Reaching Home: Canada's Homelessness Strategy

Community Homelessness Report

Regional Municipality of Wood Buffalo

2024-2025

TEMPLATE FOR COMMUNITIES

SECTION 1: COMMUNITY CONTEXT

Overview

CHR 1

Highlight any efforts and/or issues related to the work that your community has done to **prevent and/or reduce homelessness** and **improve access to safe, appropriate housing** over the last year.

Your response could include information about:

- Homelessness prevention and shelter diversion efforts;
- Housing move-ins;
- New investments in housing-related resources;
- Gaps in services;
- Collaboration with other sectors;
- Efforts to address homelessness for specific groups (e.g., youth); and/or,
- Efforts to meet Reaching Home minimum requirements (including a brief explanation if a minimum requirement was assessed as “Completed” in a previous CHR, but is now “Under development” or “Not yet started”).

Building and maintaining relationships and systems navigation continues to be a top priority for the Community Entity (CE). Various working groups (e.g. Encampment working groups and processes, procedures and responses have been developed in order to provide multi-sector support to individuals experiencing homelessness. For example, the CE, in partnership with the Royal Canadian Mounted Police (RCMP), Municipal Enforcement (Bylaw), and Community Outreach Teams meet on a monthly basis to discuss prevention and reduction methods for individuals living rough. With the continued increase of encampments in 2023-2024 fiscal in Fort McMurray, an encampment strategy was developed to collaboratively support individuals living rough and prevent future episodes of living rough. This strategy although effective, is now under review by the Encampment Working Group as there has been some changes to the

	system. As a response in 2024-2025, there was a successful decampment that took place where individuals were offered supports to housing. Ultimately, the individuals were housed. Encampment activity is posted on the Regional Municipality of Wood Buffalo (RMWB) website for people to access. Encampments have been on the decline over 2024-2025 due to the partnership collaborative response with bylaw, community services and the CE. The CE continues to monitor data for trends including the inflationary effects on chronic homelessness in the reported data. Opportunities for prevention include a reduction in chronic homelessness by increasing diversion supports, increasing prevention programs, focusing on the Recovery Oriented System of Care, and developing flexibility within programs and housing models to prevent homelessness. This fiscal, the RMWB was not supported with Unsheltered Housing Funding; however, in the spring of the 2024-2025 fiscal the RMWB received Stabilization Funding which was used to support prevention, housing and client needs programming. Addressing the emerging priorities identified by the community enables proactive measures to be taken and serves to support reaching the goal of Functional Zero ending chronic homelessness. The CE continues to focus on increasing metrics for tracking the diversion program's outcomes and recidivism rates. The Diversion Program diverts individuals from seeking and staying at the emergency shelters by providing individualized support to families and individuals who are entering the shelter system within RMWB. The diversion coordinator helps individuals and families seeking shelter to explore safe and appropriate

alternate housing arrangements and, if necessary, connect them with services and financial assistance to help people find secure housing. The diversion coordinator focuses on people as they are applying for entry into shelters, ensuring alternative and immediate housing arrangements are fully explored and supported before completing an intake for shelter space. The Centralized Intake (CI) Program works collaboratively with agencies (both funded and non-funded) to meet the needs of the community's homeless population. They do so by providing individualized participant-focused approaches including meeting the client where they are both physically and emotionally with the utmost respect and in a culturally sensitive manner. The CI program works with participants during the transitional phase from unhoused to housed. The Eviction Prevention Program (EPP) is a community program designed to assist individuals who are facing eviction and who do not participate in the housing programs. The objective is to identify barriers and establish an action plan to maintain a tenancy. From the first intake in the program, the team began a collective community approach with other service agencies to provide wrap-around support quickly and effectively to prevent eviction. Each case has an individualized approach. The service delivery mirrors the Housing First Program case management on a less intense level and at a more rapid pace. The Outreach Program works with individuals with low acuity that do not qualify for Housing First programming. The program assists people with finding secure and sustainable housing, employment or an income source and connecting them with community resources. The main goal of the Outreach program is to help individuals reach their housing goals and help prevent them from falling into chronic homelessness. Outreach also supports previous participants from Housing First as a method of preventing participants from returning to homelessness. The Housing First (HF) Program provides intensive case management and wrap-around support under the HF philosophy for mid to high-acuity chronically homeless adults and families referred to the funded agency by the CI Program. With the support and direction of a team lead, HF coordinators deliver an intensive case management model that is both goal-oriented and client-centered, with a focus on life skills development. The goal of the program is to assist participants in achieving and maintaining safe, affordable, suitable, and sustainable housing. Active participation in the program is mandatory with all participants working with their case managers on self-determined goals to sustain housing and autonomy. Participants are assessed through CI for program suitability.

CHR 2	How has the community's approach to addressing homelessness changed with the implementation of Reaching Home? Communities are strongly encouraged to use the ***"Reflecting on the Changing Response to Homelessness"*** worksheet to help them reflect on how the approach has changed and the impact of these changes at the local level.	
	Over the past year, the community's approach to addressing homelessness has changed. The Homelessness Initiatives Strategic Committee (HISC) made a substantial shift towards enhancing housing programs. As a result, two permanent supportive housing and four Housing First programs were funded. These programs focus on moving people living rough into housing efficiently and effectively through collaboration and partnership with agency programs such as outreach. With a greater emphasis on using actual data to create budgets, more money was invested in housing for individuals. One organization relinquished the funding and decided not to continue in the housing program. This resulted in the remaining three organizations being requested to take on the 45 participant caseload which they did successfully by working together. Each of the agencies was supported with the funding that the relinquishing agency received. Efficiency was improved by allowing subprojects enhanced autonomy over the funding. The CE has reduced the number of program meetings, and the frequency of reporting. This change permits subprojects to focus more on client care and work towards outcome-based objectives. The CE works closely with organizations to support them in data collection on their outcomes. This has resulted in agencies taking more responsibility and accountability for their programs. On December 20, 2024, the Province of Alberta announced that Community Based Organizations (CBOs) will be defunded by the Province for the 2025-2026 fiscal. The Province will fund the service agencies directly. The transition with the Province has become a journey and we are working together to make the transition as smooth as possible for the community and the service agencies.	
Collaboration between Indigenous and non-Indigenous partners		
CHR 3	Please select your community from the drop-down menu:	Wood Buffalo (AB)

	Your community:	**Has IH funding available.** **The DC CE and IH CE are the same organization.** **The DC CAB and IH CAB are the same group.**

CHR 4

a) Has there been meaningful collaboration between the DC CE and local Indigenous partners, including those that sit on your CAB, over the reporting period specific to the work of:

• Implementing, maintaining and/or improving the **Coordinated Access system**?	Yes
• Implementing, maintaining and/or improving, as well as using the **HMIS**?	Yes
• Strengthening the **Outcomes-Based Approach**?	Yes

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

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

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

→ Coordinated Access:	Yes
→ HMIS:	Yes

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

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

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

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

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

The Regional Municipality of Wood Buffalo (RMWB) is both the Designate and Indigenous CE, with only one Community Advisory Board (CAB). There are members on the CAB who hold the Indigenous community representative positions.

The CAB, locally called the Homelessness Initiatives Strategic Committee (HISC), is an action-focused group that stewards and advocates for the community plan on homelessness. HISC is involved with strategic planning, funding, communication, research and best practice. It advocates for funding and policy change and members are champions in the community. HISC works closely with the RMWB to monitor trends, provide strategic direction, and guide funding decisions based on identified community needs. One of HISC's priorities is addressing the needs and providing support to the Indigenous population, as the By-Name List (BNL) consistently shows a high percentage of individuals in the community experiencing homelessness self-identifying as Indigenous. Additionally, the CAB makes decisions for the Federal and Provincial Community Plan on Homelessness funding, complies with Provincial and

Federal agreements, identifies Coordinated Access Systems barriers and works collaboratively with the community to alleviate them.

In alignment with Council's plan, HISC recognizes the need to address Indigenous homelessness and the need for Indigenous housing models in the community under the guidance and the 94 calls to action of the Truth and Reconciliation Commission (as well as the organization's 30 specific calls to action). The CAB has recommended funding to the Wood Buffalo Wellness Society (WBWS), an Indigenous service organization for programming, addressing Indigenous homelessness and specific Indigenous housing models.

The WBWS is a local Indigenous agency funded for the Centralized Intake (CI) Program and they are the team leading the Coordinated Access System (CAS) and the BNL. WBWS has been instrumental in the planning of CAS from the very beginning and was involved with the development of the BNL. WBWS has implemented changes to the CAS and BNL such as suggesting community Indigenous connections, adding Indigenous supporting data points on the BNL, and providing guidance on processes and protocols. WBWS also remains a Coordinated Access Point (CAP) and brings its experience and knowledge to the table at the monthly Coordinated Access System Team (CAST) meetings. WBWS offers programming through an Indigenous lens for Housing First, Outreach, and Centralized Intake. In 2023, WBWS launched a Permanent Supportive Congregate Housing style facility (Tawâw Housing Program) that houses Indigenous individuals while addressing healing with Indigenous principles. The team has a client-centered approach, which focuses on meeting the individuals where they are in their journey. The CI program experienced a shortage of staff being only able to support one worker and the CE intervened to support the CI program with the BNL updates for most of the 2024/2025 fiscal. This reduced wait times for individuals entering into housing. This practice will continue into 2025/2026 with the discontinuation of the Provincial funding.

The Nistawayou Friendship Association Center is also a CAP, that provides outreach and employment services to the Indigenous population. Nistawayou is still a fairly new CAP in the system, but they remain a member of CAST and a community support provider on the housing continuum.

In 2023-2024, 41% of individuals added to the BNL self-identified as being of Indigenous ancestry. With an overrepresentation of Indigenous peoples experiencing homelessness, that population has been identified as a priority to support. The addition of the Tawâw Housing Program to the CAS stemmed from the heightened need to support the Indigenous population in the community. Tawâw Housing remains partnered with McMurray Métis to provide additional services to its participants.
The CAB and the CE continue to rely on the expertise of these organizations to identify gaps within the coordinated

access system and work collaboratively with all the access points to provide culturally sensitive services to Indigenous peoples. The CE also has a good standing relationship with McMurray Métis Local 1935, to the extent that there is a representative from McMurray Métis on HISC. In 2024/2025 fiscal the CAB recruited another Indigenous leader to the committee. The Indigenous organizations provide regular insight at monthly HISC meetings and on subcommittees.

The relationship between the Community Partnerships and Initiatives (CPI) branch of the RMWB and the Indigenous and Rural Relations (IRR) department of the RMWB is very strong and they collaborate on all aspects of funding. IRR sit on HISC as resource experts and community connection points, as they work very closely with all of the rural hamlets, local Indigenous Bands and Councils, and various Indigenous organizations in the region. IRR provides regular insight on funding and applications, events and programming, and community responses. As a result of our relationship with internal departments, partnerships, engagements and collaborations continue on an ongoing basis.

CHR 5	a) Specific to the completion of this Community Homelessness Report (CHR), did ongoing, meaningful collaboration take place with the local Indigenous partners, including those that sit on your CAB, over the reporting period?	Yes
	As a reminder, meaningful collaboration on the CHR with local Indigenous partners is expected for your community.	
	b) In your response to **CHR 5(a)** you noted that collaboration occurred with Indigenous partners. As a follow up to this, please indicate which of the following activities took place:	
	• Engagement with Indigenous partners took place in the early stages of CHR development, to determine how collaboration should be undertaken for the CHR.	Yes
	• Collaboration with Indigenous partners took place when developing and finalizing the CHR.	Yes
	• Indigenous partners reviewed and approved the final CHR.	Yes
	Note: As applicable, these activities should be described in further detail in CHR 5(c). This list is not meant to be exhaustive. Other relevant activities not listed here can be described in CHR 5(c).	
	c) In your response to **CHR 5(a)** you noted that collaboration **occurred** with Indigenous partners. As a follow up to this, please describe the collaboration that took place in more detail **related to the completion of this CHR.** Your response could include information such as how Indigenous peoples were engaged in these discussions, when collaboration occurred, who it was with, and what sections of the CHR were informed by Indigenous input and/or perspectives.	

The CE engaged with the Community Advisory Board (CAB) during the development and completion of the Community Homelessness Report (CHR) starting in February 2025. The CAB (Homelessness Initiatives Strategic Committee (HISC)) is comprised of community partners, community members and Municipal Council with two voting seats being held by Indigenous Community representatives. Indigenous Rural Relations Department also holds a non-voting seat with the CAB and one of the Municipal Councilors represents Fort Chipewyan one of the rural Indigenous communities. A regularly scheduled CAB meeting was held on February 19th, 2025 and the 2024/2025 CHR was presented in the education session and discussed. The CHR was reviewed at the HISC meeting on May 21st, 2025 and approved and signed by HISC. Sections 1,2,3 and 4a were informed by HISC input and perspectives. The CAB and the CE acknowledge that moving forward, more information and knowledge sharing and representation from the Indigenous organizations is a priority. Two of the CAB Indigenous organizations have expressed an interest in becoming local Community Access Points (CAP) in the Coordinated Access System.

Moving forward into the 2025/2026 fiscal year the CAB has had to make crucial funding decisions resulting from the February meeting regarding the pivot in Provincial funding. These decisions will impact the community in ways that have been virtually unheard of over the past 16 years. Impacts include losing 30 housing placements, going from 195 to 165. No prevention or diversion programming will be funded for 2025/2026. The Regional Municipality of Wood Buffalo (RMWB) will lose the eviction prevention program, the diversion program, and the outreach program. The RMWB will also only have one staff in a street outreach program. After continued work and collaborations and partnerships have successfully reduced the encampments over the 2024/2025 fiscal, in probability it is expected that encampment numbers will increase in the community. CAB members identified from the 2024 Point-in-Time (PiT) Count that 46 individuals self identified as Indigenous. The members expressed that the CAB needs to seek ways to engage the Metis Nations and First Nations in working together to support the 46 individuals experiencing homelessness. The CAB continues seeking out ways to educate the public with regards to homelessness.

End of Section 1

SECTION 2: COORDINATED ACCESS SELF-ASSESSMENT

Note: It is expected that communities will continuously work to improve their Coordinated Access system over time. If your community is working to improve a specific Coordinated Access requirement that had been self-assessed as met in a previous CHR, you should still select "Yes" from the drop-down menu for this CHR.

Governance and Partnerships

Note: For communities that receive both Designated Communities (DC) and Indigenous Homelessness (IH) funding, this section is specific to the **DC Community Advisory Board (CAB)**.

CA 1	Communities must maintain an integrated, community-based governance structure that supports a transparent, accountable and responsive Coordinated Access system, with use of an HMIS. The CAB must be represented in this structure in some way.	
	a) Is an integrated, community-based governance structure in place that supports a transparent, accountable and responsive Coordinated Access system and use of the local HMIS?	Yes
	b) Have Terms of Reference for the integrated, community-based governance structure been documented and, if requested, can they be made publicly available?	Yes
CA 2	Does the integrated governance structure that supports Coordinated Access and use of HMIS include representation from the following: • Federal Homelessness Roles:	
	→ Community Entity:	Yes – as a CAB member with ex-officio status and a member of the overall governance structure
	→ Community Advisory Board:	Yes

→ Housing, Infrastructure and Communities Canada (HICC):	Yes – as a CAB member with ex-officio status
→ Organization that fulfills the role of Coordinated Access Lead:	Yes
→ Organization that fulfills the role of HMIS Lead:	Yes
• Homelessness roles from other orders of government:	
→ Provincial or territorial government:	Yes – as a CAB member and a member of the overall governance structure
→ Local designation(s) relative to managing provincial or territorial homelessness funding, as applicable (e.g., Service Manager in Ontario):	Not applicable
→ Municipal government:	Yes – as a CAB member and a member of the overall governance structure
→ Local designation(s) relative to managing municipal homelessness funding, as applicable:	Yes
• Local groups with a mandate to prevent and/or reduce homelessness, as applicable:	Yes
• Local Indigenous partners:	Yes – as a CAB member and a member of the overall governance structure

	• Population groups the Coordinated Access system intends to serve (e.g., providers serving youth experiencing homelessness):	Yes – as a CAB member and a member of the overall governance structure
	• Types of service providers that help prevent homelessness and those that help people transition from homelessness to safe, appropriate housing in the community:	Yes – as a CAB member and a member of the overall governance structure
	• People with lived experience of homelessness:	Yes
CA 3	Is there a document that identifies how various homeless-serving sector roles and groups are integrated and aligned in support of the community's overall goals to prevent and reduce homelessness and, if requested, can this documentation be made publicly available? At minimum, the following roles and groups must be included: • Community Entity; • Community Advisory Board; • Coordinated Access Lead and HMIS Lead; • Provincial or territorial and municipal designations relative to managing homelessness funding, as applicable; • Local groups with a mandate to prevent and/or reduce homelessness, as applicable; and, • Local Indigenous partners.	Yes
CA 4	a) Has a Coordinated Access Lead organization been identified?	Yes
	b) Has an HMIS Lead organization been identified?	Yes
	c) Do the Coordinated Access Lead and HMIS Lead collaborate to: • Improve service coordination and data management; and, • Increase the quality and use of data to prevent and reduce homelessness?	Yes

	d) Have Coordinated Access Lead and HMIS Lead roles and responsibilities been documented and, if requested, can this documentation be made publicly available?	Yes
CA 5	a) Has there been meaningful collaboration between the DC CE and local Indigenous partners, including those that sit on your CAB, over the reporting period specific to the work of implementing, maintaining and/or improving the Coordinated Access system? Note: The response to this question is auto-populated from CHR 4(a).	Yes
CA 6	a) Consider the CAB expectations outlined below. Is the CAB currently fulfilling expectations related to its role with addressing homelessness in the community?	Yes

Background: The Reaching Home Directives outline expectations specific to the CAB and its role with addressing homelessness in the community. These expectations are summarized below under four roles.

Community-Based Leadership: To support its role, collectively, the CAB:

- Is representative of the community;
- Has a comprehensive understanding of the local homelessness priorities in the community; and,
- Has in-depth knowledge of the key sectors and systems that affect local priorities.

Planning:

- In partnership with the Community Entity, the CAB gathers all available information related to local homelessness needs in order to set direction and priorities, understand what is working and what is not, and develop a coordinated approach to meet local priorities.
- The CAB helps to guide investment planning, including developing the Reaching Home Community Plan and providing official approval, as well as assessing and recommending projects for Reaching Home funding to the Community Entity.

Implementation and Reporting:

- The CAB engages in meaningful collaboration with key partners, including other orders of government, Indigenous partners, as well as entities that coordinate provincial or territorial homelessness initiatives at the local level, where applicable.
- The CAB coordinates efforts to address homelessness at the community level by supporting the Community Entity to implement, maintain, and improve the Coordinated Access system, actively use the local HMIS, as well as prevent and reduce homelessness using an Outcomes-Based Approach.
- The CAB approves the Reaching Home Community Homelessness Report.

Alignment of Investments:

- CAB members from various orders of government support alignment in investments (e.g., they share information on existing policies and programs, as well as updates on funding opportunities and funded projects).
- CAB members provide guidance to ensure federal investments complement existing policies and programs.

CA 7	Are the following CAB documents being maintained **and** are they available upon request?	
	• Terms of Reference.	Yes
	• Engagement strategy that explains how the CAB intends to:	Yes
	→ Achieve broad and inclusive representation;	
	→ Coordinate partnerships with the necessary sectors and systems to meet its priorities (e.g., beyond the homeless-serving sector); and,	
	→ Integrate local efforts with those of the province or territory.	

	• Procedures for addressing real and/or perceived conflicts of interest (e.g., members recuse themselves when they have ties to proposed projects), including the membership of elected municipal officials.	Yes
	• Procedures for assessing and recommending project proposals for federal funding under Reaching Home (e.g., supporting a fair, equitable, and transparent assessment process as set out by the Community Entity).	Yes
	• Exclusive and shared responsibilities between the CAB and Community Entity.	Yes
	• Membership terms and conditions, including: → Recruitment processes; → Length of tenure; → Attendance requirements; → Delegated tasks; and, → Having at least two seats available for the alternate Community Entity and CAB/Regional Advisory Board (RAB) member, where applicable.	Yes
CA 8	a) Do all service providers receiving funding under the Designated Communities (DC) or Territorial Homelessness (TH) stream participate in the Coordinated Access system?	Yes
	b) Has participation in the Coordinated Access system been encouraged from providers that serve people experiencing or at-risk of homelessness, and do not receive Reaching Home funding? They may or may not have agreed to participate at this time.	Yes

	c) Has participation been encouraged from providers that could fill vacancies through the Coordinated Access system (e.g., they have housing units, subsidies and/or supports that could be accessed by people experiencing homelessness), and do not receive Reaching Home funding? They may or may not have agreed to participate at this time.	Yes
Systems Map and Resource Inventory		
CA 9	a) A systems map identifies and describes the service providers that participate in the Coordinated Access system. Does the community have a current systems map **and**, if requested, can it be made publicly available?	Yes
	b) Does the systems map include the following elements:	
	→ Name of the organization and/or service provider:	Yes
	→ Type of service provider (e.g., emergency shelter, supportive housing):	Yes
	→ Funding source(s):	Yes
	→ Eligibility for service (e.g., youth):	Yes
	→ Capacity to serve (e.g., number of units):	Yes
	→ Role in the Coordinated Access system (e.g., access point):	Yes
	→ Role with maintaining quality data used for a Unique Identifier List (e.g., keep data up-to-date for housing history):	Yes
	→ If the service provider currently uses the HMIS:	Yes
	c) Over the last year, was the systems map used to guide efforts to improve:	

	→ The Coordinated Access system (e.g., identify opportunities to increase participation):	Yes
	→ Use of the HMIS (e.g., identify opportunities to onboard new service providers):	Yes
	→ Data quality (e.g., increase data comprehensiveness):	Yes
CA 10	a) Are all housing and related resources funded under the DC or TH stream included in the Resource Inventory? This means that they fill vacancies using the Unique Identifier List, following the vacancy matching and referral process.	Yes
	b) For each housing and related resource in the Resource Inventory, have eligibility criteria been documented?	Yes
	c) For each housing and related resource in the Resource Inventory, have prioritization criteria, and the order in which they are applied, been documented **and**, if requested, can this documentation be made available? At minimum, depth of need (i.e., acuity) must be included as a factor in prioritization.	Yes
Service Navigation and Case Conferencing		
CA 11	a) Are there processes in place to ensure that people are being supported to move through the Coordinated Access process? This is often referred to as service navigation or case conferencing.	Yes
	b) Have these processes been documented **and**, if requested, can this documentation be made available?	Yes
	c) Do the processes include expectations for the following:	

	→ Helping people to identify and overcome barriers to accessing appropriate services and/or housing and related resources.	Yes
	→ Keeping people's information up-to-date in the HMIS (e.g., interaction with the system, housing history, as well as data used to inform eligibility and prioritization for housing and related resources).	Yes
Access Points to Service		
CA 12	a) Are access points available in some form throughout the geographic area covered by the DC or TH funded region, so that people experiencing or at-risk of homelessness can be served regardless of where they are in the community?	Yes
	b) Have access points been documented **and** is this information publicly available?	Yes
CA 13	a) Are there processes in place to **monitor** if there is **easy**, **equitable** and **low-barrier** access to the Coordinated Access system **and** to respond to any issues that emerge, as appropriate?	Yes
	b) Have these processes been documented **and**, if requested, can this documentation be made available?	Yes
Initial Triage and more In-Depth Assessment		
CA 14	a) Is the triage and assessment process documented in one or more policies/protocols?	Yes
	b) Does the **documented** triage and assessment process address the following and, if requested, can the documentation be made available:	

→	**Consents:** Ensuring that people have a clear understanding of the Coordinated Access system, as well as how their personal information will be shared and stored. Includes addressing situations where people may benefit from services, but are not able or willing to give their consent.	Yes
→	**Intakes:** Documenting that people have connected or reconnected with the Coordinated Access system and have been entered into the HMIS, including obtaining or reconfirming consents, creating or updating client records, and entering transactions in the HMIS.	Yes
→	**Initial triage:** Ensuring safety and meeting basic needs (e.g., food and shelter), and guiding people through the process of stopping an eviction (homelessness prevention) or finding somewhere to stay that is safe and appropriate besides shelter (shelter diversion).	Yes
→	**More in-depth assessment:** Gathering information to gain a deeper understanding of people's housing-related strengths, depth of need, and preferences, including through the use of a common assessment tool(s) to inform prioritization for vacancies in the Resource Inventory.	Yes
→	**Community referrals:** Gathering information to understand what services people are eligible for and identifying where they can go to get their basic needs met, get help with a housing plan and/or connect with other related resources.	Yes

	→ **Housing plans:** Documenting people's progress with finding and securing housing (with appropriate subsidies and/or supports, as applicable).	Yes
	→ **Using a person-centered approach:** Tailoring use of common tools to meet the needs and preferences of different people or population groups (e.g., youth), while also maintaining consistency in process across the Coordinated Access system.	Yes
CA 15	a) Is a common, unified triage and assessment process being applied across all population groups in the community **and**, if requested, can this documentation be made available?	Yes
	b) If more than one triage and/or assessment tool is being used, is there a protocol in place that describes:	
	→ When each tool should be used (e.g., tools used only for youth verses those that can be used with more than one population group).	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
Vacancy Matching and Referral with Prioritization		

CA 16	a) Is the vacancy matching and referral process documented in one or more policies/protocols?	Yes
	b) Does your **documented** vacancy matching and referral process address the following:	
	→ **Roles and responsibilities:** Describing who is responsible for each step of the process, including data management.	Yes
	→ **Prioritization:** Identifying how prioritization criteria is used to determine an individual or family's relative priority on the Priority List (a subset of the broader Unique Identifier List) when vacancies become available (i.e., how the Priority List is filtered and/or sorted).	Yes
	→ **Referrals:** What information to cover when referring an individual or family that has been matched and how their choice will be respected, including allowing individuals and families to reject a referral without repercussions.	Yes
	→ **Offers:** What information to cover when a provider is offering a vacancy to an individual or family that has been matched and tips for making informed decisions about the offer.	Yes
	→ **Challenges:** How concerns and/or disagreements about prioritization and referrals will be managed, including criteria by which a referral could be rejected by a provider following a match.	Yes
	→ **Resource Inventory management:** Steps to track real-time capacity, transitions in/out of units, occupancy/caseloads, progress with referrals/offers, and housing outcomes.	Yes

CA 17	Are vacancies from the Resource Inventory filled using a Priority List, following the vacancy matching and referral process?	Yes

Section 2 Summary Tables

The tables below provides a summary of the work your community has done so far to meet the Reaching Home minimum requirements under the **Coordinated Access and CAB Directives**.

	Completed	Started	Not Yet Started
Total	17	0	0

Coordinated Access	Completed (score)	Completed (%)
Governance and partnerships (out of 8 points)	8	100%
System map and Resource Inventory (out of 2 points)	2	100%
Service navigation and case conferencing (out of 1 point)	1	100%
Access points (out of 2 points)	2	100%
Initial triage and more in-depth assessment (out of 2 points)	2	100%
Vacancy matching and referral with prioritization (out of 2 points)	2	100%
All (out of 17 points)	**17**	**100%**

End of Section 2

SECTION 3: HOMELESSNESS MANAGEMENT INFORMATION SYSTEM AND OUTCOMES-BASED APPROACH SELF-ASSESSMENT		
Context		
CHR 7	a) In your community, is the Homeless Individuals and Families Information System (HIFIS) the Homelessness Management Information System (HMIS) that is being used?	Yes
<u>Note:</u> Throughout Section 3 and Section 4 of this CHR, questions that ask about the "HMIS" or the "dataset" refer to the HMIS identified in question CHR 7.		
Homelessness Management Information System (HMIS)		
HIFIS 1	Is an HMIS being **actively used** to manage individual-level client data (i.e., person-specific data) and service provider information for Coordinated Access and for the Outcomes-Based Approach? This includes using the HMIS to generate data for the Unique Identifier List and outcome reporting.	Yes
HIFIS 2	a) Are **all** Reaching Home-funded service providers actively using the same HMIS to manage individual-level client data (i.e., person-specific data) and service provider information for Coordinated Access and for the Outcomes-Based Approach?	Yes
	b) Over the last year, were **other** non-Reaching Home-funded providers that serve people experiencing or at-risk of homelessness encouraged to actively use the HMIS? They may or may not have agreed to do so at this time.	Yes

HIFIS 3	a) Has the Community Entity signed the latest Data Provision Agreement (find the latest version **here**, which includes the Racial Identity field in the annex) with Housing, Infrastructure and Communities Canada (HICC)? This may have been done in a previous year.	Yes
	b) Are local agreements in place to manage privacy, data sharing and client consent related to the HMIS? These agreements must comply with municipal, provincial/territorial and federal laws and include: • A Community Data Sharing Agreement; and, • A Client Consent Form.	Yes
	c) Are processes in place that ensure there are no unnecessary barriers preventing Indigenous partners from accessing the HMIS data and/or reports they need to help the people they serve?	Yes
HIFIS 4	Has the Community Entity updated HIFIS to the latest version that was most recently confirmed as mandatory by HICC?	Yes
HIFIS 5	a) Has there been meaningful collaboration between the DC CE and local Indigenous partners, including those that sit on your CAB, over the reporting period specific to the work of implementing, maintaining and/or improving, as well as the use of the HMIS? Note: The response to this question is auto-populated from CHR 4(a).	Yes
Data Uniqueness		
OBA 1	a) Does the dataset include people currently experiencing homelessness that have interacted with the homeless-serving system?	Yes

	b) Do people appear only once in the dataset?	Yes
	c) Do people give their consent to be included in the dataset?	Yes
OBA 2	Is there a **written policy/protocol** (“Inactivity Policy”) that describes how **interaction with the homeless-serving system** is **documented**? The policy/protocol must: • Define what it means to be “active” or “inactive”; • Define what keeps someone “active” (e.g., data entry into specific fields in HIFIS); • Specify the level of effort required by service providers to find people before they are made/confirmed as “inactive”; • Explain how to document a person’s first time as “active”, as well as changes in “activity” or “inactivity” over time; and, • Explain how to check for data quality (e.g., run a report that shows the clients that are about to become inactive and work with outreach workers to update their files and keep them active, as needed).	Yes
OBA 3	Is there a **written policy/protocol** that describes how **housing history is documented** (e.g., as part of a broader data entry guide for the HMIS)? The policy/protocol must: • Define what it means to be “homeless” or “housed” (e.g., define a housing continuum that shows which housing types align with a status of “homeless” versus “housed”); • Explain how to enter housing history consistently; and, • Explain how to check for data quality (e.g., run a report that shows the percentage of clients that have complete housing history, so that “unknown” fields can be updated).	Yes
	Data Consistency	
OBA 4	To support Coordinated Access, is the HMIS used to generate data for a Unique Identifier List?	Yes

OBA 5	Is the HMIS used to collect data for setting baselines, setting reduction targets and tracking progress for the following community-level outcomes:	
	→ Overall homelessness:	Yes
	→ Newly identified as experiencing homelessness:	Yes
	→ Returns to homelessness:	Yes
	→ Indigenous homelessness:	Yes
	→ Chronic homelessness:	Yes
Data Timeliness		
OBA 6	Is the dataset updated as soon as new information is available about a person for:	
	→ Interaction with the system (e.g., changes from “active” to “inactive”).	Yes
	→ Housing history (e.g., changes from “homeless” to “housed”).	Yes
	→ Data that is relevant and necessary for Coordinated Access (e.g., data used to determine who is eligible and can be prioritized for a vacancy).	Yes
OBA 7	Is data readily available and accessible, so that it can be used for Coordinated Access, the Outcomes-Based Approach and to drive the prevention and reduction of homelessness more broadly?	Yes
Data Completeness		

OBA 8	Are processes in place to ensure that all relevant and necessary data for filling vacancies is complete? For example, is data used to determine if someone is eligible and can be prioritized for a vacancy complete for each person in the dataset?	Yes
OBA 9	Are processes in place to ensure that data for every person in the dataset is as complete as possible for:	
	→ Interaction with the system:	Yes
	→ Housing history (including data about where people were staying immediately before becoming homeless and, once they've exited, where they went):	Yes
	→ Indigenous identity:	Yes
Data Comprehensiveness		
OBA 10	Does the dataset include all household types (e.g., singles and families experiencing homelessness)?	Yes
OBA 11	Does the dataset include people experiencing sheltered homelessness (e.g., staying in emergency shelters)?	Yes
OBA 12	Does the dataset include people experiencing unsheltered homelessness (e.g., people living in encampments)?	Yes
CHR 9	The following questions aim to help consider other factors that may impact data comprehensiveness. They do not directly assess progress with the minimum requirements.	
	a) Does the dataset include the following household types, as much as possible right now:	
	→ Single adults:	Yes

→ Unaccompanied youth:	Yes
→ Families	Yes – Only heads of households
b) Does the dataset include people staying in the following types of shelter:	
→ Permanent emergency shelter:	Yes
→ Seasonal or temporary emergency shelter:	Yes
→ Hotels/motel stays paid for by a service provider:	Yes
→ Domestic violence shelters:	Yes
c) Does the dataset include the following groups of people who have interacted with the system:	
→ People that identify as Indigenous:	Yes
→ People as soon as they interact with the system:	Yes – people are added on the first day
→ People experiencing hidden homelessness:	Yes
→ People staying in transitional housing:	Yes
→ People staying in public institutions who do not have a fixed address (e.g., jail or hospital):	Yes

OBA 13	Under Reaching Home, at minimum, a comprehensive dataset includes all household types (OBA 10), people experiencing sheltered homelessness (OBA 11) and people experiencing unsheltered homelessness (OBA 12), as applicable. Consider your answers to questions OBA 10, OBA 11, OBA 12 and CHR 9. Does the dataset include everyone currently experiencing homelessness that has interacted with the homeless-serving system, as much as possible right now?	Yes
Data Use		
OBA 14	**Note:** For the purpose of this CHR, the dataset can only be used for monthly reporting if there is at least one full month of data available, and for annual reporting if there is at least one full fiscal year of data available.	
	a) **<u>Can the dataset be used to set</u>** monthly and annual baselines and reduction targets for the following community-level outcomes:	
	→ Overall homelessness:	Yes
	→ Newly identified as experiencing homelessness:	Yes
	→ Returns to homelessness:	Yes
	→ Indigenous homelessness:	Yes
	→ Chronic homelessness:	Yes
	b) **<u>Is the dataset being used to set</u>** monthly and annual baselines and reduction targets for the following community-level outcomes:	
	→ Overall homelessness:	Yes
	→ Newly identified as experiencing homelessness:	Yes

	→ Returns to homelessness:	Yes
	→ Indigenous homelessness:	Yes
	→ Chronic homelessness:	Yes
OBA 15	Is data used to inform action related to preventing and reducing homelessness?	Yes
	b) How is data being used to inform action? Please provide specific examples. Your response should include: • Examples of how data is used to develop and/or update clear plans of action for reaching your reduction targets; and/or, • Examples of how data is used to inform action in policy-making, program planning, performance management, investment strategies and/or service delivery.	
	Data from our quality By-Name List is entered daily and analyzed monthly. Each month, data for chronic homelessness, all homelessness, and veteran homelessness are submitted to Built for Zero. This process helps us monitor trends, track progress, and identify any month-over-month increases that may need to be addressed through the Performance Management Tracker. These data trends inform our annual Built for Zero Aim, based on inflow and outflow patterns within the community. Our community prioritizes individuals experiencing chronic homelessness, taking into account factors such as sleeping location, acuity, and tri-morbidity levels. Ensuring this data is accurate and updated in real time enables us to focus our efforts on housing the most vulnerable individuals first. In 2024, our community action cycle aim was to increase move-ins among the chronic homeless population by 10%. To support this goal, we reallocated funding from episodic homelessness programs to those addressing chronic homelessness. As a result, we successfully met our target. Additionally, we maintained Functional Zero status for veteran homelessness by identifying veterans immediately upon their addition to the By-Name List and ensuring they were connected with a housing worker. This approach enabled us to house veterans within 30 days of identification.	
CHR 10	The following questions aim to determine how you will report data in Section 4 of your CHR.	
	a) What is the earliest you can report monthly data in Section 4 of your CHR, inclusively?	March 2020

	b) What is the earliest you can report annual data in Section 4 of your CHR, inclusively?	2020-21
	c) What methodology will you use to set baselines, set reduction targets and track progress on core Reaching Home outcomes in this CHR? **Reminder:** To meet **Outcomes-Based Approach Minimum Requirement 8**, you must use the federal methodology to set baselines, set reduction targets and track progress for the five core Reaching Home outcomes. For HIFIS users, this means using the "Community Outcomes" report in HIFIS. For non-HIFIS users, this means using a report equivalent to the "Community Outcomes" report in HIFIS.	Other HMIS: Report equivalent to "Community Outcomes" report in HIFIS
Partnerships		
OBA 16	a) Has there been meaningful collaboration between the DC CE and local Indigenous partners, including those that sit on your CAB, over the reporting period specific to the work of strengthening the Outcomes-Based Approach? Note: The response to this question is auto-populated from CHR 4(a).	Yes
Data quality improvement		
OBA 17	a) Are efforts being made to improve data quality?	Yes
	b) How was data quality improved? Please provide specific examples. Your response could reference one or more dimensions of data quality: • Data uniqueness • Data consistency • Data timeliness • Data completeness • Data comprehensiveness	

	This year, our community made significant progress in improving data quality by transitioning our Homelessness Management Information System (HMIS) from Efforts to Outcomes (ETO) to Homeless Individuals and Families Information System (HIFIS). This transition involved extensive training for Regional Municipality of Wood Buffalo (RMWB) staff provided by ACRE consulting and a Policy Analyst from HIFIS Development and Partnerships Unit of Housing, Infrastructure Communities Canada. This support was to configure the new system, and provide training sessions for funded agencies and community partners. On March 31, 2025, we officially launched the HIFIS system. The new platform provides a more comprehensive and accurate picture of homelessness in our community by capturing real-time data and reducing duplication. Importantly, we now have access to Emergency Shelter data, which was not available in the previous system. RMWB staff play a key role in maintaining data quality by entering Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT) information and updating client records based on the HIFIS intake forms which are uploaded to a secure site. This ensures data is entered consistently, in a timely manner, and remains complete across the system.

Reporting on other Community-Level Outcomes		
CHR 11	a) Beyond the five mandatory core outcomes under Reaching Home, do you wish to include any additional <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 include any additional <u>annual</u> community-level outcomes for this CHR? **Reminder:** Reporting on additional community-level outcomes is optional.	No

Section 3 Summary Tables

The tables below provides a summary of the work your community has done so far to meet the Reaching Home minimum requirements under the **HIFIS Directive**.

	Completed	Started	Not Yet Started
Total	5	0	0

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

The tables below provides a summary of the work your community has done so far to meet the Reaching Home minimum requirements under the **Outcomes-Based Approach Directive**.

	Completed	Started	Not Yet Started
Total	17	0	0

Outcomes-Based Approach	Completed (score)	Completed (%)
Data uniqueness (out of 3 points)	3	100%
Data consistency (out of 2 points)	2	100%
Data timeliness (out of 2 points)	2	100%
Data completeness (out of 2 points)	2	100%
Data comprehensiveness (out of 4 points)	4	100%
Data use (out of 2 points)	2	100%

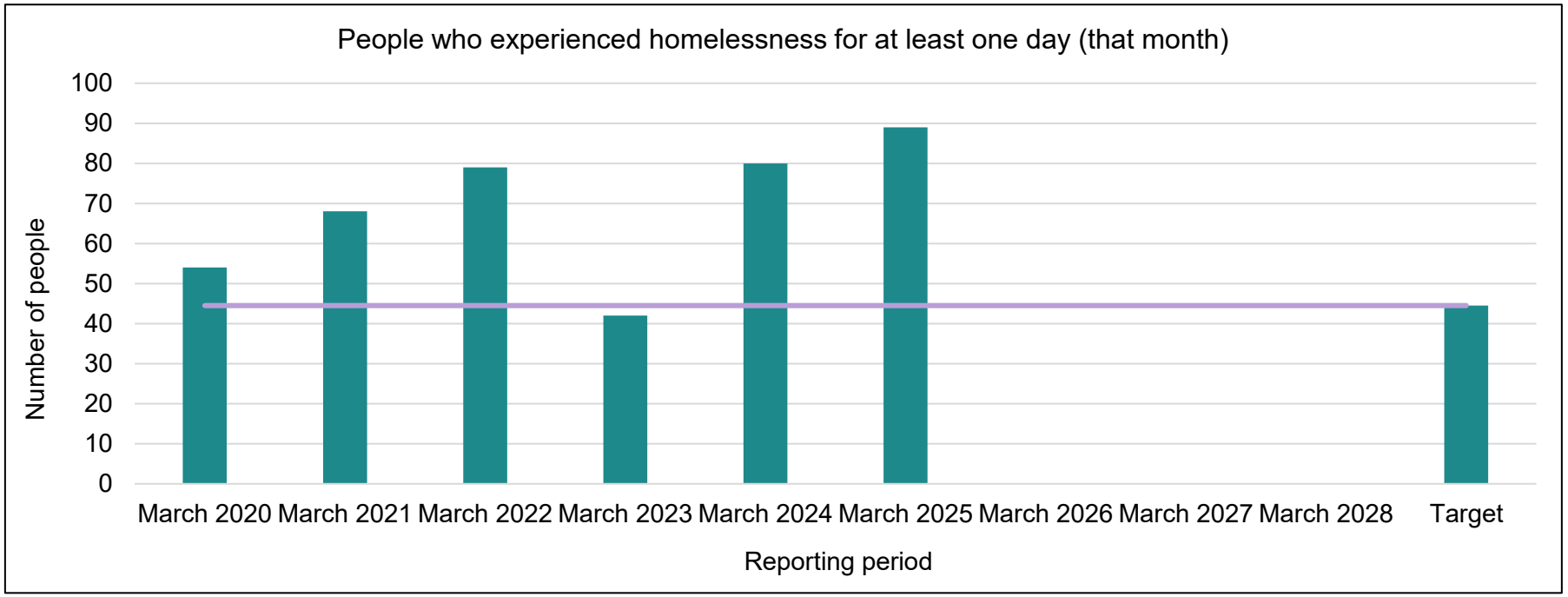
Partnerships (out of 1 point)	1	100%
Data quality improvement (out of 1 point)	1	100%
All (out of 17 points)	**17**	**100%**

End of Section 3

SECTION 4: COMMUNITY-LEVEL OUTCOMES AND TARGETS

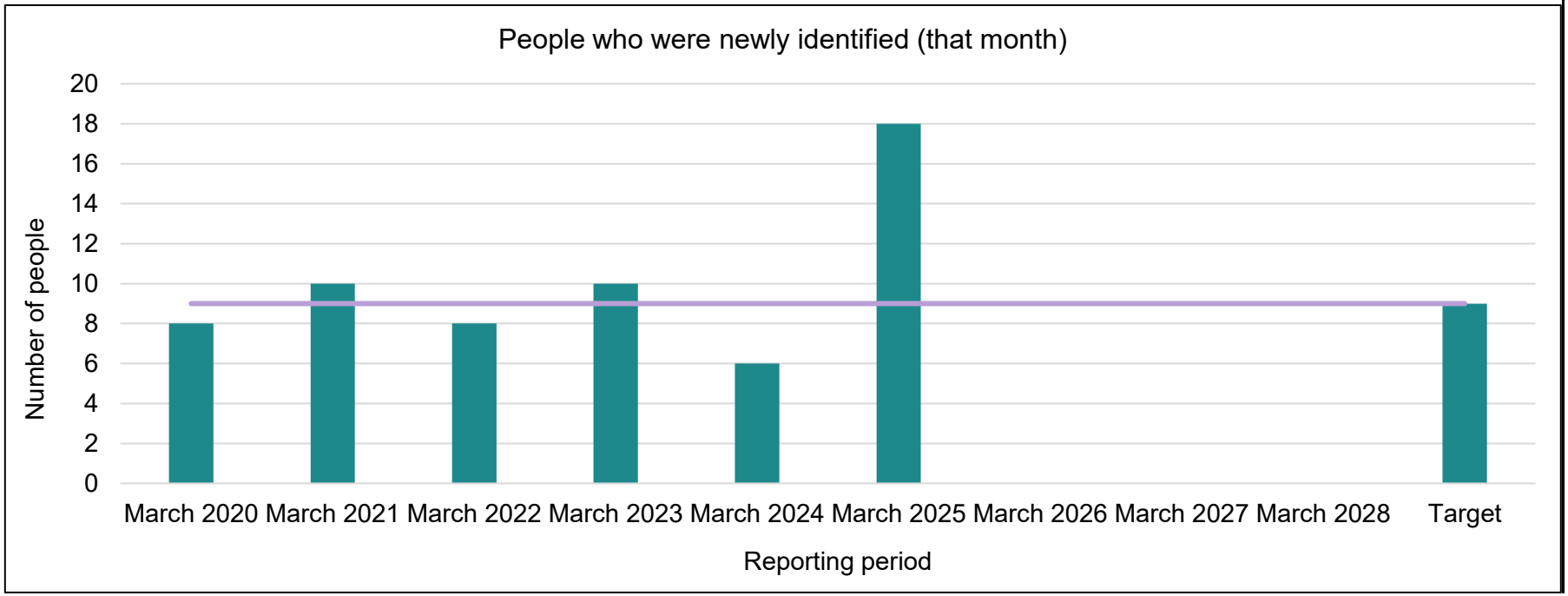
Using person-specific data to set baselines, set reduction targets and track progress – Monthly data

O1(M) Outcome #1: Fewer people experience homelessness (homelessness is reduced overall)										
Given your answers in Section 3, you can report monthly result(s) for Outcome #1 using your person-specific data.										
	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	**Target**
People who experienced homelessness for at least one day (that month)	54	68	79	42	80	89				44.5



O1(M)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	March 2025
	Overall homelessness will decrease by 50% between March 2025 and March 2028.	
	b) Please use the comment box below to: • As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target. • As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank. • Optionally, provide any additional context on your data.	
	The federal mandate to reduce homelessness by 50% has motivated an increase in our original target from 25% to 50%. Although homelessness continues to rise due to external factors, such as environmental, political, and economic challenges beyond our control, we remain committed to achieving this ambitious goal. Our strategy includes pursuing funding opportunities from all levels of government and available grants, while also strengthening our efforts in landlord engagement, supportive case management, and cross-sector collaboration.	

O2(M) Outcome #2: Fewer people were newly identified (new inflows to homelessness are reduced)										
Given your answers in Section 3, you can report monthly result(s) for Outcome #2 using your person-specific data.										
	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	**Target**
People who were newly identified (that month)	8	10	8	10	6	18				9

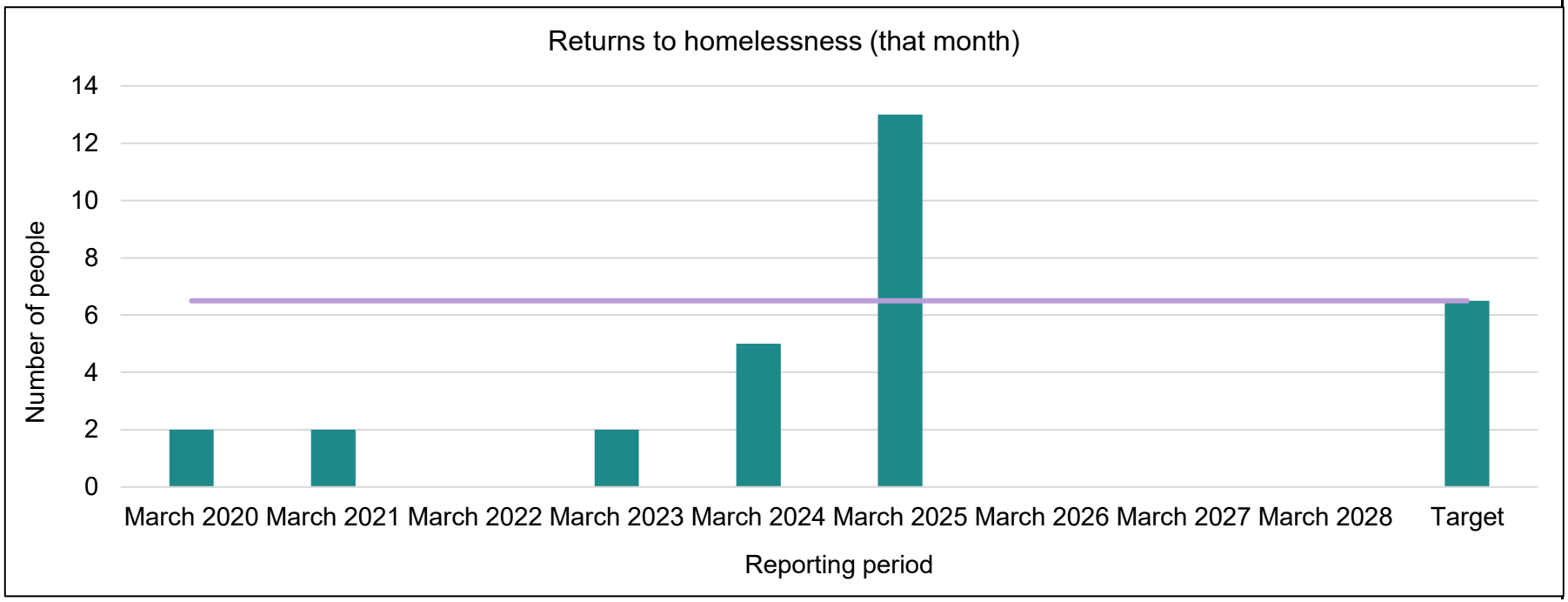


O2(M)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	March 2025
	New inflows to homelessness will decrease by 50% between March 2025 and March 2028.	
	b) Please use the comment box below to: • As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target. • As applicable, explain the use of "N/A" for one or more data points. As a reminder, no cells should be left blank. • Optionally, provide any additional context on your data.	
	The federal mandate to reduce homelessness by 50% has motivated an increase in our original target from 25% to 50%. Although homelessness continues to rise due to external factors, such as environmental, political, and economic challenges beyond our control, we remain committed to achieving this ambitious goal. Our strategy includes pursuing funding opportunities from all levels of government and available grants, while also strengthening our efforts in landlord engagement, supportive case management, and cross-sector collaboration.	

O3(M)	**Outcome #3: Fewer people return to homelessness (returns to homelessness are reduced)**

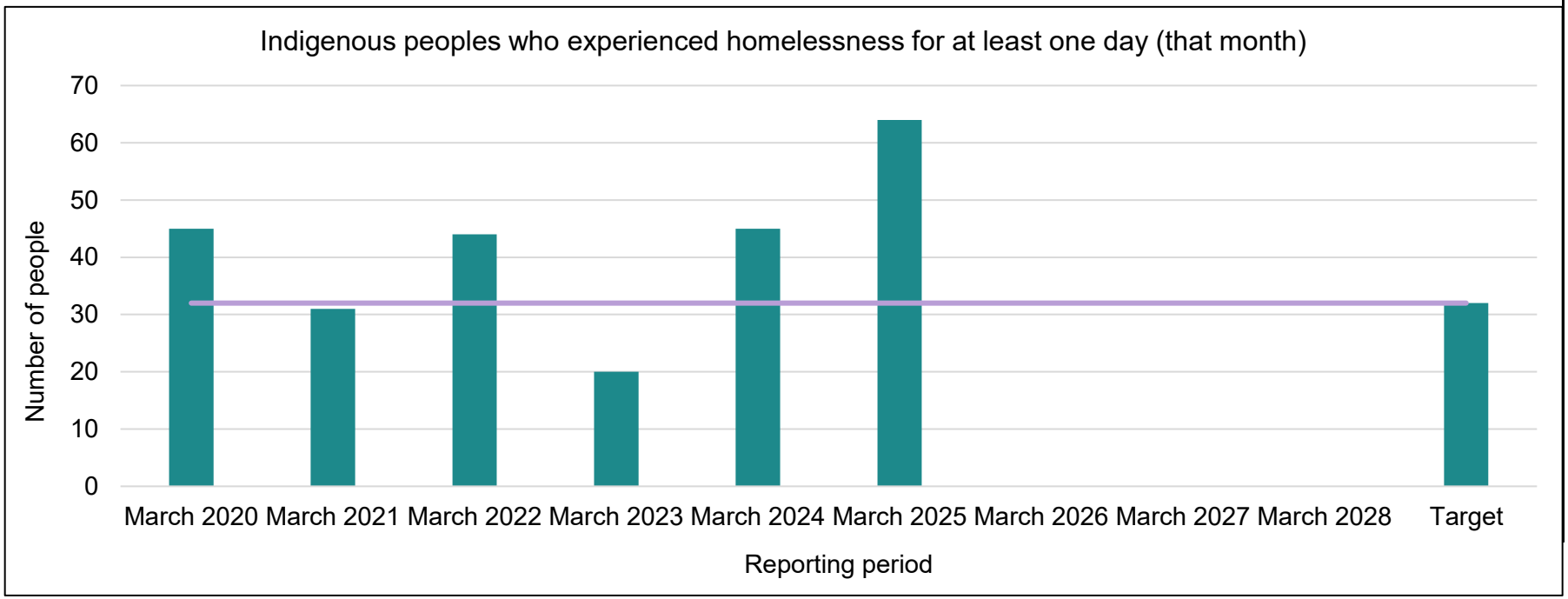
Given your answers in Section 3, you can report monthly result(s) for Outcome #3 using your person-specific data.

	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	**Target**
Returns to homelessness (that month)	2	2	0	2	5	13				6.5



O3(M)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	March 2025
	Returns to homelessness will decrease by 50% between March 2025 and March 2028.	
	b) Please use the comment box below to: • As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target. • As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank. • Optionally, provide any additional context on your data.	
	The federal mandate to reduce homelessness by 50% has motivated an increase in our original target from 25% to 50%. Although homelessness continues to rise due to external factors, such as environmental, political, and economic challenges beyond our control, we remain committed to achieving this ambitious goal. Our strategy includes pursuing funding opportunities from all levels of government and available grants, while also strengthening our efforts in landlord engagement, supportive case management, and cross-sector collaboration.	

O4(M) Outcome #4: Fewer Indigenous peoples experience homelessness (Indigenous homelessness is reduced)										
Given your answers in Section 3, you can report monthly result(s) for Outcome #4 using your person-specific data.										
	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	**Target**
Indigenous peoples who experienced homelessness for at least one day (that month)	45	31	44	20	45	64				32



O4(M)

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

March 2025

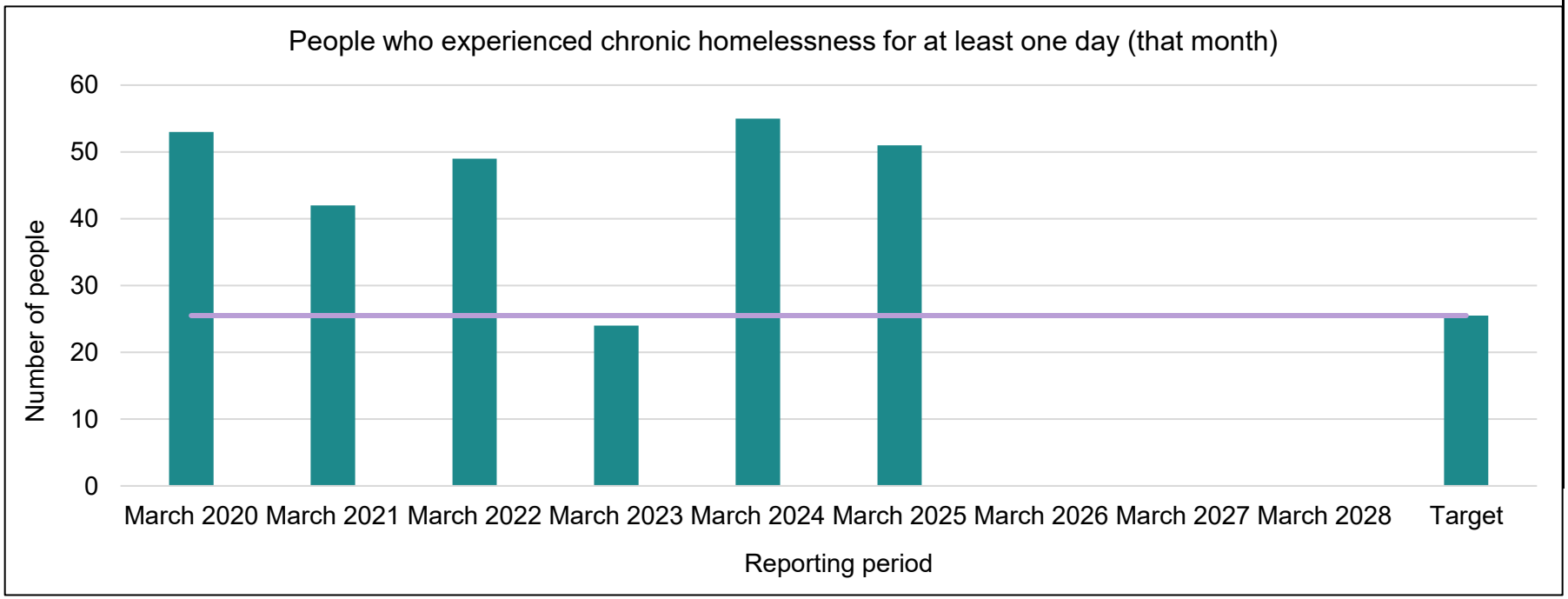
Indigenous homelessness will decrease by 50% between March 2025 and March 2028.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- As applicable, explain how Indigenous partners were engaged in the process of setting the baseline, setting the target, reporting on the outcome and/or interpreting the results.
- Optionally, provide any additional context on your data.

The federal mandate to reduce homelessness by 50% has motivated an increase in our original target from 25% to 50%. Although homelessness continues to rise due to external factors, such as environmental, political, and economic challenges beyond our control, we remain committed to achieving this ambitious goal. Our strategy includes pursuing funding opportunities from all levels of government and available grants, while also strengthening our efforts in landlord engagement, supportive case management, and cross-sector collaboration.

O5(M) Outcome #5: Fewer people experience chronic homelessness (chronic homelessness is reduced)										
Given your answers in Section 3, you can report monthly result(s) for Outcome #5 using your person-specific data. Note: As applicable, your target must be, at minimum, a 50% reduction from your baseline.										
	March 2020	March 2021	March 2022	March 2023	March 2024	March 2025	March 2026	March 2027	March 2028	**Target**
People who experienced chronic homelessness for at least one day (that month)	53	42	49	24	55	51				25.5



O5(M)

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

March 2025

Chronic homelessness will decrease by 50% between March 2025 and March 2028.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target.
- As applicable, explain the use of "N/A" for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

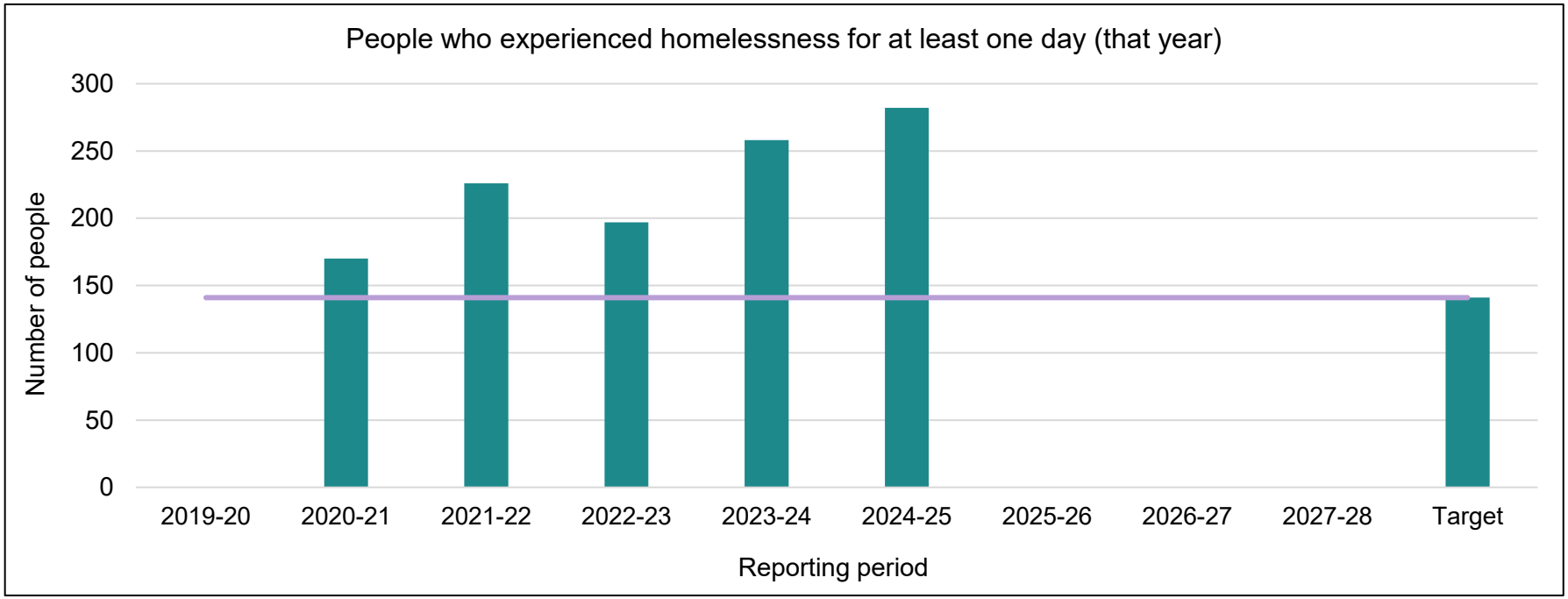
The federal mandate to reduce homelessness by 50% has motivated an increase in our original target from 25% to 50%. Although homelessness continues to rise due to external factors, such as environmental, political, and economic challenges beyond our control, we remain committed to achieving this ambitious goal. Our strategy includes pursuing funding opportunities from all levels of government and available grants, while also strengthening our efforts in landlord engagement, supportive case management, and cross-sector collaboration.

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

Our community calculates chronicity using the Provincial definition: continuously homeless for a year or longer or have had at least four episodes of homelessness in the past three years; sleeping in a place not meant for human habitation (e.g., on the street) and/or in an emergency shelter.

Using person-specific data to set baselines, set reduction targets and track progress – Annual data

O1(A)	**Outcome #1: Fewer people experience homelessness (homelessness is reduced overall)**									
Given your answers in Section 3, you can report annual result(s) for Outcome #1 using your person-specific data.										
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	**Target**
People who experienced homelessness for at least one day (that year)		170	226	197	258	282				141



O1(A)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	2024-25

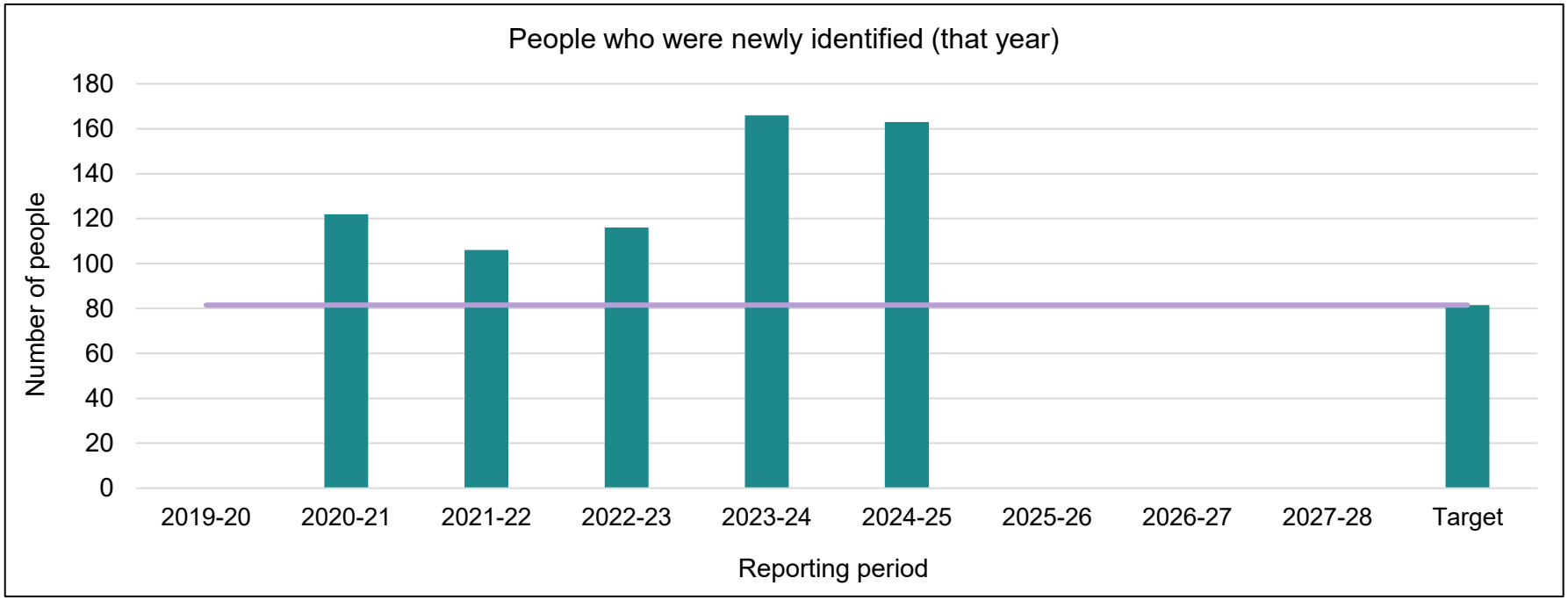
Overall homelessness will decrease by 50% between 2024-25 and 2027-28.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

The federal mandate to reduce homelessness by 50% has motivated an increase in our original target from 25% to 50%. Although homelessness continues to rise due to external factors, such as environmental, political, and economic challenges beyond our control, we remain committed to achieving this ambitious goal. Our strategy includes pursuing funding opportunities from all levels of government and available grants, while also strengthening our efforts in landlord engagement, supportive case management, and cross-sector collaboration.

O2(A)	**Outcome #2: Fewer people were newly identified (new inflows to homelessness are reduced)**									
Given your answers in Section 3, you can report annual result(s) for Outcome #2 using your person-specific data.										
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	**Target**
People who were newly identified (that year)		122	106	116	166	163				81.5



O2(A)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	2024-25

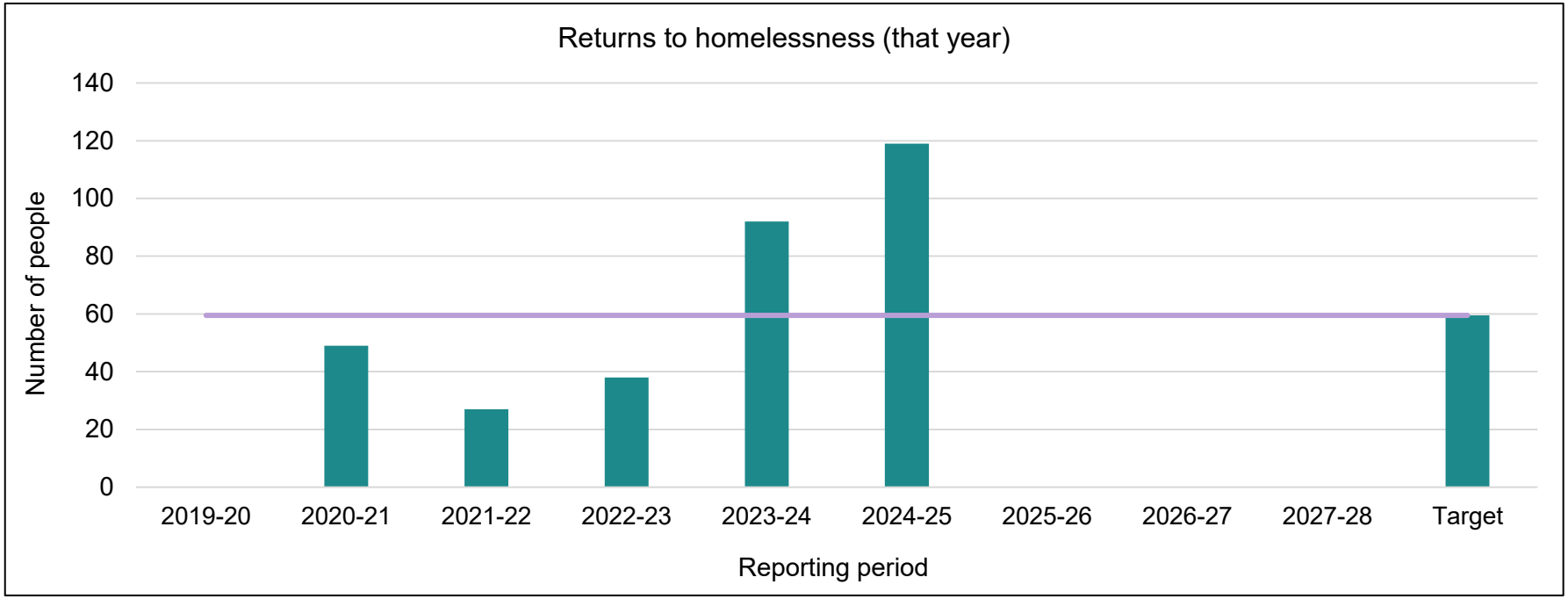
New inflows to homelessness will decrease by 50% between 2024-25 and 2027-28.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

The federal mandate to reduce homelessness by 50% has motivated an increase in our original target from 25% to 50%. Although homelessness continues to rise due to external factors, such as environmental, political, and economic challenges beyond our control, we remain committed to achieving this ambitious goal. Our strategy includes pursuing funding opportunities from all levels of government and available grants, while also strengthening our efforts in landlord engagement, supportive case management, and cross-sector collaboration.

O3(A)	Outcome #3: Fewer people return to homelessness (returns to homelessness are reduced)									
Given your answers in Section 3, you can report annual result(s) for Outcome #3 using your person-specific data.										
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	**Target**
Returns to homelessness (that year)		49	27	38	92	119				59.5



O3(A)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	2024-25

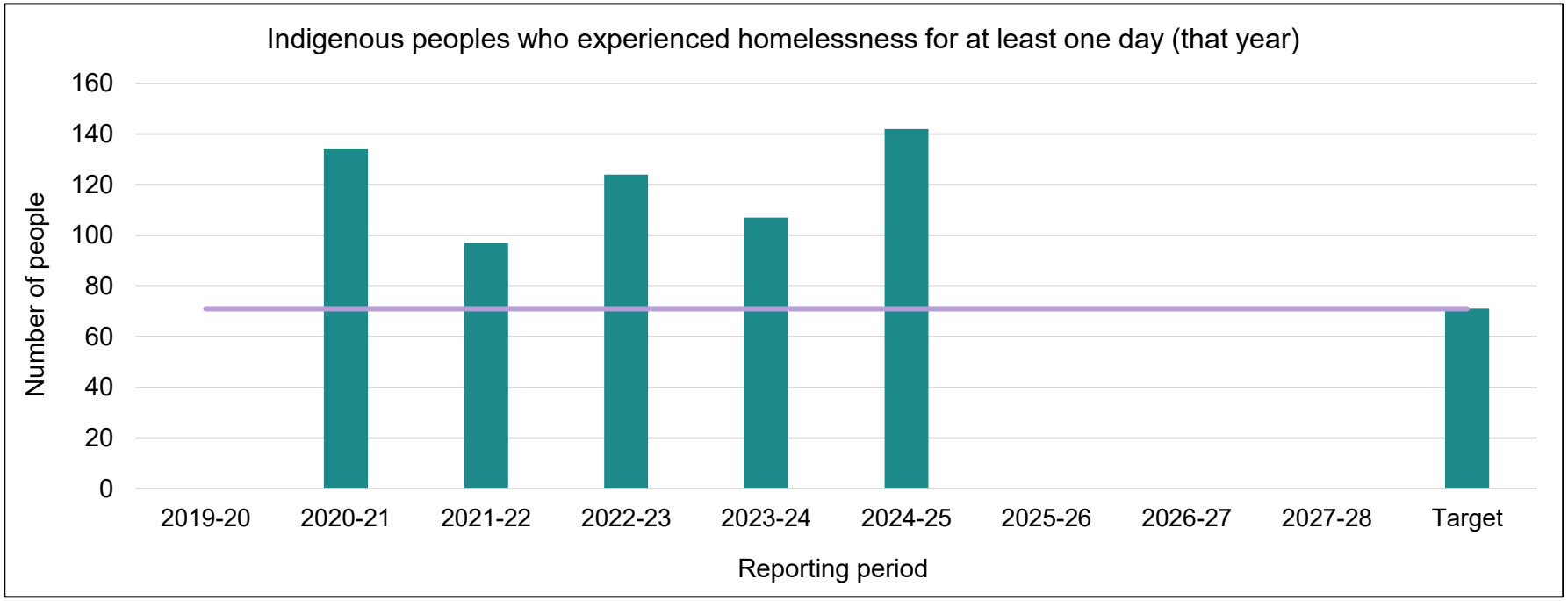
Returns to homelessness will decrease by 50% between 2024-25 and 2027-28.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

The federal mandate to reduce homelessness by 50% has motivated an increase in our original target from 25% to 50%. Although homelessness continues to rise due to external factors, such as environmental, political, and economic challenges beyond our control, we remain committed to achieving this ambitious goal. Our strategy includes pursuing funding opportunities from all levels of government and available grants, while also strengthening our efforts in landlord engagement, supportive case management, and cross-sector collaboration.

O4(A)	Outcome #4: Fewer Indigenous peoples experience homelessness (Indigenous homelessness is reduced)									
Given your answers in Section 3, you can report annual result(s) for Outcome #4 using your person-specific data.										
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	**Target**
Indigenous peoples who experienced homelessness for at least one day (that year)		134	97	124	107	142				71



O4(A)	a) What is your baseline year? The baseline is the year from which you measure change. This may be the first year you submitted outcomes, but could be the year where you have the most confidence in your data.	2024-25

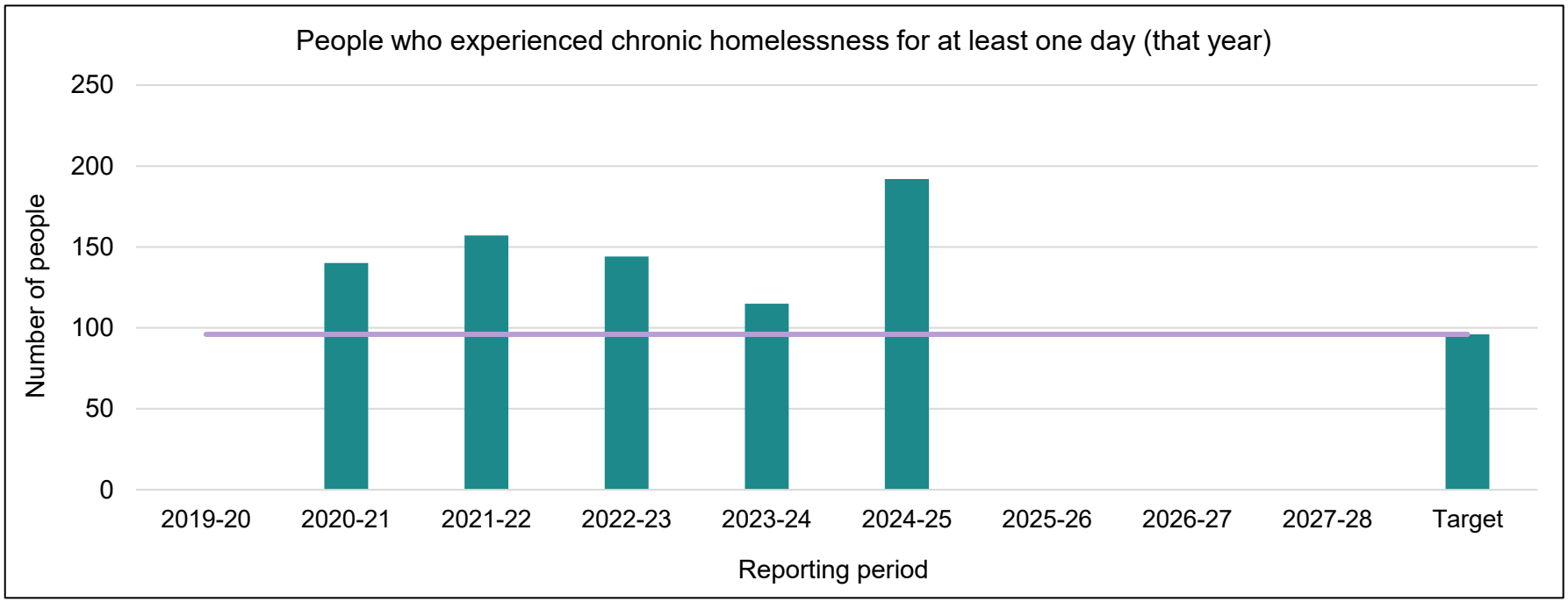
Indigenous homelessness will decrease by 50% between 2024-25 and 2027-28.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target.
- As applicable, explain the use of “N/A” for one or more data points. As a reminder, no cells should be left blank.
- As applicable, explain how Indigenous partners were engaged in the process of setting the baseline, setting the target, reporting on the outcome and/or interpreting the results.
- Optionally, provide any additional context on your data.

The federal mandate to reduce homelessness by 50% has motivated an increase in our original target from 25% to 50%. Although homelessness continues to rise due to external factors, such as environmental, political, and economic challenges beyond our control, we remain committed to achieving this ambitious goal. Our strategy includes pursuing funding opportunities from all levels of government and available grants, while also strengthening our efforts in landlord engagement, supportive case management, and cross-sector collaboration.

O5(A)	Outcome #5: Fewer people experience chronic homelessness (chronic homelessness is reduced)									
Given your answers in Section 3, you can report annual result(s) for Outcome #5 using your person-specific data. *Note: As applicable, your target must be, at minimum, a 50% reduction from your baseline.*										
	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	**Target**
People who experienced chronic homelessness for at least one day (that year)		140	157	144	115	192				96



O5(A)

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

2024-25

Chronic homelessness will decrease by 50% between 2024-25 and 2027-28.

b) Please use the comment box below to:

- As applicable, explain any changes to the data reported from the previous CHR (2023-24), including to the data itself, the baseline and the target.
- As applicable, explain the use of "N/A" for one or more data points. As a reminder, no cells should be left blank.
- Optionally, provide any additional context on your data.

The federal mandate to reduce homelessness by 50% has motivated an increase in our original target from 25% to 50%. Although homelessness continues to rise due to external factors, such as environmental, political, and economic challenges beyond our control, we remain committed to achieving this ambitious goal. Our strategy includes pursuing funding opportunities from all levels of government and available grants, while also strengthening our efforts in landlord engagement, supportive case management, and cross-sector collaboration.

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

Our community calculates chronicity using the Provincial definition: continuously homeless for a year or longer or have had at least four episodes of homelessness in the past three years; sleeping in a place not meant for human habitation (e.g., on the street) and/or in an emergency shelter.

End of Section 4a