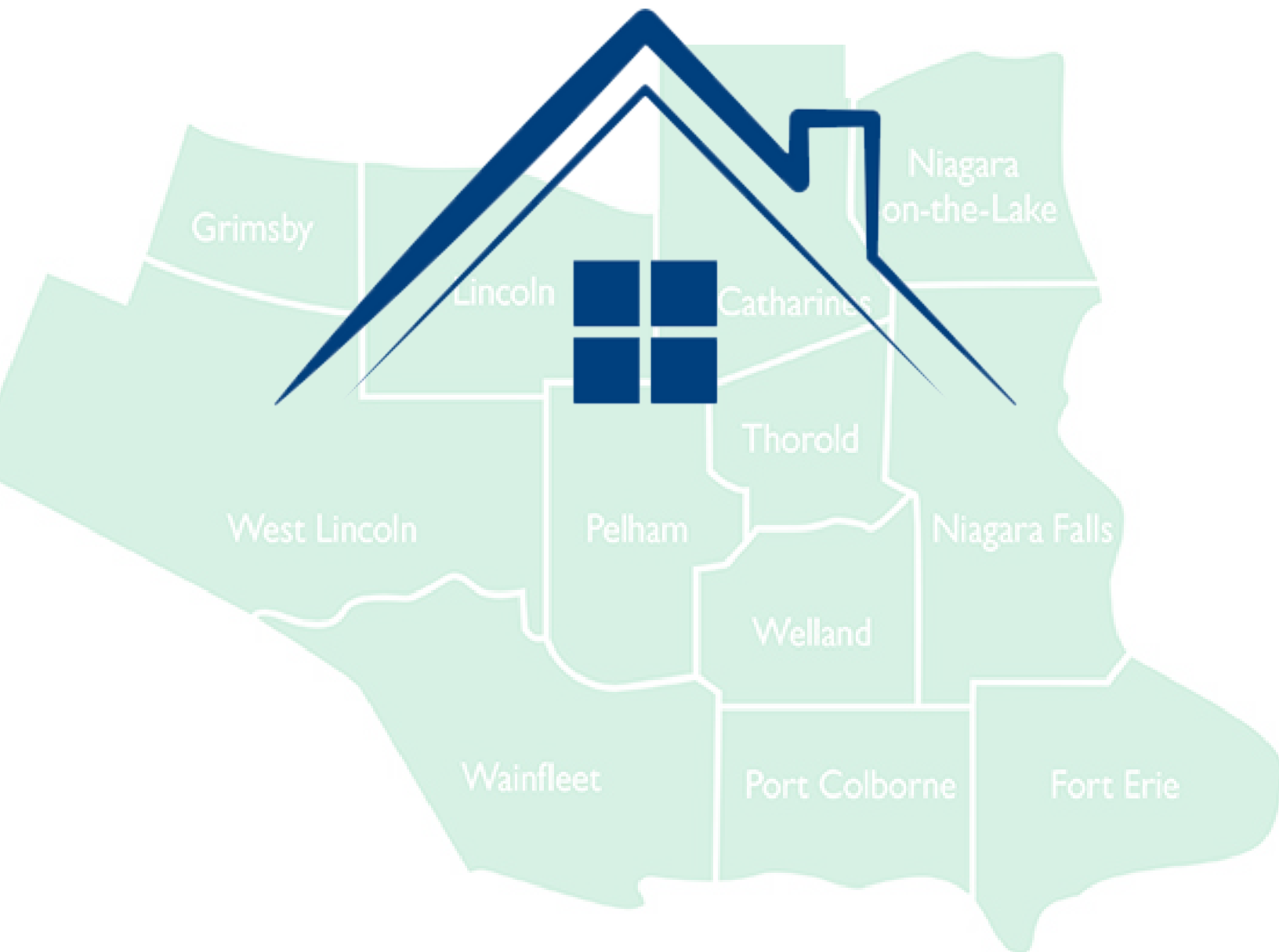


## HOMELESSNESS SERVICES SYSTEM REVIEW



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## Acknowledgements

Whitesell & Company sincerely appreciates the participation of people from all levels of government, Niagara Regional Housing, service providers and organizations directly or indirectly involved with the homelessness services system in Niagara region. We are especially appreciative of the contribution of people with lived experience who spoke candidly, critically and constructively about their situations and the services that they have received.

We had nearly 100% participation from the Niagara region funded service providers when they attended a workshop to identify the system issues and priorities. The workshop was followed by individual interviews, staff focus groups and onsite tours of the service provider facilities. Their cooperation and candor were remarkable and highly useful for this homelessness services system review.

The leadership and staff of Niagara Region's Homelessness Services and Community Engagement were extremely helpful and supportive as we conducted the review. Their depth of knowledge, enthusiasm and commitment were impressive. We are confident that they will be able to guide the homelessness services system to the next level

of performance. This will help ensure that people who are experiencing homelessness can achieve housing stability in homes that are safe, appropriate, adequate and affordable.

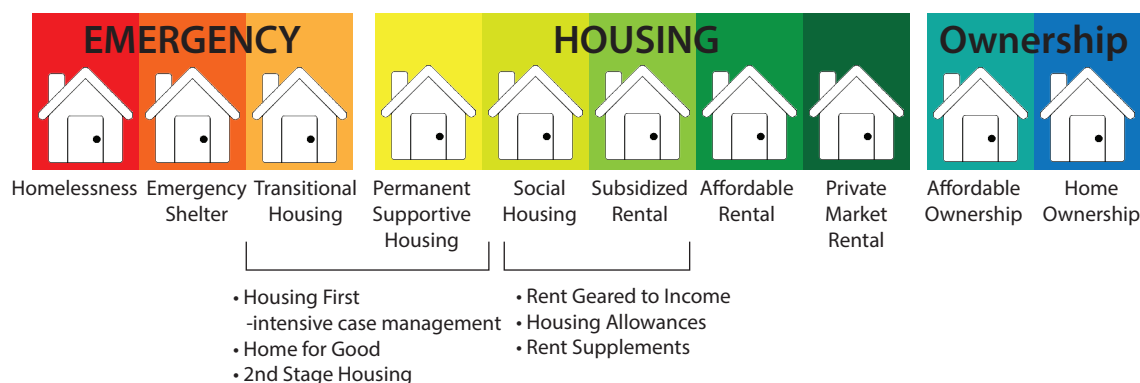
## Executive Summary

The purpose of this systems review is to present a snapshot of Niagara’s homeless-serving sector as it exists in 2018, clarify understanding of the system, recommend a path to a future state, and recommend policies, practices and a workplan to enable realization of the future state. The ultimate goal of the review is to develop a system that will help prevent and end chronic homelessness in Niagara Region. People experiencing homelessness or precarious housing are the most important stakeholders in the homelessness services system.

While it is widely recognized that housing and homelessness services exist on the same continuum of housing and support, the scope of this report primarily concerns Emergency Shelters, Transitional and Permanent Supported Housing, in addition to Prevention and Outreach services as defined below.

Figure 1

### Housing Continuum & Supports



**Prevention & Diversion:** Services that support households to maintain their current housing or find alternate housing so as to *prevent* entry into the housing and homelessness system (e.g. Niagara Emergency Energy Fund - NEEF, Housing Stability Benefit - HSB, Emergency Assistance, etc.). Prevention includes diverting people who are looking to access emergency shelter services to more appropriate and available services. A Housing First best practice prioritizes households that have lost their tenancies due to eviction or other circumstances for soonest possible rehousing with supports that will ensure the stabilization and sustainability of the tenancy. Diversion and rehousing are practices that need to be integrated in the next iteration of the homelessness services system. Prevention and diversion are critical components of the next version of the homelessness services system.

**Outreach:** Services that facilitate a household’s entry into the housing and homelessness system (e.g. Niagara Mobile Food Truck). This includes staff who are able to respond to service requests in the community for individuals who may be ‘sleeping rough’ or living outdoors at that moment in time (e.g. sleeping in their car, abandoned buildings, encampments, etc.). Outreach services are focused on ending the experience of homelessness for those with high acuity who are not accessing emergency shelters or other homelessness services. Outreach services are not the same as coordinated access.

## *Methodology*

The methodology included five major components conducted during a compressed, four-month time-line from April to August 2018. These included:

1. Document review that included over 43 reports, plans and council briefs
2. Evidence-based literature review
3. Stakeholder and service provider engagement, including 47 users of homelessness services
4. Service providers workshop
5. Project updates and discussions with Niagara Region staff

## *Key Concepts*

The foundational concepts necessary to frame this review are: 1) system analysis, 2) systems thinking, and, 3) understanding different perspectives.

**System analysis** considers all of the elements that contribute to the outcomes that the system is designed to achieve. The analysis also considers the weight or impact of the elements. For instance, the homelessness services system is designed to facilitate the end of chronic homelessness through housing solutions and supports. So, every service provider that is part of the system needs to contribute to that outcome with as few degrees of separation between the service provision and the outcomes as possible.

**Systems thinking** is an approach that involves moving from simply observing events or data, to identifying patterns of behavior over time and identifying the underlying structures that drive those events and patterns. By understanding and changing structures that are not serving the purpose and goals of the system well, we can expand the choices available to create long-term, effective solutions to complex problems through intentional design.

**Understanding different perspectives** is an integral component to systems thinking. People who operate within complex systems find it difficult to fully understand the entire system from the perspective of their own day-to-day responsibilities and operations. By understanding, respecting and including different perspectives, there is an opportunity to work together to design a system that delivers the desired outcomes.

“*Housing First is a philosophy, principles and practices that provide an operational framework for the housing and homelessness system. Housing First is a funded program that is recognized by both the Provincial and Federal Governments.*”

### *Recommendations*

The following 10 proposed recommendations are the result of the homelessness services systems review:

1. Clarify the system vision and mission grounded in Housing First philosophy.
2. Capture all system components through a system mapping process.
3. Implement the System 2.0 model for program and services delivery.
4. Strengthen key components of System 2.0, with Outreach, Housing Help and Housing First programs/services as priorities.
5. Develop standards and key performance indicators for each program/service area: Outreach, Prevention & Diversion, Emergency Shelter, Transitional Housing and Permanent Supportive Housing.
6. Improve contract management and performance measurement, including continuous improvement.
7. Work to understand the depth of need related to mental health and addictions, and their impacts on the system, in order to improve client access to available health services and supports.
8. Improve decision-making through enhanced use of technology, communication and tracking.
9. Improve staff capacity through ongoing, service provider training.
10. Increase affordable housing stock and strengthen the linkages between homelessness services and housing.

These recommendations are intended to transform the system from its current state into System 2.0 a more streamlined, efficient and effective means for clients to attain permanent, safe, adequate and affordable housing.

## Methodology

This review included five methods during a compressed, four-month timeline from April to August 2018. Dr. John Whitesell conducted all of the direct contact with people in Niagara Region to ensure that there was a single filter for information gathering, curation and preliminary analysis.

### *1. Document Review*

The consultants reviewed over 43 reports, plans and Council briefs that provided background to the planning and evaluation of Regional homelessness services, including the review that was conducted in 2013.<sup>1</sup> Many of the service agencies provided us with white papers, blogs, promotional documents and even proposals for funding from non-Region organizations.

The relevant contextual documents also included the Auditor General's Report, Housing and Homeless-ness Action Plan (HHAP), National Housing Strategy, Long-Term Affordable Housing Strategy, Human Services Integration, Canada's First Poverty Reduction Program, Point-in-Time Homelessness Count 2018 and the Staff Report on the Proposed Hybrid Model within the Alternative Service Delivery Review of Social Housing.

### *2. Literature Review*

The consultants cast a wide net for the evidence-based, literature review due to the multitude of factors or social determinants of health that directly relate to the experience of homelessness such as mental health, family/relationship breakdowns, addictions, gender-based violence, physical health, trauma, social exclusion, poverty, unemployment, stress, food scarcity, transportation, etc. The lack of affordable and stable housing exacerbates existing mental health issues and that underlines the need for a full spectrum, coordinated system that is responsive and tailored to individual needs. Our research, therefore, had to be expansive.

The research included a review of grey literature. The consultants have been involved in housing and homelessness for over two decades and have access to other thought leaders and their work in this sector.<sup>2</sup>

### *3. Stakeholder & Service Provider Engagement*

The most important stakeholders in the homelessness services system are the actual consumers of the services. Using a semi-structured, informal interview format, the consultant interviewed 47 individuals and families who were experiencing homelessness, precarious housing situations or couch surfing (no fixed address) during this review.

The consultant conducted 19 stakeholder interviews in both face-to-face and telephone formats with six follow-up interviews. The stakeholder interviews included staff and managers from the Region's Homelessness Services, Social Assistance and Employment Opportunities and Public Health; HBHN

<sup>1</sup> Paul Dowling & Associates, Niagara region Homelessness Services System Review, September 2013

<sup>2</sup> Grey literature is information produced outside of traditional publishing and distribution



LHIN; Ministry of Housing; Niagara Regional Housing; Niagara Chapter of Native Women, Inc.; Housing Help Centre of Hamilton & Area; Niagara Falls Community Health Centre; and, more. An additional five interviews were conducted with individuals who had direct experience with the homelessness system but are now working outside of the Region.

Eighteen service providers from the Region engaged in the review process. They provided the consultant with their in-depth experience, onsite tours, access to staff and background literature from their organizations. The service providers were very cooperative to give the consultant access and the agencies that are funded by Niagara Region's Homelessness Services can be found in [Appendix A](#).

Prior to the release of this report and following a presentation to service providers on November 29, 2018, the service providers and stakeholders were asked to review the draft report, provide feedback and recommend edits. The changes were reviewed and included in this final version of the report.

#### 4. Service Provider Workshop

On May 22, 2018 the majority of the funded service providers (18 in total) attended a half-day session at the Niagara Region's Headquarters Office to discuss this project and the process. The focus was the homelessness services system. The purpose was to identify and rank the issues impacting system performance. Following 90 minutes of, at times, intense discussion, the service providers were tasked to reach a consensus regarding the homelessness services system issues and priorities from their perspective using a nominal group technique developed by the consultants.<sup>3</sup> *Figure 2* is the priority ranking for the seven issues identified and defined by the service providers based upon value/importance and current performance.

*Figure 2*  
Service Providers—SOG Priorities

Priority	Value/ Importance*	Performance
A - Shared Vision	85	3.25
B - Appropriate Supports	75	3.50
C - Urban Rural Supports	67	1.25
D - Diversity of Permanent Housing Options	60	3.75
E - System Access	74	2.75
F - Shelter Beds & Capacity	67	2.00
G - Prevention of Homelessness	70	3.75

\* Value/Importance (7X17=126)

<sup>3</sup> The nominal group technique (NGT) is a process based on item response theory. Whitesell & Company used the theory to develop a framework called the Strategic Opportunity Grid (SOG). SOG was designed to objectively reach consensus regarding shared issues and their priorities among diverse participants who are part of the same system. The process involved issue identification, definitions of the issues, and decision making to make an independent, informed, forced choice between two issues at a time (often among 6-15 issues) to determine which is more important to the effectiveness of the system. The total number of choices are ranked on a vertical scale that is calculated as the total number of issues multiplied by the total number of participants. The participants rank current performance relative to each issue on a scale of 1 to 10 on a horizontal axis. This produces four quadrants: Strengths, 2) Opportunities, 3) Over-Emphasis, and, 4) Non-Issues. The results of the Niagara region SOG can be found in [Appendix B](#).

## 5. *Project Updates & Discussion*

The consultant conducted four project updates with Niagara Region staff to identify barriers to the review, new lines of inquiry and to discuss the preliminary findings. An online project tracking tool called Smartsheet, was shared with staff to provide real-time feedback regarding the project. The discussions with staff were especially helpful to the consultant to keep the “reach” of the current system in focus while helping the consultant to understand options and aspirations for the future of the system.

## 6. *Key Concepts – Systems and Systems Thinking*

A system is a cohesive assembly of interrelated and interdependent parts. A system can be natural (organic) or designed by humans. Every system is delineated by its spatial and temporal boundaries, surrounded and influenced by its environment, described by its structure and purpose and expressed in what it yields trends, key performance indicators, metrics, measures and events. In terms of its impact, a system can be more than the sum of its parts if it expresses synergy and emergent behavior that are focused on defined outcomes. An example of this impact is how two Regionally-funded agencies supporting youth are independently collaborating to provide a continuum of service appropriate for youth. Co-location of professional resources such as having Public Health nurses and psychotherapists on the frontlines serving clients is another example. And, still another example, is Gateway Residential and Community Support Services in Welland that has developed its own housing ecosystem complete with outreach, comprehensive case management and owned supportive housing stock.

The intent of this homelessness services system review was to examine the system across the entire region. *Collective Impact* is a systems approach that can help individual organizations that are isolated geographically benefit from the scale of service type and access that is provided by collective impact. This can be accomplished through the following five steps:

1. Agreement on common agenda
2. Develop a shared measurement approach
3. Leveraging resources through mutually reinforcing activities
4. Building continuous communications
5. Develop a backbone structure to mobilize the collective effort

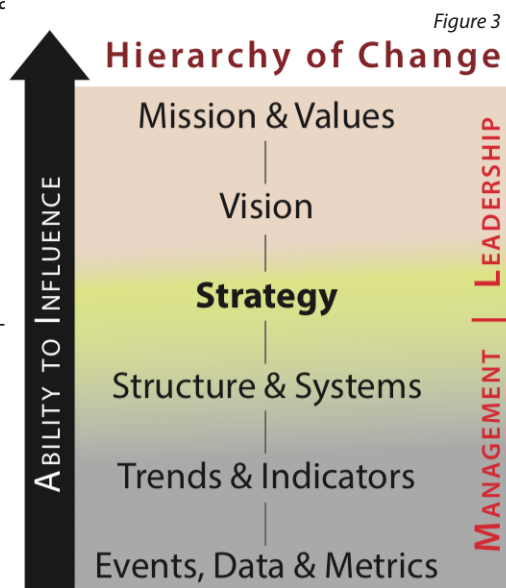
Determining the optimal system design is similar to breaking down a bicycle into its component parts: frame, handlebars, wheels, pedals, saddle, shifters, stems, chain, brakes, etc., but it’s vitally important to know what the purpose of the bicycle will be. Will the parts be used to construct a mountain bike, road bike, beach bomber, hybrid or a folding bike that can be put into the back of a car or on a sailboat? The bike’s purpose informs its design with variations in the parts that are used. The 2013 review was not performed on a system that, at that time, had a singularity of purpose.

Systems need to be designed or continuously improved to adjust to real circumstances that occur in its environment. The system must be responsive to the needs of the clients that it serves. Increasing and shifting pressures from poverty, addictions, evictions, family breakdowns, etc. in the homelessness services system will challenge its design as well as the system’s ability to deliver the desired outcomes.

For instance, an experienced rider can use a mountain bike in the Tour de France but even performance enhancing drugs will not overcome the inherent limitations of the bike's structure, system and design. The level of effectiveness and the adaptability of any system is contextual.

Figure 3 illustrates how the various parts of any system are interrelated. The ability to influence positive change in a system or organization increases as the designers or participants in the system go up in the hierarchy to the Mission, Vision and Leadership levels.<sup>4</sup> At the management level on the right side of the illustration where management inter-sects with strategy, traditions as command and control are illusory, at best. Guiding, supporting, coaching are the management skills that can adjust to shifting circumstances, assure the adaptability of the system relative to its purpose and, therefore, complement leadership.

Changing one part of a system usually impacts other parts or the whole system, with predictable patterns of behavior and, sometimes, unintended consequences. Adding additional shelter beds in Niagara Region may not house more people permanently if other components of the system are not adjusted for the change and the outward flow from shelters and transitional housing towards permanent housing. Figure 1 on page 2 illustrates a continuum of housing solutions that can work if the overall system is integrated. For systems that are self-learning and self-adapting, the positive growth and adaptation depends upon how well the system adjusts with its environment.



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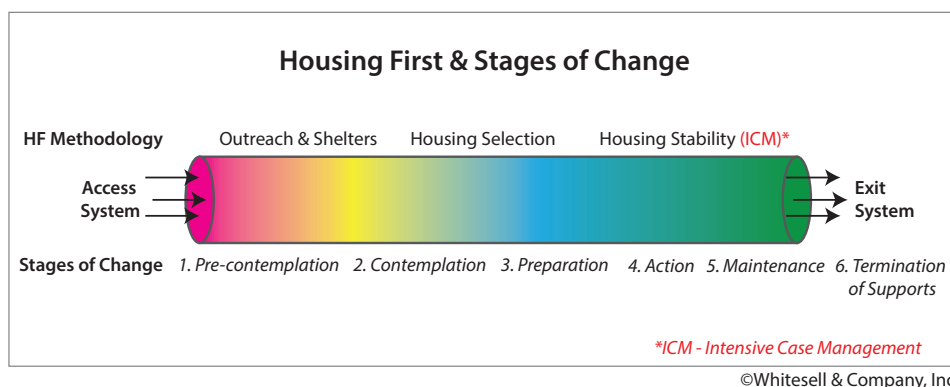
Some systems function mainly to support other systems. Smaller, related systems can aid the purpose, capacity and maintenance of the primary system to prevent failure. The goal of systems theory is to methodically discover a system's dynamics, constraints, conditions and elucidating principles, purpose, measures, methods, tools, etc. that can be discerned and applied to the overall system or the microsystems that function closest to the client, e.g., outreach workers using Housing First principles, tools and intensive case management. Figure 4 illustrates how intensive case management (ICM) progresses from outreach to housing stability and the termination of supports that signals client self-sufficiency.

The wraparound supports that are tailored to the needs of the client correspond to the six stages in the theory of change with the goal of housing stability as the outcome.<sup>5</sup>

4 The Hierarchy of Change illustration was used in the Whitesell & Company proposal as well as during the Service Providers Workshop on May 22, 2018.

5 Prochaska J.O., J. Norcross & C. DiClemente 2007. Changing for Good: A Revolutionary Six-Stage Program for Overcoming Bad Habits and Moving Your Life Positively Forward. William Morrow Paperbacks.

Figure 4



Systems thinking can overcome the major deficiencies of the traditional, linear, mechanistic approach to solving human-based, messy problems such as logic models from the past to explain housing and homelessness systems. Social science is complicated because correlation and causation are often difficult to separate. But the evidence, when viewed objectively and modeled accurately, can inform the changes that need to be made to a system to advance towards the vision and achieve the accompanying goals and objectives. It is important to remember that high-performing systems can only exist within enabling structures.

It's the difference between throwing a rock and throwing a bird.<sup>6</sup> When one throws a rock, the trajectory and distance are predictable unless, of course, skipping stones on the Niagara River. Throwing a bird is different because once the bird leaves one's hands, the bird will determine its own flight path. And, so it goes with people who are experiencing homelessness. A homeless services system must meet clients "where they are at."

The consultant conducted short interviews with 47 individual system users. A common trend in the feedback was that the current system wasn't responsive in meeting their specific needs. At the same time, they wanted the consultant to know that they blamed the system, not the service providers.

The way that individuals respond to the homelessness services system as any frontline worker can verify is going to vary dramatically. And, the variation in responses can be included in the modeling to make initiatives such as A Home For All or Home For Good a reality. An accidental discovery during the service provider interviews was that many of the frontline workers were confused by the various initiatives, e.g., Housing First, A Home For All, Home For Good, etc. This made the consultant curious about the fidelity to Housing First principles and practices across the system. Housing is a human right. Achieving that outcome for everyone requires a system that meets people where they are with the platinum rule in play: Do unto others as they need to be done unto.

Adopting systems thinking does not automatically eliminate counter-productive modes of thinking or outright failures. System thinking is not a silver bullet that will enable policy makers and managers to achieve their intended outcomes. But it will help identify what can be achieved and the means required to achieve it, e.g., what needs to change and how much it will cost.<sup>7</sup>

6 PE Plsek and T Greenhalgh, 'The challenge of complexity in health care', British Medical Journal (BMJ) 323 (15 September 2001), p 625

7 The review did not include a cost analysis related to the development of the new system. The cost analysis could be included as part of the recommendation to conduct a thorough system mapping exercise since cost is directly related to the design of the new system. There are efficiencies that will be realized through "collective impact" but it is too early to determine if the efficiencies will translate to overall savings compared to the current spend.

### *Understanding Different Perspectives*

The existence of varying perspectives regarding the definition of a problem is a key characteristic of a messy problem, that is, one that is difficult to incorporate in a linear, rational model of decision or policy making. The service providers are getting closer to a shared, conceptual view of the current system but there are still wide variations in their perspectives about how the system should work. They also have a board-mandated obligation to keep their individual organizations viable and to operate in alignment with their Board's strategic vision and mission. The majority of the leaders who were interviewed would like to have a shared view of the system to inform their decisions to serve the "greater good" that the homelessness services system represents while maintaining the operational and financial integrity of their organizations.

The classic example of perspectives phenomenon is the story of the elephant and the blind wise men as illustrated by *Figure 5*.<sup>8</sup> The parable has been used to illustrate a range of truths and fallacies; broadly, the parable implies that one's subjective experience can be true, but that such experience is inherently limited by its failure to account for other truths or a totality of truth. At various times the parable has provided insight into the relativism, opaqueness or inexpressible nature of truth. Often, even experts experience a deficit of evidence or inaccessibility of information which reinforces the need for communication and respect for different perspectives. The homelessness services system is the elephant.

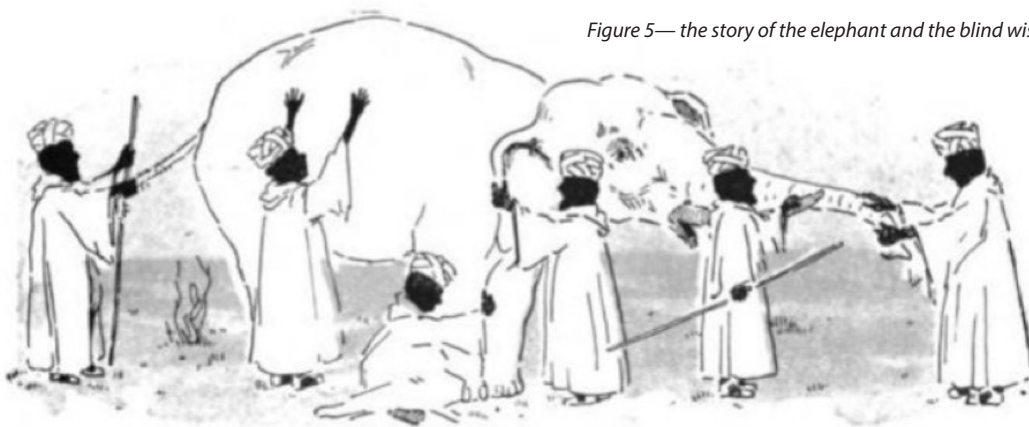


Figure 5—the story of the elephant and the blind wise men

Competing theories are expressions related to trying to make sense of the world or in the case of Niagara Region, the homelessness services system.<sup>9</sup> Echoing many of Thomas Khun's comments on conflicts in science arising from different paradigms, there is no possibility of falsifying a frame of analytical reference; no data can be produced that would conclusively disconfirm it in the eyes of all qualified, objective observers. The reason for this is that if 'objective' means frame-neutral, there are no objective

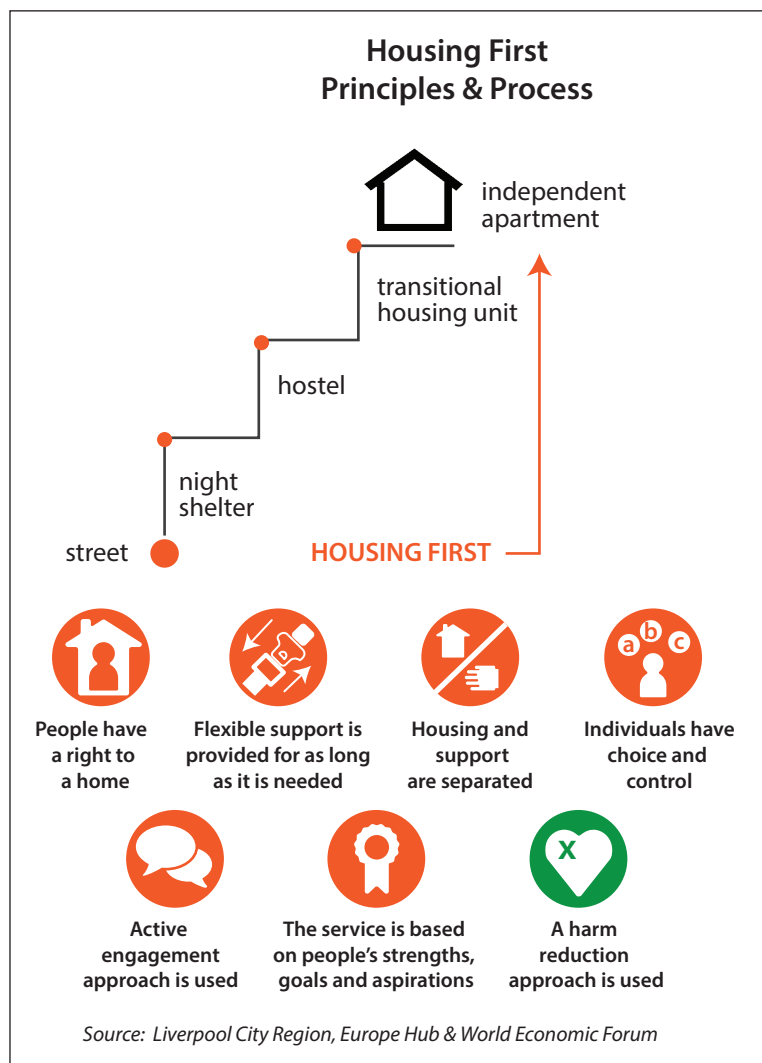
<sup>8</sup> The earliest versions of the parable of blind, wise men and their first encounter with an elephant is found in Buddhist, Hindu and Jain texts. The parable: A group of blind men heard that a strange animal, called an elephant, had been brought to the town, but none of them were aware of its shape and form. Out of curiosity, they said: "We must inspect and know it by touch, of which we are capable." So, they sought it out, and when they found it they groped about it. In the case of the first person, whose hand landed on the trunk, said, "This being is like a thick snake." For another one whose hand reached its ear, it seemed like a kind of fan. As for another person, whose hand was upon its leg, said, the elephant is a pillar like a tree trunk. The blind man who placed his hand upon its side said, "Elephant is a wall." Another, who felt its tail, described it as a rope. The last wise man felt its tusk and stated that the elephant is that which is hard, smooth and like a spear. In some versions, the blind men then discover their disagreements, suspect the others to be not telling the truth and they come to blows. Lesson: when solving problems, we must respect and explore the limits of perception and emphasize the importance of complete context.

<sup>9</sup> CHAPMAN J. 2002. System Failure: Why Governments Must Learn to Think Differently. Demos.

observers.<sup>10</sup> There is no way of perceiving and making sense of social reality except through a frame called, systems thinking. The task of making sense of complex, information-rich situations requires an operation of evidence-based selectivity which is what ‘framing’ means. From that point of reference, system effectiveness can be modeled, measured, adjusted, improved and accepted by the key players.

Homelessness systems around the world that are built using the Housing First philosophy, principles and practices have demonstrated that they work to reduce and even end chronic homelessness. The challenge is to reduce the traumatic impact of homelessness for all households whether the experience is episodic or chronic. The objective is to make homelessness an experience that is rare, short and non-repeating. The World Economic Forum reports that the significant decline in homelessness in Finland can be attributed to the adherence by service partners and community leaders to the first principles of Housing First as illustrated by *figure 6*. The Europe Hub and the Liverpool City Region validated and implemented the Finnish approach.

Figure 6



<sup>10</sup> Werner Heisenberg (1901-1976): observer-uncertainty principle

## Homelessness Services System – Background

### *Housing First*

Homelessness exists at the intersection of poverty, mental health, gender-based violence, discrimination, lost jobs, physical disabilities and addictions. Housing First has been the touchstone solution for homelessness and it has been integrated into Canadian public policy. It's vital that every element of a homelessness services system is coordinated around the Housing First philosophy, principles and programming. This is the only proven way to make a sustained impact on homelessness with the achievable goal of ending chronic homelessness. Continuing to rely on shelters, policing and emergency medical services as responses to homelessness will only add to the \$7.05 billion that Canadians pay annually.<sup>11</sup>

### *Federal and Provincial Policy Context*

Every Canadian has a right to housing but for those individuals and families with limited incomes, finding and maintaining an affordable, stable home is beyond their reach. For the first time in Canada's history, the Poverty Reduction Strategy sets an official measure of poverty — Canada's Official Poverty Line — based upon the cost of a basket of goods and services that individuals and families require to meet their basic needs and achieve a modest standard of living in communities across the country.<sup>12</sup> This measure is an essential benchmark but in housing markets across Canada, affordable housing is no longer affordable for most individuals and families experiencing homelessness. In Ontario, the pilot for the Universal Basic Income (UBI) will likely be shutdown although the Federal Government has shown interest in pursuing the program. OW and ODSP provide a shelter allowance as part of income support.<sup>13</sup>

### *Coordinated Access System*

Coordinated access is an essential element of efforts to prevent and end homelessness. Implemented with a Housing First philosophy, these systems have been in place in the United States for several years and are being implemented in a growing number of Canadian communities. Coordinated access systems are designed to streamline the process for people experiencing homelessness to access the housing and support services needed to permanently end their homelessness. The Provincial Government has endorsed coordinated access and the Federal Government has made coordinated access a requirement under the new homelessness strategy, Reaching Home, that is part of the National Housing Strategy.

The coordinated access system requires the implementation of a common assessment tool and a by-name list of clients. Niagara Region receives federal funding to develop and operate this system.

In the federal government's National Housing Strategy, the Government has taken a rights-based approach by declaring: "Canadians deserve safe and affordable housing. That is why the federal government is taking additional steps to progressively implement the right of every Canadian to access

11 Stephen Gaetz et al., *The State of Homelessness in Canada 2013* (Homeless Hub, 2013), <http://www.homelesshub.ca/sites/default/files/SOHC2103.pdf>; Stephen Gaetz and Tanya Gulliver, *Housing: Housing First* (Homeless Hub, 2013), <http://www.homelesshub.ca/Topics/Housing-First-209.aspx>.

12 [http://bit.ly/CanadaPovertyReduction\\_Strategy](http://bit.ly/CanadaPovertyReduction_Strategy). Poverty is the condition of a person who is deprived of the resources, means, choices and power necessary to acquire and maintain a basic level of living standards and to facilitate integration and participation in society.

13 Universal Basic Income is considered to be a practical way of sustaining economic growth through equity in wealth distribution. [bit.ly/UBI\\_Evidence](http://bit.ly/UBI_Evidence) WorldEconomic Forum



adequate housing.”<sup>14</sup> The economic reality of housing affordability in Niagara Region needs to be understood in the context of the Canada Housing Benefit that will become operational in April 2019.<sup>15</sup> In preparation for the inflow of funding and initiatives related to housing, it is critically important for the Region to consider restructuring options related to housing and homelessness services at the Regional level to streamline service delivery and optimize affordable housing options and opportunities.

### *Best Practices in Homelessness Services*

Homeless Hub is the de facto gold standard for evidence-based research and practices. The organization provides easy access to Housing First research, case studies and training.<sup>16</sup> Housing First has led to significant progress in helping people experiencing chronic homelessness. Intensive Case Management (ICM) ensures that households remain stable and it has also been applied to sub-populations of people experiencing homelessness such as Indigenous Peoples, Youth and women experiencing intimate partner violence (IPV) and other forms of gender-based violence (GBV).

There are best and promising practices for homelessness services systems through-out North America, Europe and Ontario. A 2012 Dutch report captures six key points regarding foundational aspects of a successful system: 1) prevention services to help clients avoid evictions and the accumulation of financial debts; 2) a coordinated approach for persons who leave health and mental healthcare institutions or prison; 3) the development of social workers' expertise and competence with respect to housing and homelessness dynamics and practices; 4) a national framework to collect data on homelessness; 5) a stronger governance role for local authorities; and 6) the introduction of a client-centred approach and case management techniques to accelerate the outflow of clients from the homelessness system and into transitional or permanent housing.<sup>17</sup>

Best practices have been identified with several programs in Niagara Region including youth homelessness prevention. The RAFT has been cited as a national best practice through prevention programs such as Youth Reconnect and Eternal Routes that have contributed to a downward trend in homelessness for young people ages 16 to 35.

The consultant has conducted Housing First program evaluations throughout North America, including CMHA in Ontario. Gateway Residential and Community Support Services demonstrates expertise in Housing First that ranks among other exceptional practitioners in this field. Gateway's case management approach helps staff better understand the supports that clients need to achieve their goals, connect with the community and sustain their tenancy.

14 Government of Canada. (2017). Canada's National Housing Strategy: A Place to Call Home. Ottawa, ON: Government of Canada. Page 8. <https://www.placetocalhome.ca/>.

15 With investments of \$40 billion over 10 years in housing, the Strategy will help provide Canadians with accessible, affordable housing that meets their needs. The aim to reduce or eliminate more than 530,000 families from housing need, protect 385,000 community homes and create another 50,000 units through the expansion of community housing in Canada. Another target is to reduce chronic homelessness by 50%.

16 The Homeless Hub is a web-based research library and information centre representing an innovative step forward in the use of technology to enhance knowledge mobilization and networking. Homeless Hub was formed following the Canadian Conference on Homelessness in 2005 and the Canadian Alliance to End Homelessness (CAEH) is a research partner. <[homelessshub.ca](http://homelessshub.ca)> <[caeh.ca](http://caeh.ca)>

17 [bit.ly/Dutch\\_HomelessnessStrategy](https://bit.ly/Dutch_HomelessnessStrategy)



### *Creating a System Vision*

When the Government of Alberta crafted its 10-year plan to end homelessness in 2009, one of the most significant visionary statements in the plan became an organizing principle for the future design of the system:

This will mean that even though there may still be emergency shelters available for those who become homeless, those who become homeless will be re-housed into permanent homes within 21 days. – *A Plan for Alberta: Ending Homelessness in 10 Years*

This design principle guided the decision making for the number of shelter beds in the province, where the beds would be located and the support services that were required to fulfill the goal of re-housing people experiencing homelessness within 21 days. Funding levels to make the system work effectively were calibrated to the 21-day key performance indicator. The Continuums of Care system in Michigan communities have demonstrated fluctuating levels of homelessness since the housing and market crash in 2008 but they tend to take the same approach as Alberta to bring a sense of urgency and accountability to the system partners.<sup>18</sup>

System effectiveness is ultimately judged by the clients who use the system. In a systems approach, implementation of changes needs to include deliberate strategies for innovation, evaluation, learning and reflection. Successful approaches will be reinforced. Programs or approaches that don't add value, deliver outcomes or strengthen the system will be removed from the system<sup>19</sup>

In 2016, the Medicine Hat Community Housing Society (MHCHS) publicly stated that they had ended chronic homelessness in the city of 63,000 people. MHCHS housed 1,072 people including 372 children from 2009 to 2016. This announcement attracted international attention because the word “chronic” was typically dropped in the media and by some Albertan politicians. The fact is that people experiencing chronic homelessness — homeless for six months or more — are limited in number compared to the overall homeless population. But they are the most expensive for society because they tend to access expensive emergency services such as hospital emergency rooms, paramedics, and police. The Executive Director of MHCHS qualified the statement regarding the ending of chronic homelessness by saying, “Ending homelessness does not mean that no one will ever experience homelessness.”<sup>20 21</sup> The consultant would like to add to this statement of fact: While ending homelessness so that it never occurs again in any given jurisdiction is not possible, ending chronic homelessness can be achieved if the system is working optimally.

“While poverty is not always about homelessness, homelessness is always about poverty.”

*Canada's First Poverty Reduction Strategy, 2018*

<sup>18</sup> Michigan homelessness dropped by 28.7% between 2010 and 2016 according to the Department of Housing and Urban Development.

<sup>19</sup> Housing First is not a system. It is one of the major, evidence-based functions of a well operating homelessness services system that has principles, techniques and tools embedded in the function, including intensive case management (ICM).

<sup>20</sup> Medicine Hat News, Gillian Slade, January 4, 2018.

<sup>21</sup> The author of this report has direct experience consulting with the Government of Alberta, the MCHCS and the 7-City Consortium in Alberta.

## Niagara Region – System 2.0 Model

The current state of the homelessness services system was the focus for this review process. It's encouraging to see several homelessness agencies collaborating with each other as well as with partner organizations to leverage their capacity and capabilities. The objective over the next 18 months is to design and develop the next version of the system (2.0) that will provide more opportunities for cooperation and collaboration in preparation for the next round of funding in 2020.

The collaboration will involve a participatory process through which the agencies will help establish key performance indicators, metrics and measures for various programs and the homelessness services system. This will be combined with performance and quality assurance targets to better serve clients. System 2.0 will form the foundational elements for the next version of the system and will be reflected in the submission requirements during the next round of funding.

The concept of alignment and coordination in the homelessness services system was presented during the service providers meeting on May 22. *Figure 7* illustrates how the shared vision can guide policies, practices and decisions at the agency level while preserving enough autonomy at the ground level as represented by the width of the arrow — to collaborate with each other to achieve the operational effectiveness of the overall homelessness services system.

Figure 7



### *Homelessness Prevention*

Homelessness prevention is the most proactive and cost-effective way to help stabilize households that are at risk of losing their housing. Homelessness prevention refers to policies, practices, and interventions that reduce the likelihood that someone will experience homelessness. It also means providing those who have been homeless with the necessary resources and supports to stabilize their housing, enhance integration and social inclusion, and ultimately reduce the risk of the recurrence of homelessness. The causes of homelessness include individual and relational factors, broader population-based structural factors, and the failure of many public institutions to protect people from homelessness. This

suggests that homelessness prevention must not only include interventions targeted at individuals, but broader structural reforms directed at addressing the drivers of homelessness. That not only communities but all orders of government, and most departments within have a responsibility to contribute to the prevention of homelessness is in keeping with a human rights perspective.<sup>22</sup>

The loss of housing can be traumatic for individuals and families with the high probability of exacerbating existing issues. Assisting households before homelessness results can avoid negative economic, social, mental, and health impacts. Since most households can successfully avoid homelessness with limited assistance, the cost savings generated by an efficient prevention program can reduce reliance on emergency shelter solutions and other emergency services in the community.

The best practices that have been demonstrated success include:

- Utilization of partnerships with providers, agencies, community leaders, and many other mainstream entities that interact with people who may be at risk of homelessness;
- Adopting a ‘zero discharge into homelessness’ philosophy so that housing stability is maintained regardless of exits from systems of care (child protection, hospitals, prisons, etc.).
- Targeting people who are most likely to become homeless based on HIFIS or other data, or other risk factors;
- Performance improvement through constant review of shelter admission data to analyze who received prevention assistance but still became homeless and people who were not provided with assistance and became homeless; and,
- Providing “just enough” resources to directly resolve a particular household’s specific and immediate barriers to getting or keeping housing and to prevent its near-term recurrence.

Eviction advocacy can be helpful in homelessness prevention by helping clients to understand and invoke their rights. This is not necessarily an “anti-landlord” approach but, instead, a practical way to prevent the loss of housing while considering the rights and issues of the household and the landlord.

### *Outreach*

Outreach services are defined as engagement with any individual who requires housing support but is not accessing emergency shelter or other homelessness services at a particular point in time (e.g. living in encampments, cars, abandoned buildings, living with an abusive partner, etc.). This includes individuals who are “sleeping rough” or living in unsuitable and, perhaps, unsafe circumstances. The goal of outreach services is to help people connect with services that can mitigate the risks that results from not having safe and adequate housing with supports. Outreach workers actively approach potential clients on the streets and offer supports related to accommodation and services.

Street outreach workers respond directly and immediately to clients’ needs by bringing services to clients. Outreach services engage homeless individuals in locations such as train stations, bus stops, streets, alleys, bridges and overpasses, parks, vacant lots, abandoned buildings and vehicles, wooded areas, riverbanks, and makeshift camps. Outreach is a harm reduction approach that aims to reduce the adverse effects of living outdoors or locations not suitable for human habitation. For example, in the

<sup>22</sup> Stephen Gaetz & Erin Dej. (2017). *A New Direction: A Framework for Homelessness Prevention*. Toronto: Canadian Observatory on Homelessness Press.

VAW sector, outreach workers may meet with clients in a coffee shop, library, etc. Public meetings are a safe way to support women who are experiencing intimate partner violence but still living with their abusers (and can therefore be understood as a form of 'hidden homeless').

Street outreach services in Niagara Region are currently limited to operating Monday to Friday during daylight hours (08:30-16:30). This approach does not consider that people sleeping rough and in other locations not designed for human habitation are vulnerable around the clock. Best practices point to 24/7 outreach services as being the most effective way to make contact with people experiencing homelessness.

The Canadian Mental Health Association (CMHA) in British Columbia provided outreach services to nearly 800 clients. Outreach workers assisted 34% of the clients (272) access housing. Two thirds of the clients were housed in private rental units and 78% were able to maintain their initial housing situation. Similar housing outcomes have been reported by the Streets to Homes outreach team in Toronto and by London CArES. CMHA Middlesex has successfully integrated outreach services as part of their Housing First team based upon the same five principles as London CArES:

1. Immediate access to permanent housing with no housing readiness requirement;
2. Consumer choice and self-determination;
3. Recovery orientation;
4. Individualized and client-driven supports; and,
5. Social and community integration.

### *Emergency Shelter*

Traditional, community responses to visible homelessness have been to build more shelters, but more beds in every jurisdiction is not necessarily the answer, either. It depends on the validated need, the system capacity/options, cost, and, whether the outflow of people into transitional or permanent housing from the shelter can be integrated into the system. Building new shelters (or housing them in motels) without identifying the outflow to permanent housing is simply warehousing people.

Niagara Region is both urban and rural and that presents the opportunity to design a system with programs that are tailored to this geographic reality to address homelessness prevention and emergency response when individuals or families lose their housing.

There are evidence-based guidelines to operating effective emergency shelters that have been developed in Canada, the United States and Australia. The National Alliance to End Homelessness (NAEH) and the Canadian Alliance to End Homelessness (CAEH) endorse the following five operational guidelines for emergency shelters:

1. Housing First Approach: Align shelter eligibility criteria and practices with a Housing First approach to that anyone experiencing homelessness can access shelter without prerequisites, make services voluntary and assist people to access permanent housing options as quickly as possible.

2. **Safe & Appropriate Diversion:** Provide diversion services to find safe and appropriate housing alternatives to entering shelter through problem-solving conversations, identifying community supports and offering “lighter touch” solutions.
3. **Immediate & Low Barrier Access:** Ensure immediate and easy access to shelter by lowering barriers to entry and staying open 24/7. Eliminate sobriety and other policies that make it difficult to enter shelter, stay in shelter, or access housing and income opportunities. Shelters that require clients to be sober to access services can be life threatening if a client chooses to experience withdrawal without proper health supports or continue using substances that may lead to overdose. Niagara Region does not currently have a ‘wet shelter’ that goes beyond harm reduction. Staff in wet shelters permit the use of palatable alcohol while monitoring use to prevent unhealthy or lethal levels of use. Wet shelters can help clients be eligible for other emergency, transitional or permanent housing options.
4. **Housing Focused, Rapid Exit Services:** Focus services in shelter on assisting people to access permanent housing options as quickly as possible.
5. **Data to Measure Performance:** Measure data on percentage of exits to housing, average length of stay in shelter and returns to homelessness to evaluate the effectiveness of shelter then, continuously improve outcomes.

Housing First is a recovery-oriented approach that draws upon models from the health, mental health and addictions sectors. Housing stability has been proven to assist recovery, especially when combined with the wraparound supports in the form of Intensive Case Management (ICM) and Assertive Community Treatment (ACT) that are the other critical components of Housing First methodology.<sup>23</sup> In 2014, the Mental Health Commission of Canada released its findings from the five cities pilot program called At Home/ Chez Soi. The \$110 million project demonstrated that Housing First saved \$9,250 per person compared to people who received traditional community services.<sup>24</sup>

Housing First was originally based upon Pathways to Housing in the 90s which led to a very effective program called, Streets to Homes, that was implemented in Toronto in the mid 2000s. Housing First is a best practice that has been adopted as an operational standard in addressing homelessness by the Federal and Provincial Governments and in countries and jurisdictions around the world. Housing First has evolved during the past 25 years and like any evidence-based program, there are variations on the techniques and tools while the principles have remained largely intact.

Housing First is practiced by some of the funded service providers in Niagara Region with varying degrees of success and fidelity to the program principles and practices. Consistent standards for Housing First practices, protocols and tools, especially ICM, will be addressed in the recommendations.

23 Ana Stefancic et. al., Implementing Housing First in rural areas: pathways Vermont. American Journal of Public Health 103 (2013). S.Tsemberis, I. Gulcur and M. Nakae, Housing First, Consumer Choice, and Harm Reduction for Homeless Individuals with a Dual Diagnosis.

24 See Mental Health Commission of Canada, National At Home/Chez Soi Final Report (Calgary, Alta.: 2014), <http://www.mental-healthcommission.ca/English/node/24376>.

Ongoing evaluation by staff regarding shelter practices that drift from the intent of the five points is helpful to determine why the failure occurred and how it can be remedied in the future. Are fewer people being turned away? Are people moving into permanent housing at a higher and/or faster rate? Safety is absolute. But, continue to drop the rules that are reactions to one-time incidents or situations that are unlikely to occur again and further isolate people.

Emergency homelessness shelters that are designated for particularly vulnerable populations such as women fleeing gender-based violence (GBV) and youth are critical to create safe refuge for recovery. In Niagara Region, a response to women (including women seeking asylum) experiencing homelessness due to domestic violence and women who are victims of human sex trafficking makes the size of this subpopulation of “VAW” disproportionately high compared to other jurisdictions due to the high volume of cross-border travel and immigration in Niagara Falls and Fort Erie.<sup>25</sup> The YWCA Niagara Region has been actively participating with public health, police and school boards to identify the level of need and helping to design appropriate responses. Shelter staffing is always important and, especially, in shelters designated for women and youth.<sup>26</sup>

The housing and support needs for survivors of human sex trafficking are unique within the VAW sub-population. There is currently a gap in the housing options for these women and a ‘safe house’ could provide the security, safety and supports that will help them integrate into the community.

### *Transitional Housing*

Transitional housing is an interim step between emergency crisis shelter and permanent housing or permanent supportive housing. The longer-term stay, intensive services and higher level of privacy differentiates transitional housing from emergency shelters. The typical length of stay ranges from three months to 18 months depending on the population being served. It is meant to provide a safe, supportive environment where residents can overcome trauma, begin to address the issues that led to homelessness or kept them homeless, and provide adequate time to rebuild their support network.

The passing of the 2017 Rental Fairness Act (Bill 124) had significant implications for transitional housing programs. For instance, service/participation agreements signed by clients are exempt from the Residential Tenancies Act (2006) for up to four years.

“*Housing First as a person-centred, harm-reduction approach...can in many ways act as a Trojan horse in social policy, stimulating shifts in practice and policy from within and without government towards enhanced integration.*”

*Source: Alina Turner, PhD  
Beyond Housing First: Essential  
Elements of a System-Planning  
Approach to Ending Homelessness.*

<sup>25</sup> Statistics Canada: Almost one in three (32%) incidents of human trafficking between 2009 and 2016 was a violation of the Immigration and Refugee Protection Act offence which targets human trafficking that crosses Canada's international borders.

<sup>26</sup> The youth homelessness sub-population can also be complicated in terms of designing appropriate responses. Multiple sources including the Human Rights Campaign, National Alliance to End Homelessness and Canadian Alliance to End Homelessness report that 20-40% of homeless youth are LGBTQ. In addition, there are male and female youth who have been identified as victims of human sex trafficking.

And, importantly, service/participation agreements must set out a process to address disputes between the client and the provider.

Often the length of stay is directly connected to the availability of affordable housing. There are situations when transitional housing is the only option until a path to permanent supportive housing can be confirmed.

The essential “learning” from transitional housing programs is that the length of stay target and range is contingent on the tailoring of services for the clients, goal setting and connection to the clients’ support network. This combination helps reduce the length of stay and eases the transition to the next stage of housing.

### *Permanent Supportive Housing*

Permanent Supportive Housing (PSH) combines rental or housing assistance with individualized, flexible and voluntary support services for people with high needs related to physical or mental health, developmental disabilities or substance use. Niagara Region’s Homelessness Services provides PSH through Home for Good and Housing First programs.

PSH is a housing option for chronically homeless individuals with high acuity that is indicative of moderate to severe mental illness and co-occurring issues. These clients are often heavy users of services (HUoS) in the community. Usually, PSH units are located in one home or building that could include rooms in a house or several to all units of a building. PSH units could be scattered site units depending upon the acuity level of the individual and the local availability of the supports that are provided through home visits or in a community-based setting.

Homeward Trust Edmonton currently funds six PSH properties that are considered to be the current best practices associated with this housing form, including:

- A recovery orientation to client case planning and goal setting to promote clients’ transition to independent living, when possible;
- The operational premise is that the PSH residents are capable of change and progress;
- Supports can include harm reduction principles and practices as well as trauma-informed care;
- Application of evidence-based practices in case management;
- Choice in housing accompanied by voluntary participation in programs and services;
- Staff efforts focus on housing stability, retention and eviction risk mitigation; and,
- Demonstrated cultural competence in service delivery, e.g., Indigenous clients.

The City of Medicine Hat attributes its success in ending chronic homelessness to provision of PSH and best practices.<sup>27</sup> The Cities of Toronto and Vancouver are also experienced and successful providers of permanent supportive housing.<sup>28</sup>

27 Turner, A. & Rogers, J. (2016). “The First City to End Homelessness. A Case Study of Medicine Hat’s Approach to System Planning in a Housing First Context.”

28 De Wolff, A. (2008). “We Are Neighbours: The Impact of Supportive Housing on Community, Social, Economic and Attitude Changes”. Toronto: Wellesley Institute. <http://www.wellesleyinstitute.com/wp-content/uploads/2011/11/weareneighbours.pdf>.



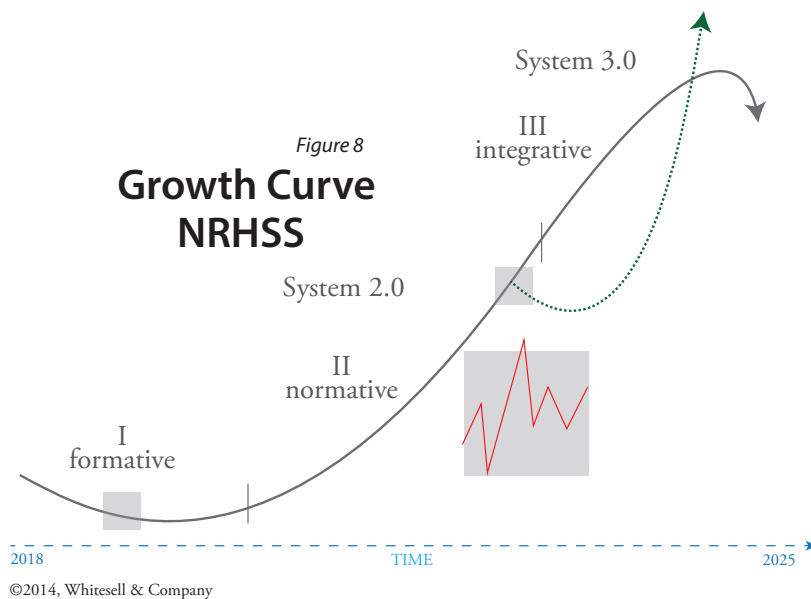
Transitional housing and permanent supportive housing need to include a social and community integration component that will help clients overcome feelings of isolation that can undermine a stable household.

### *Niagara Region's Homelessness Services – Analysis*

The consultant applied over 30 years of systems theory study and practicum to the review of the Niagara Region homelessness services system. It should be noted that the 2013 review of the system was an excellent touchstone for this study because the review used a reductionist technique to identify and assess the variables, structures and microprocesses in a system that was emerging organically.

This review applied systems theory as a framework for the study and it was encouraging to observe that members of the Region's Homelessness Services team are familiar with this approach. The starting point is to define what a "system" is because that will help us understand how the current Niagara Region homelessness services system currently functions and what changes can be made to better serve clients, e.g., the reason that the system exists. And, it will help answer a question from the funder's perspective: "...how much money needs to be invested (and where) to make the system better?"

The Niagara Region Homelessness Services System (NRHSS) has been in the formative stage of growth for several years as illustrated in *Figure 8*. The formative phase involves both success and failure in attempts to discover the best practices to achieve the system vision and goals. That is why the growth curve is erratic during this first period of time. System 2.0 in Niagara Region will be developed over the next 18 months with integration of the entire homelessness services system in 2023 and beyond System 3.0.





### *Homelessness Services – 2018*

In most jurisdictions in North America, housing and homelessness services' administration are joined together since these major functions manage the entire housing continuum from outreach to emergency shelters to supportive housing to affordable, permanent housing. However, in Niagara the administration of these services is separated between Niagara Region's Homelessness Services and Niagara Regional Housing (NRH).

Homelessness services in Niagara Region are provided through 51 contracts with 22 community agencies. These agencies deliver homelessness prevention services, outreach services, emergency shelter, transitional housing and supportive housing. On April 1, 2018 data from NRH revealed that there were 4,926 households on the social housing waitlist and 17% (842) were considered homeless. In addition to the homeless status applicants on the housing waitlist, there were 226 households with special priority status due to domestic violence and urgent status — people experiencing physical limitations and com-promised health in their current living arrangements. The wait times can only be estimated for households in the queue due to the multiple variables involved including the household status category but the wait time is measured in years and this can exacerbate existing circumstances.

There are clients being served in the various communities who are precariously housed and may not be on the waiting list. For instance, in one of the homelessness services agencies, Community Care of St. Catharines and Thorold, there were an average of 1,647 unique individuals and families accessing housing-related services during a six-month period from April to September 2018 — 275 per month. This data point includes Housing Help services such as housing lists, housing calls, NRH applications, housing appointments, housing searches and calls to shelters regarding availability. The number of people accessing Community Care housing services who were also on the NRH waitlist is unknown. The number of people who had successful housing outcomes is unknown. But, anecdotally, staff report that the frequency of people presenting with complex issues during this period has increased by a minimum of 20%. This requires more staff time and in situations that may exceed the capacity and capabilities of the workers due to the specialized service response required, e.g., serious mental health (SMI), addictions.<sup>29</sup>

### *Niagara Region's Homelessness Services Division*

Niagara Region's Homelessness Services division has assembled a team of dedicated and competent people who have demonstrated through leadership, multiple initiatives and research that they can support service providers while organizing homelessness-related stakeholders in an effort to prevent and end homelessness. The success of the Home For Good program demonstrated that positive housing outcomes can be delivered when there is a singularity of purpose. The next level of system change for Homelessness Services will be to strengthen and leverage the expertise of high-performing service providers as an objective for the development of System 2.0.

<sup>29</sup> The consultant conducted (2) 90-minute "all hands" focus groups with staff at Community Care. The agency provides 21 programs to their clients, including trusteeship services for youth.

The Social Assistance & Employment Opportunities team (SAEO) Homelessness team assists individuals who are experiencing homelessness — or at risk of becoming homeless — with access to emergency sheltering by securing hotel stays. SAEO responds to requests for homelessness supports from community agencies such as corrections, Niagara Health Services and residents. SAEO also assists individuals with the transition from emergency shelter to sustainable housing through financial supports such as the delivery of Housing Stability Benefits, community referrals and individualized case planning.

There is a significant range in the quality and efficacy of the programs and practices among the service providers who form the bulk of the homelessness services system. The implementation of HIFIS 4 will help measure the performance levels of the individual agencies. A systemwide dashboard of key performance indicators (KPIs) focused on outcomes with supporting metadata comprised of the measures and metrics will support a common understanding on a system level of what is working, what needs to improve and where resources need to be invested to improve system performance.

Within this report, 10 recommendations are proposed to support the alignment of the homelessness services system and they are calibrated to an 18 to 24-month timeline for System 2.0. Several of the recommendations are not finite projects and will involve continuous development over a longer period and will go beyond the REOI funding cycle in 2023. The recommendations are based on the premise that the homelessness services system needs to have more influence and direct connection to housing solutions and opportunities that will increase housing stock that meet the needs of the various subpopulations experiencing homelessness in Niagara Region.

### *Niagara's Housing and Homelessness Action Plan (HHAP)*

Niagara's Housing and Homelessness Action Plan (HHAP) has four goals as illustrated in Figure 9 and they are directly related to the purpose of the homelessness services system. The first two goals point to the only solution for homelessness — housing people permanently. The purpose of the Niagara Region Homelessness Services System is to find homes for people accessing services through any "door" in the system. The homes must be safe, appropriate, adequate, affordable and sustainable. The system capabilities include prevention, outreach, housing and providing support programs that promote good health, wellbeing and independence.

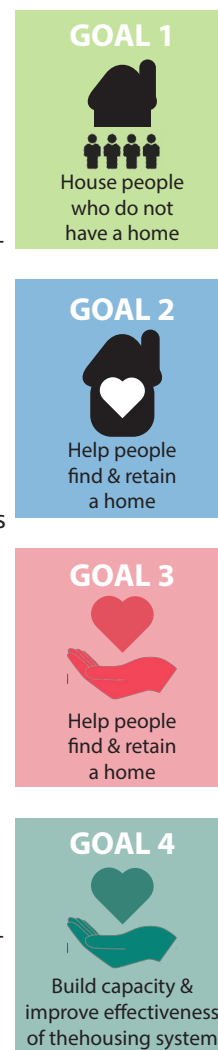
### *Niagara's Homelessness Services as a System*

In Niagara Region, an obvious system limitation is the separation of homelessness related services into two different hierarchical, administrative structures. Structure and context matter to the system's performance capacity.

One of the major, positive changes in Niagara Region since the 2013 homelessness services report has been in the leadership and management of the system.

In the Niagara Region, some of the considerations would be the number of clients being served, the priority clients being served, the services being consumed, the location of the

Figure 9



clients, the mental acuity and physical state of clients, availability of affordable housing, transportation, household income, etc.

It's critical to keep the purpose of the system top of mind to leverage its capabilities in delivering positive results. Niagara Region's 2017 Housing and Homelessness Action Plan Update reported 83 households that were placed through Housing First at the same time that there were nearly 5,000 people on the affordable housing waitlist. The rental housing vacancy rate in 2017 was 1.5%.

Is the system operating at maximum capacity? The answer to this question may sound like a hedge but it's both "yes and no" because the system isn't currently designed to respond to the level of need that is evident in Niagara Region. The agencies are doing their best in most cases to serve clients and remain financially viable but, as a system that provides a coordinated and seamless response to client needs, the agencies are rowing a square boat. System capacity will increase significantly when the agencies work collectively to achieve the goals of the overall system as well as the goals attached to their individual mandates.

Will the 13 HHAP goals (May 2018) deliver the intended outcomes? Yes. When the next iteration of the homelessness services system is designed and implemented, these goals are achievable.

What KPIs, metrics and measures will be used to track and evaluate the system's performance? These will be determined through a collaborative process with the service providers based on the design of the new system. Fewer but clearer outcome targets that comprise the operational dashboard of key performance indicators (KPIs) will be combined with greater freedom for service providers to adapt and innovate will help strengthen the homelessness services system in Niagara Region.<sup>30</sup> This includes the understanding among the system partners that poor performance especially from a client perspective will be addressed decisively.

System planning based upon Housing First in Niagara Region requires the "next stage" development of a framework for the delivery of homelessness services. The strategic, purposeful construct will help align the service provider stakeholders based upon their competencies, capabilities and capacity to facilitate their clients' access to stable and sustainable housing.<sup>31</sup> The framework will entail a combination of vertical integration (such as youth-focused agencies) combined with the horizontal integration between and among agencies that has been happening, especially on the frontlines, over the past several years. It is recommended that the framework will be based on systems thinking and modeling.

Determining the optimal number of emergency shelter beds available in Niagara Region combined with the range of people who need to access the beds continues to be a challenge. Shelters are not homes, but they can be the starting point to find permanent housing if the client chooses to accept the

<sup>30</sup> Niagara region currently has a dashboard with KPIs but this information is not common knowledge among the service providers. Many of the service providers have multiple funders and they tend to use the terms KPIs, metrics and measures interchangeably due largely to funder reporting criteria. [Appendix C](#) has a brief explanation of the differences in these three terms to help everyone in the system achieve common understanding. There are also examples of both system and program KPIs, metrics and measures that have been aggregated by HomelessHub from multiple jurisdictions.

<sup>31</sup> The consultant refers to "stable and sustainable" housing with the caveat that Housing First housing in whatever form must be safe, affordable, adequate and accessible. Also, the "next stage" reference is acknowledgement of the fact that Niagara region has been funding service providers with the intention of developing an effective homelessness services system.

service. All emergency shelters that are funded by Niagara Region should actively provide services that can be connected directly or by a few degrees of supportive separation to the purpose of the system: to find safe, permanent, adequate, appropriate, affordable and sustainable homes for clients. Band-aids are great for small wounds but they don't belong in a homelessness services system. Every assessment, meal, ID application, transportation voucher, clothing request, etc. needs to be connected to a discussion or a path to permanent housing.

The question about the optimal number of shelter beds is still open and Niagara Region has launched a two-year Niagara Falls Out of the Cold program to better understand the level of need that will inform decision making regarding shelter capacity. A report that was submitted by Councillor Wayne Campbell and Dianne Munro in February 2018 concluded that opening a shelter for men over 30 was not a solution for Niagara Falls at this time.

Everyone interviewed in the Campbell-Munro report did agree, however, that the solution to homelessness is permanent, safe, affordable and adequate housing. [Figure 10 on the following page](#) is an illustration of Niagara Region's currently-funded homelessness services, separated by service area: Outreach, Prevention & Diversion, Emergency Shelter and Supportive Housing, and developed by the Region's Homelessness Service's team. It is not a system profile, but it is an excellent categorization and representation of the current system elements.

Several of the Regionally-funded shelters are evolving and improving their services based on experience, research and collaboration with other shelters. They are also appreciative of the Region's training, support and group meetings. At the same time, some of the emergency shelter operators or programs could benefit from an independent review of their policies, practices, protocols and service platforms in an effort to identify opportunities for improvement to better respond to sustained and, at times, overwhelming levels of critical client needs (see Recommendation #6). The aphorism to slow down so you can go faster fits here.

The Niagara Region's housing and homelessness services system as a standalone is an anomaly in Ontario based on its structure. Niagara Regional Housing (NRH) is currently a distinct entity governed by its own Board and funded by Niagara Region. NRH also has a Community Resource Unit and Housing Programs Division as part of its structure. Certainly, there is ample evidence of internal cooperation between these two entities for administration of services but, through the lens of a person or family accessing the housing and homelessness system, it's far from straightforward and that can result in added stress.

The consultant agrees with the rationale and recommendations proposed in the Hybrid Model of social housing service delivery. It is a classic change management challenge but the projected timeline for the transition is reasonable based on the consultant's experience and the cost/benefit analysis makes sense. Special attention will be required to the communication strategy as well as in maintaining client service levels. The transition needs to be invisible and seamless from the client perspective.

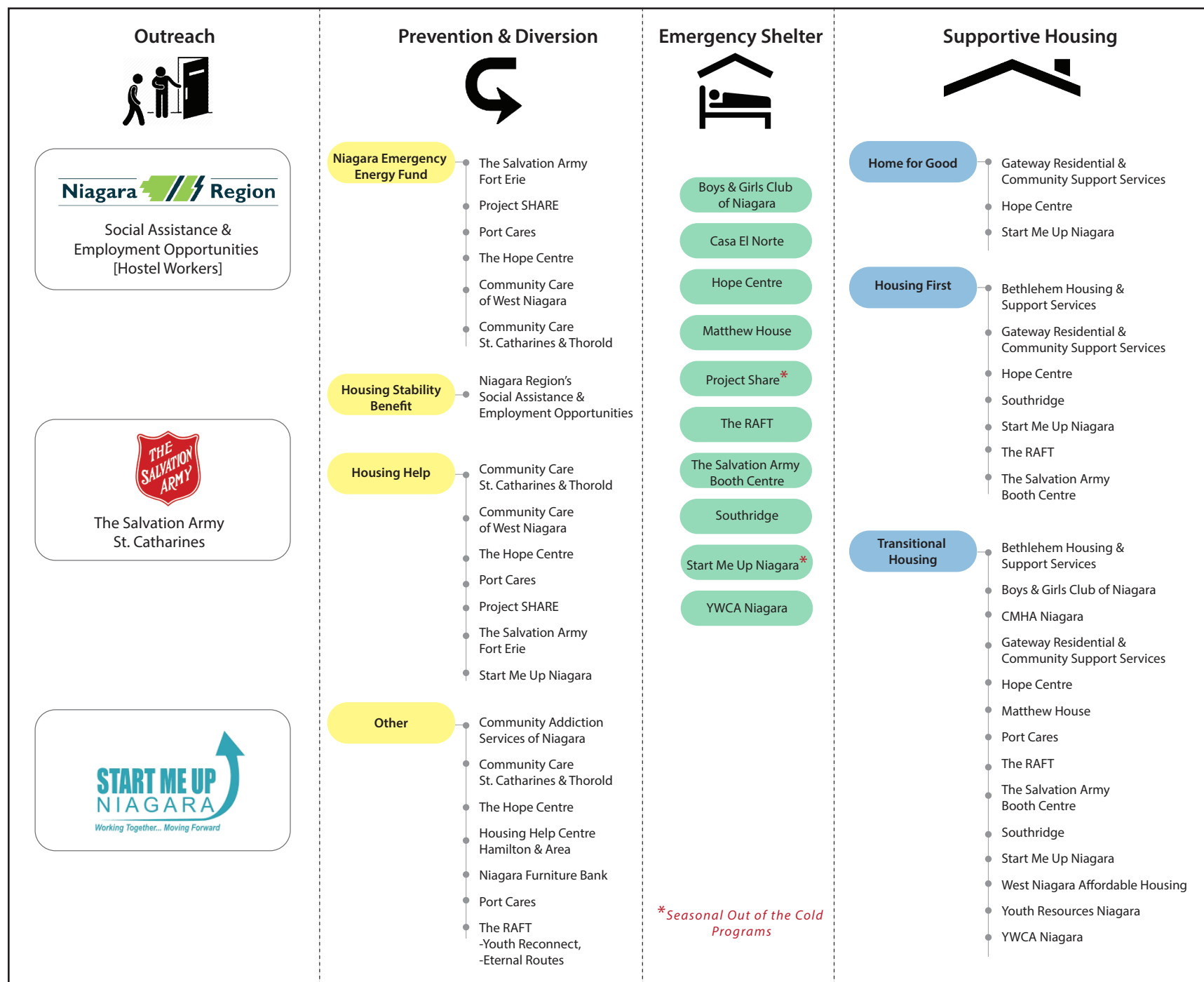


Figure 10

### *Discussion of Niagara System Issues & Priorities*

The following table summarizes the trending comments that were gathered by the consultant during

Perspectives	Key Comments
Homelessness Services Users	<ul style="list-style-type: none"> <li>• The consultant conducted 47 five-minute interviews with users of homelessness services and 29 (61%) had no fixed address, that is sleeping rough, couch surfing or not paying rent.</li> <li>• Clients were generally not critical of the quality of services being provided or the staff even though the majority were frustrated by the long wait times to access services.</li> <li>• When asked about their opinion of the homelessness services system, clients responded that staff want to help them but there is too much paperwork and not much action.</li> <li>• Clients see the agency as a place to socialize and stay current with what's happening in the neighbourhood.</li> <li>• Most clients expressed little hope about their personal situation improving in 2019.</li> <li>• The majority of clients did not think that permanent housing was a reasonable goal, e.g., no job, little income, mental health challenges such as drug/alcohol use, pets, etc.</li> </ul>
Homelessness Services Providers	<ul style="list-style-type: none"> <li>• Dialogue among service providers has been occurring and has been improving steadily over the past few years — facilitated by Region staff at times. This alone has contributed to better understanding about different approaches and experiences when working with people experiencing homelessness.</li> <li>• The current homelessness services system has been improving significantly over the past two years. This was reported unanimously by the service providers who were interviewed for this study. The two reasons cited for the improvement were related to consistent communication and information sharing by the Region's Homelessness Services staff.</li> <li>• Providers articulated that the Region needs to shift from managing homelessness to solving homelessness.</li> <li>• Providers felt that the current system lacks the overall number of shelter beds and the capacity to provide emergency shelter to the range of subpopulations that comprise the total number of people experiencing homelessness. This was especially true for survivors of human sex trafficking.</li> <li>• Most providers stated that they feel unable to address need for affordable housing for clients and accept as reality that housing people who are homeless when there is a lack of affordable permanent housing is an insurmountable obstacle. Homeless service providers want a more direct connection between the work that they do and securing permanent housing for their clients.</li> <li>• Service providers were encouraged by the Region "reaching out more" for feedback and input, especially with the development of the HHAP also known as A Home For All.</li> <li>• Providers discussed how staff turnover impacts capacity and quality of services as more experienced staff tend to carry a disproportionate amount of the client workload leading, in some cases, to burnout — but they stay for the income.</li> <li>• There were four comments from service providers about the "fairness" of the last round of REOs but that their trust in the Region has been increasing — a paradox.</li> </ul>

Perspectives	Key Comments
System Planners	<ul style="list-style-type: none"> <li>• The major observation from system planners was that there was a lack of integration of homelessness services, homelessness support services such as health, mental health, addictions. The lack of services integration was directly connected to the availability of affordable housing.</li> <li>• The consultant heard “there is no homelessness system” on several occasions and almost always with the caveat that there has been significant progress in the past two to three years.</li> <li>• There was a healthy degree of skepticism about the homelessness services review leading to improvements in client services and outcomes.</li> </ul>

### Key Points from the May 22 Discussion with Service Providers

On May 22, 2018 a half-day strategy workshop was facilitated by the consultant with 18 service provider representatives. The focus was the homelessness services system. The purpose was to identify and rank the issues impacting system performance. The participants identified and defined seven (7) priorities that were determined through a voting process and the results are displayed in figure 11.32 The highest-ranking issue was to reach consensus regarding a “shared vision” of the homelessness services system across all stakeholders. Some of the defining points for this issue included:

- Is the system functioning as a system?
- Shared measures, metrics and key performance indicators
- Define “success” metrics (when the system is operating as intended)
- Funding needs to be calibrated to the level of needs in the region

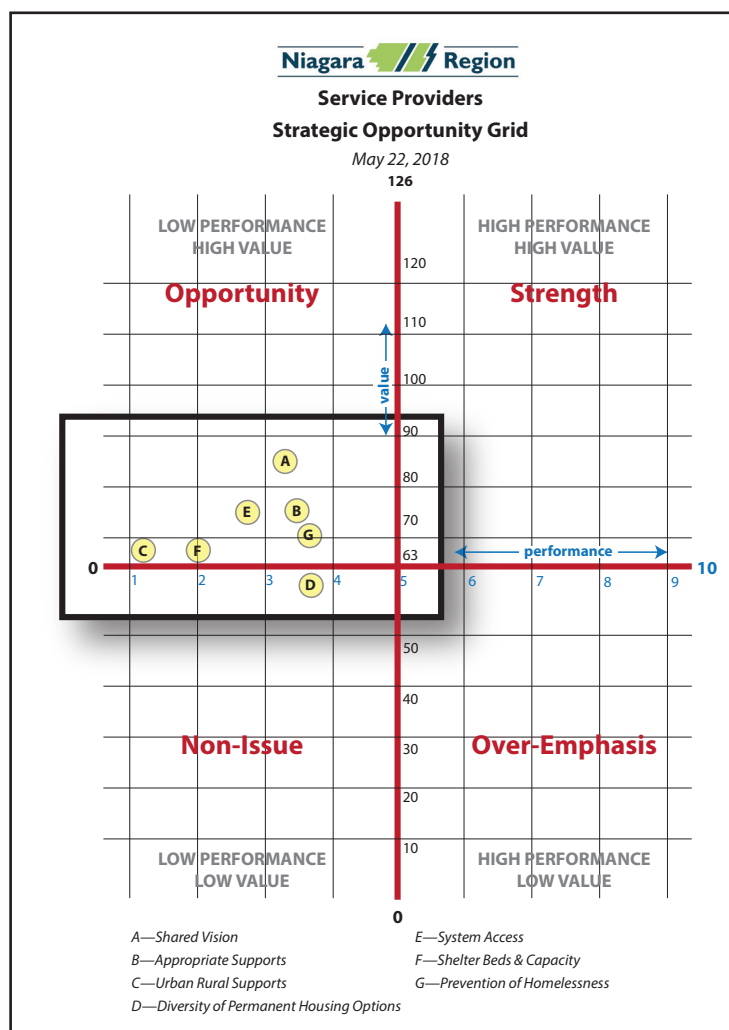


Figure 11

32 The seven (7) issues are plotted on four quadrants. The SOG and definitions can be found in [Appendix B](#).



An example of a shared vision was mentioned earlier in this report and comes from the Government of Alberta's plan to end homelessness in the province: no Albertan without a home for longer than 21 days. From that reference point, the vision for Niagara's system can be described in terms that address all of the other six issues that were identified: funding levels, the number of shelter beds, supports required, transportation that deals with the urban/rural realities, permanent housing form options, system access and how the system helps prevent homelessness. The service providers all agreed that the Region is currently managing homelessness as opposed to ending homelessness. The end of homelessness begins with a shared vision of the system.

In addition to a shared vision for the system, another issue that emerged was the Diversity of Permanent Housing Options that is complicated by the overall lack of permanent, affordable housing. This issue was ranked below the other six because it's an accepted reality that housing people experiencing homelessness in Niagara Region is increasingly difficult to the point of being an insurmountable obstacle.

Shelters were operating at 108% capacity at the time of this report and there were 50-60 evictions in process from social housing. But there are some "green shoots" appearing.<sup>33</sup> There are 17 more Housing First units becoming available in March 2019 and a Landlord Engagement Coordinator has been engaged to help develop landlord relationships in the Region. Bethlehem Housing and Support Services has a new residential building planned that will add 126 affordable units. The Region is exploring alternate housing forms, including congregate living that will add housing capacity to the system. Also, similar to other municipalities experiencing extremely low vacancy rates, the focus of housing help services will be to support renters as well as to recruit and retain landlords to prevent and end homelessness.

The current Landlord Engagement pilot (through the Housing Help Centre) and its positive outcomes securing private market units and connecting clients within Housing First and Home for Good programs could be further enhanced. The pilot could support diversion efforts for those precariously housed, expand landlord engagement through the development of landlord-specific resources and toolkits and through the creation of tenant self-advocacy guides and education materials regarding housing rights.

St. Catharines has one of the highest rates of affordable housing need in Niagara Region and the wait for a one-bedroom unit can be as long as 12 years. In 2017, through the Governments of Canada and Ontario and the Investment in Affordable Housing Agreement (IAH), 161 more units of affordable housing were added to Niagara Region inventory in three cities.<sup>34</sup>

The consultant identified another example of ideas and initiatives that are fueling an optimistic view about youth housing in Niagara Region. Youth Resources Niagara and The RAFT have a coordinated approach for providing safe shelter and supports for youth with the goal of helping their clients become self-sustaining in the mainstream community. How We Can is the motto that underpins their service approach by providing a "light hand of guidance and support."<sup>35</sup>

33 The term had its original connection to the environmentalist lobby in West Germany during the 1970s. British Conservative MP Norman Lamont introduced the phrase "green shoots of recovery" in relation to the emergence of Britain from the 1991 recession.

34 CMHC reported the following: 527 Carlton Street: (64) one-bedroom; (8) 2-bedroom and 13 accessible units | Birchwood Place, 235 Fitch Street Welland – 67 units | Gateway Residential & Community Support Services, 4750 Huron Street – (9) units

35 [bit.ly/YRN\\_MikeTaylor\\_Interview](https://bit.ly/YRN_MikeTaylor_Interview)

One of the issues discussed during the service providers meeting was the overall number of shelter beds and the capacity of the system to provide emergency shelter to the range of subpopulations that comprise the total number of people experiencing homelessness. The ideal homelessness system would result in every individual and family being safe by having shelter, transitional housing or permanent housing in Niagara Region. Niagara's second point-in-time count concluded that at least 625 people were experiencing homelessness.<sup>36</sup> In addition to homeless enumeration, a second goal of the point-in-time count was to gather information on the demographics, experience and service needs of Niagara's homeless population, through surveys. In total, 408 people completed surveys, the majority of whom (226) stated that they were staying in an emergency or domestic violence shelter or at Safe Beds on the night of the count. Over the past year, 55% of all respondents had been homeless 6 or more months (i.e., chronically homeless).

The next PIT Count needs to include people with no fixed address who are sheltered in hospitals, mental health facilities, jails or are on remand without a permanent address on record. The 2018 PIT Count did highlight, through the detailed survey, the number of people who visited emergency rooms or were involved with police or the justice system.

Many homelessness service providers in Niagara function on the economic premise of scarcity, e.g., if we just had more funding, we could do more for our clients. Without program evaluation and outcomes analysis, the injection of more money into ineffective services will not make them better. It's time to create a baseline reference for performance and embed evaluation into all programs with efficient data tracking.

The current homelessness services system has been improving significantly over the past two years. This was reported unanimously by the service providers who were interviewed for this study. The two reasons cited for the improvement were also consistent — communication and sharing information.

The seven issues and priorities from the service providers meeting were discussed and expanded during the interviews that were conducted for this report. Most participants thought that the Region's Homelessness Services staff has earned enough trust to provide more direction to the ongoing development of the system. Several people mentioned that the system is not integrated to a level where it is reliable and functional for clients or service partners. The previous REOI process was considered "fair" by most but the service providers would appreciate more direction about what the Region wants from the next round of REOI submissions in 2020 in the context of the homelessness services system (e.g., shared vision).

Joint REOI submissions from two or more service providers could result in added synergy and creativity as well as improving the return on investment via successful client outcomes. Several of the service providers were open to the idea of this concept and approach.

“Desperately looking for a place for March first were a young responsible couple looking for a 1-bedroom apartment in Welland. Have to move. Landlord is moving also. We're still in school and no one wants to rent to us because we're too young. Please don't judge us because of other young people don't know how to behave. We're quiet and just want a good future. Please call.”

*Posted in housing section of Niagara Mobile Outreach*

“I'm in desperate need of a place - two-bedroom by March 15th at the latest or my family could possibly be homeless - any help will do right now my budget for it is 1100 all-inclusive though and that's the max amount I'm starting to get very worried at this point in time because I cannot find a place any help would be grateful thank you”

*Posted in housing section of Niagara Mobile Outreach; the average market rent for 2-bedroom apartment in Niagara region*

<sup>36</sup> The Point-in-Time Count was conducted on March 27, 2018. All PIT Counts underestimate the actual number of people experiencing homelessness. There were 465 people counted in the 2016 PIT Count – 34% increase in two years.

## Recommendations

This section of the report represents the distillation of the information that was gathered, curated and analyzed during the review process. The recommendations will be implemented with the understanding that the impact of the homelessness experience is always traumatic but the trauma manifests differently in its impact on different sub-populations such as families, women, veterans, single men, victims of sex trafficking, youth, LGBTQ2, Indigenous and immigrants. Mental health challenges and/or addictions often accompany the experience of homelessness so having psychiatric and health professionals on the frontline of homelessness service delivery contributes to positive client outcomes.

Our understanding of homelessness is not limited to identifying the various sub-populations. Homelessness is more nuanced than categorizing people. For instance, we acknowledge that the needs of women experiencing homelessness due to gender-based violence is different than a single woman with a family experiencing homelessness due to poverty. Similarly, the needs of a transgender youth being ejected from the family home is different than a youth with no fixed address who is released into the community from the justice system.

Housing will always be the solution to homelessness. But the supports that people need to maintain and sustain their housing will vary because homelessness is a different experience across the sub-populations. We need to have tailored responses to the multi-faceted experience of homelessness. That is why the needs of the different sub-populations will be layered over all of the recommendations during the development of System 2.0 with emphasis on including their voices in the process.

The following 10 recommendations are the result of the homelessness services system review.

### *1. Clarify the system vision and mission grounded in Housing First philosophy.*

The homelessness services system needs to be more clearly articulated so that all stakeholders share an understanding about the goals of the system and their individual and collective roles in achieving the goals. The ultimate focus of all activities in the system will be through the lens of ending homelessness in alignment with Housing First philosophy, principles and practices.

### *2. Capture all system components through a system mapping process.*

The most important recommendation is the instruction to conduct a system mapping event for all stakeholders. The purpose of the event will be to capture “all of the moving parts” of the homelessness services system using software such as Stella Architect®.<sup>37</sup> This is a disciplined way to model and understand complex, dynamic relationships such as housing and homelessness. It enables people to make better choices and avoid unintended consequences. This approach will help people to visualize the interdependent components that are involved in the homelessness services system, calibrate the inputs with available data and be able to identify the leverage points for effective intervention and to enhance client outcomes. [Figure 12](#) illustrates a Housing Supply Model using Stella Architect®.

<sup>37</sup> [bit.ly/Stella\\_Architect](http://bit.ly/Stella_Architect)

This recommendation will involve as many as (4) 3-hour events or (2) days. The visioning exercise will reveal not only a representation about how the system operates today but also how the stakeholders in Niagara Region need it to operate to achieve the goals and objectives attached to the system. This approach will help reduce wasted efforts and resources no matter how well intentioned and reinforce the alignment of services and programs.

The next iteration of the Niagara Region homelessness services system 2.0 will require clearly articulated mechanisms that connect to other key public systems and services, including public health, justice, child intervention, immigration/refugee, gender-based violence, LGBTQ2, poverty reduction, mental health and addictions. Capacity gaps and duplication of services can be identified when a complete rendering of the system is achieved. At the operational level, the system mapping can capture differences in such important service approaches such as eligibility criteria, length of stay in shelters or transitional housing, referral processes, data management and performance standards.

Niagara Region combines rural and urban challenges and the system needs to address the challenge of connecting all service providers and programs, regardless of location in the region. The entire system can be reoriented to a Housing First approach.

### *3. Implement the System 2.0 model for program and service delivery.*

The next level of system change for Homelessness Services will be to leverage the expertise of high-performing service providers that will become the foundation for the System 2.0 model. The system design will be the product of a collaborative process with homelessness services stakeholders and will be accompanied by performance targets, key performance indicators, metrics and measures. System 2.0 will include the entire “reach” of the services continuum in both rural and urban settings while striving to reduce distance — figurative and literal as a barrier to services access.

### *4. Strengthen Key Components of System 2.0 with Outreach, Housing Help and Housing First programs/services as priorities.*

In an effort to improve client service and outcomes, it is important to strengthen key components of the homelessness services system. The consultant recommends that organization and program reviews should be conducted with agencies that have high client volume and broad service offerings. This will ensure that program integrity and outcomes related to outreach, housing and housing stability are reinforced. A review of outreach and housing help can use the highly successful, award-winning London CARES model as a reference point. Enhanced staff training in Housing First with accreditation will also contribute to strengthening the system.

Outreach needs to be linked to coordinated entry into the system in System 2.0. This will involve the implementation of a common assessment tool and by-name list.

Strong outreach or street engagement services include components such as:

1. Seasoned staff with expertise working with clients with high acuity;
2. Ensuring engagement with clients is planned, strategic and housing focused, and,
3. A balanced approach that involves engagement with clients during daytime, evening and early morning hours — 24/7 outreach.

*5. Develop standards and key performance indicators for each program/ service area: Outreach, Prevention & Diversion, Emergency Shelter, Transitional Housing and Permanent Supportive Housing.*

Standardize, support and sustain Housing First practices through regular staff training and auditing. This can be done through the further development of resources such as tool kits, tip sheets, webinars, conferences and direct support. Without consistent engagement with frontline staff and supervisors, the uptake and implementation of best practices by new staff will be limited while skills can erode over time.

Training will have a long-term impact on the quality and efficacy of System 2.0 by recruiting qualified staff and managers.

There is a range of interpretations across the service providers in Niagara Region about Housing First principles and how it works in practice. Currently, the fidelity to the Housing First approach is variable across the agencies in the system. Housing First is a philosophy, a set of principles, a methodology and tools. An individual or family experiencing homelessness does not have to qualify or meet specific criteria to be housed. But, the practical component of Housing First is the intensive case management (ICM) that ensures that a new household receives wraparound supports so that people can be successfully housed over time and, eventually, sustain their tenancy without supports.

*6. Improve contract management and performance measurement, including continuous improvement.*

Once the system mapping of 2.0 has been completed, the Region can work towards establishing and monitoring service standards and the impact of programs across the system, especially with priority populations. Sample indicators would include shelter occupancy/conditions, length of stay, destinations upon exiting shelter, case management practices, recidivism, rehousing rates, income, self-sufficiency, acuity and interaction with public systems. The Plan, Do, Check, Act (PDCA) cycle of continuous improvement will help combine quantitative and qualitative factors that contribute to effectiveness.

Using the Six Sigma model of graduated knowledge and skill levels, Regional staff can design a syllabus for homelessness and housing services training to ensure quality standards, learning goals and system capacity. The Region can certify people for each level as they master the theories, techniques and tools associated with their frontline work.<sup>38</sup> The syllabus can be populated from approved content from sources such as Homeless Hub, Canadian Alliance to End Homelessness, National Alliance to End Homelessness, etc.

This training should have an additional focus on mental health, addictions, stages of change, communication skills, first aid, overdose protocols/treatment and trauma. The courses can be a combination of in-class and on-line instructional modalities. There have been recommendations from the federal Advisory Committee on Homelessness to develop national guidelines and an accreditation process for Housing First and this recommendation is a significant step in that direction.

<sup>38</sup> Niagara region's Internal Controls and Organizational Performance (ICOP) department has Six Sigma Black Belt capability. Homelessness Services has already tapped ICOP expertise in 2018 for yellow belt training for homelessness staff (Action Plan Advisor, Homelessness Contracts Administrator) and for assistance with the 5-year review of the HHAP and new logic model.

*7. Work to understand the depth of need related to mental health and addictions, and their impacts on the system, in order to improve client access to available health services and supports.*

The Region should continue to work towards standardizing protocols and data collection when working with the same clients across multiple agencies (e.g., there are five agencies in the mental health space, including Niagara Region's Public Health). Providers should maintain their focus on Housing First in all client interactions with consistent use of the SPDAT assessment process and HIFIS 4.

Housing First is a proven methodology but it is not effective with all clients, particularly those who are experiencing clinical-level, serious mental illness (SMI) such as — but not limited to — schizophrenia, schizoaffective disorder, manic depressive disorder and autism. Psychiatric nurse practitioners who meet clients where they are in the community could expedite diagnoses, recommend appropriate treatment and help sustain housing for clients experiencing SMI. Niagara Region frontline staff need to be included in the development of System 2.0.

Mental health includes the negative impacts resulting from social isolation, stigma and exclusion that often accompanies the homelessness experience.

*8. Improve decision-making through enhanced use of technology, communication and tracking.*

The next iteration of the system should involve increasing the use and integration of technology for homelessness supports, communication, KPIs, metrics/measures tracking and assistance with diversion. The goal is to determine the impact of the homelessness services system to determine the "state" of homelessness in the region and to improve decision making at the program and system levels. The alignment of data collection, reporting, intake, assessment, referrals will enable coordinated service delivery.

- a. 211 is administered by INCommunities for the Central South Region — formerly Information Niagara — and is designed to connect people in Niagara with community services. This data-base driven resource can provide eligibility guidelines for shelters but the operators have no access to information about shelter bed availability. The combination of eligibility, available beds and connections to transportation services would help enhance this service channel.<sup>39</sup> Consideration should be made to designate a 'lead' shelter provider to centralize access to all available bed spaces in the Region.
- b. Medimap® is an online service designed to provide people with wait times for health clinics. The organization is exploring opportunities to expand into the mental health and addictions sector.<sup>40</sup> People experiencing homelessness are four times more likely than the general population to also experience severe mental illness — 25% versus 6%, respectively.<sup>41</sup> Medimap®

<sup>39</sup> 211 flips over to Toronto in the evenings when it could be argued that client needs are higher. The consultant called and confirmed that the Toronto operators were limited in their knowledge about the Niagara service providers beyond the shelter descriptions and locations.

<sup>40</sup> Medimap® or similar technology will reinforce the Home For Good program, specifically, and the homeless services system overall when clients have improved access to diagnoses, treatment and housing. The consultant has been in touch with the B.C. based owners of Medimap® and they would entertain conducting a pilot in Niagara region as proof of concept for the sector.

<sup>41</sup> [bit.ly/NIMH\\_Homelessness](https://bit.ly/NIMH_Homelessness). National Institute of Mental Health. Homelessness counts such as those conducted by the City of Toronto report that more than 40% of people experiencing homelessness have had mental health diagnoses.



- has the potential of connecting agencies and organizations such as CMHA, CAMH, Hospitals, Shelters, Food Banks, etc.
- c. Ontario Telemedicine Network (OTN) for telepsychiatry services that can help with diagnoses and diversion to appropriate shelters and supports.
- d. Niagara Mobile Outreach – nmop.ca has significant potential and demonstrated success to direct people to housing solutions, provide locations for food distribution, locate shelters, advocacy, scheduled stops for basic needs, etc. The service needs to be ‘real time’ for the housing information via Kijiji and synchronize with other information platforms.<sup>42</sup>
- e. Interagency communication systems, especially with frontline staff, can help reduce the time required to access homelessness services. There are a multitude of secure apps available with Slack having the best track record for reliability and features. Slack can help facilitate intra-agency communication among team members, as well.
- f. Develop a Mobile App and/or SaaS website. Every informational element of the homelessness to housing continuum can be captured through a mobile app or Software as a Service (SaaS). Information services and access to services is currently fragmented with the caveat that there is a plethora of high-quality information readily available if you know where to look.<sup>43</sup>

## 9. *Improve staff capacity through ongoing, service provider training.*

The Region should seek to provide ongoing HIFIS 4 and SPDAT training. The implementation of a homelessness management information system has been partially achieved with the introduction of HIFIS 4 — Homeless Individual and Family Information System. The web-based system has currently documented 50% (1,552) people who are experiencing are considered active users of the system. This effort will align data collection, reporting, intake, assessment and referrals to enable the next level of coordinated service delivery in the Region with a focus on capacity building. Additional work needs to be done with the Violence Against Women (GBV, IPV, Human Sex Trafficking) sector to collect statistics and create a more complete picture of how homelessness impacts women and children. New tools need to be integrated into HIFIS for population-specific dynamics with respect to Indigenous Peoples, youth and women.

<sup>42</sup> Niagara Mobile Outreach features the following services:

- Provide evening Mobile Outreach services in the communities of St. Catharines, Grimsby, Beamsville, Niagara Falls, Fort Erie, Welland, Port Colborne six nights per week at regular stops.
- Mobile Outreach will be staffed with a Community Outreach Worker who will engage individuals, build rapport and complete rapid assessments to determine immediate needs
- Referrals for emergency shelter will be made and transportation provided, if needed, as well as to other community services for follow-up care and housing supports
- Provision of basic needs (food, sleeping bags, hats, gloves, etc)
- Advocacy and follow-up for all referrals

<sup>43</sup> Candace Faber provides a thorough review of why homelessness apps are not a great idea. The consultant is presenting the app as an additional information channel once the other communication platforms are current. [bit.ly/HomelessnessApps\\_Ar-gument](https://bit.ly/HomelessnessApps_Ar-gument)

Currently, the Service Prioritization Decision Assistance Tool (SPDAT) has been integrated into HIFIS 4. Service prioritization is based upon measuring and responding to the acuity of people accessing services, especially those with mental health and co-occurring issues.<sup>44</sup> Therefore, ongoing HIFIS 4 and SPDAT training needs to be offered by qualified staff to offset the reality of high staff turnover in this sector and to maintain data integrity and consistency.

Frontline homelessness services workers require a range of skills to serve their clients, including (but not limited to): harm reduction, de-escalation techniques, mental health first-aid, motivational interviewing, advanced first-aid, CPR, health and safety, crisis management, resiliency and self-care and trauma-informed service delivery.

### *10. Increase affordable housing stock and strengthen the linkages between homelessness services and housing.*

The Hybrid Model proposed within the Alternate Service Delivery (ASD) review of Niagara Region Housing and the Region's existing homelessness services should be implemented.<sup>45</sup>

Through the Home For Good program, the Region engaged the Housing Help Centre to help build landlord relationships while identifying and facilitating affordable housing options in a market that has 1.5% vacancy. The extremely low vacancy rate provides an opportunity for landlords to increase rents – sometimes, in the double digits. Those two facts make it seem like a mission impossible for the housing worker. Complicating matters is the fact that several agencies are speaking to the same landlords on behalf of their clients.<sup>46</sup> The RentSmart Ontario program is active in Niagara Region. The program was designed to increase successful tenancies by educating landlords and potential tenants about how that goal can be achieved. An evaluation of the program demonstrated its effectiveness.<sup>47</sup>

Niagara Region has been doing well finding ways to deal with a constrained housing market. In some ways, however, closing the gap between housing availability and the need for housing is frustrating. The 2018 point-in-time count used a more robust methodology compared to previous years with searches conducted in remote and hard to access locations as well as mobilizing a larger group of volunteers to conduct the count.<sup>48</sup> Shelter capacity was 117% at the time of the 2018 count compared to 82% during the evening of the previous PIT Count.

44 People experiencing high acuity and stress may discount the severity of their symptoms or “low-ball” their involvement with substances. It is important for frontline workers to conduct an informal conversation with their client to determine their background narrative before conducting the SPDAT. That will help the client feel more comfortable about describing their situation and help make the results (and subsequent service decisions) more appropriate.

45 The ASD model developed and recommended by Ernst & Young was presented to the Committee of the Whole on July 19, 2018 and deferred until after the October 22 election. Whitesell & Company originally leaned towards recommending the current, separate NRH structure including dissolution of the NRH Board to be consistent with other jurisdictions in Ontario and to improve service delivery for both housing and homelessness services. Following a review of the ASD recommendation, it makes sense to implement this level of change as a first step and it is less costly and disruptive while allowing time to focus on taking the homelessness services system to the next level of performance.

46 One of the service providers used an African aphorism to describe the lack of affordable housing: “...once the watering hole gets smaller, the animals look at each other differently.” The housing worker is managing the competition among service providers at the same time as trying to coordinate the landlord relationships.

47 The RentSmart Ontario program ([www.rentsmartontario.ca](http://www.rentsmartontario.ca)) is funded by the Government of Canada, Homelessness Partnering Strategy and the Ontario Trillium Foundation. An independent program evaluation reported that 86% of tenants said that the program has helped them keep their housing. As well, 66% of tenants who received their RentSmart certificates used the document when applying to a landlord for rental housing, and, 70% of those tenants said that the certificate directly helped them to acquire housing.

48 It's important to note, once again, that all PIT Counts are under-counts. The count methodology is adjusted over time to identify people who need housing but the counts are still only indicators of the actual level of need.



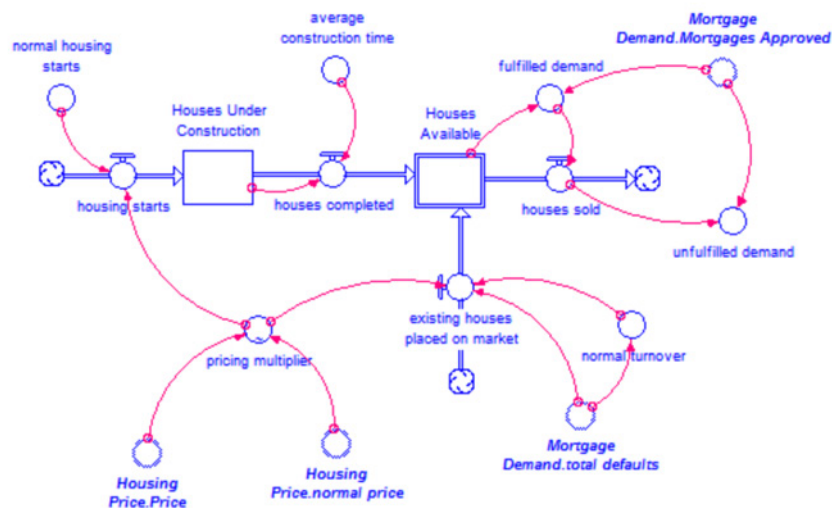
The management and coordination of all housing workers in the Region would help strengthen landlord relationships. A coordinated housing approach and alignment of messaging with landlords and the public will result in increased housing placements. Also, the RentSmart program can be integrated into Housing First engagements to help tenants and landlords work together for successful tenancies.

The Region has encouraged secondary suites but other housing forms need to be considered such as single residence occupancy (SRO) units that also come in different forms. For instance, The Buffalo Apartments in Red Deer, Alberta rent their 39 apartments to Housing First clients with 24/7 onsite support from CMHA workers. Another example of SROs comes from British Columbia. The Nuxalk First Nation in Bella Coola built four, 338 square foot tiny homes with a fifth unit for shared laundry and utilities.<sup>49</sup> The Government of British Columbia injected \$66 million for the build of 600 temporary, modular units as transition housing.<sup>50</sup> Co-living, housing solutions are also being promoted in Vancouver where the rental market, like Toronto, is beyond the reach of most people.

One of the opportunities for the new homelessness services system as identified by the service providers was the “Diversity of Permanent Housing Options.” There were several defining points that impact the affordable housing inventory, including:

- Determine the ‘exit’ strategies for clients from shelter, supportive housing and transitional housing;
- Re-purpose existing facilities;<sup>51</sup>
- Advocate for resetting the housing formula for ODSP and OW – client subsidies are not in pace with the rental market; and,
- Implement incentives for housing builders and contractors.

Figure 12  
Housing Supply Model



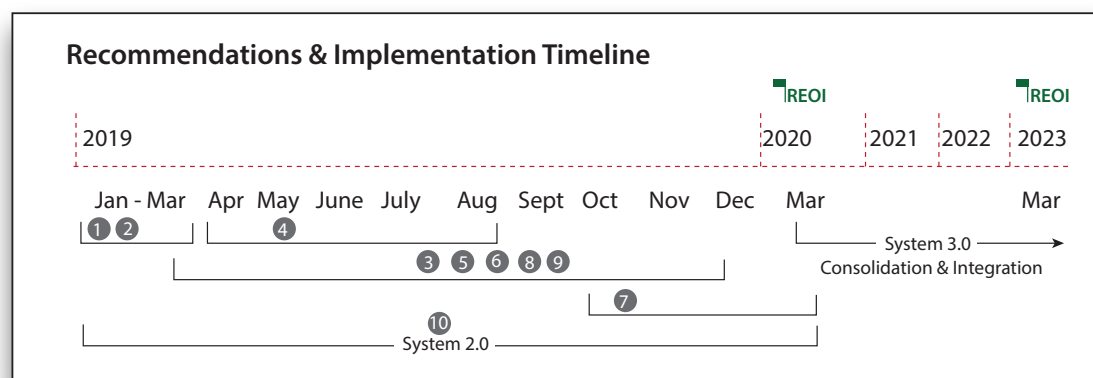
49 The cost of \$50,000 per unit also includes a small galley kitchen, bedroom, open living area and a bathroom with standup shower. Solar panels on each of the units provides supplemental power. As a comparative, the average cost to build a Habitat for Humanity home for a family is \$200,000.

50 The right supply of housing, with the right supports for the city’s lower income and homeless residents, continues to be a top priority. Temporary, modular housing provides lower-income and homeless residents with an opportunity to be placed directly into housing with supportive services until they can transition to longer-term housing solutions. [bit.ly/TemporaryModular-pHousing\\_Vancouver](https://bit.ly/TemporaryModular-pHousing_Vancouver)

51 In Finland, the country has embraced Housing First tenets to the point where they have eliminated shelters by repurposing the shelters into supported housing on a path to permanent housing. [bit.ly/Finland\\_SolvesHomelessness\\_2017](https://bit.ly/Finland_SolvesHomelessness_2017). The consultant could expand the recommendation into increasing land banking, buying vacant buildings or under-valued buildings to be repurposed into housing, etc. and those initiatives could be considered by coordinated efforts between Housing (NRH) and the Homelessness Services System.

## Consolidation & Integration of Homelessness Services

In 2020, the next round of Requests for Expression of Interest (REOI) will be issued by the Region. This will set the stage for the emergence of System 3.0 and will be reinforced by the 2023 funding cycle. The aim for System 3.0 will be to consolidate and integrate homelessness services to provide more efficient client services based upon the lessons learned during System 2.0 months and the system KPIs, metrics and measures.



### Recommendations

- ① Clarify the system vision and mission grounded in Housing First philosophy.
- ② Capture all system components through a system mapping process.
- ③ Implement the System 2.0 model for program and services delivery.
- ④ Strengthen Key Components of System 2.0. Outreach, Housing Help and Housing First programs/services as priorities.
- ⑤ Develop standards and key performance indicators for each program/service area:  
Outreach, Prevention & Diversion, Emergency Shelter, Transitional Housing and Permanent Supportive Housing.
- ⑥ Improve contract management and performance measurement, including continuous improvement.
- ⑦ Work to understand the depth of need related to mental health and addictions, and their impacts.  
on the system, in order to improve client access to available health services and supports.
- ⑧ Improve decision-making through enhanced technology, communication and tracking.
- ⑨ Improve staff capacity through ongoing, service provider training.
- ⑩ Increase affordable housing stock and strengthen the linkages between homelessness services and housing.

## Conclusion

Complexity, ambiguity and uncertainty have the capacity to absorb large amounts of resources in systems that are comprised of disparate elements or services. Capturing, measuring and modeling these elements is the first major step towards better understanding the system, eliminating waste and improving client outcomes. This process will also harness the under-utilized system energy.

Systems practice is different from command and control. The priority is to improve overall system performance as determined by the end-users of the system as opposed to the municipality or other levels of government. To improve the homelessness services system, the engagement with agencies and other stakeholders needs to be based upon listening, co-researching and implementing changes with evaluation and reflection as part of the overall system design. System 2.0 will help facilitate, implement and improve the homelessness services system.

The components of the Niagara Region's homelessness services system are evolving and adapting to funding resources from multiple sources. At this point, categorizing the system as "messy" is certainly accurate because it is based on human activities and is reacting to dynamic changes in the environment. Every agency for itself cannot deal with the scale of homelessness or the complexity of needs in the region. System alignment and shared goals can result in purposeful actions, consistent service quality and better client outcomes.

The policies guiding Niagara Region's housing and homelessness functions should have minimum specifications that establish the direction of the change clearly, set boundaries for the implementation strategy and allocate resources for a sufficiently long period of time to determine impacts. Niagara Region has improved homelessness services communication significantly in the past two years through service provider meetings associated with the Housing and Homelessness Action Plan, Home For Good, Housing First, etc.

Implementation strategy boundaries are established by the subset of systems that are represented by the service providers. Determining service provider funding through the REOI process and extending the timeline for funding streams has improved stability in the emerging system. Also, there has been encouragement to join forces for funding submissions within and outside of the Region with full transparency so that system impacts can be tracked. Importantly, core evaluation needs to be embedded into existing and new services with accessibility by clients to provide feedback, evaluations and recommendations. A representative, paid group of people with lived experience could be convened on a quarterly basis for this purpose. A Lived Experience Advisory Committee has been assembled for this purpose. These changes should be included in the service provider contracts and form a component of the performance management system.

Our learned instinct with social issues such as homelessness is to troubleshoot and fix things in the system using reductionist thinking. It's an effort to breakdown the ambiguity, resolve any paradox, achieve more certainty and agreement and move towards simplifying the system. But complexity science suggests that it is often better to try multiple approaches and let direction arise by gradually shifting time and attention towards those things that seem to be working. Successful approaches will be reinforced and the demise of those that don't inform or strengthen the system will be removed from the system. System effectiveness will be determined by client outcomes.

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## Appendix A

### Niagara Region:

### Funded Stakeholders & Service Providers



Agency	Description
<b>Bethlehem</b>	Supportive transitional housing for people facing issues of poverty, abuse, homelessness and family breakdown. Assistance with housing, income source referrals, life skills and advocacy for residents living in transitional housing.
<b>Boys &amp; Girls Club of Niagara (BGCN)</b>	Emergency shelter for homeless youth aged 16 to 30 and supportive transitional housing for youth at risk. Designed to assist youth to reach their full potential through shelter services and supportive transitional housing services.
<b>Casa El Norte</b>	Provides emergency shelter and services to immigrants and refugees coming into Canada. Services include assistance with legal documents, immigration appointments, health care and housing help referrals.
<b>Community Care St. Catharines (CCSC)</b>	Assists individuals who are homeless or at risk of becoming homeless to find affordable safe, adequate housing with a wide range of services on an individual basis including: education, budget management, utility funding assistance and housing help assistance and income referrals. Clients can also utilise a voluntary Trusteeship program to assist with money management.
<b>Community Care of West Niagara (CCWN)</b>	Assists individuals who are homeless or at risk of becoming homeless to find affordable safe, adequate housing with a wide range of services on an individual basis including: education, budget management, utility funding assistance and housing help assistance and income referrals.
<b>Canadian Mental Health Association (CMHA)</b>	Supportive Transitional Housing is available for residents with mental health issues who are preparing to live independently. Support counsellors are available for those with moderate support needs (up to 4 hours in group homes) and high support needs (up to 7 hours in modified lodging homes). Transitional housing supports are also available.
<b>Grimsby Affordable Housing Partnership (GAHP)</b>	Provides supportive transitional housing, subsidized rent and program supports to assist low to moderate income families and individuals - homeless or those at risk of homelessness.
<b>Gateway Housing</b>	Provides Supportive Transitional housing and support services to residents which provides stable and supportive environments for the individual that emphasize personal choice, dignity and respect.
<b>Matthew House</b>	Provides emergency shelter and services to immigrants and refugees coming into Canada. Services include assistance with legal documents, immigration appointments, health care and housing help referrals.
<b>Niagara Furniture Bank (NFB)</b>	Collects gently used home furnishings in order to provide individuals and families in the Niagara region with the beds, tables, chairs and other furnishings. The members of your community that receive these items are referred by organizations across Niagara.
<b>Port Cares</b>	Assists individuals who are homeless or at risk of becoming homeless to find affordable safe, adequate housing with a wide range of services on an individual basis including: education, budget management, utility funding assistance and housing help assistance and income referrals. Clients can also utilise a voluntary Trusteeship program. Supportive transitional housing program is also available to clients.

Agency	Description
<b>Project SHARE</b>	Emergency utility program assists people who are in threat of being disconnected for heat, water or gas utilities or to reconnect those households where the utility has already been disconnected.
<b>Salvation Army - Booth Centre</b>	Overnight accommodation and meals are provided to transient men over age 18. Meals, clothing and life skills programs are available to clients. Assistance with permanent housing is also available through the Housing First Program.
<b>Salvation Army - Fort Erie</b>	Emergency utility program assists people who are in threat of being disconnected for heat, water or gas utilities or to reconnect those households where the utility has already been disconnected.
<b>Salvation Army - Niagara Mobile Outreach</b>	A food truck travels to numerous locations across Niagara where hot meals are provided to those that access the service. Referrals to other homelessness services are offered and those clients that express an interest can be given more in depth services at the permanent sites across the Niagara region.
<b>Start Me Up Niagara (SMUN)</b>	Offers individualized support for maintaining housing to individuals who have experienced chronic homelessness. Assistance with permanent housing is also available through the Housing First Program. <b>Out of the Cold:</b> November through March, provides temporary overnight shelter to homeless individuals through a network of churches in St. Catharines that is available to anyone in the Niagara region.
<b>Southridge Shelter</b>	Temporary housing and shelter for men and/or women over the age of 18 who are homeless in a dormitory style shelter with washroom/bath/shower /laundry facilities. Provides breakfast, lunch and dinner to residents. Assistance with permanent housing is also available through the Housing First Program.
<b>The Hope Centre</b>	Assists individuals who are homeless or at risk of becoming homeless to find affordable safe, adequate housing with a wide range of services on an individual basis including: education, budget management, utility funding assistance and housing help assistance and income referrals. Assistance with permanent housing is also available through the Housing First Program.
<b>The RAFT Shelter</b>	Provides emergency shelter and support to homeless and high risk youth over the age of 16 in Niagara. Shelter is open 24 hours a day seven days a week and provides a clean bed, showers, and warm healthy meals. Additional support includes Steps to Independent Living Program, support and mentorship, internet and phone access, assistance in connecting to community support services for employment, education and housing assistance. Assistance with permanent housing is also available through the Housing First program.
<b>Youth Resources Niagara (YRN)</b>	A supportive reintegration housing residence which provides accommodation, educational and social programs and supports for justice involved male youth ages 16-18 who are experiencing or are at risk of homelessness. This population also typically suffers from an absence of role modelling/mentorship of family/others in coping and managing their many needs.

Agency	Description
YWCA Niagara	<p><b>YWCA - Men's Shelter:</b> Emergency shelter for homeless men and men with children, designed to assist these households to regain permanent housing through shelter and program services.</p> <p><b>YWCA St Catharines:</b> Temporary housing and emergency shelter for women, women with children and families over the age of 16 years who are homeless. Provides breakfast, lunch, dinner, and snack to residents; Programs available for children staying at the Centre. Staff assist with goal planning and accessing community resources during the search for affordable housing. Assistance with housing, referrals, life skills and advocacy for residents living in transitional housing. Assistance with permanent housing is also available through the Housing First Program.</p>

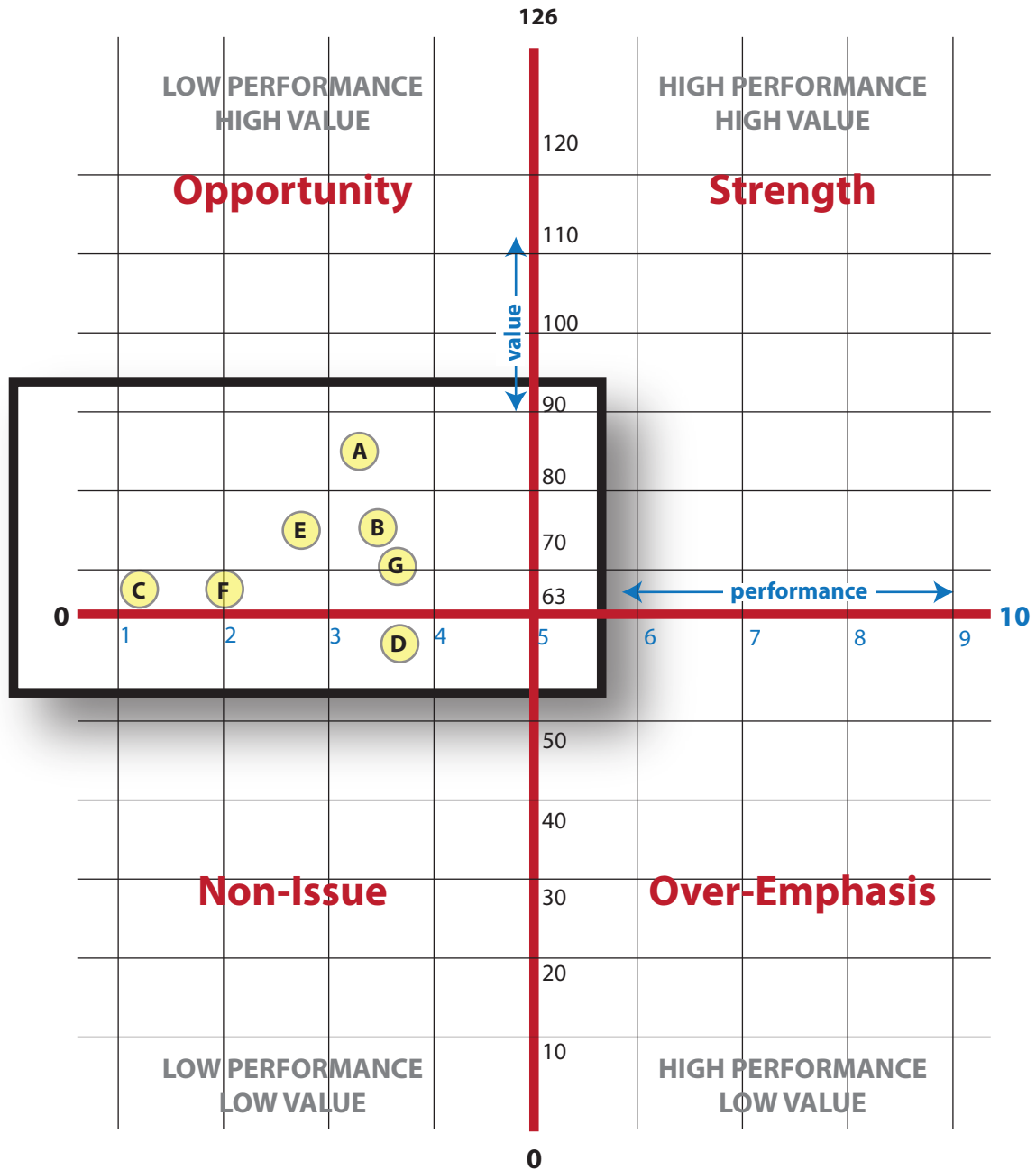
## Appendix B

### Strategic Opportunity Grid: Issues & Priorities

Niagara Region

Service Providers  
Strategic Opportunity Grid

May 22, 2018



A—Shared Vision

B—Appropriate Supports

C—Urban Rural Supports

D—Diversity of Permanent Housing Options

E—System Access

F—Shelter Beds & Capacity

G—Prevention of Homelessness

Issue	Description
A. Shared Vision	<ul style="list-style-type: none"> <li>• Is the system a system? Common understanding about function of system; communication; define 'system'</li> <li>• Shared measures, metrics, KPIs</li> <li>• Define "success"</li> <li>• Funding - ensuring funding to sustain services and supports</li> <li>• Funding is not calibrated to the level of needs in Region</li> <li>• Hospitals at the table for discharge conversations</li> <li>• Shifting priorities based on politics &amp; funding</li> </ul>
B. Appropriate Supports	<ul style="list-style-type: none"> <li>• Equity</li> <li>• Diversity of needs: individuals, families, youth, seniors, women, etc.</li> <li>• Complexity of needs</li> <li>• Connection with health system to prevent need for rehousing clients</li> <li>• Internal changes in various organizations</li> <li>• Appropriate housing supports</li> <li>• Supports for MH&amp;A to secure and sustain housing</li> <li>• Supports for people who are not appropriate for shelters</li> <li>• Need to better understand our clients, e.g., trauma-informed</li> </ul>
C. Urban-Rural Supports	<ul style="list-style-type: none"> <li>• Transportation</li> <li>• Community realities</li> <li>• Disconnect about the realities of homelessness between the public and government</li> <li>• Equitable services for diverse region</li> <li>• TAY with developmental needs</li> <li>• Provide services closer to where people call home</li> </ul>
D. Diversity of Permanent Housing Options	<ul style="list-style-type: none"> <li>• Increase housing forms &amp; options</li> <li>• Affordable, safe, adequate</li> <li>• Lack of affordable housing</li> <li>• What is the 'exit' strategy, e.g., shelter, supportive, transitional</li> <li>• Re-purpose existing facilities</li> <li>• Landlord engagement &amp; partnerships</li> <li>• Base housing formula on ODSP/OW reality v. 30% gross income</li> <li>• Work with private sector, e.g., incentives for builders and contractors</li> <li>• Vacancy rates, e.g., rental market; subsidy not in pace with market; recent explosion</li> </ul>
E. System Access	<ul style="list-style-type: none"> <li>• Shared tools</li> <li>• Data sharing - central access point, e.g., mental health, addictions, seniors</li> <li>• Data collection is not integrated</li> <li>• Shared decision-making</li> <li>• Too many organizations - focus on collaboration &amp; priorities based on client needs</li> <li>• Inconsistent, two-tier government policies</li> <li>• Alignment (lack of) to other community services: healthcare; justice/jail; education; family &amp; children's services; detox</li> </ul>
F. Shelter Beds & Capacity	<ul style="list-style-type: none"> <li>• Emergency only</li> <li>• Lack of shelter beds</li> <li>• Occupancy &amp; capacity</li> </ul>
G. Prevention of Homelessness	<ul style="list-style-type: none"> <li>• Community support</li> <li>• Political will</li> <li>• Prevention strategy</li> <li>• Public perception; remove stigma</li> </ul>

## Appendix C

### Homeless Hub

### KPIs, Metrics & Measures



## System-Level Performance Targets

The following section outline targets that can help provide a basic outline of a community's progress towards reducing homelessness. Note that these are only part of a broader performance management process, which includes qualitative methods to augment data with client, staff and partner organization narratives, program monitoring, financial analysis, etc.

Progress towards the sample goals is indicated by the various measures outlined in the system indicators section of the table. Note that goals should be specific and measured with associated timelines.

Sample Target	Corresponding Performance Indicators
Overall homelessness is reduced by 60% by 2017-18.	<ul style="list-style-type: none"> <li>• Number of homeless. Indicate number in emergency shelter, transitional housing, and sleeping rough against emergency shelter and transitional housing capacity.</li> <li>• Number of households housed. Break data down by chronic/episodic, singles, families, youth, Aboriginal people, Veterans, immigrants, women, etc.</li> <li>• Number of permanent housing units and occupancy rates in community.</li> </ul>
Chronically and episodically homeless numbers are reduced by 20% by 2017-18.	<ul style="list-style-type: none"> <li>• Number of chronically and episodically homeless housed.</li> <li>• Percent of shelter/transitional housing users with multiple stays.</li> <li>• Percent of housed chronically and episodically homeless who maintain housing at 6 and 12 months post-intake.</li> </ul>
80% of Housing First clients are stabilized in permanent housing by 2016-17.	<ul style="list-style-type: none"> <li>• Percent of re-housed clients who remain in housing 1 year post intervention.</li> <li>• Percent of those served by "Housing First" programs return to homelessness.</li> </ul>
Usage of emergency shelters is reduced by 15% by 2017-18.	<ul style="list-style-type: none"> <li>• Average length of stay in emergency and family shelters.</li> <li>• Number of days for clients to move from shelters into permanent housing.</li> <li>• Number of emergency shelter and transitional beds in community.</li> </ul>
90% of Housing First clients have improved self-sufficiency at program exit.	<ul style="list-style-type: none"> <li>• Change in clients employed and reduction in social assistance use, where appropriate.</li> <li>• Average income increase from intake to 12 month follow up.</li> <li>• Average acuity levels at program intake and exit.</li> </ul>
Use of public systems is decreased by 25% among Housing First clients at program exit.	<ul style="list-style-type: none"> <li>• Interactions with police, days in jail, days hospitalised, EMS and ER usage at client intake and 12 month follow up.</li> <li>• Estimate of dollars saved through intervention.</li> </ul>
50% of homeless programs participate in integrated information system by 2017.	<ul style="list-style-type: none"> <li>• Percent of homeless agencies in community contributing data to HPS using an integrated information management system.</li> <li>• Number of shelter beds on integrated information management system.</li> </ul>

## Program-Level Performance Targets

While the indicators outlined above can be gleaned through analysis of output information at the highest aggregate level, system effectiveness is also assessed through program performance monitoring.

Program Performance Indicators	Program Performance Targets Examples					
	Emergency Shelter	Transitional Housing	Affordable Housing	Housing First Programs	Prevention	Outreach
<b>Occupancy</b>	90%	95%	95%	95%	90%	95%
<b>Length of Stay</b>	21 days	90% clients complete program within timeframe (mns, 24 mns, etc.)	At any given reporting period, 85% of the people housed will still be permanently housed	95% maintain housing for at least 6 months; at least 85% maintain housing for at least 12 months	85% of clients maintain housing for 1 year after intervention	N/A
<b>Destinations at Exit</b>	50% of those engaged with shelter service providers leave program to go to positive housing destinations	85% go to positive housing destinations	N/A	N/A *Homeless individuals are considered to have successfully exited the program when they demonstrate the ability to maintain stable housing and require less intensive supports and services, and as a result, leave an organization's Housing First client caseload	85% of clients leaving program go to positive housing destinations	70% of clients engaged in program leave program to go to positive housing destinations
<b>Return to Homelessness</b>	Less than 20% of clients return to shelter/rough sleeping.	Less than 10% of clients return to shelter/rough sleeping.	Less than 10% of clients return to shelter/rough sleeping.	Less than 5% of clients of clients return to shelter/rough sleeping.	N/A	N/A
<b>Income</b>	30% of those engaged with shelter service providers report an increase in income from employment and/ benefits.	85% of clients leaving program report an increase in income from employment and/ benefits Where clients are unable to increase income, 95% maintain stable source of income.	Program defined, if applicable.	85% of clients leaving program report an increase in income from employment and/ benefits. Where clients are unable to increase income, 95% maintain stable source of income.	85% of clients have an increase in income at program exit.	20% of those engaged with shelter service providers report an increase in income from employment and/ benefits.

Program Performance Indicators	Program Performance Targets Examples					
	Emergency Shelter	Transitional Housing	Affordable Housing	Housing First Programs	Prevention	Outreach
Interaction with Public Institutions	Program defined, if applicable	Program defined, if applicable	Program defined, if applicable	Intake and Exit comparison of: EMS interactions, Hospital days, days in jail/prison etc.	Intake and Exit comparison of: EMS interactions, Hospital days, days in jail/prison etc.	Program defined, if applicable

### What is a key performance indicator (KPI)?

**Definition:** A Key Performance Indicator (KPI) is a measurable value that demonstrates how effectively an organization, program or initiative is achieving key goals and objectives. They can span across organizations that are part of system, departments or individual tasks. KPIs are evaluated over a specified time period, and are compared against past performance metrics or best practices norms.

Why are KPIs important? Without establishing and tracking proper key performance indicators, companies would be left in the dark about their performance. They might feel that they are having success, but what kind of success? And compared to what? They may know which metrics are trackable, but which ones should they track? With KPIs in place you can set appropriate goals, develop strategies to reach them and evaluate your progress, and eventually have a historical record of your performance.

**KPI examples:** If you work in the highway division of a transportation authority, a key performance indicator could be to track the average driver's speed from July to November, as many accidents happened during this time the previous year. In this case, it would be helpful to know that from July to November the average driver cruises at 60 km/h which is 10 km/h higher than the posted speed limit of 50 km/h, and 6 km/h higher than they typically drive during all other months.

Or let's say you are a marine biologist. Establishing average water temperature as a key performance indicator would allow you to notice trends over time, such as how the water temperature in a particular region is rising exponentially faster than all surrounding regions.

And let's say you are the owner of a local pub. In establishing average pints per patron per visit (ppv) as a key performance indicator, you may notice that last month you averaged 1.1ppv (compared to the local pub average of 1.4ppv and last month's average of 1.3ppv). In this sense, estab-

lishing a KPI can help open the door to questions about your business performance that you may have missed otherwise.

### What is a metric?

**Definition:** A metric is a quantifiable measure that is used to track and assess the status of a specific process. If you're confused because we haven't yet covered "measure," get this: according to the Oxford dictionary, the word measure is derived from the Latin word "metiri." In other words, their meanings are almost identical which is why you may find them used interchangeably. That said, here is the difference: a measure is a fundamental or unit-specific term a metric can literally be derived from one or more measures. This is why the term metric has a more goal or performance nuance attached to it.

This difference becomes especially obvious when metric becomes "business metric," and thereby becomes a "quantifiable measure" that is used to track and assess the status of a specific business process.

Why are metrics important? Metrics are important because they are comprised of a wide swathe of all trackable areas. With metrics, think broad. With key performance indicators, think deep. For example, a metric may monitor website traffic compared to a traffic goal, whereas a key performance indicator would monitor that same site traffic but only insofar as it's related to, say, content downloads.

Unlike key performance indicators which drill down into what truly is key — metrics cover the entire gamut. Think of it like this: if you don't know all the trackable metrics, how can you select which to take most seriously?

**Metric examples:** If you're a content marketing agency, you may find that a particular client is adamant about seeing a massive uptick in email subscriptions per month. If you have a grasp on all the content marketing metrics, you may be able to present some surprising news to your client: "Readers are signing up, but none are trialing your product. If you want better bottom-line results, it's time to focus on middle-of-the-funnel content."

Or let's say you're the founder of a SaaS (Software-as-a-Service) startup. There are seemingly infinite SaaS metrics to track, so where to begin? With a bird's-eye view of all metrics, you notice that your Customer Churn Rate isn't where you want it to be. In fact, at the current rate it could sink your company within six months. In teasing out Customer Churn Rate from the many other metrics and setting the parts that build it as departmental KPIs, you just helped steer your company in a better direction.

### What is a measure?

**Definition:** In a data context, measures are the numbers or values that can be summed and/or averaged, such as sales, leads, distances, durations, temperatures, and weight. The term is often

used alongside dimensions, which are the categorical buckets that can be used to segment, filter or group such as sales rep, city, product, colour and distribution channel.

For example, let's say you have 50 TVs sold and 30 radios sold. The units sold is the measure and the dimensions are the product type. You can perform math on the measure and you could filter or group on the dimension.

A measure differs from a metric in that it's unit-specific. Whereas a metric may be Customer Churn Rate, it's made of measures such as a) the overall number of customers and b) the number of customers that discontinue their service each month.

If measure sounds like a KPI, think of it like this: measures are numbers/values; KPIs are context-driven and are often made up of multiple measures.

Why are measures important? Both metrics and KPIs rely on and are derived from measures. Without measures, you can certainly name industry best practices for metrics and KPIs, but you won't have the capacity to understand how they're built. The result? You're basically our example from the beginning: a company in the dark just trying to feel its way toward progress.

**Measure examples:** In the SaaS industry, Customer Acquisition Cost (CAC) is an important metric. As it sounds, this is quite literally how much it costs for a company to acquire a customer. If you know that your CAC is 100, great. That means you know the number behind the metric. But do you know the measures that gave life to that number? In this case, there would be several measures. They would include, at least, all your marketing and sales costs for a given period of time. You would then divide this by another measure: the number of customers acquired over that same period of time. The resulting metric, then, would be your CAC for that time period.

*Note: Whitesell & Company acknowledges and thanks Klipfolio for their concise summary of these terms that are often confusing for strategic planning teams. <https://www.klipfolio.com/blog/kpi-metric-measure>*