Reaching Home: Canada's Homelessness Strategy Community Homelessness Report

HALIFAX REGIONAL MUNCIPALITY

2023-2024

TEMPLATE FOR COMMUNITIES

SECTION 1: COMMUNITY CONTEXT

Overview
a) Highlight any efforts and/or issues related to the work that your community has done to prevent and/or reduce homelessness and improve access to safe, appropriate housing over the last year.
Your response could include information about: • Homelessness prevention and shelter diversion efforts; • Housing move-ins; • New investments in housing-related resources; • Gaps in services; • Collaboration with other sectors; and/or, • Efforts to address homelessness for specific groups (e.g., youth).
As the Community Entity, we have worked to build relationships with youth serving, refugee serving and veteran serving organizations. Work continues with sub-projects that prioritize clients that identify as African Nova Scotian, Indigenous, gender diverse and LGBTQIA2S+. Through the Unsheltered Winter Response (UHR) Emergency Funds, we were able to support both specialized populations (youth and veterans) and look to continue to support those organizations as we move into 2024-25. We also supported Halifax Refugee Clinic near the end of 2023-24 both through UHR funds as well as base funding to ensure a continuation of service for refugee and refugee claimants, a marginalized population that was a current gap in service in our community. We also identified a gap in service for clients with the highest depth of need and are working with organizations to ensure this housing and support gap is addressed in 2024-25. Through 2023-24, we continued to support organizations that have been funded for several years and worked closely with them to ensure that they are demonstrating compliance with Reaching Home contractual compliance and enhancing alignment with fidelity to practice and working toward better data entry in Homeless Individuals and Families Information System (HIFIS) as well as interagency data sharing.

b) What **impact** did these efforts and/or issues have on your community-level outcomes over the last year (as reported in Section 4, if applicable)? This impact may or may not be directly related to the efforts and/or issues identified in 1.1(a). Please enter "N/A" if the impact is not known at this time.

	These efforts allowed a continuation of service for the Halifax Refugee Clinic, an organization that supports refugees and refugee claimants in up to eleven languages. Had this organization not been able to continue, there would have been an influx of a marginalized population back into homelessness with minimal support available to navigate them through the system.
1.2	How has the community's approach to addressing homelessness changed over the last few years? Communities are strongly encouraged to use the <i>"Reflecting on the Changing Response to Homelessness"</i> worksheet to help them reflect on how the approach has changed and the impact of these changes at the local level.
	Over the past few years, the Community Entity (CE) did not have a great working relationship with the community as a whole and processes were not consistent and transparent which led to community disengagement. The current CE Reaching Home team is working diligently to improve these relationships and working more collaboratively in developing processes that reflect the needs of the community. The previous two-committee governance model for Coordinated Access and HIFIS was adapted to merge both committees into one to provide a streamlined approach to policy and process refinement and approval. This was a temporary measure to ensure integrity in the process and upon completion of policy revision, the committees will return to their previous state. The ideal future state will include interagency data sharing within the HIFIS platform, which the CE is working purposefully to achieve prior to the Housing, Infrastructure and Communities Canada (HICC) deadline. Currently all governance committees are in the beginning processes of recruitment to ensure a more equitable and diverse approach to governance. Our method of communicating and sharing information with our community partners has led to an improvement of relationships and engagement. There is more openness to the coming changes, such as data sharing, because of this improved transparency. The redevelopment of the coordinated access policy manual for the community has provided a much needed voice to the community to effectively and efficiently do their work. As a community, we have been using HIFIS for many years, however not to the level that we should have been. Because of that, our By Name List is still external from HIFIS (in an Excel document). We have implemented a new training process in 2023-24 to ensure better and

more accurate community use of HIFIS. This was a necessary first step on the path toward data sharing and moving our BNL into HIFIS. While we have not yet achieved data sharing and BNL processes within HIFIS itself, we are closer to reaching that goal than ever before. The training redevelopment has provided a much more in depth understanding of how to utilize HIFIS to it's maximum capability. We also redeveloped HIFIS policies and processes at a governance level to ensure consistency across all service providers. The ideal future state is interagency data sharing and this will still require more collaboration with community partners. We are working to align data entry at all community organizations to ensure outcome based reporting. The unintended consequence of these changes is how end users interact with client files in HIFIS. Through training resources, the CE strives to overcome these challenges and the local HIFIS Support Team works closely with end users to boost their knowledge and understanding of the database. Once this is fully functional, the end users will benefit from less administrative work in a data sharing environment. Many organizations have increased their capacity and organizations that did not previously support homelessness response have shifted their work toward that sector. There is still a lot of work to do in the current state to ensure that clients are getting fair, equitable and efficient service, regardless of which agency they use as an access point. Indigenous partners are currently engaged but as a community we have to work to improve coordination. Since the inception of coordinated access, the entire community has been using the same intake and assessment triage tool and these forms have changed over time to reflect changes in the community. The matching and referral process changed over time due to COVID and the community is working toward re-engaging a community-based service navigation and case conferencing approach that provides action focused brainstorming for housing and support options for people "stuck" on the By Name List. We have had multiple vacancy information sessions to enhance matching and referral meetings for specific resources in the past few months.

Collaboration between Indigenous and Non-Indigenous Partners

1.3 Please select your community from the drop-down menu:

Halifax (NS)

Your community: Has only DC funding available.

1.4

a) Specific to Coordinated Access, the HMIS and the Outcomes-Based Approach, has there been ongoing, meaningful collaboration between the DC CE and local Indigenous organizations, including those that sit on your CAB, over the reporting period?

As a reminder, meaningful collaboration with local Indigenous organizations is expected for your community.

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

b) In your response to 1.4(a) you noted that collaboration has occurred with Indigenous partners related to **at least one** of the following: Coordinated Access, the HMIS and/or the Outcomes-Based Approach. As a follow up to this, please indicate **if any** of the following activities took place:

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

→ Coordinated Access:	Yes
→ HMIS:	Yes

• The perspectives of Indigenous partners are integrated into the work of the Coordinated Access system, use of the HMIS and the Outcomes-Based Approach.

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

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

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

Note: As applicable, these activities should be described in further detail in 1.4(c). This list is not meant to be exhaustive. Other relevant activities not listed above should be described in 1.4(c).

c) In your response to 1.4(a) you noted that collaboration has occurred with Indigenous partners. As a follow up to this, please describe the collaboration that took place in more detail. Your response **must** include the following elements:

- When it occurred (e.g. "in February 2024" or "on an ongoing basis since 2022");
- Who it was with (e.g. "the IH CE", "organization A");
- What aspects of Coordinated Access, the HMIS and/or the Outcomes-Based Approach were discussed; and,
- How Indigenous perspectives influenced the outcome.

Throughout all of 2023-24 fiscal year, Indigenous representatives from the Indigenous Homelessness (IH) Community Entity (CE) participated in both Coordinated Access and HIFIS governance. Indigenous partners were directly involved in the redevelopment of the CA policy manual and the HIFIS policy guide. As with all our organizational partners, we have room for improvement and we will continue to work on our collaborative relationship with all Indigenous partners.

1.5	a) Specific to the completion of this Community Homelessness Report (CHR), did ongoing, meaningful collaboration take place with the local Indigenous organizations, including those that sit on your CAB?	No
	As a reminder, meaningful collaboration on the CHR with local Indigenous or community.	ganizations is expected for your

d) In your response to 1.5(a) you noted that collaboration did **not** occur with Indigenous partners. As a follow up to this, please describe why collaboration did not take place in more detail and what the plan is to ensure meaningful collaboration occurs during next year's CHR process. Your response **must** include the following elements:

• Related to this year's CHR process (2023-24), why meaningful collaboration with Indigenous partners did not take place.

- Related to next year's CHR process (2024-25):
 - o How will Indigenous peoples be engaged in these discussions;
 - o Who it will be with (e.g. "the IH CE", "organization A"); and,
 - o When it will occur.

The Indigenous Homelessness (IH) Community Entity (CE) is a member of the Designated Community (DC) Community Advisory Board (CAB), the Coordinated Access and HIFIS Governance Committee and the IH CE is an active user of the Homeless Individuals and Families Information System (HIFIS) in Halifax Regional Municipality (HRM). IH CE team members have therefore been included in the redevelopment of policies and procedures governing the Coordinated Access System (CAS), HIFIS and the rebuilding of community relationships. The data

	entered by the IH CE as a result, is included in the Community Homelessness Report (CHR) but a dedicated meeting to discuss the results of the CHR was not facilitated beyond the CAB discussions and feedback opportunities. Prior to final submission, the Community Advisory Board and the governance committees provided feedback, including Indigenous representatives. The Reaching Home (RH) CE will continue to invite stakeholders from Indigenous (and African Nova Scotian) organizations to contribute to system building activities and the finalization of the CHR.		
Public Access to Results			

1.7	As outlined in the Reaching Home Directives, communities are required to make a summary of the CHR publicly available. How will the public have access to this information? For example, which website will be used to publish the results?	
As with	previous reports, it will be published on ahans.ca and widely available to all community members.	
End of Section 1		

	SECTION 2: COORDINATED ACCESS AND HOMELESSNESS MANAGEMENT INFORMATION SYSTEM (HMIS) SELF-ASSESSMENT		
	Governance and Partnerships		
2.1	a) Is there a governance structure for the Coordinated Access system and the HMIS?	Yes	
	The following questions are new for this year and ask about the governance structure in place for Coordinated Access and the HMIS. These questions are not used to assess progress with meeting minimum requirements for the 2019-2024 funding cycle.		
	 b) Is there a representative governance structure in place? Membership should include people that represent the following: Population groups the Coordinated Access system intends to serve; Types of service providers that help prevent homelessness and those that help people transition from homelessness to stable, appropriate housing; Indigenous partners (more than a single representative, wherever possible); People with lived experience of homelessness; and, Provincial/territorial and municipal governments. 	Not yet	

 c) Is an integrated governance structure in place, where various homeless-serving sector roles and groups are aligned in support of the community's overall goals to prevent and reduce homelessness? These roles and groups should include: Community Entity; Community Advisory Board; Coordinated Access Lead and HMIS Lead roles; Provincial/territorial and/or municipal designations relative to managing homelessness funding, as applicable; Local groups with a mandate to prevent and/or reduce homelessness, as applicable; and, Local Indigenous partners, including Indigenous service delivery organizations, as applicable. 	Yes
d) Is there a document that describes how the various homeless-serving sector roles and groups are integrated and aligned in support of the community's overall goals to prevent and reduce homelessness and, if requested, can this documentation be made publicly available?	Not yet
e) Have Terms of Reference for the governance structure been documented and, if requested, can they be made publicly available?	Yes
a) Has a Coordinated Access Lead organization and an HMIS Lead organization been identified?	Yes
The following questions are new for this year and ask about the roles and responsibilities for the Coordinated Access Lead and HMIS Lead, as well as related documentation. These questions are not used to assess progress with meeting minimum requirements for the 2019-2024 funding cycle.	
 b) Do the Coordinated Access Lead and HMIS Lead collaborate to: Improve service coordination and data management; and, Increase the quality and use of data to prevent and reduce homelessness? 	Yes
	 sector roles and groups are aligned in support of the community's overall goals to prevent and reduce homelessness? These roles and groups should include: Community Entity; Community Advisory Board; Coordinated Access Lead and HMIS Lead roles; Provincial/territorial and/or municipal designations relative to managing homelessness funding, as applicable; Local groups with a mandate to prevent and/or reduce homelessness, as applicable; and, Local Indigenous partners, including Indigenous service delivery organizations, as applicable. d) Is there a document that describes how the various homeless-serving sector roles and groups are integrated and aligned in support of the community's overall goals to prevent and reduce homelessness and, if requested, can this documentation be made publicly available? e) Have Terms of Reference for the governance structure been documented and, if requested, can they be made publicly available? a) Has a Coordinated Access Lead organization and an HMIS Lead organization been identified? The following questions are new for this year and ask about the roles and respons Coordinated Access Lead and HMIS Lead, as well as related documentation. These not used to assess progress with meeting minimum requirements for the 2019-2024 b) Do the Coordinated Access Lead and HMIS Lead collaborate to: Improve service coordination and data management; and,

	c) Have Coordinated Access Lead and HMIS Lead roles and responsibilities been documented and, if requested, can this documentation be made publicly available?	Yes
2.3	a) Do all service providers receiving funding through the Designated Communities (DC) or Territorial Homelessness (TH) stream participate in the Coordinated Access system?	Yes
	The following questions are new for this year and ask if broad participation in the Access system is being encouraged. These questions are not used to assess progreminimum requirements for the 2019-2024 funding cycle.	
	b) Over the last year, was participation in the Coordinated Access system encouraged from providers that serve people experiencing or at-risk of homelessness, and do not receive Reaching Home funding? They may or may not have agreed to participate at this time.	Yes
	c) Over the last year, was participation encouraged from providers that could fill vacancies through the Coordinated Access system (e.g., they have housing units, subsidies and/or supports that could be accessed by people experiencing homelessness), and do not receive Reaching Home funding? They may or may not have agreed to participate at this time.	Yes
	Homelessness Management Information System (HMIS))
2.4	a) Does your community have an HMIS to manage individual-level client data (i.e., person-specific data) and service provider information for Coordinated Access and the Outcomes-Based Approach?	Yes
	b) In your community, is the Homeless Individuals and Families Information System (HIFIS) the HMIS that is being used?	Yes

The following questions are new for this year and ask about active use of the HM processes for ensuring that Indigenous partners can access the HMIS data and/or re to help the people they serve. These questions are not used to assess progress minimum requirements for the 2019-2024 funding cycle.	eports they need
e) In your community, are all Reaching Home-funded service providers actively using the same HMIS to manage individual-level client data (i.e., person-specific data) and service provider information for Coordinated Access and the Outcomes- Based Approach? This includes using the HMIS to generate data for the Unique Identifier List and outcome reporting.	Not yet
f) Over the last year, were other non-Reaching Home-funded providers that serve people experiencing or at-risk of homelessness in the community encouraged to actively use the HMIS? They may or may not have agreed to do so at this time.	Yes
g) Are processes in place that ensure there are no unnecessary barriers preventing Indigenous partners from accessing the HMIS data and/or reports they need to help the people they serve?	Yes
Has your community signed a Data Provision Agreement with the Department? Reminder: The Data Provision Agreement is an agreement between the Community Entity and the Department that outlines the roles and responsibilities between both parties, as well as authorizes the Department's collection of certain non-directly identifiable data fields.	Yes

2.6	Do you have a set of local agreements to manage privacy, data sharing and client consent related to your HMIS that comply with municipal, provincial/territorial and federal laws? This includes: • A Community Data Sharing Agreement; and, • A Client Consent Form.	Yes			
2.7	Have you established safeguards to ensure the data collected in your HMIS is secured from unauthorized access?	Yes			
	Access Points to Service				
2.8	a) Are access points available in some form throughout the geographic area covered by the DC or TH funded region, so that people can be served regardless of where they are in the community?	Yes			
	The following question is new for this year and asks about documentation for access points. It is not used to assess progress with meeting minimum requirements for the 2019-2024 funding cycle.				
	b) Have access points been documented and is this information publicly available?	Not yet			
2.9	a) Are there processes in place to monitor if there is easy and equitable access to the Coordinated Access system and to respond to any issues that emerge, as appropriate?	Not yet started			

2.10	Are there processes in place that ensure no one is denied access to service due to perceived housing or service barriers?	Under development				
	Triage and Assessment					
2.11	a) Is the triage and assessment process documented in one or more policies/protocols?	Yes				
	The following question is new for this year and asks if specific elements of triage and assessment are covered in the documentation. It is not used to assess progress with meeting minimum requirements for the 2019-2024 funding cycle.					
	b) Does your documented triage and assessment process address the following:	Vee				
	→ Consents? → → Intakes?	Yes				
	\rightarrow Initial triage?	Yes				
	$\rightarrow \text{More in-depth assessment?}$	Not yet				
	→ Community referrals?	Yes				
	→ Housing plans?	Yes				
0.40	→ Using a person-centred approach?	Yes				
2.12	The following question is not new for this year, but was revised to provide further flexibility.					
	a) Is a common, unified triage and assessment process being applied across all population groups in the community?	Yes				
	The following question is new for this year and asks for more information from commusing more than one triage and/or assessment tool. This question is not used to as with meeting minimum requirements for the 2019-2024 funding cycle.	sess progress				

	b) If more than one triage and/or assessment tool is being used, is there a protocol in place that describes:	
	→ When each tool should be used (e.g., tools used only for youth verses those that can be used with more than one population group).	Not applicable – Only use one tool
	→ When a person/family could be asked to complete more than one tool (e.g., if an individual becomes part of a family or a youth becomes an adult).	Not applicable – Only use one tool
	→ How the matching process will be managed in situations where more than one person/family is eligible for the same vacancy and, because data to inform prioritization was collected using different tools, results are not the same (e.g., one tool gives a higher score for depth of need than the other).	Not applicable – Only use one tool
	Resource Inventory	
2.13	Are all housing-related resources funded through the DC or TH stream included in the Resource Inventory?	Under development
2.14	For each housing-related resource in the Resource Inventory, have eligibility requirements been documented?	Under development
2.15	For each housing-related resource in the Resource Inventory, have prioritization criteria, and the order in which they will be applied, been documented? At minimum, depth of need (i.e., acuity) must be included as a factor in prioritization.	Yes
	Vacancy Matching and Referral with Prioritization	
2.16	a) Is the vacancy matching and referral process documented in one or more policies/protocols?	Yes

	 → Roles and responsibilities? → Prioritization? → Referrals? 	Yes Yes	
		Yes	
	→ Referrals?		
		Yes	
	\rightarrow Offers?	Yes	
	\rightarrow Challenges?	Yes	
	→ Resource Inventory management?	Not yet	
choi reje deal	he vacancy matching and referral policies/protocols specify how individual ce in housing options will be respected (allowing individuals and families to ct a referral without repercussions) and do they include processes specific to ing with vacancy referral challenges, concerns and/or disagreements (including sals of referrals)?	Yes	
,	re vacancies from the Resource Inventory filled using a Priority List, following /acancy matching and referral process?	Under development	
	The following questions are new for this year and ask about how the Priority List is generated. These questions are not used to assess progress with meeting minimum requirements for the 2019- 2024 cycle.		
	your HMIS used to generate the Priority List (i.e., person-specific data filtered the broader Unique Identifier List to a Priority List)?	No	

	The priority list is generated via the By Name List, held in an excel document. Since updates from BNL partner agencies is not as consistent and timely as needed, identifying which BNL clients are "document ready" for housing move-in (therefore on the Priority List) is also not consistently known at this time.				
	System Map				
The	following questions are new for this year and ask about the community's system map. assess progress with meeting minimum requirements for the 2019-2024	•			
2.19	a) Does your community have a current system map? A system map identifies and describes the service providers that participate in the Coordinated Access system.	Not yet			

	Service Navigation and Case Conferencing			
The f	following questions are new for this year and ask about service navigation and case co not used to assess progress with meeting minimum requirements for the 2019-			
2.20	a) Are there processes in place to ensure that people experiencing homelessness are being supported to move through the Coordinated Access process (referred to as service navigation and/or case conferencing)?			
	These processes should include expectations for the following:			
	→ Helping people to identify and overcome barriers to accessing appropriate services and/or housing-related resources.	Yes		
	 → Keeping people's information up-to-date in the HMIS (e.g., interaction with the system, housing history, as well as data used to inform eligibility and prioritization for housing-related resources). 	Yes		
	b) Have service navigation and case conferencing processes been documented and, if requested, can this documentation be made publicly available?	Yes		
	Section 2 Summary Tables			
	ble below provides a summary of the work your community has done so far to meet the ements for Coordinated Access and an HMIS.	e Reaching Home minimum		

	Completed	Started	Not Yet Started
Total	13	4	1

The table below shows the percentage of minimum requirements completed for each core component.

	Governance and Partnerships	HMIS	Access Points to Service	Triage and Assessment	Resource Inventory	Vacancy Matching and Referral with Prioritization
Percentage Completed	100%	100%	33%	100%	33%	67%

	Section 2 Summary Comment
2.21	Highlight efforts and/or issues related to the work your community has done over the last year related to the Reaching Home minimum requirements for Coordinated Access and an HMIS.
	Your response should include:
	 An update about your community's efforts to implement, maintain and/or improve the Coordinated Access system and the HMIS;

Information about changes made to the Coordinated Access system and/or HMIS related to one or

- more minimum requirements that were identified as "completed" in a previous CHR, if applicable; and,
- Information about how people with lived experience of homelessness were engaged or will be
- engaged in one or more aspects of the Coordinated Access system or HMIS (e.g., taking on a governance role).

Your Summary Comment is an opportunity to provide additional context about your Section 2 Summary Tables results.

1. The CAS-HIFIS Governance Committee successfully completed a CA and HIFIS policy review with updates and revisions incorporated into the Policy & Procedure documents to guide local activities. 2. AHANS is actively engaged in a HIFIS Enhancement project for NS that includes ensuring that all HIFIS agencies are configured properly to reflect their current services and resources. This HIFIS Enhancement project will also involve moving the communities to formalized data sharing via HIFIS to ensure that the only shared dataset is no longer the By Name List in HRM. This will also set the stage for the activation of the Coordinated Access module in HIFIS so that the BNL and the Priority Lists can be populated within the HIFIS platform. This HIFIS Enhancement project is a massive change management exercise for both Reaching Home and Provincially funded agencies. Ongoing conversations and training to improve data quality will be essential. 3. Part of the HIFIS Enhancement project also included the redevelopment of HIFIS training via online and on-demand training sessions that are specific to the positions as well as the programs and services completed. This training webpage is now readily available to all community partners using HIFIS. 4. To complete a more comprehensive Resource Inventory for Coordinated Access in HRM and throughout the Province, AHANS engaged with HelpSeeker to complete data scraping of datasets to identify all housing/homelessness response agencies as well as ancillary projects. 5. As a community, we will continue to work to engage with individuals with lived/living experience to better inform the work we do. **Please note: while the 2022-23 report indicated that items 2.9, 2.10, 2.13, 2.14, and 2.18 were complete, in this year's report we have identified these as under development/not yet started at the request of our CAB. As a whole, our community does not feel that there is an equal and equitable coordinated access process, in large part because provincially funded projects, which are the majority in HRM, have thus far not been fully aligned and committed to the coordinated access process. We are in communication with provincial partners with the goal to align their process with coordinated access by the end of 2025-26 fiscal year.

End of Section 2

	SECTION 3: OUTCOMES-BASED APPROACH SELF-ASSESSMEN	NT		
Part	Part A) Having person-specific data for homelessness that is real-time and comprehensive and being able to track progress against targets for outcomes			
	Step 1. Maintain person-specific data for homelessness			
3.1	a) Is person-specific data managed in a single database in your community (e.g., HIFIS)?	Yes		
	b) What is the database used to manage person-specific data?	Other database		
	c) Please describe the other database:			
	Our community uses a hybrid approach with the by name list kept in an excel document and a stored in HIFIS	all other information		
3.2	Does the dataset include people who are currently experiencing homelessness?	Yes		
3.3	Do people give their consent to be included in the dataset?	Yes		
3.4	Do people appear only once in the dataset?	Yes		
	Step 2. Maintain real-time data			
3.5	Is data about people experiencing homelessness updated monthly at minimum?	Yes		
	Step 3. Maintain comprehensive data			
3.6	a) Does the dataset include the following household types:			
	→ Single adults?	Yes		
	→ Unaccompanied youth?	Yes		

	→ Families?	Yes
	b) Does the dataset include family members like dependents, or just the head of household?	Only heads of households
3.7	Does the dataset include everyone that identifies as Indigenous that has interacted with the system in some way?	Yes
3.8	Are people added to the dataset as soon as they interact with the system?	Yes – people are added on the first day
3.9	Does the dataset include everyone staying in emergency shelter, including:	
	→ Permanent emergency shelter?	Yes
	→ Seasonal or temporary emergency shelter?	Yes
	→ Hotels/motel stays paid for by a service provider?	Yes
	→ Hostels?	Not applicable
	→ Domestic violence shelters?	Yes
3.10	Does the dataset include everyone being served through outreach at all locations (hotspots) where people are living unsheltered?	Yes
3.11	Does the dataset include everyone experiencing hidden homelessness that has interacted with the system in some way?	Yes
3.12	Does the dataset include everyone staying in transitional housing?	Yes
3.13	Does the dataset include individuals staying in public institutions who do not have a fixed address (e.g., jail or hospital) that have interacted with the system in some way?	Yes

3.14	Under the Outcomes-Based Approach, data comprehensiveness refers to data that reflects c homelessness.	ommunity-level				
	Compared to other sources of data about homelessness, how comprehensive is the person-specific dataset? Does it accurately reflect community-level homelessness? If not, which population groups may be missing?					
	Communities are strongly encouraged to use the <i>"Understanding Community-Level Data"</i> worksheet to help them reflect on the comprehensiveness of their dataset.					
	The HRM By Name List is currently still held in an excel spreadsheet. As the HIFIS enhancement project continues and will eventually host the HRM BNL, it is recognized that the HRM BNL is currently the only shared dataset for the community. This dataset is comprehensive since people experiencing homelessness that interact with the homelessness response system can consent to participate in Coordinated Access in their first interaction with the system. This BNL dataset includes people experiencing all forms of homelessness (sheltered, unsheltered provisionally accommodated and hidden homelessness) and tracks all mandatory demographic populations (single adults, youth and families) and includes Indigenous, African Nova Scotians (as this is an important demographic for our community based on our Community Plan), as well as people being discharged from institutions. Additionally, we track refugee/refugee claimants. HRM's updating processes for the BNL currently relies on monthly updates from agencies for the BNL clients that they support. AHANS provides monthly requests to each partner agency to update the status of clients and so the BNL is as up-to-date as the agency level updates permit.					
3.15	Consider your answers to questions 3.6 to 3.14. In your opinion, does your dataset include everyone currently experiencing homelessness in your community that has interacted with the system in some way?	Yes				
	Step 4: Track outcomes and progress against targets					
3.16	When did the dataset become real-time and comprehensive?					
	Note: If you do not know the exact day, select the first day of the month.					
	→ Year:	2022				

		01			
	→ Day:				
	Date the dataset				
	Has y	our data been in place	long enough to repo	rt on monthly outcome	es for:
	March 2020	March 2021	March 2022	March 2023	March 2024
	No	No	Yes	Yes	Yes
	Насу	our data boon in plac	e long enough to repo	rt on annual outcome	s for:
			e long enough to repo		5 101.
	2019-20	2020-21	2021-22	2022-23	2023-24
	No	No	No	Yes	Yes
0.47					
3.17	Can <u>monthly data</u> be g	generated for the follow	ing core outcomes:		
	a) Outcome #1: People	Yes			
	b) Outcome #2: People	Yes			
	c) Outcome #3: Return	Yes			
	d) Outcome #4: Indigenous peoples who experienced homelessness for at least one day (that month)				Yes

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	e) Outcome #5: People who experienced chronic homelessness for at least one day (that month)	Yes
3.18	Does your community have a target to report in Section 4 for the following monthly core out	omes:
	a) Outcome #1: People who experienced homelessness for at least one day (that month)	No
	b) Outcome #2 : People who were newly identified (that month)	No
	c) Outcome #3 : Returns to homelessness (that month)	No
	d) Outcome #4: Indigenous peoples who experienced homelessness for at least one day (that month)	No
	e) Outcome #5: People who experienced chronic homelessness for at least one day (that month)	No
3.19	Can annual data be generated for the following core outcomes:	
	a) Outcome #1: People who experienced homelessness for at least one day (that year)	Yes
	b) Outcome #2 : People who were newly identified (that year)	Yes
	c) Outcome #3 : Returns to homelessness (that year)	Yes
	d) Outcome #4: Indigenous peoples who experienced homelessness for at least one day (that year)	Yes
	e) Outcome #5: People who experienced chronic homelessness for at least one day (that year)	Yes
3.20	Does your community have a target to report in Section 4 for the following annual core outco	mes:
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a) Outcome #1: People who experienced homelessness for at least one day (that year)	No			
b) Outcome #2 : People who were newly identified (that year)	No			
c) Outcome #3 : Returns to homelessness (that year)	No			
 d) Outcome #4: Indigenous peoples who experienced homelessness for at least one day (that year) 	No			
e) Outcome #5: People who experienced chronic homelessness for at least one day (that year)	No			
Part B) Additional information				
These questions are not used to assess progress with meeting the requirement to transition to an Outcomes- Based Approach within the 2019-2024 funding cycle.				
Interaction with the homeless-serving system data ("activity" and "inactivity")				
Interaction with the homeless-serving system data ("activity" and "inactivit	y")			

Yes			
90 days			
Yes			
Somewhat complete			
e) What is the plan for improving data completeness in the year ahead?			
AHANS and its community partners are investing in a HIFIS data and reporting enhancement project currently to increase the data entry completed by agencies and ensure that data entered relates to outcome based reporting. Improvements to training and minimum reporting requirements should assist with data completeness in 2024-25.			
Housing history data			

 Communities need data about where people are staying or living to calculate inflows to homelessness and from homelessness. More specifically, person-specific data needs to track: Where people were <i>before</i> they became homeless (e.g., people who were evicted from supportive how and went to stay with a friend temporarily); and, Where people went <i>after</i> they exited homelessness (e.g., people who returned to a family home after being discharged from shelter). 			
 a) Is there a written policy/protocol that describes how housing history is documented (e.g., as part of a broader data entry guide for the HMIS)? The policy/protocol should: Define what it means to be "homeless" or "housed" (e.g., define a housing continuum that shows which housing types align with a status of "homeless" versus "housed"); Explain how to enter housing history consistently; and, Explain how to check for data quality (e.g., run a report that shows the percentage of clients that have complete housing history, so that "unknown" fields can be updated). 	Not yet		
b) Are processes in place to ensure that data about housing history is as complete as possible?	Not yet		
c) How complete is housing history data?	Somewhat complete		
d) What is the plan for improving data completeness in the year ahead?			
The HIFIS enhancement project is focusing on increasing data entry compliance within a service culture that amplifies documentation as an evidence informed practice. Emphasis on housing history as a mandatory data point that needs to be updated will be incorporated into Provincial and Reaching Home funding agreements as well as HIFIS Agreements with agencies. Additional HIFIS and outcome based reporting training is currently happening for community partners.			
Coordinated Access data			

3.23	a) Are processes in place to ensure that all relevant and necessary data for filling vacancies is complete? For example, is data used to determine if someone is eligible and can be prioritized for a vacancy complete for each person?	Yes				
	b) How complete is all relevant and necessary data for filling vacancies?	Complete				
	Demographic data					
3.24	a) Is the database used to track the following demographic data:					
	\rightarrow Indigenous identity (mandatory for Reaching Home)?	Yes				
	→ Age?	Yes				
	→ Household type (e.g., single or family)?	Yes				
	→ Gender identity?	Yes				
	\rightarrow Veteran status?	Yes				
	→ Other (please define)?					
	Please define other social demographics collected here:					
	African Nova Scotian and refugee/refugee claimants					

	b) How complete is data on Indigenous identity? For example, if someone is currently experiencing homelessness, is Indigenous identity always documented?		Somewhat complete		
	c) What is the plan for improving data completeness in the year ahead?		L		
	Historically, AHANS has customized all HIFIS data fields to incorporate African Nova S identity. As HIFIS national has now made racial identity a mandatory field, this should i can no longer be skipped at intake. As HIFIS data entry becomes more consistent with this data will become more complete.	mprov	e completeness as it		
	Timely data				
3.25	Once new information is available about a person, on average, how long does it take for changes to be updated in the database for the following:				
	\rightarrow Interaction with the system (e.g., changes from "active" to "inac	tive")?	Other (please define)		
	\rightarrow Housing history (e.g., changes from "homeless" to "housed")?		Other (please define)		
	Data that is relevant and necessary for Coordinated Access (e.) → data used to determine who is eligible and can be prioritized for vacancy)?	•	Other (please define)		
	Please define how long it takes, on average, for data to be updated:				
As we use a hybrid approach to data entry, changes to the excel BNL happen within a week of receiving the statu update from the supporting agency and changes to HIFIS happen as provided by community partners. This timeframe varies greatly depending on the agency.					

	Data collection and entry processes		
3.26	Describe the process(es) used by service providers to collect and enter data about people currently experiencing homelessness into the database.		
	All service providers have their own process for data entry. Some organizations have data end data entered by individual case workers. Outcome based reporting for Provincial and Reaching has resulted in Reporting Guides being developed that will streamline which HIFIS modules v data.	ng Home investments	
	Outcome reporting		
3.27	a) Beyond the five mandatory core outcomes under Reaching Home, do you wish to included any additional <u>monthly</u> community-level outcomes for this CHR? Reminder: Reporting on additional community-level outcomes is optional.	No	
	b) Beyond the five mandatory core outcomes under Reaching Home, do you wish to included any additional <u>annual</u> community-level outcomes for this CHR? Reminder: Reporting on additional community-level outcomes is optional.	No	
3.28	Beyond the mandatory reporting for March of every year, do you wish to report month-over- month data for one or more of the five mandatory core outcomes under Reaching Home in this CHR? Reminder: Reporting month-over-month community-level outcomes is optional.	No	
	Section 3 Summary Tables		

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

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

Step 4: Can report <u>monthly</u> outcomes and set targets using data (reporting monthly data in Section 4 is mandatory for 2023-24 CHRs)				
Dataset was in place as of January 1, 2024 (or earlier)	Can generate monthly data	Has set targets	Has an Outcomes- Based Approach in place	
	Outcome 1: Yes	Outcome 1: No		
	Outcome 2: Yes	Outcome 2: No		
Yes	Outcome 3: Yes	Outcome 3: No	No	
	Outcome 4: Yes	Outcome 4: No		
	Outcome 5: Yes	Outcome 5: No		

Step 4: Can report <u>annual</u> outcomes and set targets using data (reporting annual data in Section 4 is mandatory once annual data can be generated)			
Dataset was in place as of April 1, 2023 (or earlier)Can generate annual dataHas set targetsHas an Outcomes Based Approach i place			
	Outcome 1: Yes	Outcome 1: No	

Yes	Outcome 2: Yes	Outcome 2: No	
	Outcome 3: Yes	Outcome 3: No	No
	Outcome 4: Yes		
	Outcome 5: Yes	Outcome 5: No	

Section 3 Summary Comment 3.29 Highlight efforts and/or issues related to your community's work to implement, maintain or improve the Outcomes-Based Approach under Reaching Home. Your response should include: Efforts to start collecting, maintain and/or improve person-specific data over the last year; and. • Plans to start collecting, maintain and/or improve person-specific data over the next year. Your Summary Comment is an opportunity to provide additional context about your Section 3 Summary Tables results. It is our intention to move away from the current hybrid approach to data collection (HIFIS & Excel for BNL) and have all person specific data to be captured in HIFIS. This will be achieved through interagency data sharing. In addition to system level HIFIS and CAS enhancements, Reaching Home funded agencies that have hisotrically not complied with the HIFIS and CAS processes and policies have been notified via Conditional Contribution Agreements for 2024-25 to demonstrate their commitment to inacting all Reaching Home contractual activities and expectations.

End of Section 3

SECTION 4: COMMUNITY-LEVEL OUTCOMES AND TARGETS

Improving data quality and using results to drive the prevention and reduction of homelessness												
Note: In Section 4, any references to "data" are specific to your community's real-time, comprehensive person-specific data on homelessness.												
4.0 a ti l:	a) Under Reaching Home, data availability and accessibility refers to the process of ensuring that data is available to end-users, so that they can access it when, where and how they need it. Is data readily available and accessible, so that it can be used for Coordinated Access, the Outcomes-Based Approach and to drive the prevention and reduction of homelessness more broadly?								Not yet			
v	What is the plan for improving data availability and/or accessibility in the year ahead?											
ti	Interagency data sharing has been a struggle for agencies in HRM. HIFIS configuration historically has exacerbated the challenges in data sharing and efficient data entry. The HIFIS enhancement project is dedicated to improving this. With the NS government now also identifying the need to enter data into HIFIS and fill vacancies off the BNL hopefully data access and data sharing will improve.											
ii a C	 b) Under Reaching Home, data use refers to instances where data are reviewed to inform action in policy-making, program planning, and performance management, investment strategies, and/or service delivery. Over the last year, did your community use data to inform actions related to preventing and reducing homelessness? 									Somewhat, we sometimes used data to inform actions		
	 How did your community use data to inform actions? Please provide specific examples. Your response should include: Examples of how data was used to develop and/or update clear plans of action for reaching your reduction targets; and/or, Examples of how data was used to inform action in policy-making, program planning, performance management, investment strategies and/or service delivery. 											
c F c	Data is used to identify gaps in service to inform decisions about funding priorities. During 2023-24, AHANS used data from the BNL, especially those that remained on the list for many months to identify the need to prioritze Call for Proposal processes that targeted housing programs for people experiencing chronic homelessness and higher depths of need, given the current focus on housing low and low-moderate acuity via supportive housing, shelter and public housing programming. Additionally, some organizations who are very comprehensive in their data entry have secured additional funding by their ability to demonstrate need through their data.											
	U	sing outco	ome data t	o monitor	progress	against ta	argets – M	onthly Dat	a Reportii	ıg		
4.1(M) C	Outcome #	1: Fewer p	eople exp	perience h	omelessn	ess (home	elessness	is reduced	d overall)			
4.1(M) Outcome #1: Fewer people experience homelessness (homelessness is reduced overall) Given your answers in Section 3, you can report monthly result(s) for Outcome #1 using your person-specific data.											ic data.	
		March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	Target	
People wl experienc homeless at least or (that mon	ed ness for ne day			897	632	903						

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

Given your answers in Section 3, you can report annual result(s) for Outcome #1 using your person-specific data.										
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
People who experienced homelessness for at least one day (that year)				1597	1969					

Use outcome data to monitor progress against community-level core outcomes - Annual Data Reporting

]
b) How was	this Outco	ome genera	ated?	_	_	_	_		Reaching hity Outcom			b) How w	as this Out	come gene	rated?	_	_	_	_		Reaching hity Outcom	
					me from Mi ious CHR?		to March 2	023	No, no	ne of the d changed	lata has					r this Outc previous C		2019-20 to	2022-23 (where	No, no	ne of the da changed	ata has
d	d) Has the target you set changed from your previous CHR? No, the targ			rget has no	ot changed		d) Has the target you set changed from your previous CHR?							No, the target has not changed									
	e) Was "N/A" used for one or more data points? As a reminder, no cells should be left blank. If you cannot report data in a specific cell, please use "N/A".					e) Was "N/A" used for one or more data points? As a reminder, no cells should be left blank. If you cannot report data in a specific cell, please use "N/A".																	
a S	llso use the Summary.	e comment	box to pro	ovide any a	rovide cont dditional co	ontext on y	our data th	at you wisl	h to include	e in your C	HR		also use t Summary	he comme	nt box to p	rovide any	additional	context on	your data	that you wi	ish to inclu	applicable. de in your (CHR
H C u s	lomelessn Outreach ca Insheltered	ess initiativ apacity in H homeless acity during	ve resulted HRM has ir ness are c	in addition hcreased d onnected t	ss and enca al people s ramatically to the large 4, increasi	supported t and ensur r system o	hrough ten ed that the f care. The	nporary mo increased Provincial	otel accomi number of investmen	modations. f people ex its also inc	kperiencing reased		Homeless Outreach experience also incre	ness initiat capacity in ing unshel	ive resulte HRM has ered home er capacity	d in additio increased elessness a	nal people dramatical re connec	e supported ly and ens ted to the l	through to ured that tl arger syste	emporary n ne increase em of care.	notel accor ed number The Provi	Unsheltered nmodations of people ncial invest n shelters a	s. ments
4.2(M) O	Outcome #	2: Fewer	people we	re newly i	dentified (new inflov	vs to home	elessness	are reduc	ed)		4.2(A)	Outcome	#2: Fewe	· people w	ere newly	identified	(new inflo	ows to ho	nelessnes	s are redu	iced)	
Give	en your ans	swers in Se	ection 3, yo	ou can repo	ort monthly	result(s) fo	or Outcome	e #2 using j	your perso	n-specific	data.	Gi	ven your ar	iswers in S	ection 3, y	ou can rep	ort annual	result(s) fo	or Outcome	#2 using y	our persor/	n-specific d	ata.
		March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	Target			2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
People wh newly ider (that mont	ntified			38	38	163						People w newly ide (that yea	entified				542	1350					
]]
b) How was	this Outco	ome genera	ated?						Reaching hity Outcom			b) How w	as this Out	come gene	erated?						Reaching hity Outcom	

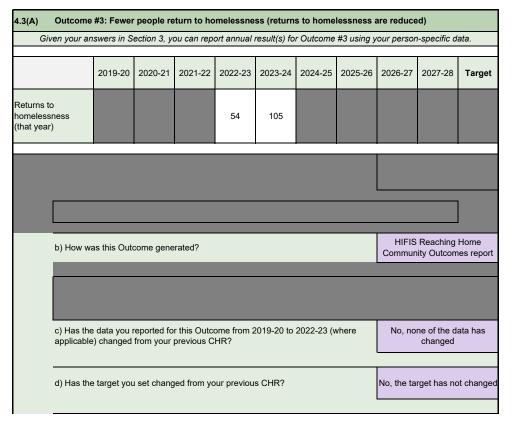
c) Has the c (where appl						o March 2	023	No, no	ne of the d changed	ata has	
d) Has the t	d) Has the target you set changed from your previous CHR?								No, the target has not changed		
,	e) Was "N/A" used for one or more data points? As a reminder, no cells should be eft blank. If you cannot report data in a specific cell, please use "N/A".								No, N/A was not used for one or more data point		
Please use also use the Summary.											
Reaching H temporary r response, H emergency increased n BNL.	notel accor IRM also h motel acco	mmodation as two larg mmodatio	is for peopl ge Provinci ns for hous	e experien ally fundec seholds. Th	icing home I Shelter Di nese increa	lessness ir version Se sed emerg	n HRM. In ervices pro gency shel	addition to grams that ter respons	the winter also provid es resulted	sheltering de d in an	
• • • •											
Outcome #		•			•				'		
iven your ans	swers in Se	ection 3, yo	ou can repo	ort monthly	result(s) fo	or Outcome	e #3 using	your perso	n-specific (data.	
	March	March	March	March	March	March	March	March	March	Target	

4.3(

	2020	2021	2022	2023	2024	2025	2026	2027	2028	Target
eturns to omelessness nat month)			3	2	11					
							-			-
										[
b) How was	this Outco	ome genera	ated?						Reaching ity Outcom	
c) Has the data you reported for this Outcome from March 2020 to March 2023 (where applicable) changed from your previous CHR?										
d) Has the t	arget you s	set change	d from you	r previous	CHR?			No, the ta	raet has n	

c) Has the data you reported for this Outcome from 2019-20 to 2022-23 (where applicable) changed from your previous CHR?	No, none of the data has changed
d) Has the target you set changed from your previous CHR?	No, the target has not changed
e) Was "N/A" used for one or more data points? As a reminder, no cells should be left blank. If you cannot report data in a specific cell, please use "N/A".	No, N/A was not used for one or more data point
Please use the following comment box to provide context to your responses in c), d) also use the comment box to provide any additional context on your data that you wi Summary.	
With increases in unsheltered homelessness and encampments in HRM, the Reachi Homelessness initiative resulted in additional people supported through temporary m	
Outreach capacity in HRM has increased dramatically and ensured that the increase	

experiencing unsheltered homelessness are connected to the larger system of care. The Provincial investments also increased shelter capacity during the winter of 2023-24, increasing the number of people in shelters and being added to HIFIS and the BNL.



e) Was "N/A" used for one or more data points? As a reminder, no cells should be left blank. If you cannot report data in a specific cell, please use "N/A".

No, N/A was not used for one or more data point

Please use the following comment box to provide context to your responses in c), d) and e), as applicable. You can also use the comment box to provide any additional context on your data that you wish to include in your CHR Summary

Severe economic poverty has been further exacerbated for vulnerable households in HRM with woefully inadequate income assistance rates and minimum wage rate not keeping up with the extremely high cost of living. The lack of investment in affordable housing, combined with severe poverty and failing health, mental health and addiction systems continue to push more highly vulnerable people into literal homelessness. Without increased investment in affordable and supportive housing to offset decades of minimal capital investment and very few rent subsidies for people at greatest risk, a 100% reduction in homelessness is unattainable.

4.4(M) Outcome #4: Fewer Indigenous peoples experience homelessness (Indigenous homelessness is reduced)

Given your ans	swers in Se	ection 3, yo	u can repo	ort monthly	result(s) fo	or Outcome	e #4 using	your perso	n-specific (data.
•			,		()			, , ,		
	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	Target
genous peoples o experienced nelessness for east one day at month)			N/A	94	127					
b) How was	this Outco		ted?	-	-	-	-		Reaching	
									ity Outcom	
c) Has the c (where appl						to March 2	023	No, no	ne of the d changed	ata has
d) Has the t	arget you s	set change	d from you	r previous	CHR?			No, the ta	rget has no	ot change
e) Was "N/A left blank. If							ould be		was used ore data po	
Please use	the comn	nent box b	elow to ex	plain why	/ "N/A" wa	s used.				
f) Were Indi the target, r							, setting		No	

e) Was "N/A" used for one or more data points? As a reminder, no cells should be left blank. If you cannot report data in a specific cell, please use "N/A".

No, N/A was not used for one or more data point

Please use the following comment box to provide context to your responses in c), d) and e), as applicable. You can also use the comment box to provide any additional context on your data that you wish to include in your CHR Summary.

Data for annual comparison is pulled from BNL in excel. Nova Scotia has not had a province-wide capacity building inititative for more than 8 years. Staff turnover in the sector has been at an all-time high since the global pandemic and monitoring visits to funded Reaching Home projects identified the need for comprehensive training, coaching and quality assurance for many housing projects. Agencies have a desire to maintain fidelity to evidence informed practices and approaches, training is required to assist with building/re-building service excellence. In addition to this, the competitive rental market in HRM and the lack of rental subsidies is placing many re-housed clients in heightened risk of losing their housing.

4.4(A) Outcome #4: Fewer Indigenous peoples experience homelessness (Indigenous homelessness is reduced) Given your answers in Section 3, you can report annual result(s) for Outcome #4 using your person-specific data. 2019-20 2020-21 2021-22 2022-23 2023-24 2024-25 2025-26 2026-27 2027-28 Target

nous peoples operienced essness for at ne day ear)				273	265					
b) How wa	as this Out	come gene	erated?						Reaching ity Outcom	
	e data you e) changed				2019-20 to	2022-23 (v	vhere	No, no	ne of the d changed	ata has
applicable		from your	previous C	HR?		2022-23 (v	vhere			
applicable d) Has the e) Was "N	e) changed	from your u set chang or one or m	previous C ged from yo	HR?	s CHR?	no cells sh		No, the ta	changed	ot chan

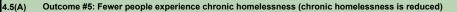
Please use the following comment box to provide context to your responses in c), d), e) and f), as applicable. You can also use the comment box to provide any additional context on your data that you wish to include in your CHR Summary.

As was seen in the overall number of people in HRM that experienced homelessness in 2023-24, the number of Indigenous people that experienced homelessness also increased when comparing March 2022 data and March 2023 data. Winter sheltered and enhanced outreach activities ensured that people experiencing hidden, sheltered and unsheltered homelessness were better connected to the system and therefore included in the increased number of Indigenous People experiencing homelessness.

	nswers in Se ote: As app									data.
	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	Target
eople who kperienced pronic prelessness for least one day nat month)			404	632	385					
										[
b) How was	s this Outco	ome genera	ated?						Reaching hity Outcom	
	data vou re					to March 2	023	No, no	ne of the d changed	ata has
c) Has the (where app		anged from	your previ						changeu	
	olicable) cha							No, the ta	rget has no	ot change
(where app	target you s	set change	d from you	r previous	CHR?		ould be	No, N/A		ed for one

Please use the following comment box to provide context to your responses in c), d), e) and f), as applicable. You can also use the comment box to provide any additional context on your data that you wish to include in your CHR Summary.

When examining year to year annual HIFIS data available on the number of Indigenous Peoples that experienced homelessness, the report identifies a 3% reduction in Indigenous Homelessness from 2022-23 to 2023-24. This minimal reduction may be tied to the opening of supportive housing units by the Indigenous Homelessness Community Entity. Based on BNL data and anecdotal information shared by community partners, it is anticipated that this reduction was not sustained. In April 2022, 109 people on the By Namel List identified as Indigenous. In April 2023, this number increased to 200 and in April of 2024 this number rose again to 270.



Given your answers in Section 3, you can report annual result(s) for Outcome #5 using your person-specific data. Note: As applicable, your target must be, at minimum, a 50% reduction from your baseline.

	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	Target
People who experienced chror comelessness for east one day that year)				820	764					
b) How	was this Out	come gene	erated?						Reaching ity Outcom	
c) Has t applical	he data you ble) changed	reported fo from your	r this Outco previous C	ome from 2 HR?	2019-20 to	2022-23 (v	vhere	No, no	ne of the da changed	ata has
d) Has t	he target yo	u set chang	jed from yc	our previou	s CHR?			No, the ta	rget has no	ot changed
	"N/A" used f k. If you can						nould be	,	vas not use nore data p	
	use the follow the comme ry.									

Given the reduced collaboration in system level initiatives in HRM between 2022-23 and early 2023-24, a reduction in HIFIS data entry ensued. Atthough HRM experienced an increase in the number of supportive housing units available for people experiencing homelessness in 2023-24, this increase in units - although serving primarily households with low and moderate acuity - supported the movement of more people off the BNL and the shelter rolls than in past years. AHANS is currently undertaking both HIFIS and Coordinated Access enhancement projects. Data entry into HIFIS should improve for all local service providers in the coming 12-18 months. However, although HRM experienced a decrease in chronic homelessness in 2023-24, it is unlikely that such gains will continue unless additional capital investments can continue. Given the current housing scarcity, the lack of available rental supplements and the woefully inadequate income assistance rates, HRM like all Canadian urban centres will struggle to achieve 100% reduction in Chronic Homelessness. In relation to the annual comparisons via HIFIS reports, the BNL dataset identifies a steadily increasing number of people experiencing chronic homelessness in HRM. In April of 2022, 404 active BNL clients were experiencing Chronic Homelessness. This number increased to 680 in April 2023 and 852 in April of 2024. Status updates for BNL clients did reduce in 2022-23 and in the first quarter of 2023-24. HRM experienced an increase in the number of supportive housing units available for people experiencing homelessness in 2023-24. This increase in units - although serving primarily households with low and moderate acuity - supported the movement of more people off the BNL and the shelter rolls than in past years. AHANS is currently undertaking both HIFIS and Coordinated Access enhancement projects. Data entry into HIFIS should improve for all local service providers in the coming 12: 18 months. However, although HRM experienced a decrease in chronic homelessness in 2023-24, it is unlikely that such gains will continue unless additional capital investments can continue. Given the current housing scarcity, the lack of available rents and the woefully inadequate income assistance rates, HRM like all Canadian urban centres will struggle to achieve 100% reduction in Chronic Homelessness.

End of Section 4a

End of Section 4a

COMMUNITY HOMELESSNESS REPORT SUMMARY

HALIFAX REGIONAL MUNCIPALITY

2023-2024

The Community Homelessness Report (CHR) is an annual Reaching Home reporting deliverable that supports communities to prevent and reduce homelessness using a more coordinated, systems-based and data-driven response. The CHR was designed to support local discussions and decision making, using all of the information about homelessness currently available at the community level. Communities are encouraged to use their CHR data to develop clear plans of action that help them to reach their homelessness reduction targets and to leverage the collective efforts of service providers working across the community, regardless of how they are funded.

This is a summary of the CHR for the 2023-24 reporting cycle. It shows the community's self-assessment of Reaching Home implementation, which includes the following key components:

• meaningful collaboration between Indigenous and non-Indigenous partners (see Section 1);

• community-level governance, coordinated service delivery (Coordinated Access) and use of a Homelessness Management Information System or HMIS (see Section 2); and,

• an Outcomes-Based Approach (tracking community-level outcomes and progress against targets using person-specific data; see Section 3).

If the community was able to report on outcomes and targets, this CHR Summary also includes results for each of the five core outcomes of Reaching Home (see Section 4).

Section 1. Community Context – Collaboration between Indigenous and Non-Indigenous Partners

	→ Coordinated Access:	Yes					
	→ HMIS:	Yes					
	→ Outcomes-Based Approach:	Yes					
Describe this collaboration in more details	ail.						
fic to the completion of this Community Homelessness Report (CHR), did ongoing, meaningful ation take place with the local Indigenous organizations, including those that sit on your CAB?							
aboration take place with the local Indigenous	organizational partners, we have room for improvement and we will continue to work on our collaborative relationsh with all Indigenous partners. fic to the completion of this Community Homelessness Report (CHR), did ongoing, meaningful ation take place with the local Indigenous organizations, including those that sit on your CAB? No Describe how this collaboration will happen over the coming year in more detail. No The Indigenous Homelessness (IH) Community Entity (CE) is a member of the Designated Community (DC) Community Advisory Board (CAB), the Coordinated Access and HIFIS Governance Committee and the IH CE is an active user of the Homeless Individuals and Families Information System (HIFIS) in Halifax Regional Municipality (HRM). IH CE team members have therefore been included in the redevelopment of policies and procedures governing the Coordinated Access System (CAS), HIFIS and the rebuilding of community relationships. The data entered by the IH CE as a result, is included in the Community Homelessness Report (CHR) but a dedicated meeting to discuss the results of the CHR was not facilitated beyond the CAB discussions and feedback opportunities. Prior to final submission, the Community Advisory Board and the governance committees provided						

Section 2 Summary Tables

The table below provides a summary of the work your community has done so far to meet the Reaching Home minimum requirements for Coordinated Access and an HMIS under the 2019-2024 Reaching Home funding cycle.

	Completed	Started	Not Yet Started
Number of minimum requirements	13	4	1

The table below shows the percentage of minimum requirements completed for each core Coordinated Access component.

Governance and Partnerships	HMIS	Access Points to Service	Triage and Assessment	Resource Inventory	Vacancy Matching and Referral with Prioritization
100%	100%	33%	100%	33%	67%

Section 2 Summary Comment

Highlight efforts and/or issues related to the work your community has done over the last year related to the Reaching Home minimum requirements for Coordinated Access and an HMIS.

1. The CAS-HIFIS Governance Committee successfully completed a CA and HIFIS policy review with updates and revisions incorporated into the Policy & Procedure documents to guide local activities. 2. AHANS is actively engaged in a HIFIS Enhancement project for NS that includes ensuring that all HIFIS agencies are configured properly to reflect their current services and resources. This HIFIS Enhancement project will also involve moving the communities to formalized data sharing via HIFIS to ensure that the only shared dataset is no longer the By Name List in HRM. This will also set the stage for the activation of the Coordinated Access module in HIFIS so that the BNL and the Priority Lists can be populated within the HIFIS platform. This HIFIS Enhancement project is a massive change management exercise for both Reaching Home and Provincially funded agencies. Ongoing conversations and training to improve data quality will be essential. 3. Part of the HIFIS Enhancement project also included the redevelopment of HIFIS training via online and on-demand training sessions that are specific to the positions as well as the programs and services completed. This training webpage is now readily available to all community partners using HIFIS. 4. To complete a more comprehensive Resource Inventory for Coordinated Access in HRM and throughout the Province, AHANS engaged with HelpSeeker to complete data scraping of datasets to identify all housing/homelessness response agencies as well as ancillary projects. 5. As a community, we will continue to work to engage with individuals with lived/living experience to better inform the work we do. **Please note: while the 2022-23 report indicated that items 2.9, 2.10, 2.13, 2.14, and 2.18 were complete, in this year's report we have identified these as under development/not yet started at the request of our CAB. As a whole, our community does not feel that there is an equal and equitable coordinated access process, in large part because provincially funded projects, which are the majority in HRM, have thus far not been fully aligned and committed to the coordinated access process. We are in communication with provincial partners with the goal to align their process with coordinated access by the end of 2025-26 fiscal year.

Section 3. Outcomes-Based Approach Self-Assessment

Section 3 Summary Table

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

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

Step 4: Can report monthly outcomes and set targets using data (reporting monthly data in Section 4 is mandatory for 2023-24 CHRs)			
Dataset was in place as of January 1, 2024 (or earlier)	Can generate monthly data	Has set targets	Has an Outcomes-Based Approach in place
Yes	Outcome 1: Yes	Outcome 1: No	
	Outcome 2: Yes	Outcome 2: No	
	Outcome 3: Yes	Outcome 3: No	No
	Outcome 4: Yes	Outcome 4: No	
	Outcome 5: Yes	Outcome 5: No	

Step 4: Can report annual outcomes and set targets using data (reporting annual data in Section 4 is mandatory once annual data can be generated)			
Dataset was in place as of April 1, 2023 (or earlier)	Can generate annual data	Has set targets	Has an Outcomes-Based Approach in place
	Outcome 1: Yes	Outcome 1: No	
Yes	Outcome 2: Yes	Outcome 2: No	
	Outcome 3: Yes	Outcome 3: No	No
	Outcome 4: Yes	Outcome 4: No	
	Outcome 5: Yes	Outcome 5: No	

Summary Comment

Highlight efforts and/or issues related to your community's work to implement, maintain or improve the Outcomes-Based Approach under Reaching Home.

It is our intention to move away from the current hybrid approach to data collection (HIFIS & Excel for BNL) and have all person specific data to be captured in HIFIS. This will be achieved through interagency data sharing. In addition to system level HIFIS and CAS enhancements, Reaching Home funded agencies that have hisotrically not complied with the HIFIS and CAS processes and policies have been notified via Conditional Contribution Agreements for 2024-25 to demonstrate their commitment to inacting all Reaching Home contractual activities and expectations.

Additional information - Timely data

Once new information is available about a person, on average, how long does it take for changes to be updated in the database for the following:

\rightarrow Interaction with the system (e.g., changes from "active" to "inactive")?	Other (please define)
→ Housing history (e.g., changes from "homeless" to "housed")?	Other (please define)
→ Data that is relevant and necessary for Coordinated Access (e.g., data used to determine who is eligible and can be prioritized for a vacancy)?	Other (please define)

Please define how long it takes, on average, for data to be updated:

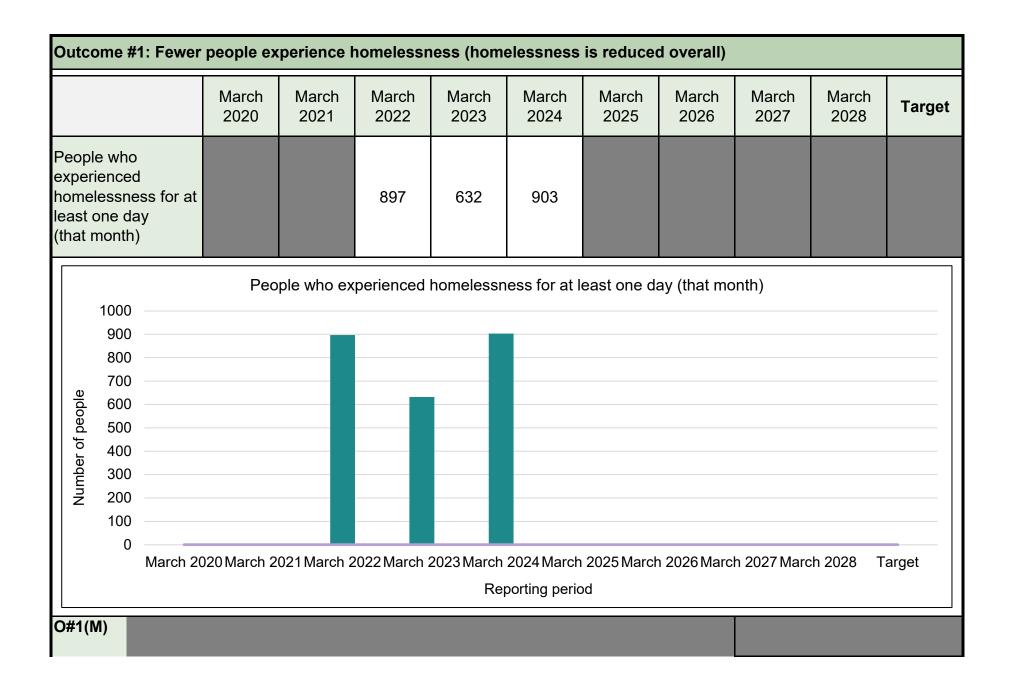
As we use a hybrid approach to data entry, changes to the excel BNL happen within a week of receiving the status update from the supporting agency and changes to HIFIS happen as provided by community partners. This timeframe varies greatly depending on the agency.

Additional information - Data collection and entry processes

Describe the process(es) used by service providers to collect and enter data about people currently experiencing homelessness into the database.

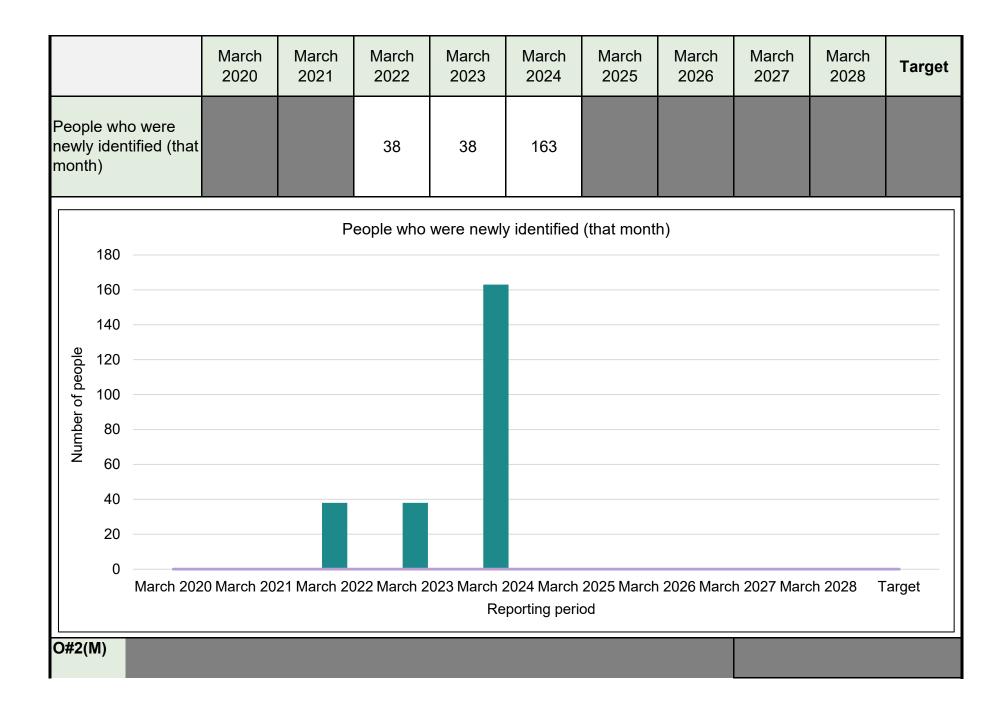
All service providers have their own process for data entry. Some organizations have data entry clerks, others have data entered by individual case workers. Outcome based reporting for Provincial and Reaching Home investments has resulted in Reporting Guides being developed that will streamline which HIFIS modules will be used to collect data.

Section 4. Community-Level Outcomes and Targets – Monthly



How was this Outcome generated?	HIFIS Reaching Home Community Outcomes report	
Has the data you reported for this Outcome from March 2020 to March 2023 changed from your previous CHR?	No, none of the data has changed	
Has the target you set changed from your previous CHR?	No, the target has not changed	
Was "N/A" was used for one or more data points?	No, N/A was not used for one or more data point	
Please use the following comment box to provide context on your data.		
With increases in unsheltered homelessness and encampments in HRM, the Reaching Home Unsheltered Homelessness initiative resulted in additional people supported through temporary motel accommodations. Outreach capacity in HRM has increased dramatically and ensured that the increased number of people experiencing unsheltered homelessness are connected to the larger system of care. The Provincial investments also increased shelter capacity during the winter of 2023-24, increasing the number of people in shelters and being added to HIFIS and the BNL.		

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



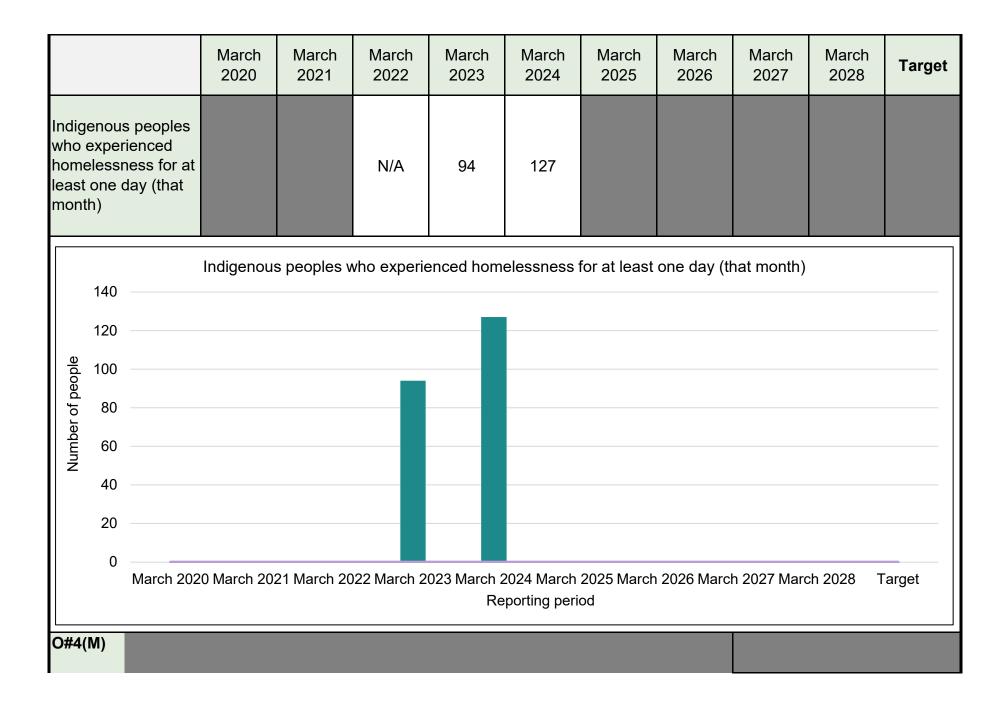
How was this Outcome generated?	HIFIS Reaching Home Community Outcomes report	
Has the data you reported for this Outcome from March 2020 to March 2023 changed from your previous CHR?	No, none of the data has changed	
Has the target you set changed from your previous CHR?	No, the target has not changed	
Was "N/A" was used for one or more data points?	No, N/A was not used for one or more data point	
Please use the following comment box to provide context on your data.		
Reaching Home Unsheltered Homelessness Response as well as Provincial investments increased shelter and temporary motel accommodations for people experiencing homelessness in HRM. In addition to the winter sheltering response, HRM also has two large Provincially funded Shelter Diversion Services programs that also provide emergency motel accommodations for households. These increased emergency shelter responses resulted in an increased number of people connecting with funded agencies and having their information captured in HIFIS and/or BNL.		

Outcome #3: Fewer people return to homelessness (returns to homelessness are reduced)



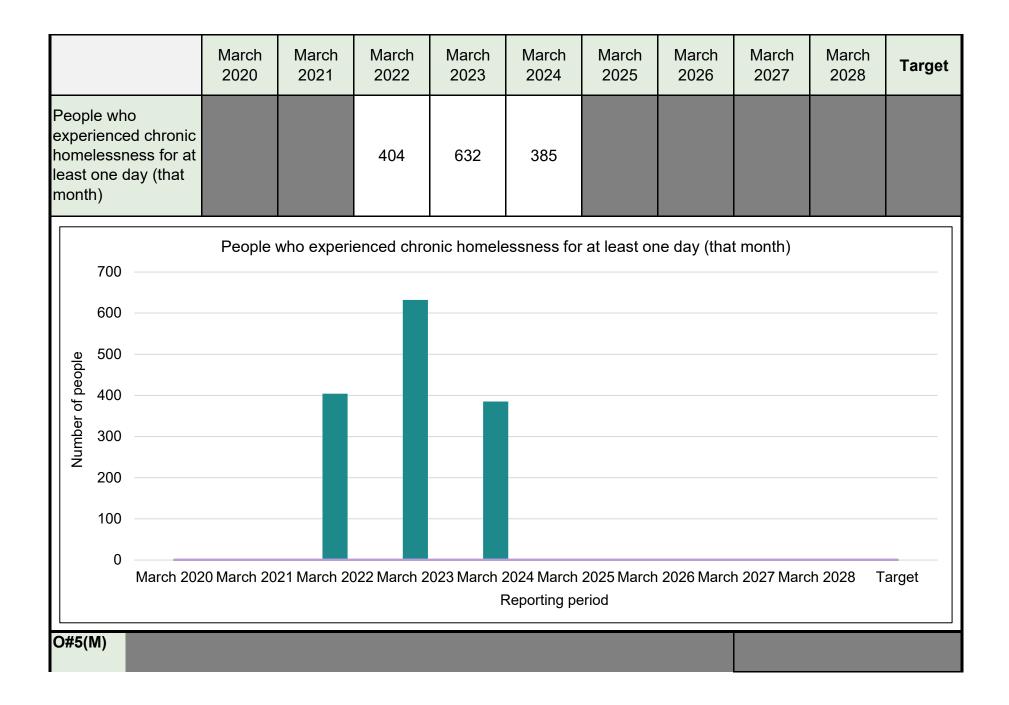
How was this Outcome generated?	HIFIS Reaching Home Community Outcomes report	
Has the data you reported for this Outcome from March 2020 to March 2023 changed from your previous CHR?	No, none of the data has changed	
Has the target you set changed from your previous CHR?	No, the target has not changed	
Was "N/A" was used for one or more data points?	No, N/A was not used for one or more data point	
Please use the following comment box to provide context on your data.		
Severe economic poverty has been further exacerbated for vulnerable households in HRM with woefully inadequate income assistance rates and minimum wage rate not keeping up with the extremely high cost of living. The lack of investment in affordable housing, combined with severe poverty and failing health, mental health and addiction systems continue to push more highly vulnerable people into literal homelessness. Without increased investment in affordable and supportive housing to offset decades of minimal capital investment and very few rent subsidies for people at greatest risk, a 100% reduction in homelessness is unattainable.		

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



How was this Outcome generated?	HIFIS Reaching Home Community Outcomes report	
Has the data you reported for this Outcome from March 2020 to March 2023 changed from your previous CHR?	No, none of the data has changed	
Has the target you set changed from your previous CHR?	No, the target has not changed	
Was "N/A" was used for one or more data points?	Yes, N/A was used for one or more data point	
Were Indigenous partners engaged in the process of setting the baseline, setting the target, reporting on the outcome and/or interpreting the results?	No	
Please use the following comment box to provide context on your data.		
As was seen in the overall number of people in HRM that experienced homelessness in 2023-24, the number of Indigenous people that experienced homelessness also increased when comparing March 2022 data and March 2023 data. Winter sheltered and enhanced outreach activities ensured that people experiencing hidden, sheltered and unsheltered homelessness were better connected to the system and therefore included in the increased number of Indigenous People experiencing homelessness.		

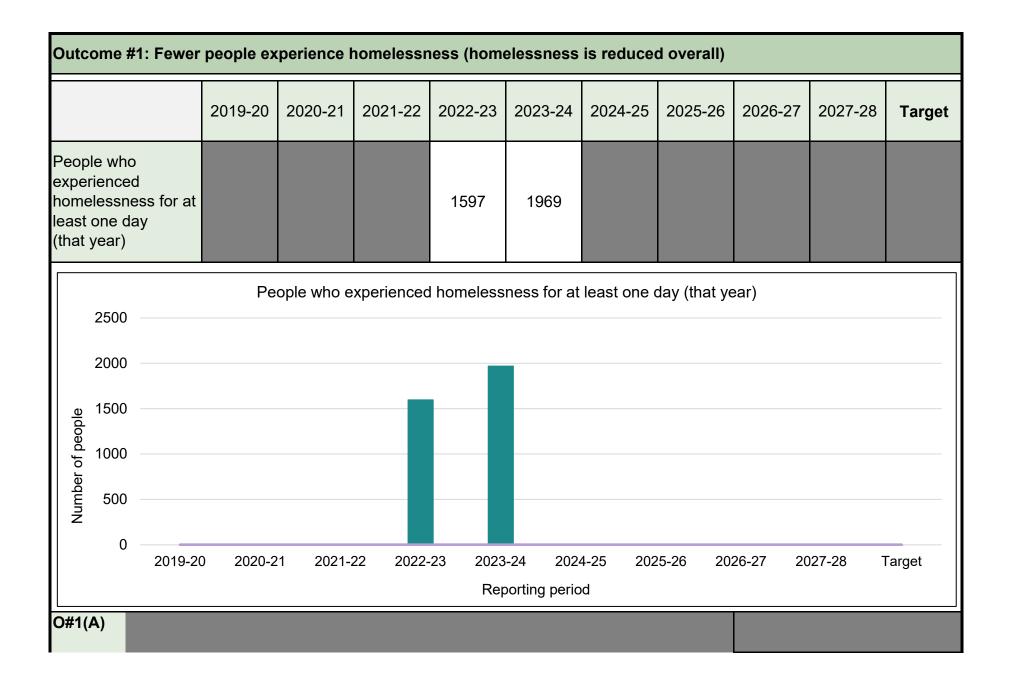
Outcome #5: Fewer people experience chronic homelessness (chronic homelessness is reduced)



How was this Outcome generated?	HIFIS Reaching Home Community Outcomes report	
Has the data you reported for this Outcome from March 2020 to March 2023 changed from your previous CHR?	No, none of the data has changed	
Has the target you set changed from your previous CHR?	No, the target has not changed	
Was "N/A" was used for one or more data points?	No, N/A was not used for one or more data point	
Please use the following comment box to provide context on your data.		
Given the reduced collaboration in system level initiatives in HRM between 2022-23 and early 2023-24, a reduction in HIFIS data entry ensued. Although HRM experienced an increase in the number of supportive housing units available for people experiencing homelessness in 2023-24, this increase in units - although serving primarily households with low and moderate acuity - supported the movement of more people off the BNL and the shelter rolls than in past years. AHANS is currently undertaking both HIFIS and Coordinated Access enhancement projects. Data entry into HIFIS should improve for all local service providers in the coming 12-18 months. However, although HRM experienced a decrease in chronic homelessness in 2023-24, it is unlikely that such gains will continue unless		

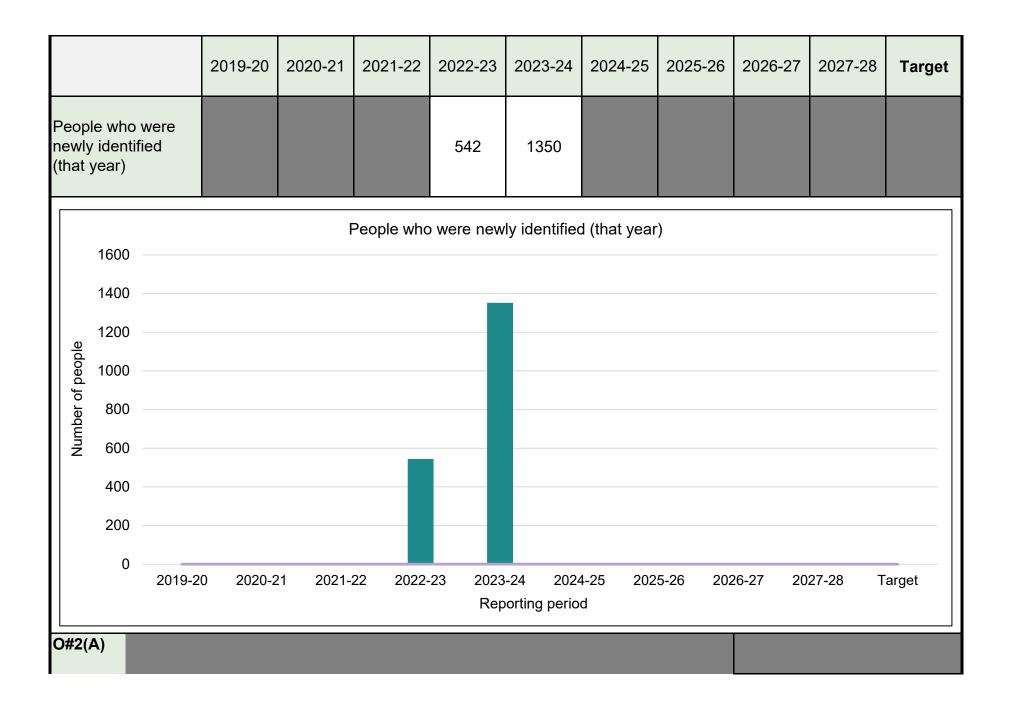
additional capital investments can continue. Given the current housing scarcity, the lack of available rental supplements and the woefully inadequate income assistance rates, HRM like all Canadian urban centres will struggle to achieve 100% reduction in Chronic Homelessness.

Section 4. Community-Level Outcomes and Targets – Annual



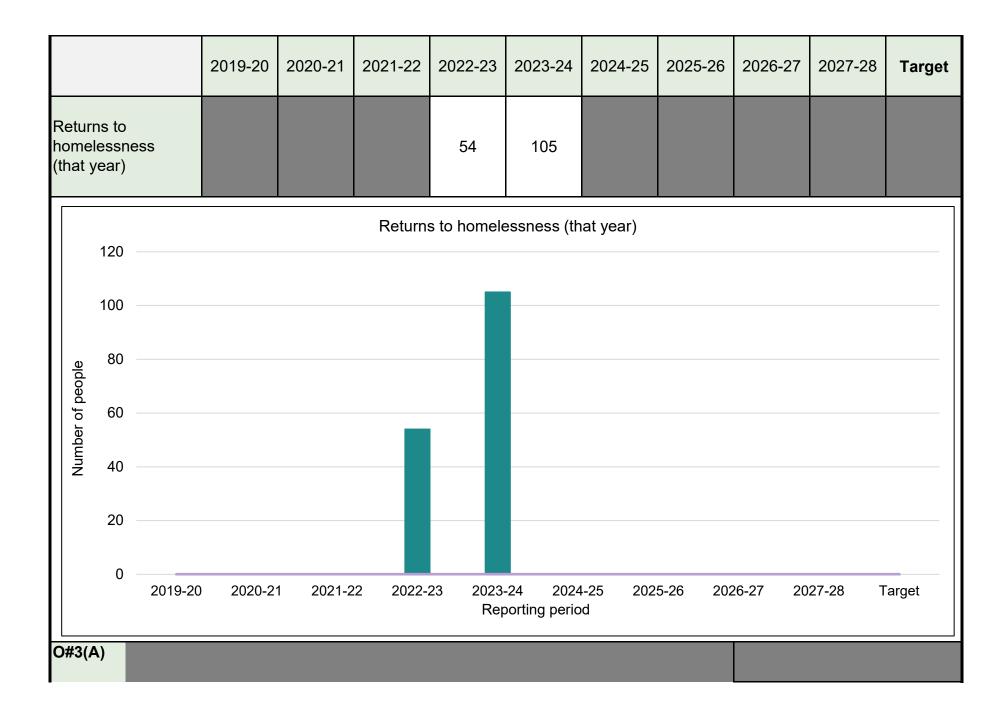
How was this Outcome generated?	HIFIS Reaching Home Community Outcomes report	
Has the data you reported for this Outcome from 2019-20 to 2022-23 changed from your previous CHR?	No, none of the data has changed	
Has the target you set changed from your previous CHR?	No, the target has not changed	
Was "N/A" was used for one or more data points?	No, N/A was not used for one or more data point	
Please use the following comment box to provide context on your data.		
With increases in unsheltered homelessness and encampments in HRM, the Reaching Home Unsheltered Homelessness initiative resulted in additional people supported through temporary motel accommodations. Outreach capacity in HRM has increased dramatically and ensured that the increased number of people experiencing unsheltered homelessness are connected to the larger system of care. The Provincial investments also increased shelter capacity during the winter of 2023-24, increasing the number of people in shelters and being added to HIFIS and the BNL.		

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



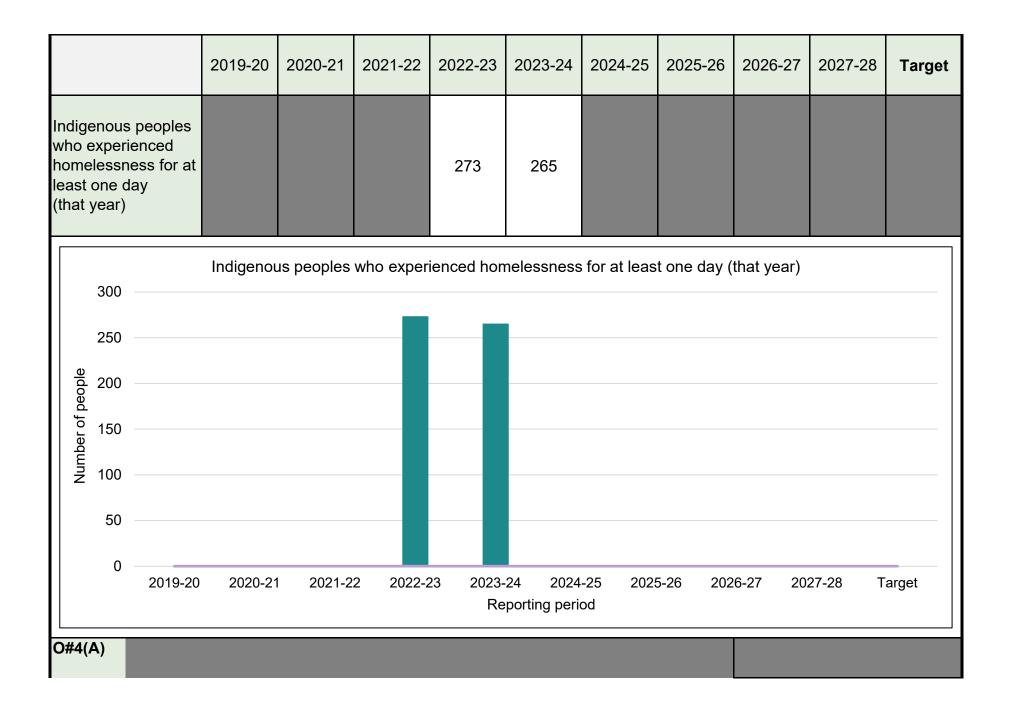
How was this Outcome generated?	HIFIS Reaching Home Community Outcomes report	
Has the data you reported for this Outcome from 2019-20 to 2022-23 changed from your previous CHR?	No, none of the data has changed	
Has the target you set changed from your previous CHR?	No, the target has not changed	
Was "N/A" was used for one or more data points?	No, N/A was not used for one or more data point	
Please use the following comment box to provide context on your data.		
With increases in unsheltered homelessness and encampments in HRM, the Reaching Home Unsheltered Homelessness initiative resulted in additional people supported through temporary motel accommodations. Outreach capacity in HRM has increased dramatically and ensured that the increased number of people experiencing unsheltered homelessness are connected to the larger system of care. The Provincial investments also increased shelter capacity during the winter of 2023-24, increasing the number of people in shelters and being added to HIFIS and the BNL.		

Outcome #3: Fewer people return to homelessness (returns to homelessness are reduced)



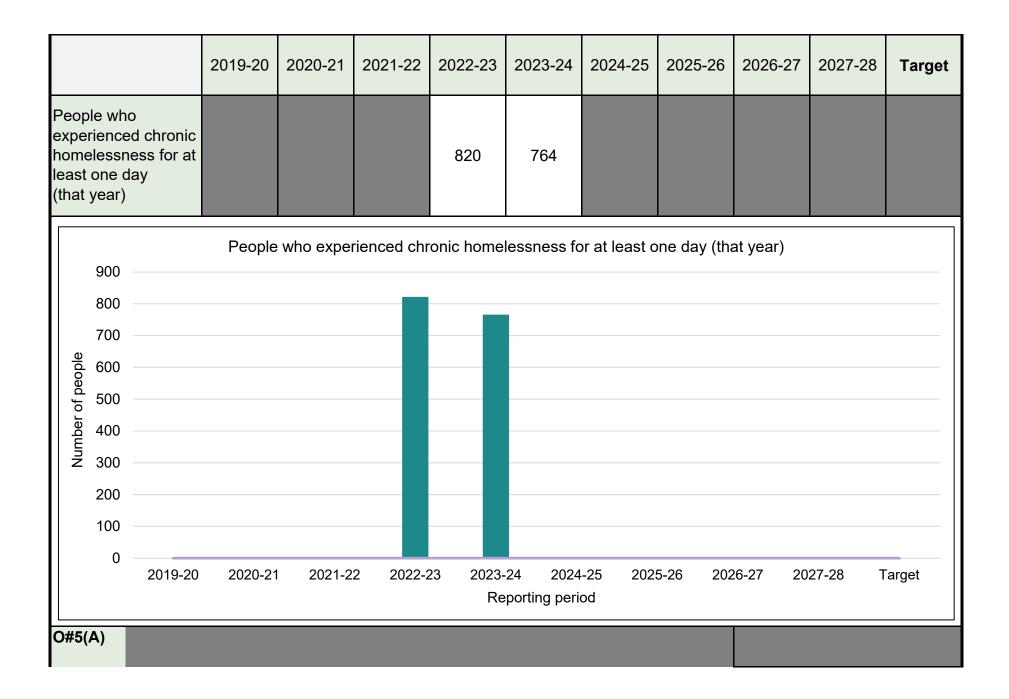
How was this Outcome generated?	HIFIS Reaching Home Community Outcomes report	
Has the data you reported for this Outcome from 2019-20 to 2022-23 changed from your previous CHR?	No, none of the data has changed	
Has the target you set changed from your previous CHR?	No, the target has not changed	
Was "N/A" was used for one or more data points?	No, N/A was not used for one or more data point	
Please use the following comment box to provide context on your data.		
Data for annual comparison is pulled from BNL in excel. Nova Scotia has not had a province-wide capacity building inititative for more than 8 years. Staff turnover in the sector has been at an all-time high since the global pandemic and monitoring visits to funded Reaching Home projects identified the need for comprehensive training, coaching and quality assurance for many housing projects. Agencies have a desire to maintain fidelity to evidence informed practices and approaches, training is required to assist with building/re-building service excellence. In addition to this, the competitive rental market in HRM and the lack of rental subsidies is placing many re-housed clients in heightened risk of losing their housing.		

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



How was this Outcome generated?	HIFIS Reaching Home Community Outcomes report	
Has the data you reported for this Outcome from 2019-20 to 2022-23 changed from your previous CHR?	No, none of the data has changed	
Has the target you set changed from your previous CHR?	No, the target has not changed	
Was "N/A" was used for one or more data points?	No, N/A was not used for one or more data point	
Were Indigenous partners engaged in the process of setting the baseline, setting the target, reporting on the outcome and/or interpreting the results?	No	
Please use the following comment box to provide context on your data.		
When examining year to year annual HIFIS data available on the number of Indigenous Peoples that experienced homelessness, the report identifies a 3% reduction in Indigenous Homelessness from 2022-23 to 2023-24. This minimal reduction may be tied to the opening of supportive housing units by the Indigenous Homelessness Community Entity. Based on BNL data and anecdotal information shared by community partners, it is anticipated that this reduction was not sustained. In April 2022, 109 people on the By Namel List identified as Indigenous. In April 2023, this number increased to 200 and in April of 2024 this number rose again to 270.		

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



How was this Outcome generated?	HIFIS Reaching Home Community Outcomes report			
Has the data you reported for this Outcome from 2019-20 to 2022-23 changed from your previous CHR?	No, none of the data has changed			
Has the target you set changed from your previous CHR?	No, the target has not changed			
Was "N/A" was used for one or more data points?	No, N/A was not used for one or more data point			
Please use the following comment box to provide context on your data.				
In relation to the annual comparisons via HIFIS reports, the BNL dataset identifies a steadily increasing number of people experiencing chronic homelessness in HRM. In April of 2022, 404 active BNL clients were experiencing Chronic Homelessness. This number increased to 680 in April 2023 and 852 in April of 2024. Status updates for BNL clients did reduce in 2022-23 and in the first quarter of 2023-24. HRM experienced an increase in the number of supportive housing units available for people experiencing homelessness in 2023-24. This increase in units - although serving primarily households with low and moderate acuity - supported the movement of more people off the BNL and the shelter rolls than in past years. AHANS is currently undertaking both HIFIS and Coordinated Access				

enhancement projects. Data entry into HIFIS should improve for all local service providers in the coming 12-18 months. However, although HRM experienced a decrease in chronic homelessness in 2023-24, it is unlikely that such gains will continue unless additional capital investments can continue. Given the current housing scarcity, the lack of available rental supplements and the woefully inadequate income assistance rates, HRM like all Canadian

urban centres will struggle to achieve 100% reduction in Chronic Homelessness.

Community Advisory Board (CAB)

Designated Communities/Territorial Homelessness

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

Sector	CAB Members (name and/or organization)
Infrastructure Canada (Ex-Officio Member)	Tanua Rorden (HICC)
Community Entity (Ex-Officio Member)	Michael Kanalen (AHANS)
Provincial/Territorial government	Lisa Ryan (Dept Community Services)
Local/Municipal government	Max Charryin (HRM)
Indigenous government	Max Chadero Liber
Individuals with lived experience of homelessness	
Indigenous Peoples, nations and organizations, Friendship Centres	Pam Glode-Descochers (UNFC)
Indigenous housing organizations	
Youth and/or child serving organizations, including Child Welfare agencies	
Organizations serving survivors of domestic violence and their families	
Seniors and senior serving organizations	
Newcomers and newcomer serving organizations	
The private sector	Jeff Karabapow (Dalpousie)
Police and correctional services	
Landlord associations and/or the housing sector	
Health organizations, including hospitals and other public health institutions, and organizations focused on mental health and addictions	Nora Dickson (NSHealth)
Veterans Affairs Canada and/or Veterans-serving	
organizations	
Organizations serving individuals experiencing, or	Sheri Lecker (Adsumfor Womenachildren Mila Suokonautin (YWCA Halifax)
at risk of experiencing homelessness	Mija Suokonautin (YWCA Halifax)
Other	rm that the above nembers or the CAB have reviewed

the attached Community Homelessness Report, and that a majority of CAB members approve of its content.

Name Kevin Hooper	Signature	DD) October 2, 202
Michael Kabalen	Max & Kak	October 3, 2024
Name	Signature	DD)
Name	Signature	DD)

Community Advisory Board (CAB)

Designated Communities/Territorial Homelessness

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Sector	CAB Members (name and/or organization)
Infrastructure Canada (Ex-Officio Member)	
Community Entity (Ex-Officio Member)	
Provincial/Territorial government	
Local/Municipal government	
Indigenous government	
Individuals with lived experience of homelessness	
Indigenous Peoples, nations and organizations,	
Friendship Centres	
Indigenous housing organizations	
Youth and/or child serving organizations, including	
Child Welfare agencies	
Organizations serving survivors of domestic	
violence and their families	
Seniors and senior serving organizations	
Newcomers and newcomer serving organizations	
The private sector	
Police and correctional services	
Landlord associations and/or the housing sector	
Health organizations, including hospitals and other	
public health institutions, and organizations	
focused on mental health and addictions	
Veterans Affairs Canada and/or Veterans-serving	
organizations	
Organizations serving individuals experiencing, or	
at risk of experiencing homelessness	
Other	

CAB Chairs or Co-Chairs (if applicable): I anirm that the above members of the CAB have reviewed the attached Community Homelessness Report, and that a majority of CAB members approve of its content.

Kevin Hooper	zun Hooper	2/10/2025
Name	Signature 44062CA3653646F	DD)
Michael Kabalen	DocuSigned by:	2/10/2025
Name	Signature	
Name	Signature	DD)