous people serve Indigenous clients and achieving data sovereignty, which means the Indigenous agencies will own the data and be able to access the back end of HIFIS so that when a question about Indigenous data comes up, they would give it to the City, rather than the City controlling the data. This collaborative effort largely surrounds the proper use of HIFIS to support Indigenous Coordinated Access (ICA).

The City's Coordinated Access Lead and the Indigenous Coordinated Access (ICA) leads meet monthly to discuss the best use of various HIFIS modules that support these joint data efforts, as well as other improvements to the use of HIFIS such as the creation of Indigenous Homelessness reports that help identify current homeless Indigenous

individuals who can be engaged with and brought into Housing First Programs. Key supports provided by the City include the development and delivery of training regarding the use of HIFIS and ICA to staff of the Indigenous agencies. Staff also supported the development of processes and reports based on the recommendations and leadership of the ICA. These included improvements to the list of Indigenous people's home communities that was available on HIFIS and which our Indigenous partners felt was not complete. Housing Infrastructure and Communities Canada has been informed of this and will be updating the list in future HIFIS updates.

Collaborative planning for the future continues to take place, including upcoming projects such as expanding the use of HIFIS to include the "Waitlist" module to coordinate and prioritize referrals to services offered by Indigenous partners.

CHR 5	a) Specific to the completion of this Community Homelessness Report (CHR), did ongoing, meaningful collaboration take place with the IH CE and IH CAB, as well as local Indigenous partners, including those that sit on your CAB?	Yes
	As a reminder, meaningful collaboration on the CHR with the IH CE and IH CAB, as well as local Indigenous 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.	Yes
	• 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.

Yes, in developing the CHR, the City consulted virtual meetings of both the Homelessness Community Advisory Board (CAB) and of the Aboriginal Community Advisory Board (ACAB) after they had each had an opportunity to read the draft CHR. There are three CAB members who represent Indigenous agencies who are also ACAB members. The agencies they represent are Wabano Centre for Aboriginal Health, Tungasuvvingat Inuit, and Minwaashin Lodge - Indigenous Women's Support Centre.

CHR 6	a) Did the IH CAB sign-off on this CHR?	Yes
	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 <u>improve</u> a specific Coordinated Access requirement that <u>had been self-assessed as met</u> in a previous CHR, you should <u>still select "Yes"</u> 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?	Yes
	b) Have Terms of Reference for the integrated, community-based governance structure been documented and, if requested, can they be made publicly available?	Yes
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:	Yes – as a CAB member with ex-officio status and a member of the overall governance structure
	➔ Community Advisory Board:	Yes

➔ Housing, Infrastructure and Communities Canada (HICC):	Yes – as a CAB member with ex-officio status
➔ Organization that fulfills the role of Coordinated Access Lead:	Yes
➔ Organization that fulfills the role of HMIS Lead:	Yes
• Homelessness roles from other orders of government:	
➔ Provincial or territorial government:	Yes – as a CAB member and a member of the overall governance structure
➔ Local designation(s) relative to managing provincial or territorial homelessness funding, as applicable (e.g., Service Manager in Ontario):	Yes
➔ Municipal government:	Yes – as a CAB member and a member of the overall governance structure
➔ Local designation(s) relative to managing municipal homelessness funding, as applicable:	Yes
• Local groups with a mandate to prevent and/or reduce homelessness, as applicable:	Yes
• Local Indigenous partners:	Yes – as a CAB member and a member of the overall governance structure

	• Population groups the Coordinated Access system intends to serve (e.g., providers serving youth experiencing homelessness):		Yes – as a CAB member and a member of the overall governance structure
	• Types of service providers that help prevent homelessness and those that help people transition from homelessness to safe, appropriate housing in the community:		Yes – as a CAB member and a member of the overall governance structure
	• People with lived experience of homelessness:		Yes
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.		Yes
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?	Yes
CA 5	a) Has there been meaningful collaboration between the DC CE and the IH CE and IH CAB, as well as 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).	Yes
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?	Yes

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.

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:	Yes

  ➔ 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.

	• 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:	Yes
	➔ 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.	
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?	Yes
	b) Does the systems map include the following elements:	
	➔ Name of the organization and/or service provider:	Yes
	➔ Type of service provider (e.g., emergency shelter, supportive housing):	Yes
	➔ Funding source(s):	Yes
	➔ Eligibility for service (e.g., youth):	Yes
	➔ Capacity to serve (e.g., number of units):	Yes
	➔ Role in the Coordinated Access system (e.g., access point):	Yes
	➔ Role with maintaining quality data used for a Unique Identifier List (e.g., keep data up-to-date for housing history):	Yes
	➔ If the service provider currently uses the HMIS:	Yes

	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):	Yes
	➔ Use of the HMIS (e.g., identify opportunities to onboard new service providers):	Yes
	➔ Data quality (e.g., increase data comprehensiveness):	Yes
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?	Yes
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).	Yes
	➔ 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).	Yes
	➔ 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).	Yes

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	17	0	0

Coordinated Access	Completed (score)	Completed (%)
Governance and partnerships (out of 8 points)	8	100%
System map and Resource Inventory (out of 2 points)	2	100%
Service navigation and case conferencing (out of 1 point)	1	100%
Access points (out of 2 points)	2	100%
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)	**17**	**100%**

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

Note: 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?	Yes

	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?	Yes
HIFIS 4	Has the Community Entity updated HIFIS to the latest version that was most recently confirmed as mandatory by HICC?	Yes
HIFIS 5	a) Has there been meaningful collaboration between the DC CE and the IH CE and IH CAB, as well as 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).	Yes

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 <u>collect data</u> 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 <u>as soon as</u> 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 yet

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) **Can the dataset be used to set** 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) **Is the dataset being used to set** 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 <u>inform action</u> related to preventing and reducing homelessness?	Yes

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.

Data is utilized to enhance service delivery by identifying gaps and areas for improvement. For example, our service partners review the data during Built for Zero committee meetings to pinpoint key projects that facilitate system flow and improve housing outcomes.

We employ inflow and outflow metrics to assess project performance and determine when efforts need to be realigned towards new initiatives. With the addition of the Social Policy and Research Analytics team, we will build a more robust analytics system next year to guide us in making better data-driven decisions.

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 <u>monthly</u> data in Section 4 of your CHR, inclusively?	March 2020
	b) What is the earliest you can report <u>annual</u> 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	a) Has there been meaningful collaboration between the DC CE and the IH CE and IH CAB, as well as 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).	Yes
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

The City has transferred the maintenance of the HIFIS database to the Social Policy and Research Analytics (SPRA) team. This team is responsible for overseeing all aspects of data quality. They are collaborating with our service partners to ensure the collection of high-quality data and to continuously enhance data quality improvements across our system.

Data Consistency: The group now has a designated trainer for the database, ensuring that all users receive consistent messaging and training. This initiative is expected to lead to improved data outcomes.

	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 monthly community-level outcomes for this CHR? Reminder: Reporting on additional community-level outcomes is optional.	Yes

b) Beyond the five mandatory core outcomes under Reaching Home, do you wish to include any additional <u>annual</u> community-level outcomes for this CHR? **Reminder:** Reporting on additional community-level outcomes is optional.	Yes

Please use tab "4b. Optional Outcomes" to report on additional outcomes.

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	5	0	0

Homelessness Management Information System	Completed (score)	Completed (%)
Homelessness Management Information System (out of 5 points)	5	100%
All (out of 5 points)	**5**	**100%**

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	17	0	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)	2	100%

Partnerships (out of 1 point)	1	100%
Data quality improvement (out of 1 point)	1	100%
All (out of 17 points)	**17**	**100%**

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)	3320	2535	2779	2999	3591	5284				2490

People who experienced homelessness for at least one day (that month)
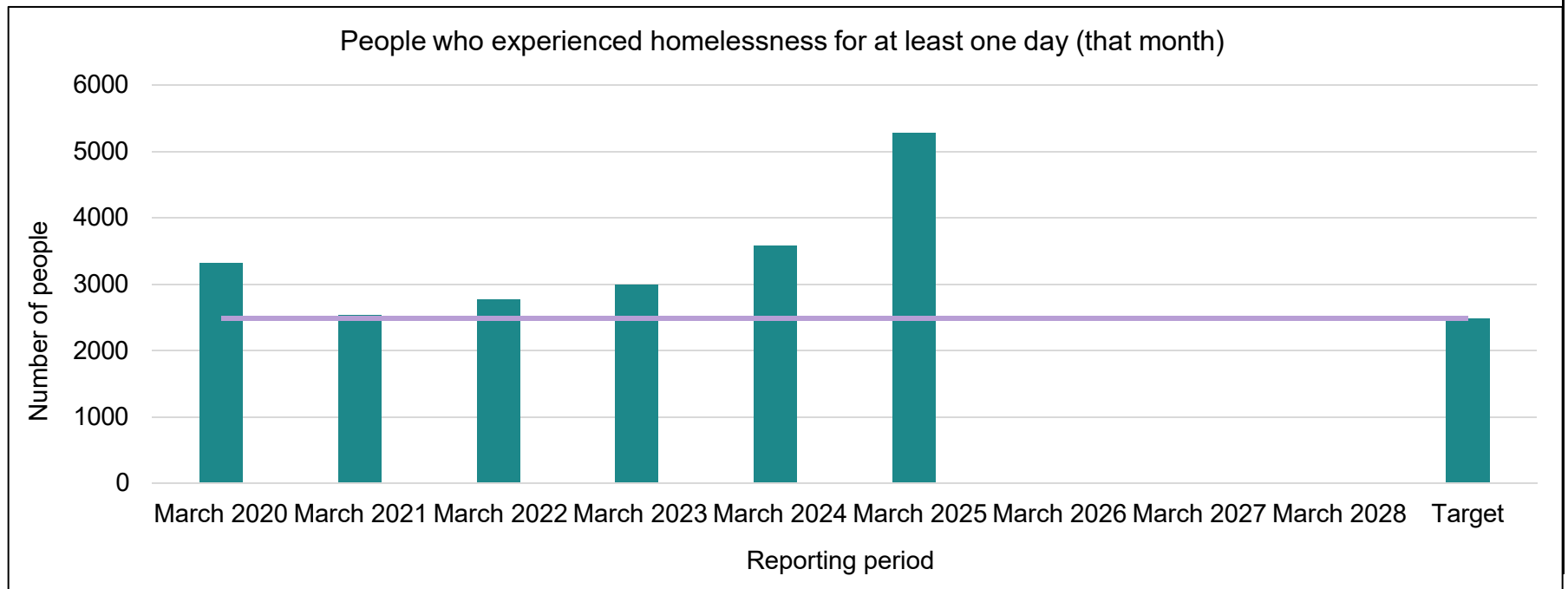
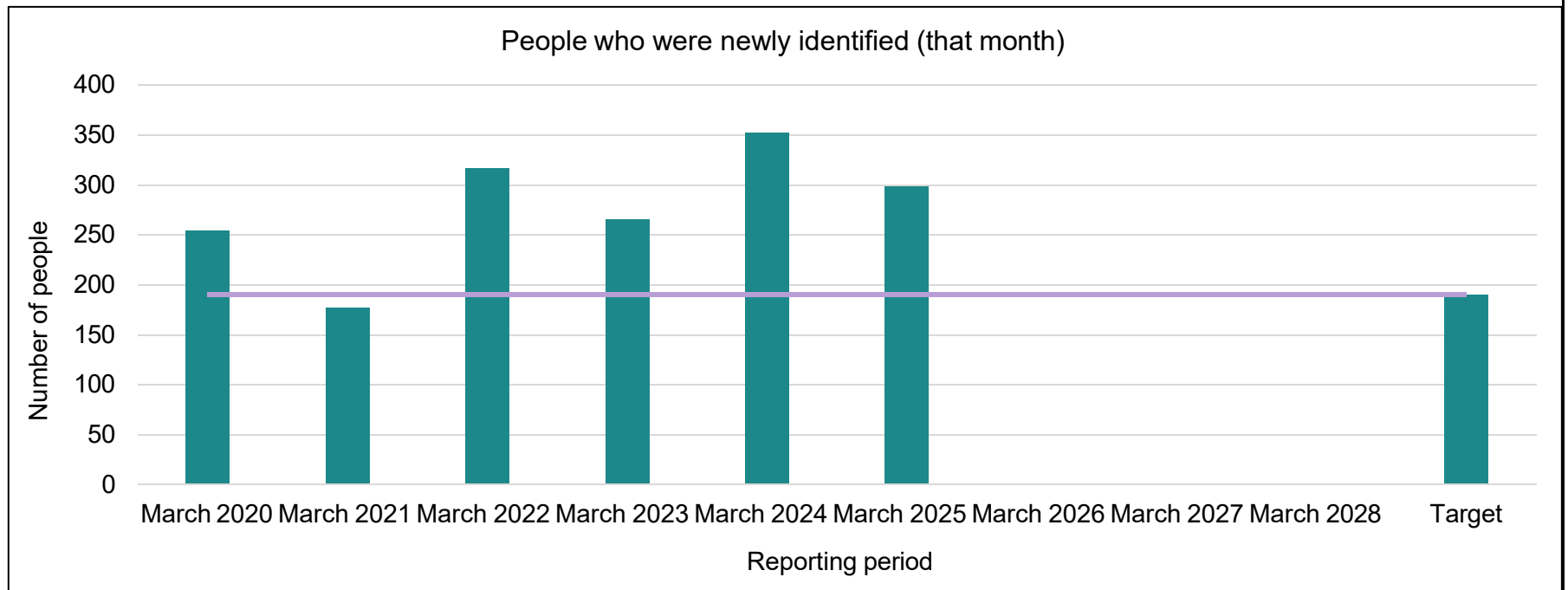| O1(M) | a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data. | March 2020 |

Overall homelessness will decrease by 25% 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.

In previous years, the City employed a different methodology for reporting the CHR. Throughout the year, the City collaborated with Housing, Infrastructure, and Communities Canada (HICC). We are now utilizing the Reaching Home Community Outcomes Report provided by HICC.

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)	254	177	317	266	352	299				190

People who were newly identified (that month)

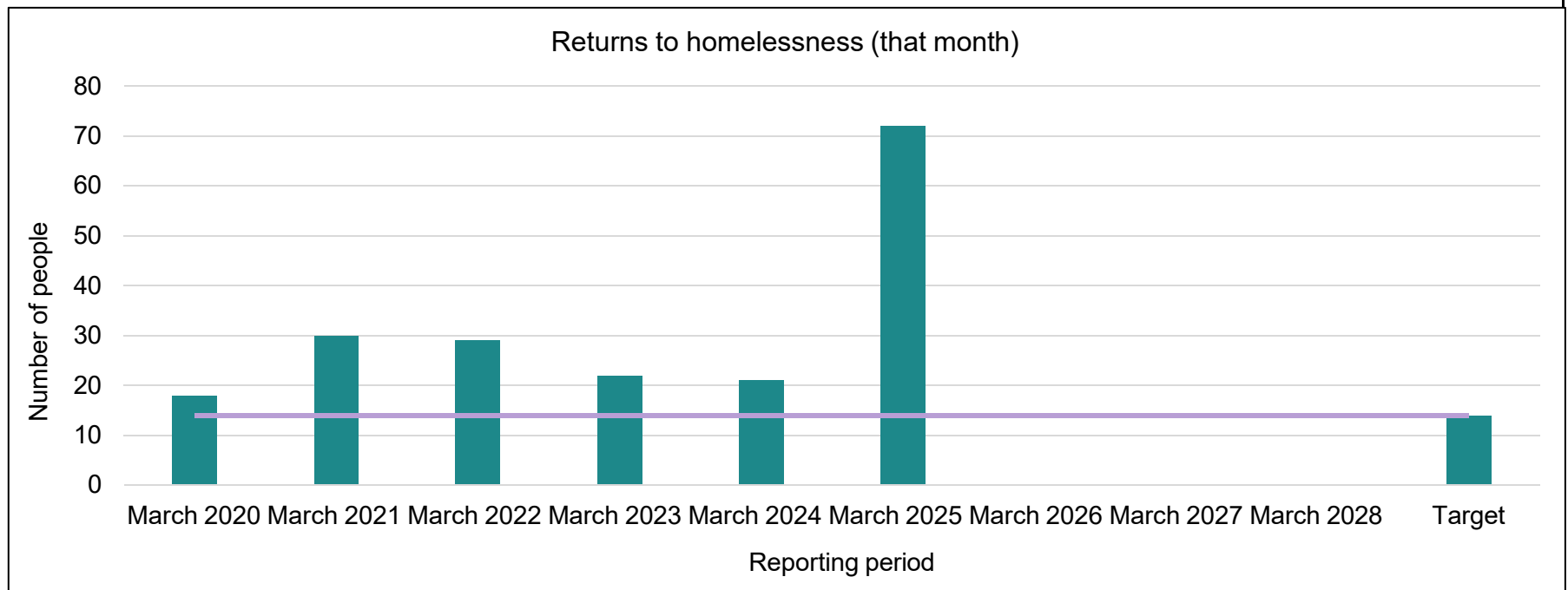| O2(M)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	March 2020

New inflows to homelessness will decrease by 25% 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.

In previous years, the City employed a different methodology for reporting the CHR. Throughout the year, the City collaborated with Housing, Infrastructure, and Communities Canada (HICC). We are now utilizing the Reaching Home Community Outcomes Report provided by HICC.

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)	18	30	29	22	21	72				14

Returns to homelessness (that month)

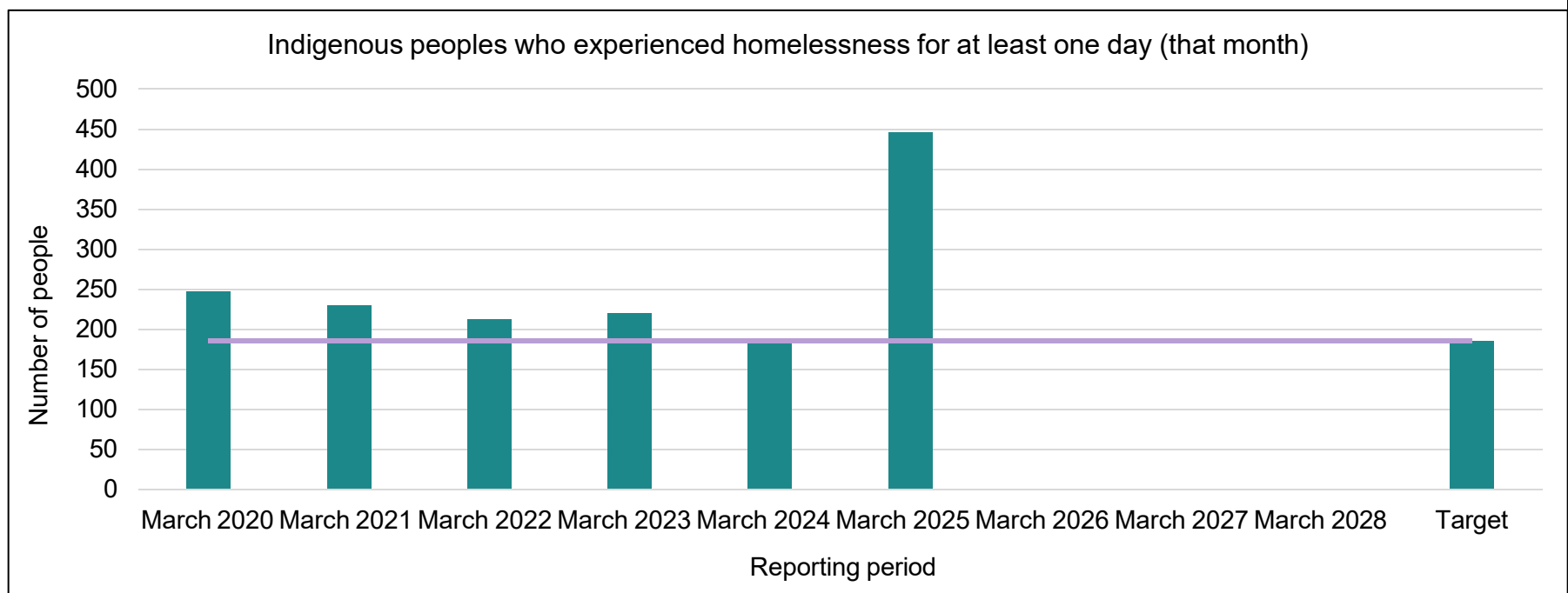| O3(M) | a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data. | March 2020 |

Returns to homelessness will decrease by 22% 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.

In previous years, the City employed a different methodology for reporting the CHR. Throughout the year, the City collaborated with Housing, Infrastructure, and Communities Canada (HICC). We are now utilizing the Reaching Home Community Outcomes Report provided by HICC.

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)	248	230	213	220	182	446				186

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

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 25% between March 2020 and March 2028.
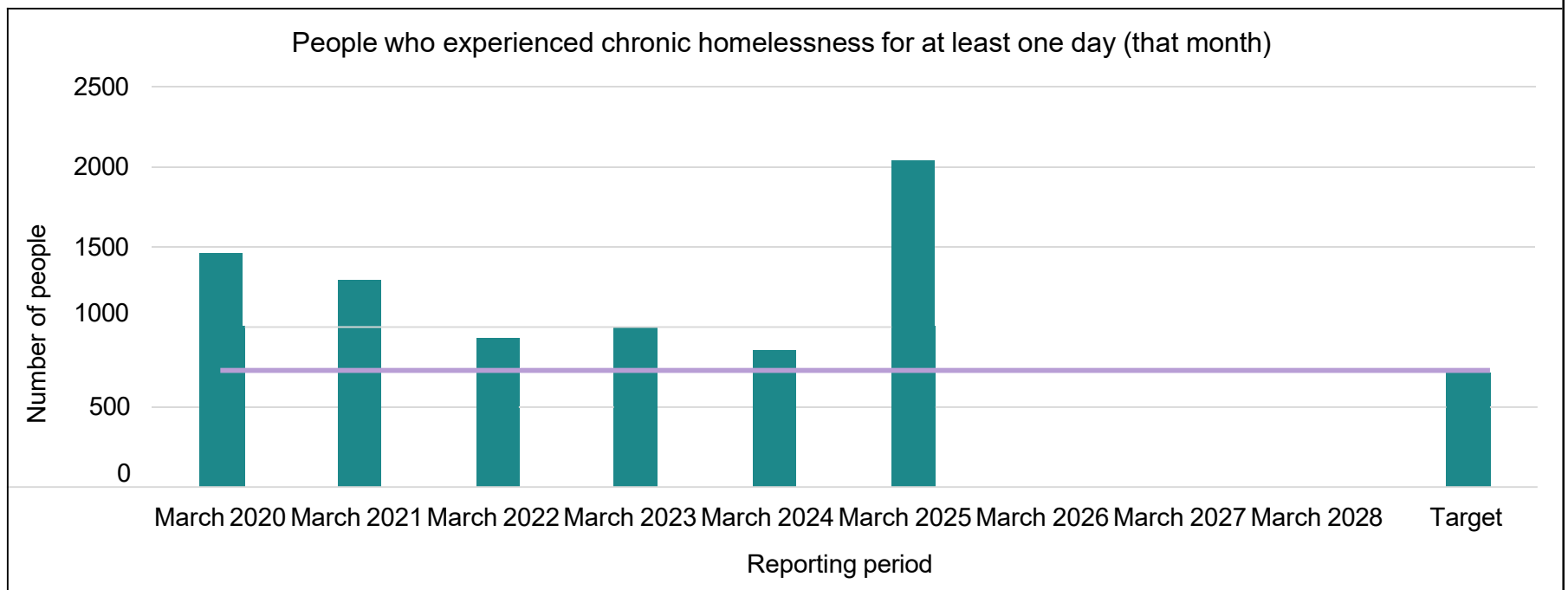
b) Please use the comment box below to:
    • As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target.
    • As applicable, explain the use of "N/A" for one or more data points. As a reminder, no cells should be 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.

In previous years, the City employed a different methodology for reporting the CHR. Throughout the year, the City collaborated with Housing, Infrastructure, and Communities Canada (HICC). We are now utilizing the Reaching Home Community Outcomes Report provided by HICC.

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)	1458	1292	931	1005	854	2042				729

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

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

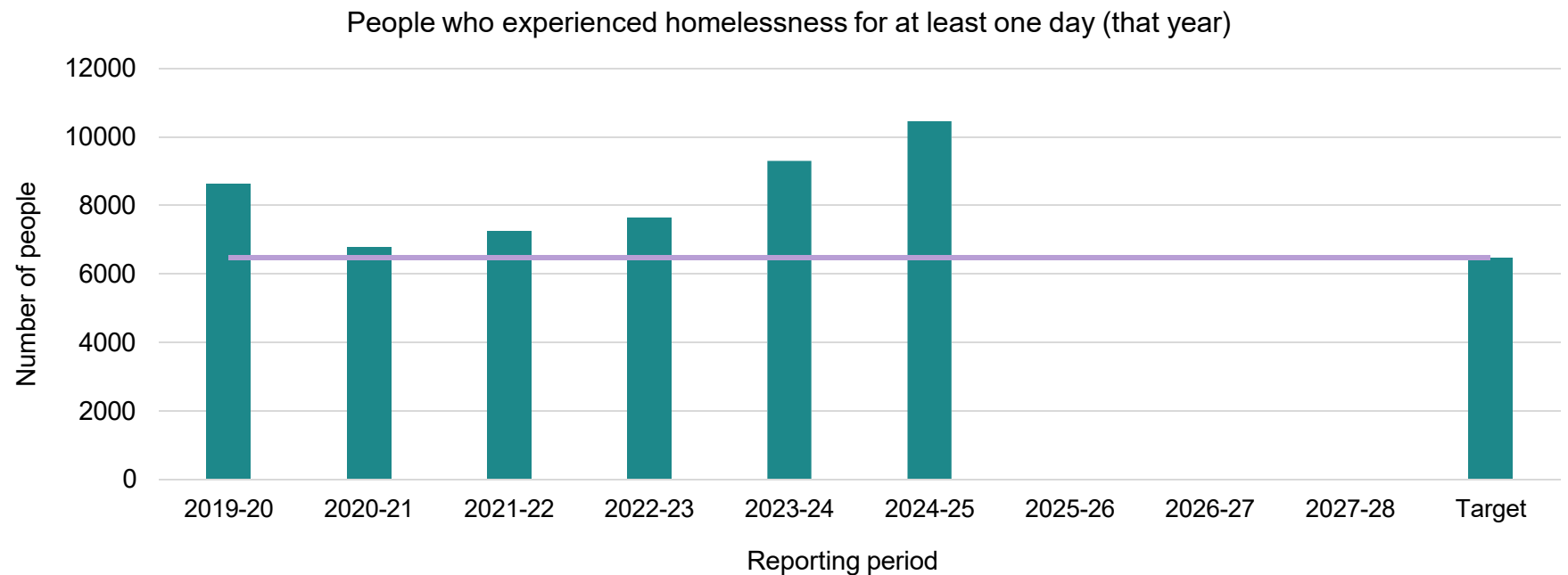**Chronic homelessness will decrease by 50% between March 2020 and March 2028.**

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.

In previous years, the City employed a different methodology for reporting the CHR. Throughout the year, the City collaborated with Housing, Infrastructure, and Communities Canada (HICC). We are now utilizing the Reaching Home Community Outcomes Report provided by HICC.

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)	8619	6790	7240	7637	9302	10460				6464

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

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.
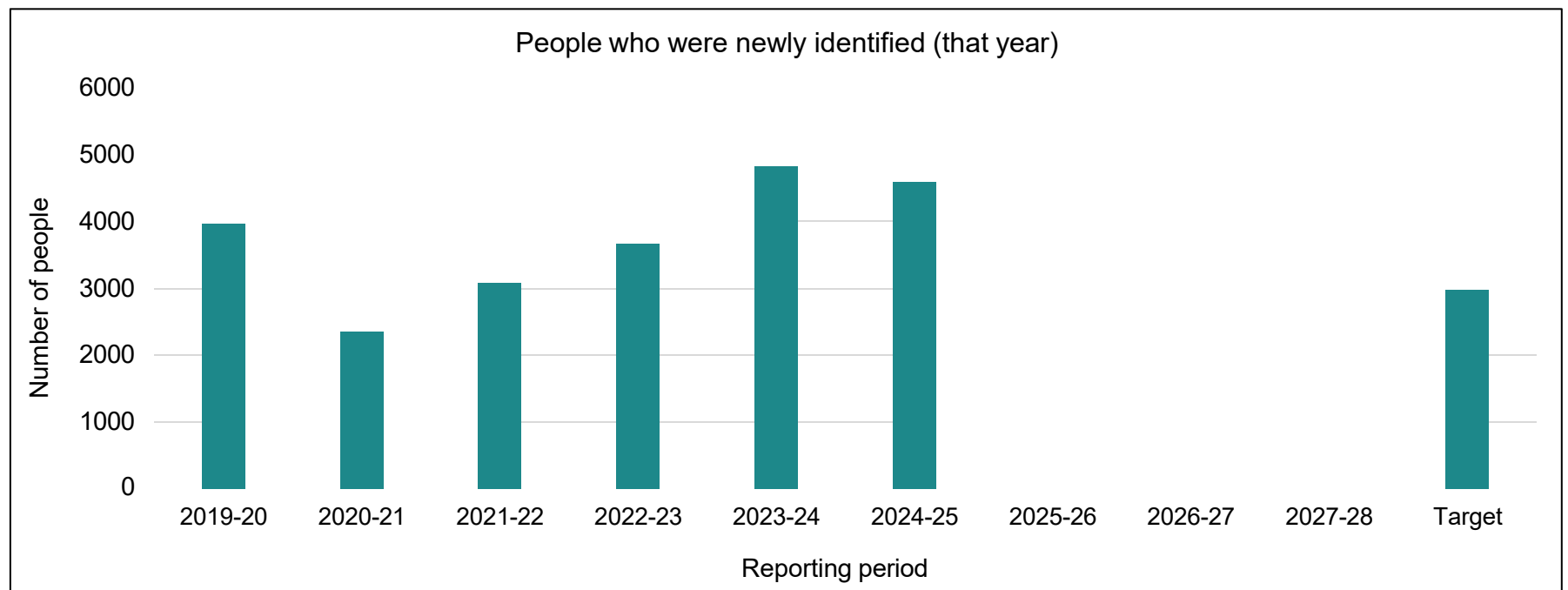
2019-20

Overall homelessness will decrease by 25% 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.

In previous years, the City employed a different methodology for reporting the CHR. Throughout the year, the City collaborated with Housing, Infrastructure, and Communities Canada (HICC). We are now utilizing the Reaching Home Community Outcomes Report provided by HICC.

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)	3965	2348	3080	3666	4821	4586				2974

People who were newly identified (that year)

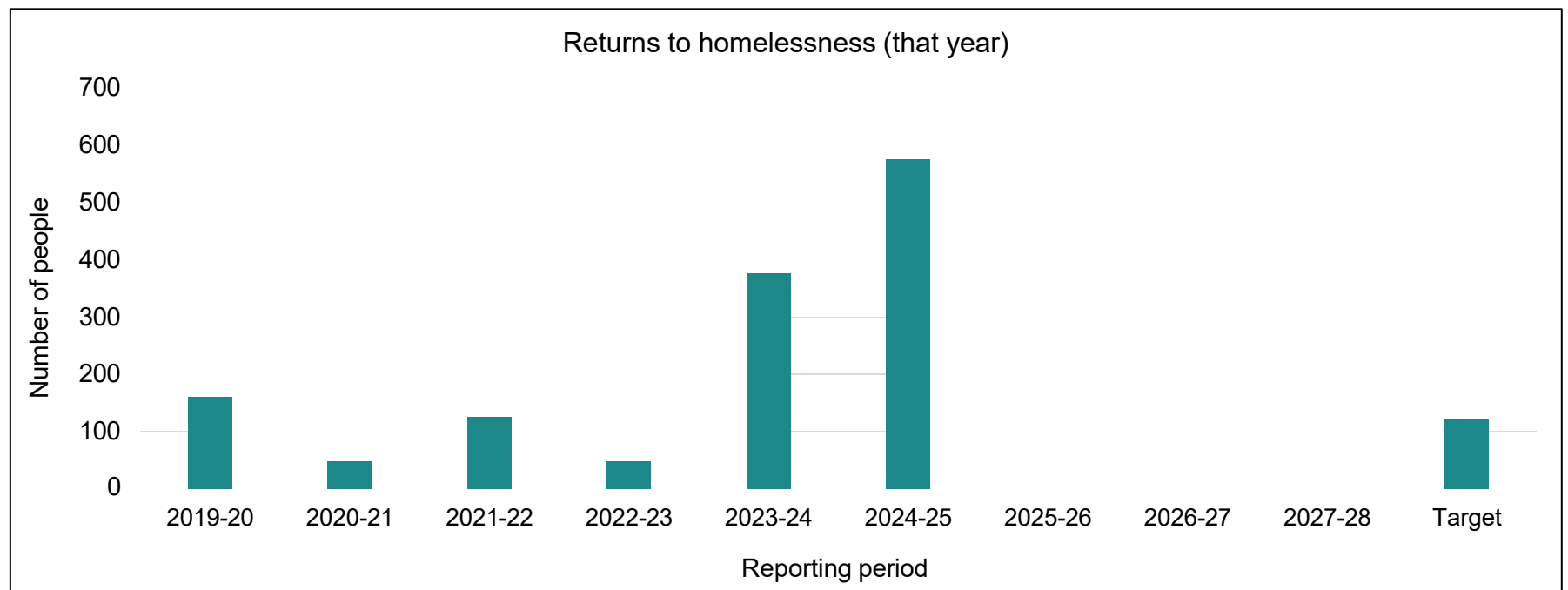| O2(A)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	2019-20

New inflows to homelessness will decrease by 25% 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.

In previous years, the City employed a different methodology for reporting the CHR. Throughout the year, the City collaborated with Housing, Infrastructure, and Communities Canada (HICC). We are now utilizing the Reaching Home Community Outcomes Report provided by HICC.

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)	160	48	125	47	376	575				120

Returns to homelessness (that year)

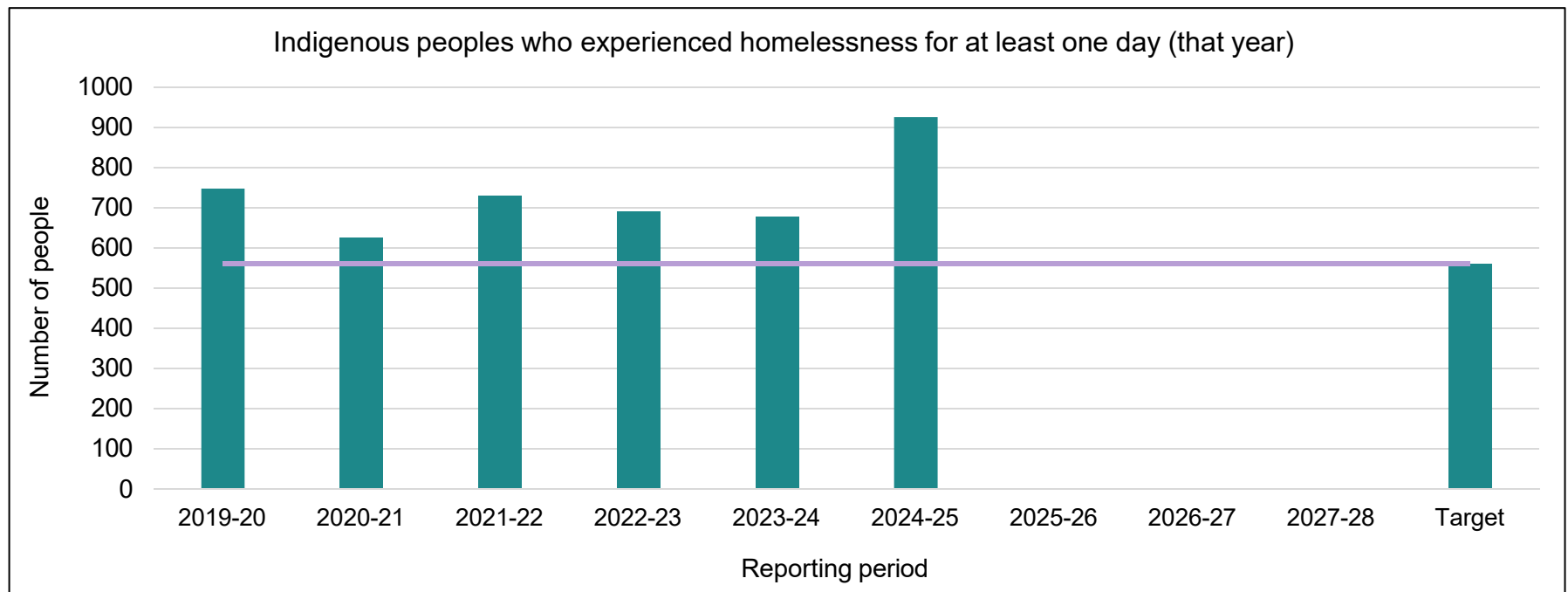| O3(A) | a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data. | 2019-20 |

Returns to homelessness will decrease by 25% 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.

In previous years, the City employed a different methodology for reporting the CHR. Throughout the year, the City collaborated with Housing, Infrastructure, and Communities Canada (HICC). We are now utilizing the Reaching Home Community Outcomes Report provided by HICC.

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)	747	625	730	690	678	925				560

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

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 25% between 2019-20 and 2027-28.
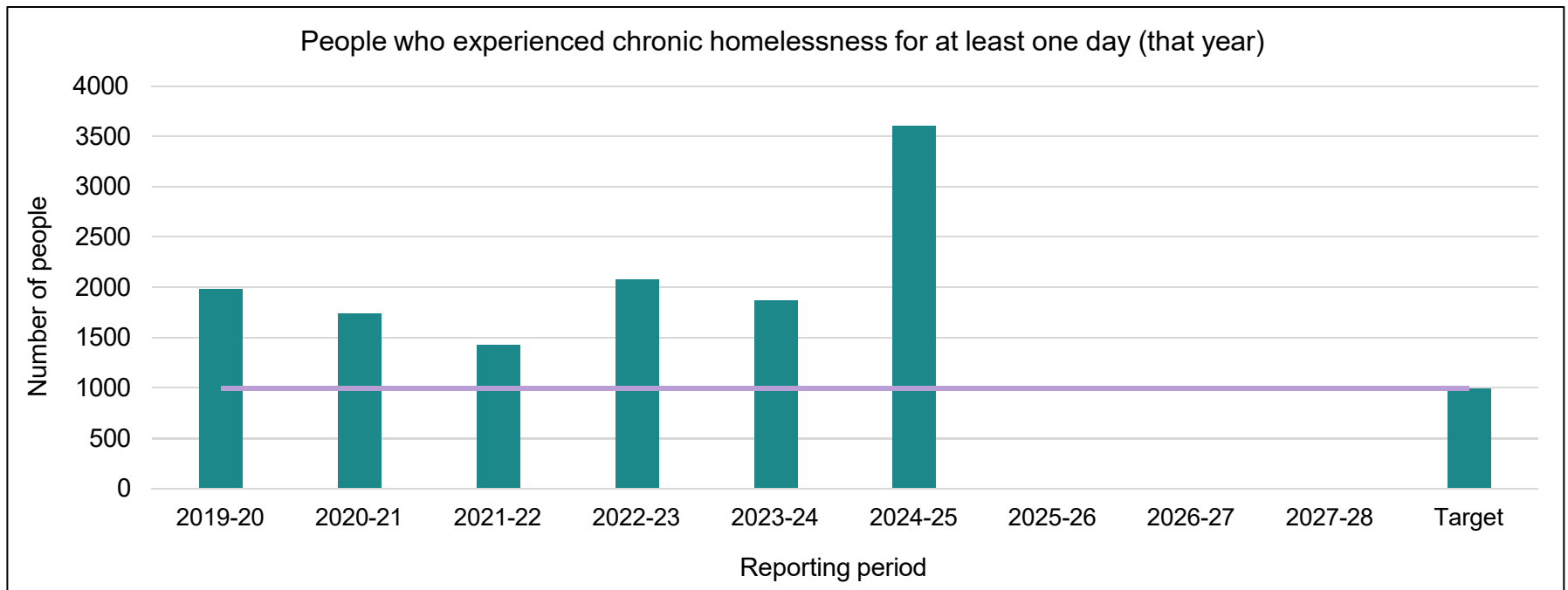
b) Please use the comment box below to:
   • As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target.
   • As applicable, explain the use of "N/A" for one or more data points. As a reminder, no cells should be 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.

In previous years, the City employed a different methodology for reporting the CHR. Throughout the year, the City collaborated with Housing, Infrastructure, and Communities Canada (HICC). We are now utilizing the Reaching Home Community Outcomes Report provided by HICC.

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)	1986	1740	1424	2075	1872	3604				993

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

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.

In previous years, the City employed a different methodology for reporting the CHR. Throughout the year, the City collaborated with Housing, Infrastructure, and Communities Canada (HICC). We are now utilizing the Reaching Home Community Outcomes Report provided by HICC.

End of Section 4a