

Reaching Home: Canada's Homelessness Strategy

Community Homelessness Report

City of Lethbridge

2019-2021

SECTION 1: COMMUNITY CONTEXT

Overview

1.1 Highlight any efforts and/or issues related to the work that your community has done to **prevent and/or reduce homelessness** over the last two years.

Permanent Supportive Housing

A local Permanent Supportive Housing (PSH) Consortium was developed to provide recovery-focused, stabilization PSH in the community. A PSH Leadership team comprised of: Alberta Health Services (Addiction & Mental Health and Primary Care Network), City of Lethbridge and PSH providers have led the development of the consortium and client care. The development of the Consortium has been an important step forward in addressing the extreme lack of permanent supportive housing beds in our City.

Facilities of a sufficient size that are appropriately zoned to meet the needs of these highly complex individuals remains a barrier for increasing cost effective PSH in our community. This is something the City of Lethbridge is supporting service providers in addressing but acknowledges that rezoning is not a short process as it relates to permanent supportive housing and there are difficulties that often come with this type of housing including community support and Not In My Backyard (NIMBY). Due to the a consortium members inability to purchase a new facility for Men's PSH, the number of beds for men is only half of what was

1.2 Highlight efforts and/or issues related to the work of **increasing access to safe, adequate housing** in your community over the last two years.

The items listed in question 1.1 are all fairly comprehensive and contribute as well to increasing access to safe, adequate housing. The intention of the Integrated Coordinated Access system and the Adaptive Case Management teams is to improve prevention and reduction of homelessness (1.1) as well as increase access to safe, adequate housing for anyone needing support in Lethbridge

In addition to the topics discussed in 1.1, the creation and implementation of the Population Navigator role occurred in 2021. These positions act as population experts that both inform the system of the needs of their particular population as well as act in a direct support/consultation role to any service provider in Lethbridge that requests their support. We currently fund Youth Population Navigators, Senior Population Navigators, and Indigenous Family Population Navigators through various service providers in Lethbridge. These individuals serve as population experts to help the system support these populations better, as well as assisting with system navigation to increase access to resources including safe, adequate housing. These populations were identified as priority populations in a thorough needs assessment conducted by Lethbridge in 2018. In the future, we intend to expand the Population Navigators to include additional priority populations.

1.3 What impact has COVID-19 had on your community's progress with designing and implementing Coordinated Access and a Homelessness Management Information System (HMIS)?

COVID-19 has had a profound impact on service delivery and community well being in Lethbridge. There has been a significant amount of adaptability demonstrated by service providers to deliver programming over the past 18 months. As the community entity, the City of Lethbridge has had to pivot a lot of time and resource into dealing with short term issues and working around COVID-19 driven emergencies. The ripple effect of this has impacted implementing Integrated Coordinated Access and an HMIS as below:

Integrated Coordination Access (ICA) implementation

The lead implementation agency for ICA in Lethbridge is the Canadian Mental Health Association, South Region. They are leading a project team for ICA rollout that is comprised of key members from the City of Lethbridge as well as support from an external consultant. While COVID-19 has slowed the development and rollout of the ICA system, the project team has done a tremendous job moving forward through the pandemic and as of June, 2021 have completed the 'ICA guidelines' document which defines the standards, definitions, and processes for the system wide rollout of ICA. The project team has developed the ICA guidelines and key concepts on the basis of community involvement, and co-creation at a system level which is illustrated through the various community engagement and co-creation workshops hosted by the project team through 2021 thus far:

January 21, 2021: ICA Info Session

February 24, 2021: Counselling Subsidy Roll-Out Meeting

March 2/3, 2021: System Navigator Co-Creation Workshop

March 17, 2021: Counselling Subsidy Final Review Meeting

March 25, 2021: System Navigator Follow-Up Workshop

April 7, 2021: Door Agency Co-Creation Workshop

May 25, 2021: ICA Guidelines Review Workshop

The project team will begin implementation of the new system wide processes and is targetting the end of 2021 for a complete rollout and functional system wide Integrated Coordinated Access system.

Homelessness Management Information System

The City of Lethbridge is working alongside an external consultant on the procurement, development, and implementation of what we are calling a Community Information Management System (CIMS). This project is in the design and engagement phase. With many of the emerging issues as a result of COVID-19, this project has fallen behind the initial timelines as the development of Integrated Coordinated Access as described above was given priority. The project team is well on track now and

Collaboration between Indigenous and Non-Indigenous Organizations

<p>1.4 a) With respect to the design and implementation of Coordinated Access and a Homelessness Management Information System (HMIS), has there been collaboration between local Indigenous and non-Indigenous organizations and, where applicable, the Indigenous Community Advisory Board (CAB)?</p>	<p>Yes</p>
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b) Describe how this collaboration was undertaken and how it impacted the design and implementation of Coordinated Access and/or the HMIS. How will it be strengthened in the future?

As described above, the development of the ICA system has been done through many community engagements and co-creation workshops:

- January 21, 2021: ICA Info Session
- February 24, 2021: Counselling Subsidy Roll-Out Meeting
- March 2/3, 2021: System Navigator Co-Creation Workshop
- March 17, 2021: Counselling Subsidy Final Review Meeting
- March 25, 2021: System Navigator Follow-Up Workshop
- April 7, 2021: Door Agency Co-Creation Workshop
- May 25, 2021: ICA Guidelines Review Workshop

Indigenous organizations and non-Indigenous organizations alike have attended, discussed, and contributed meaningful ideas and feedback to the process. The allocation of funding towards the new Integrated Coordinated Access system was developed in collaboration with the CAB and Indigenous CAB and provided as a recommendation to City Council through the CAB. The CAB has been given regular updates and opportunity for feedback on ICA development including the rollout of our ICA guidelines. The development of our CIMS (which will be the Homeless Management Information System) is still fairly early in the process, but engagement with Indigenous and non-Indigenous providers will be key to informing and creating the system.

<p>1.5 a) With respect to the completion of the Community Homelessness Report (CHR), was there collaboration between local Indigenous and non-Indigenous organizations and, where applicable, the</p>	<p>Yes</p>
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Indigenous CAB?	
b) Describe when this collaboration occurred and what parts of the CHR were informed by these efforts.	
The Community Homelessness Report will be reviewed and approved by the CWSS advisory, the acting CAB as well as the Indigenous CAB.	
1.6 a) Does your community have a separate Indigenous CAB?	Yes
b) Was the CHR approved by the Indigenous CAB?	Yes

**SECTION 2: COORDINATED ACCESS AND HOMELESSNESS MANAGEMENT
INFORMATION SYSTEM (HMIS) SELF-ASSESSMENT**

Governance

2.1	Is there a governance model for Coordinated Access and has a Coordinated Access lead organization(s) been identified?	Yes
2.2	Is there a governance model for your HMIS and has a HMIS lead organization(s) been identified?	Under development
2.3	Do all service providers receiving funding through the Designated Communities stream to deliver one or more projects participate in Coordinated Access?	Under development

Homelessness Management Information System (HMIS)

2.4	a) Does your community have an HMIS to manage individual-level data and service provider information for Coordinated Access?	Yes
	b) In your community, is HIFIS the HMIS that is being used or will be used ?	No
	c) Which HMIS is being used?	
	c) Currently ETO (government of Alberta holds the licence), however the City of Lethbridge will be implementing a new system	
	d) When was it implemented?	
	d) 2008	
2.5	Has either a Data Provision Agreement been signed with Employment and Social Development Canada (ESDC) if your community is currently using HIFIS or a Data Sharing Agreement been signed with ESDC if your community is currently using an equivalent HMIS?	Under development
2.6	Do you have a set of local agreements to manage privacy, data sharing and client consent in compliance to municipal, provincial and federal laws?	Under development
2.7	Have you established safeguards to ensure the data collected is secured from unauthorized access?	Under development

Access Points to Service

Access Points to Service

2.8	Are access sites available in some form throughout the DC geographic area so that the Coordinated Access system serves the entire DC geographic area?	Yes
2.9	Are there processes in place to monitor if there is easy and equitable access to the Coordinated Access system and respond to any emerging issues, as appropriate?	Yes
2.10	Are there processes in place that ensure no one is denied access to service due to perceived housing or service barriers?	Yes

Triage and Assessment

2.11	Is the triage and assessment process documented in one or more policies/protocols, including an intake protocol for entering people into the Coordinated Access system and/or HMIS when they (re)connect with an access point?	Under development
2.12	Is the same common assessment tool used for all population groups experiencing homelessness (for example, youth, women fleeing violence, Indigenous peoples)?	Yes

Vacancy Matching and Referral

2.13	Is the vacancy matching and referral process documented in one or more policies/protocols, including how vacancies are filled from the Coordinated Access Resource Inventory according to agreed-upon prioritization and referral protocols?	Not yet started
2.14	Are all housing resources funded through the Designated Communities stream identified as part of the Coordinated Access Resource Inventory?	Under development
2.15	For each housing resource in the Coordinated Access Resource Inventory, have eligibility requirements been documented?	Under development

2.16	For each type of housing resource in the Coordinated Access Resource Inventory, have prioritization criteria and the order in which they will be applied been documented?	Under development
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<p>... prioritization criteria, and the order in which they will be applied, been documented:</p>	
<p>2.17 Do the vacancy matching and referral policies/protocols specify how individual choice in housing options will be respected (allowing individuals and families to reject a referral without repercussions) and do they include processes specific to dealing with vacancy referral challenges, concerns and/or disagreements (including refusals of referrals)?</p>	<p>Not yet started</p>
<p>2.18 Are vacancies from the Coordinated Access Resource Inventory filled using the list of people waiting for housing resources who are offer-ready (i.e., the unique identifier list filtered to a Priority List)?</p>	<p>Under development</p>

SUMMARY

The table below provides a summary of the work your community has done so far to implement Reaching Home’s minimum requirements for Coordinated Access and an HMIS.

Yes	Under development	Not yet started
6	10	2

SUMMARY COMMENT

2.19 Are there particular efforts and/or issues that you would like to highlight for this reporting period related to your

community's work to achieve the Reaching Home minimum requirements? In particular, please describe your community's efforts to set-up or improve the Coordinated Access governance structure, including processes to ensure that policies and protocols as approved by the governance group(s) are being implemented across the system as intended to achieve desired results.

The lead implementation agency for Integrated Coordinated Access in Lethbridge is the Canadian Mental Health Association, South Region. They are leading a project team for Integrated Coordinated Access rollout that is comprised of key members from the City of Lethbridge as well as support from an external consultant. While COVID-19 has slowed the development and rollout of the Integrated Coordinated Access system, the project team has done a tremendous job moving forward through the pandemic and as of June 2021, have completed the 'Integrated Coordinated Access guidelines' document which defines the standards, definitions, and processes for the system wide rollout of Integrated Coordinated Access. The project team has developed the Integrated Coordinated Access guidelines and key concepts on the basis of community involvement, and co-creation at a system level which is illustrated through the various community engagement and co-creation workshops hosted by the project team through 2021 thus far:

January 21, 2021: Integrated Coordinated Access Info Session

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March 25, 2021: System Navigator Follow-Up Workshop

April 7, 2021: Door Agency Co-Creation Workshop

May 25, 2021: Integrated Coordinated Access Guidelines Review Workshop

The project team will begin implementation of the new system wide processes and is targeting the end of 2021 for a complete rollout and functional system wide Integrated Coordinated Access system

The City of Lethbridge has identified the need to hire for the position of an Integrated Coordinated Access Technician, who will aid in setting up and enforcing the governance structure alongside the lead implementation agency, Canadian Mental Health Association South Region. This individual will also work to gather feedback from the community and service providers, helping to ensure the policies and protocols are both being implemented appropriately, and effective in their application.

In its capacity as the Collective Impact backbone organization, the City will be leveraging the Community Wellbeing and Safety Strategy Advisory in its efforts of coordinating actions to support the strategy implementation and collective movement across stakeholders. The Community Wellbeing and Safety Strategy Advisory, acting as the Community Advisory Board, will provide

PUBLIC ACCESS TO RESULTS

2.20 As outlined in the Directives, communities are required to make results of the CHR publicly available. How will the public have access to the summary results of this CHR? For example, which website will be used to publish the results?

Have access to the summary results of this CHR? If not, for example, which website will be used to publish the results?

The City of Lethbridge intends to publish the summary results of the CHR on both our own City hosted website as well as through the Lethbridge Integrated Coordinated Access website.

SECTION 3: COMMUNITY LEVEL DATA						
2019-2020						
Community 4794 Data Center						
Note: Please answer questions 3.1 to 3.4 of the Section 3 - 2020-21* tab						
3.1	a) Does your community use the Reaching Home definition of chronic homelessness?	Select one				
	b) How does your community define chronic homelessness?					
3.2	Does your community update chronic homelessness status over time?	Select one				
	a) When your community adds individuals and families when they lived before they became homeless, is the "prior living situation" defined as where they were immediately before homelessness?	Select one				
	b) Why is there a possible time gap? How far back could the "prior living situation" apply?					
3.4	Do you have a written policy/procedure that specifies the number of days of inactivity after which state is changed from "active" to "inactive"?	Select one				
Step 1. Select Data Source						
3.5	Does your community currently have a unique identifier list (a List) that has the following characteristics:					
	3.5.1 Unpublished information for each individual/household?	Not yet				
	3.5.2 Contained in one document/database	Yes				
	3.5.3 Includes people experiencing homelessness who are active	Not yet				
	3.5.4 Consent given to be on the List	Yes				
3.6	Does the List have any data that can be reported for this reporting period (i.e., April 1, 2019 to March 31, 2020)?	Select one				
Step 2. Define the Data						
3.7	What is the date range for available data from the List for fiscal report?					
	• First date in reporting period	YYYYMMDD				
	• Last date in reporting period	YYYYMMDD				
3.8	a) Which household types does the List include? Select all that apply.					
	<input checked="" type="checkbox"/> High adults					
	<input type="checkbox"/> Nonaccompanied youth					
	<input type="checkbox"/> Adults					
	b) Does the List include family members like dependents, or just the head of household?	Select one				
	c) Can the List report data by unique individuals? This means that each family member will be reported separately.	Select one				
Step 3. Report the Data						
3.9 Complete the Population Groups table below using the date range indicated in Question 3.7.						
a) Report the number of unique individuals or households where not available who.						
Priority Population Groups – Mandatory Reporting	3.9.1 Where homeless (Measure Cumulative Homelessness)	3.9.2 Where near to homelessness (Measure Inflow)	3.9.3 Returned to homelessness from housing (one or more times) (Measure Inflow)	3.9.4 Returned to homelessness from transitional data (one or more times) (Measure Inflow)	3.9.5 Returned to homelessness from unknown data (one or more times) (Measure Inflow)	3.9.6 Date changed from active to inactive (one or more times) (Measure Inflow)
	Chronic homelessness					
	Chronically homeless					
	Homeless in specific locations					
Priority Population Groups – Mandatory Reporting	3.9.7 Moved from homelessness to housing (one or more times) (Measure Outflow)	3.9.8 Status changed from homelessness to transitional (one or more times) (Measure Outflow)	3.9.9 Status changed from homelessness to unknown (one or more times) (Measure Outflow)	3.9.10 Status changed from homelessness to active (one or more times) (Measure Outflow)	3.9.11 Date changed from active to inactive (one or more times) (Measure Outflow)	
	Chronic homelessness					
	Chronically homeless					
	Homeless in specific locations					
b) Do you wish to report on any Additional Population Groups? Select one						
Additional Population Groups – Optional Reporting	3.9.1 Where homeless (Measure Cumulative Homelessness)	3.9.2 Where near to homelessness (Measure Inflow)	3.9.3 Returned to homelessness from housing (one or more times) (Measure Inflow)	3.9.4 Returned to homelessness from transitional data (one or more times) (Measure Inflow)	3.9.5 Returned to homelessness from unknown data (one or more times) (Measure Inflow)	3.9.6 Date changed from active to inactive (one or more times) (Measure Inflow)
	Select one					
	Select one					
	Select one					
Additional Population Groups – Optional Reporting	3.9.7 Moved from homelessness to housing (one or more times) (Measure Outflow)	3.9.8 Status changed from homelessness to transitional (one or more times) (Measure Outflow)	3.9.9 Status changed from homelessness to unknown (one or more times) (Measure Outflow)	3.9.10 Status changed from homelessness to active (one or more times) (Measure Outflow)	3.9.11 Date changed from active to inactive (one or more times) (Measure Outflow)	
	Select one					
	Select one					
	Select one					
Optional: Please insert comment here						
c) Please provide the definition(s) your community uses for each Additional Population Group. Please insert definitions here*						
3.10 Complete the Prior Living Situations table below for all individuals (or households where not available) that were homeless for the date range indicated in Question 3.7.						
	Public Institutions	Transitional Housing	Permanent Housing	Unknown	Total	
How to homelessness					0	
Returned to homelessness					0	
Total	0	0	0	0	0	

SECTION 3: COMMUNITY LEVEL DATA 2023-2024						
Community-Level Data Context						
3.1 a) Does your community use the Reaching Home definition of chronic homelessness?	Yes					
3.2 Does your community update chronic homelessness status over time?	Not yet					
3.3 a) When your community asks individuals and families where they lived before they became homeless, is the "prior living situation" defined as where they were immediately before homelessness?	Yes - there is no time gap					
3.4 Do you have a written policy/protocol that specifies the number of days of inactivity after which state is changed from "active" to "inactive"?	Yes					
Step 1. Select Data Sources						
3.5 Does your community currently have a unique identifier list (a List) that has the following characteristics:						
3.5.1 Individual information for each individual/household?	Not yet					
3.5.2 Contained in one document/database?	Yes					
3.5.3 Includes people experiencing homelessness who are active?	Not yet					
3.5.4 Consent given to be on the List?	Yes					
3.6 Does the List have any date that can be reported for this reporting period (i.e., April 1, 2020, to March 31, 2021)?	Select one					
Step 2. Define the Data						
3.7 What is the date range for available data from the List this fiscal report?						
• First date in reporting period	YYYY-MM-DD					
• Last date in reporting period	YYYY-MM-DD					
3.8 a) Which household types does the List include? Select all that apply.						
<input checked="" type="checkbox"/> Single adults						
<input type="checkbox"/> Accompanied youth						
<input type="checkbox"/> Children						
b) Does the List include family members like dependents, or just the head of household?	Select one					
c) Can the List report data by unique individuals? This means that each family member will be reported separately.	Select one					
Step 3. Report the Data						
3.9 Complete the Population Groups table below using the date range indicated in Question 3.7.						
a) Report the number of unique individuals (or households where not available) who:						
Priority Population Groups – Mandatory Reporting	3.1. 19 or less homeless (Homelessness)	3.2. 20 or more homeless (Homelessness)	3.3. Moved from homelessness to housing (one or more times) (Measure Outflow)	3.4. Status changed from homelessness to transitional status (one or more times) (Measure Outflow)	3.5. Status changed from homelessness to permanent status (one or more times) (Measure Outflow)	3.6. Status changed from active to inactive (one or more times) (Measure Outflow)
Chronic homelessness						
Chronically homeless						
Indigenous homeless						
Priority Population Groups – Mandatory Reporting	3.7. Moved from homelessness to housing (one or more times) (Measure Outflow)	3.8. Status changed from homelessness to transitional status (one or more times) (Measure Outflow)	3.9. Status changed from homelessness to permanent status (one or more times) (Measure Outflow)	3.10. Status changed from active to inactive (one or more times) (Measure Outflow)		
Chronic homelessness						
Chronically homeless						
Indigenous homeless						
b) Do you wish to report on any Additional Population Groups?						
Select one						
Additional Population Groups – Optional Reporting	3.1. 19 or less homeless (Homelessness)	3.2. 20 or more homeless (Homelessness)	3.3. Moved from homelessness to housing (one or more times) (Measure Outflow)	3.4. Status changed from homelessness to transitional status (one or more times) (Measure Outflow)	3.5. Status changed from homelessness to permanent status (one or more times) (Measure Outflow)	3.6. Status changed from active to inactive (one or more times) (Measure Outflow)
Select one						
Select one						
Select one						
Select one						
Other						
Additional Population Groups – Optional Reporting	3.7. Moved from homelessness to housing (one or more times) (Measure Outflow)	3.8. Status changed from homelessness to transitional status (one or more times) (Measure Outflow)	3.9. Status changed from homelessness to permanent status (one or more times) (Measure Outflow)	3.10. Status changed from active to inactive (one or more times) (Measure Outflow)		
Select one						
Select one						
Select one						
Select one						
Other						
(Optional) Please insert comment here?						
c) Please provide the definitions your community uses for each Additional Population Group. Please insert definitions here.						
3.10 Complete the Prior Living Situations table below for all individuals (or households where not available) that were homeless for the date range indicated in Question 3.7.						
	Public Institutions	Transitional Housing	Permanent Housing	Unknown	Total	
New to homelessness					0	
Returned to homelessness					0	
Total	0	0	0	0	0	

SECTION 4: COMMUNITY-LEVEL OUTCOMES

Your answers in Section 3 indicate that your community currently has a unique identifier list. This will be called the List in this section.

Step 1. Confirm List Comprehensiveness

4.1	Is the List updated on a regular basis, monthly at minimum?	Select one
4.2	Does the List only currently include information about people experiencing chronic homelessness?	Select one
4.3	Does the List include individuals and families served through outreach to all locations (hotspots) across the community where people are living unsheltered (i.e., staying in places not meant for human habitation)?	Select one
4.4	Does the List include individuals and families across the community staying in all shelters for people experiencing homelessness (e.g., emergency shelters, hostels, hotel/motel stays paid for by a service provider)?	Select one
4.5	Does the List include individuals and families across the community staying in transitional housing?	Select one
4.6	Does the List include individuals experiencing homelessness across the community staying in institutions (e.g., jail or hospital)? (Note that if the stay exceeds your inactivity policy, their state on the List changes to inactive.)	Select one
4.7	Does the List include individuals and families across the community who are experiencing hidden homelessness?	Select one
4.8	Is the total number of people on the List served through outreach and in shelters as of March 31, 2021, higher than the number of people who were <i>unsheltered</i> or <i>in shelter</i> according to your most recent Point-in-Time (PiT) Count?	Select one
4.9	Consider your answers to Questions 4.1 to 4.8. In your opinion, does your List include all of the individuals and families experiencing homelessness in your community, as much as is possible right now?	Select one

Step 2. Define the Data Set

4.10 Did you have the List in place on or before April 1, 2019?	Select one
4.11 Did you have the List in place on or before April 1, 2020?	Select one

[Large gray area for data entry]

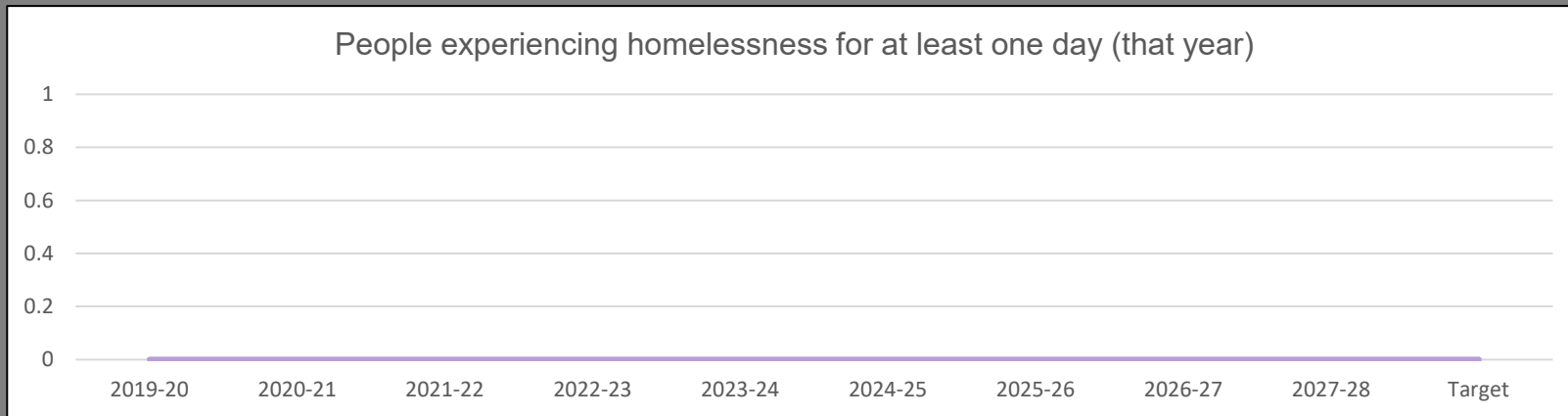
Step 3. Report the Data

CORE OUTCOMES

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

Given your answers in Steps 1 and 2, you can report annual result(s) for Outcome #1. Where applicable, add a target for 2027-28 in the far right box.

	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
People experiencing homelessness for at least one day (that year)										



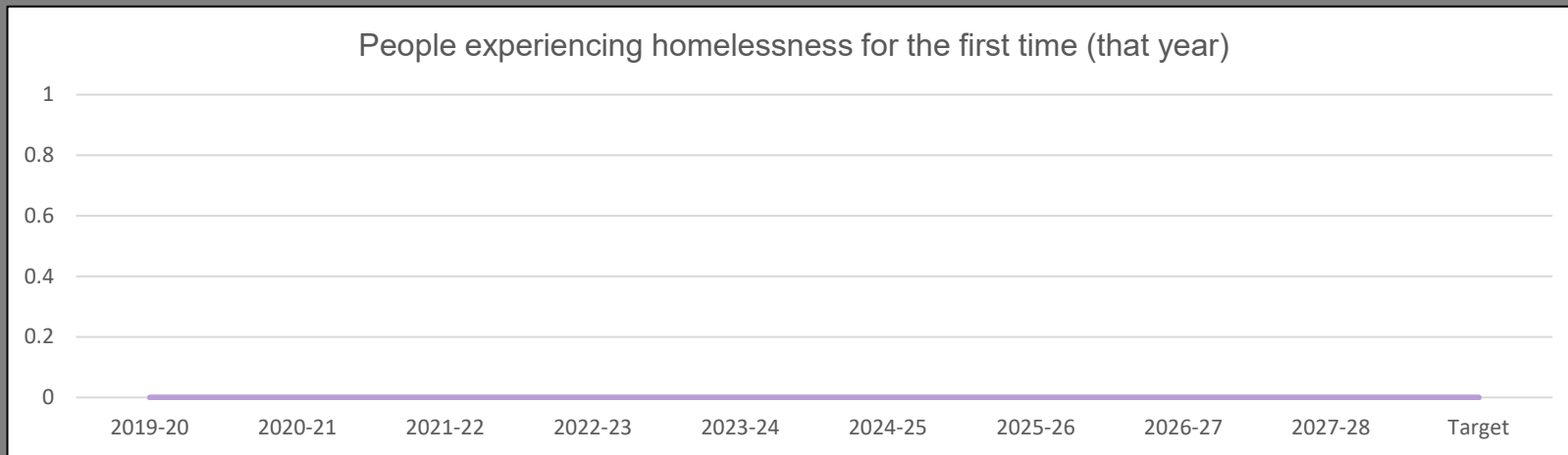
Please insert comment here

4.13 - Outcome #2: Fewer people experience homelessness for the first time (new inflows into homelessness are reduced)

Given your answers in Steps 1 and 2, you can report annual result(s) for Outcome #2. Where applicable, add a target for 2027-

28 in the far right box.

	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
People experiencing homelessness for the first time (that year)										

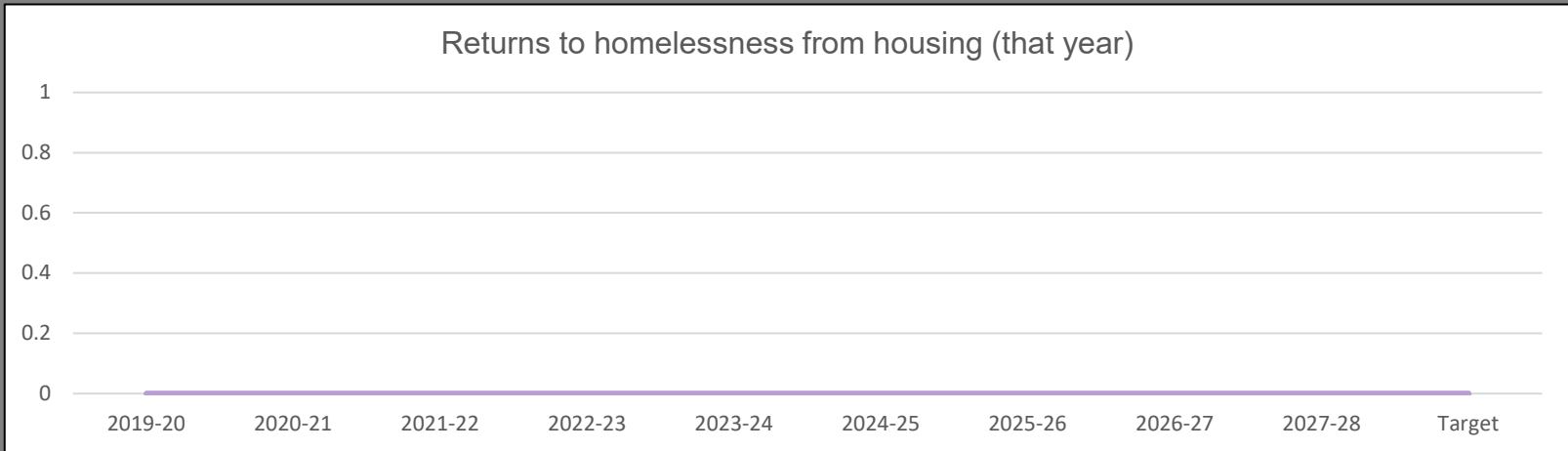


Please insert comment here

4.14 - Outcome #3: Fewer people return to homelessness from housing (returns to homelessness are reduced)

Given your answers in Steps 1 and 2, you can report annual result(s) for Outcome #3. Where applicable, add a target for 2027-28 in the far right box.

	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
Returns to homelessness from housing (that year)										

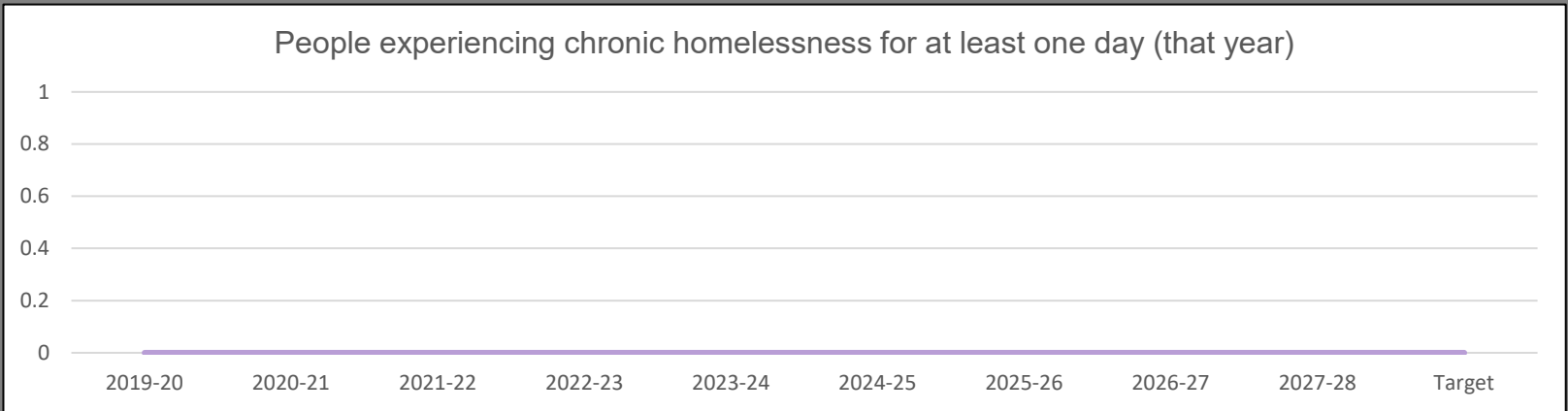


Please insert comment here

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

Given your answers in Steps 1 and 2, you can report annual result(s) for Outcome #4. Where applicable, add a target for 2027-28 in the far right box.

People experiencing chronic homelessness for at least one day (that year)											0
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Please insert comment here

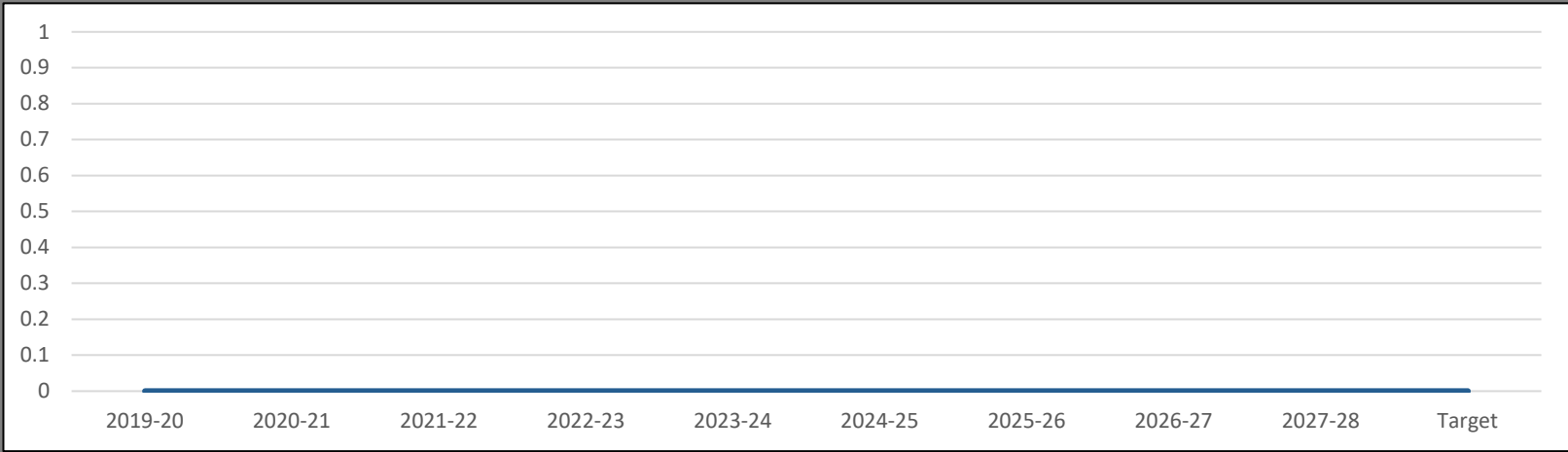
Additional Outcomes Identified by the Community (Optional)

(Optional)

Outcome #:

Additional population group outcome.

	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
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Please insert comment here

COMMUNITY HOMELESSNESS REPORT SUMMARY

City of Lethbridge
2019-2021

COORDINATED ACCESS AND HOMELESSNESS MANAGEMENT INFORMATION SYSTEM (HMIS) SELF-ASSESSMENT

SUMMARY

The table below provides a summary of the work the community has done so far to implement Reaching Home's minimum requirements for Coordinated Access and an HMIS.

How many of the Reaching Home minimum requirements has the community:

Met	Started	Not yet started
6	10	2

SUMMARY COMMENT

SUMMARY COMMENT

Are there particular efforts and/or issues that you would like to highlight for this reporting period related to your community's work to achieve the Reaching Home minimum requirements? In particular, please describe your community's efforts to set-up or improve the Coordinated Access governance structure, including processes to ensure that policies and protocols, as approved by the governance group(s), are being implemented across the system as intended to achieve desired results.

The lead implementation agency for Integrated Coordinated Access in Lethbridge is the Canadian Mental Health Association, South Region. They are leading a project team for Integrated Coordinated Access rollout that is comprised of key members from the City of Lethbridge as well as support from an external consultant. While COVID-19 has slowed the development and rollout of the Integrated Coordinated Access system, the project team has done a tremendous job moving forward through the pandemic and as of June 2021, have completed the 'Integrated Coordinated Access guidelines' document which defines the standards, definitions, and processes for the system wide rollout of Integrated Coordinated Access. The project team has developed the Integrated Coordinated Access guidelines and key concepts on the basis of community involvement, and co-creation at a system level which is illustrated through the various community engagement and co-creation workshops hosted by the project team through 2021 thus far:

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March 2/3, 2021: System Navigator Co-Creation Workshop

March 17, 2021: Counselling Subsidy Final Review Meeting

March 25, 2021: System Navigator Follow-Up Workshop

April 7, 2021: Door Agency Co-Creation Workshop

May 25, 2021: Integrated Coordinated Access Guidelines Review Workshop

The project team will begin implementation of the new system wide processes and is targeting the end of 2021 for a complete rollout and functional system wide Integrated Coordinated Access system

The City of Lethbridge has identified the need to hire for the position of an Integrated Coordinated Access Technician, who will aid in setting up and enforcing the governance structure alongside the lead implementation agency, Canadian Mental Health Association South Region. This individual will also work to gather feedback from the community and service providers, helping to ensure the policies and protocols are both being implemented appropriately, and effective in their application.

In its capacity as the Collective Impact backbone organization, the City will be leveraging the Community Wellbeing and Safety Strategy Advisory in its efforts of coordinating actions to support the strategy implementation and collective movement across stakeholders. The Community Wellbeing and Safety Strategy Advisory, acting as the Community Advisory Board, will provide input to the City's work coordinating service delivery, help foster collaboration and engagement, and increase linkages across agencies/systems. The CAB has been given regular updates and opportunity for feedback on Integrated Coordinated Access

COMMUNITY-LEVEL DATA for 2019-2020

Based on the information provided in the Community Homelessness Report, the community does not have to report community-level data for 2019-2020.

What is the date range for available data from the List for this fiscal report?

- | | |
|-----------------------------------|------------|
| • First date in reporting period: | YYYY-MM-DD |
| • Last date in reporting period: | YYYY-MM-DD |

Complete the Population Groups table below using the date range indicated for this fiscal report.

Complete the Population Groups table below using the date range indicated for this fiscal report.

Number of unique individuals (or households where not available) in each Priority Population Group who:

Priority Population Groups	Were homeless (Measures Cumulative Homelessness)	Were new to homelessness (Measures Inflow)	Returned to homelessness from housing (one or more times) (Measures Inflow)	Returned to homelessness from transitional status (one or more times) (Measures Inflow)	Returned to homelessness from unknown status (one or more times) (Measures Inflow)	State changed from inactive to active (one or more times) (Measures Inflow)
Overall homeless	0	0	0	0	0	0
Chronically homeless	0	0	0	0	0	0
Indigenous peoples	0	0	0	0	0	0
Priority Population Groups			Moved from homelessness to housing (one or more times) (Measures Outflow)	Status changed from homelessness to transitional (one or more times) (Measures Outflow)	Status changed from homelessness to unknown (one or more times) (Measures Outflow)	State changed from active to inactive (one or more times) (Measures Outflow)
Overall homeless			0	0	0	0
Chronically homeless			0	0	0	0
Indigenous peoples			0	0	0	0

Complete the Prior Living Situations table below for all individuals (or households where not available) that were homeless for the date range indicated for this fiscal report.

	Public Institutions	Transitional Housing	Permanent Housing	Unknown	Total
New to homelessness	0	0	0	0	0
Returned to homelessness	0	0	0	0	0
Total	0	0	0	0	0

COMMUNITY-LEVEL DATA for 2020-2021

Based on the information provided in the Community Homelessness Report, the community does not have to report

community-level data for 2020-2021 and community-level outcomes for the reporting period.

What is the date range for available data from the List for this fiscal report?

- | | |
|-----------------------------------|------------|
| • First date in reporting period: | YYYY-MM-DD |
| • Last date in reporting period: | YYYY-MM-DD |

Complete the Population Groups table below using the date range indicated for this fiscal report.

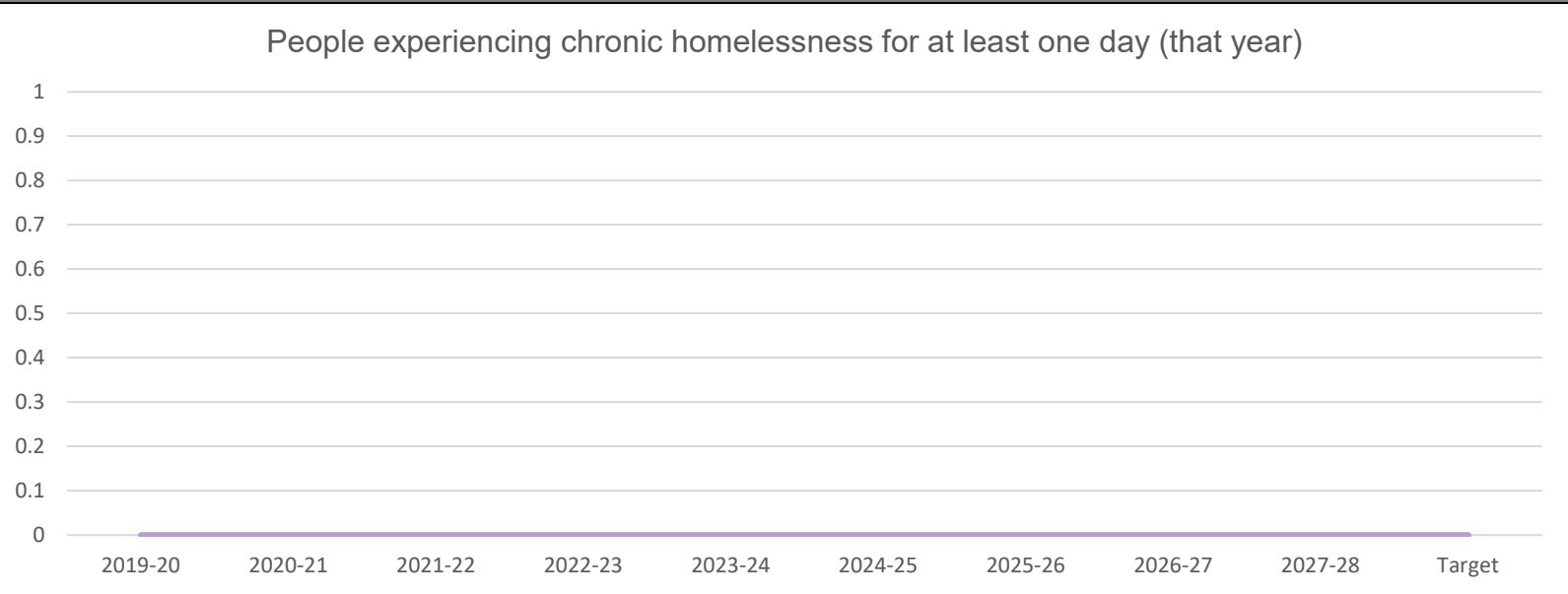
Number of unique individuals (or households where not available) in each Priority Population Group who:

Priority Population Groups	Were homeless (Measures Cumulative Homelessness)	Were new to homelessness (Measures Inflow)	Returned to homelessness from housing (one or more times) (Measures Inflow)	Returned to homelessness from transitional status (one or more times) (Measures Inflow)	Returned to homelessness from unknown status (one or more times) (Measures Inflow)	State changed from inactive to active (one or more times) (Measures Inflow)
Overall homeless	0	0	0	0	0	0
Chronically homeless	0	0	0	0	0	0
Indigenous peoples	0	0	0	0	0	0
Priority Population Groups			Moved from homelessness to housing (one or more times) (Measures Outflow)	Status changed from homelessness to transitional (one or more times) (Measures Outflow)	Status changed from homelessness to unknown (one or more times) (Measures Outflow)	State changed from active to inactive (one or more times) (Measures Outflow)
Overall homeless			0	0	0	0
Chronically homeless			0	0	0	0
Indigenous peoples			0	0	0	0

Complete the Prior Living Situations table below for all individuals (or households where not available) that were homeless for the date range indicated for this fiscal report.

	Public Institutions	Transitional Housing	Permanent Housing	Unknown	Total
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day (that year)



Please insert comment here

Designated Community – Community Advisory Board

Note: You may list more than one name or organization for each sector. ESDC will not sell, distribute, trade or transfer your information to other government departments, businesses, institutions, organizations or individuals outside ESDC for any other purposes, unless required by law.

Sector	Community Advisory Board Member(s)
Service Canada (Ex-Officio Member)	Wayne Ackerman (Interim member as previous
Provincial/Territorial government	Leigh Bremner, Director Regional Supports-
Local/Municipal government	
Indigenous peoples and organizations	Amanda Scout, Native Counseling Services of
Veterans Affairs Canada or veterans serving organizations	
Organizations serving women/families fleeing violence	
Youth and/or youth serving organizations (including Child Welfare Agencies)	
Organizations serving seniors	
Newcomer serving organizations	
Health organizations, including hospitals and other public institutions, and organizations focused on mental health and addictions	Trevor Inaba, Director South Zone- AHS – Addiction and Mental Health South Zone Treena Tallow, Advisor/Aboriginal Addiction & Mental Health, Indigenous Health Program
Individuals with lived experience of homelessness	
Organizations serving individuals experiencing or at risk of homelessness	Southern Alberta FASD Network- Debbie Deak, Co-Coordinator/Prevention Conversation Facilitator
Private sector	Cyndi Vos, Chief Executive Officer, Lethbridge
Landlord associations and/or the housing sector	Treaty 7 Housing- Hank Shade, Executive
Other	COMMUNITY FUNDERS: Tom- Former member of Lethbridge Regional Police Service COMMUNITY FUNDERS: Rotary Club- Allen Friesen, President

Community Advisory Board Chairs or Co-Chairs (if applicable):

I affirm that the above members of the Community Advisory Board have reviewed the attached Community Homelessness Report and that the majority of Community Advisory Board members approve of its content.

Debbie Deak		19-Jul-21
Name	Signature	Date
Name	Signature	Date
Name	Signature	Date

Indigenous Homelessness – Community Advisory Board

Note: You may list more than one name or organization for each sector. ESDC will not sell, distribute, trade or transfer your information to other government departments, businesses, institutions, organizations or individuals outside ESDC for any other purposes, unless required by law.

Sector	Community Advisory Board Member(s)
Service Canada (Ex-Officio Member)	
Provincial/Territorial government	
Local/Municipal government	Travis Plaited Hair, Blood Tribe
Indigenous peoples and organizations	Amanda Scout, Native Counseling Services of
Veterans Affairs Canada or veterans serving organizations	
Organizations serving women/families fleeing violence	
Youth and/or youth serving organizations (including Child Welfare Agencies)	
Organizations serving seniors	
Newcomer serving organizations	
Health organizations, including hospitals and other public institutions, and organizations focused on mental health and addictions	Treena Tallow, Alberta Health Services (Aboriginal Addiction and Mental Health)
Individuals with lived experience of homelessness	
Organizations serving individuals experiencing or at risk of homelessness	
Private sector	
Landlord associations and/or the housing sector	Hank Shade, Treaty 7 Housing
Other	

Community Advisory Board Chairs or Co-Chairs (if applicable):

I affirm that the above members of the Community Advisory Board have reviewed the attached Community Homelessness Report and that the majority of Community Advisory Board members approve of its content.

Debbie Deak

19-Jul-21

Name

Signature

Date

Name

Signature

Date

Name

Signature

Date