



Starting at Home  
in Medicine Hat –  
Our 5 Year Plan to  
End Homelessness

# Year 3

## Progress Report



## Acknowledgements

The relationships built within community are directly responsible for the 442 individuals and their 230 children that were housed between April 1, 2009 and March 31, 2013.

The local leadership and support provided by the Community Council on Homelessness has been vital in the implementation of our local plan. These efforts are furthered by the unique partnership and leadership of the 7 Cities on Housing and Homelessness that work to drive change provincially and nationally. Additionally, The Medicine Hat Community Housing Society would like to extend our sincere thank-you to Iain De Jong, President and CEO of OrgCode Consulting Inc., and everyone that has been involved with and that has continues to support Starting At Home in Medicine Hat – Our 5 Year Plan to End Homelessness.

The Community Council on Homelessness Membership:

- Medicine Hat Community Housing Society (CBO/CE)
- The Salvation Army
- Alberta Employment & Immigration
- Southeast AB Child and Family Services Authority
- Alberta Health Services - Mental Health and Addictions
- Alberta Health Services – Public Health
- City of Medicine Hat
- Community Foundation of Southeast AB
- United Way of South Eastern Alberta
- McMan Youth, Family & Community Services
- Medicine Hat Women's Shelter Society
- Persons with Developmental Disabilities South Region
- Canadian Mental Health Association
- Medicine Hat and Area Food Bank
- Miywasin Society of Aboriginal Services
- Assured Income for the Severely Handicapped
- Saamis Immigration Services Association
- Medicine Hat Police Service
- Service Canada
- Alberta Human Services



Message from the Manager  
of the Homeless & Housing  
Development Department

# Year 3 Achievements

It is truly remarkable how far our community has come in three short years. Medicine Hat is now more than half way through Our 5 Year Plan to End Homelessness.

The Year 3 Progress Report to Community outlines the achievements and results of those that have collaborated to implement our Plan since its inception in 2009, and what a year it has been! This work requires a collaborative effort, involving the participation of all levels of government, local service providers, and the community as a whole. Community based responsiveness and effective approaches to ending homelessness is the foundation of our success and this past year reaffirmed the depth of this foundation.

There has been incredible progress in ending homelessness since 2009; helping more than 670 citizens of Medicine Hat who were experiencing homelessness or were at risk of becoming homeless, build better lives. In the past year alone, every three days, one person experiencing homelessness in Medicine Hat was housed.

Medicine Hat Community Housing Society is privileged to work with so many dedicated community partners and stakeholders as we work towards our collective goal of ending homelessness. A highlight of the year has been the perseverance of our service providers to excel at program delivery, and the community's efforts to elevate the conversations about how to enhance coordinated systems of care within the homeless serving sector. Other highlights this year have been the launching of the Alberta Interagency Council on Homelessness, and the renewal of the federal Homelessness Partnering Strategy.

I look forward to a year of strengthening relationships, and validating what we know to be true; we are making a difference.

Sincerely,

Jaime Rogers

# Who we are



The Medicine Hat Community Housing Society has a dual role within community.

The Medicine Hat Community Housing Society is the local Management Body that provides subsidized and affordable rental housing options for low-income families, seniors and people with special needs. MHCHS currently manages 537 units/properties and 467 private landlord rental supplements in Medicine Hat and Redcliff. 78 of these units/properties are affordable housing, and are owned and operated by the Society. An additional 32 new units will be added to the affordable housing stock in 2013/2014, which will be owned by the City of Medicine Hat, and managed by the MHCHS.

The Medicine Hat Community Housing Society also acts as the Community Based Organization (CBO) and the Community Entity (CE); established to administer funding from all orders of government and allocate it accordingly to local priorities to end homelessness. In the role of CBO/CE, the Medicine Hat Community Housing Society leads the local Plan to End Homelessness. This is accomplished through the coordinating of programming, monitoring the progress of the Plans, advancing the research agenda, sharing best practices with colleagues and programs across the country, and engaging the wider community to achieve our common goal of ending homelessness.

This dual role makes Medicine Hat extremely unique, and has been instrumental in the success to date of Our Plan to End Homelessness. In no other community has the partnership between the CBO and the Management Body been as strong as it is in Medicine Hat.

The housing first philosophy is the foundation of the Government of Alberta's A Plan for Alberta: Ending Homelessness in 10 Years, Medicine Hat's Starting at Home in Medicine Hat – Our Five Year Plan to End Homelessness, and the Government of Canada's Homelessness Partnering Strategy. This philosophy, in essence, means we value and respect people...for who they are, and where they are at in their lives. It means that we believe every person, from birth to adulthood, deserves not just a house, but a place to create a sense of belonging; a place of their own to call home. Delivering programs that are non-compliance based, non-judgmental, and client-centered drives the work accomplished under the Plan.

Programs and services that are delivered under our local Plan to End Homelessness are made possible through funding and support provided by the federal Homelessness Partnering Strategy (HPS), the provincial Outreach Support Services Initiatives (OSSI), as well as the provincial Graduate Rental Assistance Initiative (GRAI).

## Starting At Home in Medicine Hat – Our 5 Year Plan to End Homelessness

# The six goals of our plan to end homelessness

- 1 Ensure that persons have a place to live and access to necessary support services/programs.
- 2 Ensure access to emergency shelter and interim housing options with rapid transition into permanent housing.
- 3 Ensure access to permanent affordable housing, with appropriate supports for those families and individuals experiencing homelessness through an expansion of the Housing First approach.
- 4 Ensure the coordination of services for the persons who are homeless and at-risk of homelessness.
- 5 Develop and increase the supply of permanent housing options.
- 6 Strengthen the governance structure and establish an implementation process for the Plan that builds on the strengths of the community, develops capacity, promotes collaboration, innovation and cost-effectiveness, and ensures evidence informed progress.

## A Principle-Based Plan

**Medicine Hat's plan to end homelessness is based on the Housing First model and is consistent with the seven principles established in *A Plan for Alberta; Ending Homelessness in 10 years*. These principles include:**

- 1 Everyone has access to safe, affordable accessible, permanent housing.
- 2 Addressing the root causes of homelessness is essential to ending homelessness.
- 3 Preventing and ending homelessness is a shared responsibility of all orders of government, the community, the corporate sector, service providers, and citizens.
- 4 Programs and services are evidence-informed in their planning, and demonstrate measureable outcomes.
- 5 Current essential services and supports are maintained during the transition to permanent housing.
- 6 Goals and initiatives are client-centered and community driven
- 7 Funding is long-term, predictable, and aligned with a community plan to end homelessness.

## Improving Delivery

### Building Capacity

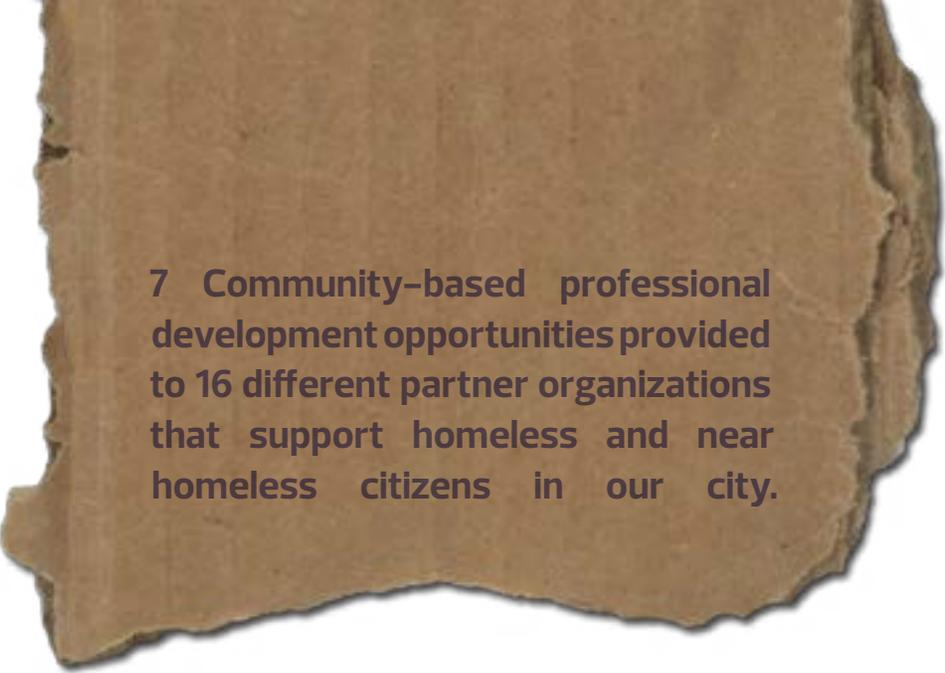
Medicine Hat Community Housing Society is continuously working to increase capacity by investing in opportunities that improves the community's ability to respond to homelessness. In particular, investments are being made to support front-line staff in working to improve their practice, as well as providing opportunities to develop the skills of those individuals that fill a leadership role in community. The service providers and community have benefitted greatly from many different learning and professional development opportunities; these opportunities will continue to be available as we move into year four of our Plan.

Additionally, the Medicine Hat Community Housing Society has been sharing our practices, processes, policies, and knowledge with those across the province and the country, that are already delivering housing first, and those that are just starting to consider delivering.

### Clinical Consultation

Since December of 2012, the Medicine Hat Community Housing Society has been working with Medicine Hat Family Service to provide clinical consultation services to service providers delivering Housing First and Rapid Re-Housing.

The addition of a clinical consultant to assist the teams has changed the way that case managers understand and now approach their most complex service participants. What is unique to this model is that the clinician works directly with the case manager, to enhance their skill, not directly with the service participant. This has elevated the overall service delivery in Medicine Hat; and has helped to enhance the quality of the intervention provided to our community's most vulnerable citizens. We are seeing a huge return on this investment; front-line staff and Team Leads are receiving mentorship and guidance that challenges their skill sets and helps them flourish into even better practitioners.



**7 Community-based professional development opportunities provided to 16 different partner organizations that support homeless and near homeless citizens in our city.**

### Landlords and Property Management Companies

The support that Medicine Hat Community Housing Society and the Housing First and Rapid Re-Housing programs continue to receive from Medicine Hat's landlord community is exceptional. Local landlords and property management companies are a vital partner in our Plan to End Homelessness. Quarterly Landlord Roundtable meetings continue to be facilitated by the Medicine Hat Community Housing Society. These meetings serve to provide information to/receive input from community landlords and to problem-solve any areas of concern that arise.

Landlords and property management companies work closely with the programs to ensure safe, appropriate, and affordable housing options are available to those individuals and families looking for a place to call home. 117 landlords and property management companies have helped 672 adults and children in Medicine Hat have a place to call home.

# Emergency Shelter Usage

There are three emergency shelter providers in Medicine Hat.

- The McMan Youth, Family and Community Services Association's Inn Between Youth Shelter provides one emergency shelter bed for community-based youth.
- The Medicine Hat Women's Shelter Society Phoenix Safe House operates a 24 bed emergency shelter for women and children fleeing family violence.
- The Salvation Army operates a 30 bed emergency intoxic shelter for adult men and women. The Salvation Army also operated the 2012-2013 Winter Response Program. On average, 27 individuals per month accessed this program to have a safe and warm place to be during day.

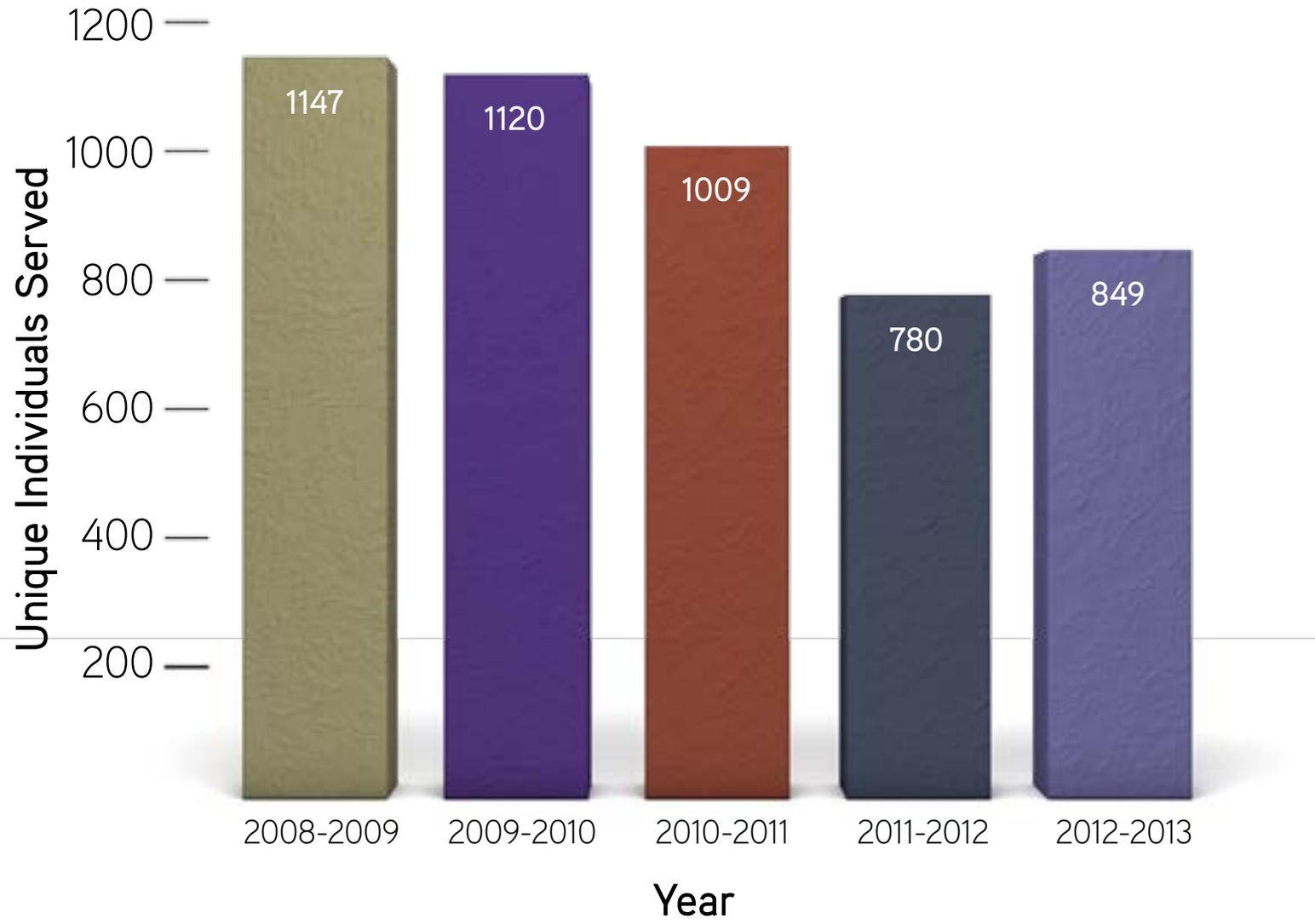
## Shelter Visioning

Strategies 8 & 13 in the Province's 10 Year Plan to End Homelessness address the need to reduce the amount of time between when individuals first enter the shelter setting to the time when they transition into permanent housing. The maximum length of stay in any shelter across Alberta will be reduced to 21 days; with appropriate community planning and improved coordination of services.

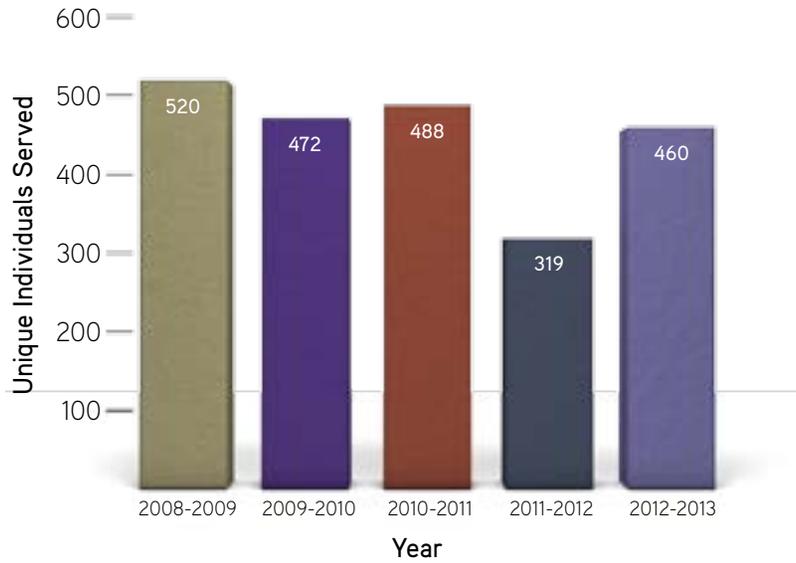
The Salvation Army, the Medicine Hat Community Housing Society, and representatives from Alberta Human Services have met to discuss the Shelter Visioning process that will address the future of emergency shelters in our community. MHCHS will continue to work closely with the Salvation Army over into the 2013-14 fiscal year to sketch out a framework that will quickly transition people out of the shelter. Once this framework is mapped out, our community partners and community at large will be invited to provide input into the process.



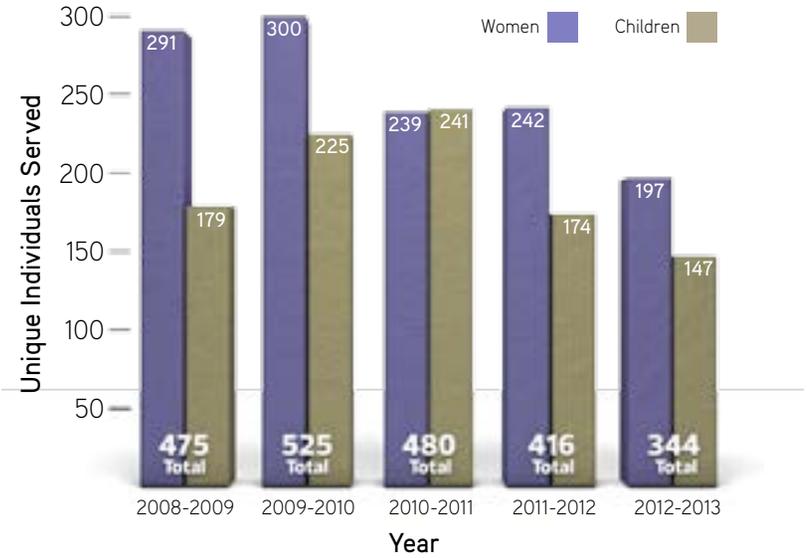
# Total Community Based Shelter Usage



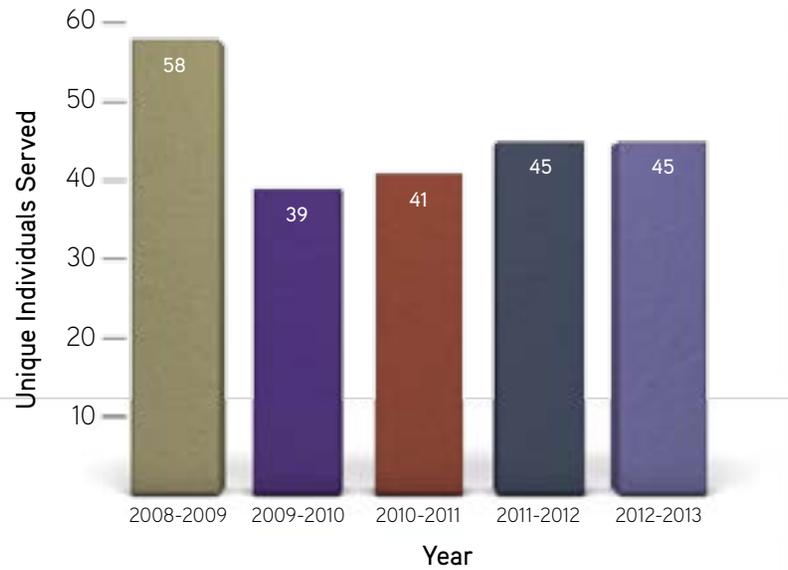
### Salvation Army Shelter



### Medicine Hat Women's Shelter Society



### McMan Inn Between Youth Shelter

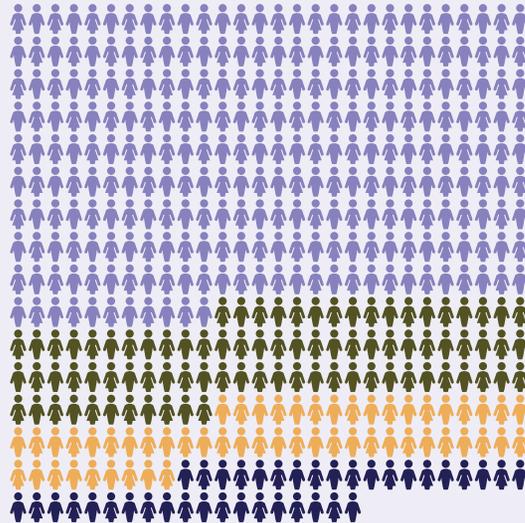


# 2012-2013 Year 3 Highlights

## Housing and Homelessness

### Housing Assessment and Triage

**439** Assessments completed (since April 2012)



**263**  
59.9%  
Assessments completed in office

**84**  
19.1%  
Assessments completed at Medicine Hat Women's Shelter

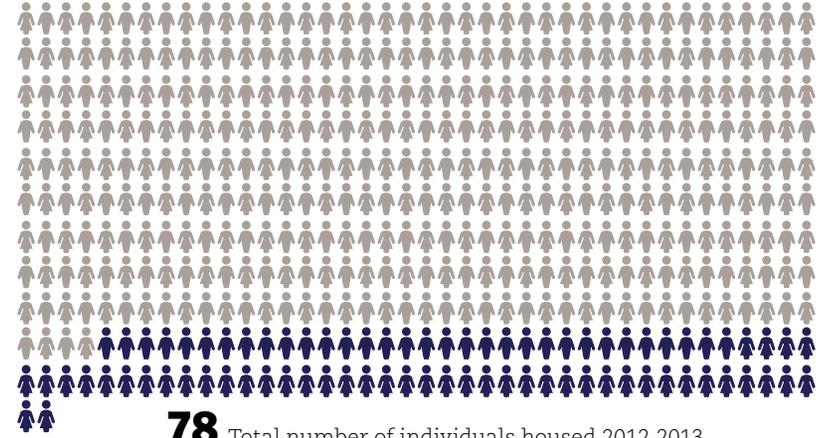
**54**  
12.3%  
Assessments completed at Salvation Army Shelter

**38**  
8.7%  
Assessments completed in hospital/treatment

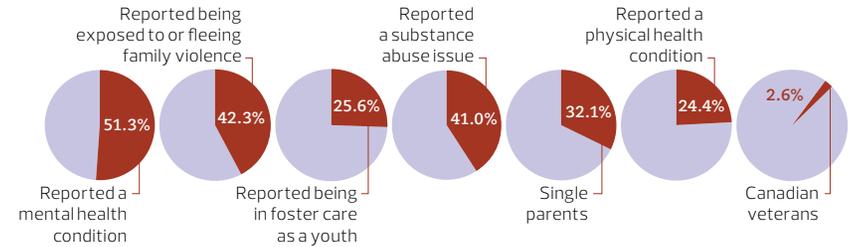
**45.9%** of individuals housed since 2009 came from shelter.

### Housing First and Rapid Re-Housing

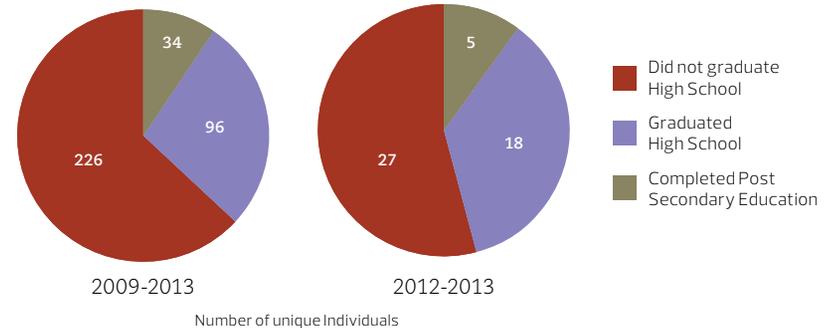
**442** Individuals housed since 2009



**78** Total number of individuals housed 2012-2013  
(32 male and 46 female)



### Education



# Sources of Income

Since 2009, at the time of housing...

13.6% of service participants were receiving AISH benefits. With the support of case management, at the time of program exit, 19.6% were connected with this resource (AISH).

10% of service participants were employed (either F/T or PT). With the support of case management, at the time of program exit, 21.4% were working.

29.6% of service participants reported having no income. With the support of case management, at the time of program exit, only 6.6% reported having no income.

### Housing Stability Program

**38** Social Housing clients supported to maintain their tenancy

### Affordable Housing

**16** Affordable Housing units built

### Miywasin Transitional Housing

**7** Units renovated and upgraded

## Financial Administrator Program (2012-2013)

### Food Bank



### Charity



**100%**

of Financial Administrator clients had stable housing at their 12 month assessment.

**23**

Budgeting for Beginners workshops were held in 2012-2013 supporting 143 unique individuals learn how to budget.



### Youth Outreach Worker Program

**39** Number of unique youth that were supported by the Youth Outreach Worker to return to/remain in home or find a safer housing situation.

## Graduate Rental Assistance Initiative (GRAI)

The Graduate Rental Assistance Initiative provides financial supports to participants that have graduated from the Housing First and Rapid Re-Housing programs. The graduation from services means that the participant has achieved a level of housing stability, and has increased their self-sufficiency to a point where they no longer require the case management supports provided through the programs. Some graduates of the program, do however still require some financial assistance to maintain their housing.

Since its inception on April 1, 2012, the Graduate Rental Assistance Initiative (GRAI) has provided 38 service participants with the ongoing financial support they required to maintain their housing stability after graduation from the programs.

**The Graduate Rental Assistance Initiative provided, on average, \$5365 in rental assistance each month during the 2012-2013 fiscal year**

## Permanent Supportive Housing

The need for Permanent Supportive Housing (PSH) has been identified through many different avenues; community planning, examination of current caseload structures within the Housing First and Rapid Re-Housing programs, the review of outcomes across community, shelter occupancy and trends, clinical consultations, and reviews of case files for those that have been flagged as potentially needing PSH.

The impact of connecting individuals experiencing homelessness to the right program with the appropriate level of supports has proven very effective in Medicine Hat as evidenced by program and service participant outcomes. Approximately 14% of current service participants in the Housing First and Rapid Re-Housing programs are being underserved due to a lack of appropriate housing and supports, thus highlighting the need for specialized types of Permanent Supportive/Supported Housing (PSH) in community. Participants requiring PSH will continue to be supported by the Housing First and Rapid Re-Housing programs until such time that PSH is developed in Medicine Hat.

**The Salvation Army Hot Meal Program serves over 1000 meals each month to individuals and families**

**Community has achieved  
a **72.3%** overall success  
rate since 2009 by using  
a housing first approach**

**“I’m amazed by the progress Medicine Hat is making. You are within striking distance of ending homelessness, potentially becoming the first community in North America to be able to say that.”**

**– Tim Richter, President &  
CEO Canadian Alliance to  
End Homelessness.**

## Progressing the Plan

Medicine Hat Community Housing Society is extremely proud of the work accomplished in community, and our role in leading the efforts relative to these accomplishments. The question that is continually asked and that guides the work we lead in community is: “How do we build the program that is needed to deliver the results our community needs?” Real transformation occurs when people and clients feel a sense of belonging in their community. It takes mindful people to guide and support this transformation.

### Efforts to Outcomes (ETO) & Data

Efforts to Outcomes (ETO) is a web-based data collection application that is used by programs in Medicine Hat and serves as the Homeless Management Information System in Alberta. ETO provides a platform to collect standardized information relative to the experience of individuals and families that have entered the Housing First and Rapid Re-Housing programs.

Analysis of the Housing First, Rapid Re-Housing, and Housing Assessment and Triage data collection in ETO helps to reveal a more accurate picture of what homelessness looks like in Medicine Hat. An increased

**In 2012-13 the Housing First and Rapid Re-Housing programs were provided with new technology that will allow them to be able to record data in ETO remotely, allowing them to be more efficient in the collection of data**

understanding of who we are serving allows us to refine and develop programs, services and policies that elevate the level of support provided to our community’s most vulnerable citizens.

The system is used by frontline workers as a case management tool. The information captured in this database is used to improve our understanding of participant demographics and needs. In addition to demographic information, assessments that capture the progression of individuals’ time in the program are also included in the database. These assessments are used to drive case management as they highlight areas of service need.

The Service Prioritization Decision Assistance Tool (SPDAT) is used across the community and the province to determine level of service need, and to prioritize services for individuals entering into the homeless serving sector. Participants are first introduced to the SPDAT through Housing Assessment and Triage to determine their level of service need and appropriateness for the Housing First or Rapid Re-Housing programs.

An individual’s level of need is determined based on the 15 different dimensions of the SPDAT, including mental health and wellness, interaction with emergency services, history of homelessness and housing, and other aspects that would impact the level of support required to achieve housing stability. The SPDAT is administered by the Housing First and Rapid Re-Housing programs at regular intervals throughout the duration of a participant’s involvement in the program to track the changes in the level of support required while in the program.

The Medicine Hat Community Housing Society is continually analyzing the data to help drive and inform decisions that impact the local Plan to End Homelessness and to inform conversations at the provincial and national level. The data drives change. This means that we make evidence-informed decisions with the most current information available.

## Promoting the Research Agenda

### Youth Homelessness

The Medicine Hat Community Housing Society along with key stakeholders in the community, are currently working with Dr. Yale D. Belanger, Ph.D. from the University of Lethbridge on a scoping study to determine the extent of youth homelessness in the City of Medicine Hat. Preliminary investigation combined with anecdotal evidence suggests that youth homelessness in Medicine Hat may be becoming more prevalent. This research will look to examine the scope of the problem, the demographics of those impacted, the factors that put youth at risk, how youth perceive homelessness, and the mechanisms that youth employ to remain socially functional while in a homeless state.

This research will set the foundation that will guide the next steps of developing strategies to end youth homelessness in Medicine Hat



### Poverty Reduction

It is widely understood that poverty is the number one contributor for entering into and remaining homeless. In 2012, the Medicine Hat Community Housing Society capitalized on an opportunity to participate and invest in a community-based research initiative that aimed to create a greater understanding about how to reduce poverty in Medicine Hat. The organization's investment in this community effort was made possible through our partnership with the federal government and their Homelessness Partnering Strategy. Two other community partners, the United Way of South Eastern Alberta, and the Community Foundation, also invested in this research, with the Medicine Hat Community Housing Society overseeing the research for community. The report *Moving From Charity to Investment: Reducing the Cost of Poverty in Medicine Hat* that was released in March 2013, aims to move from a charity-based to an investment approach; to think about how moderate investments made now can lead to significant and long-term social benefit, financial savings, and economic growth in the future. Six priority areas are examined in the report; Living Wages, Affordable Housing, Recreation, Education, Transportation and Food Security. An increased understanding of how far reaching this social issue in our community will help to shape the way we invest, so that we can achieve long term impact in the community.

### Interagency Council on Homelessness

Medicine Hat Community Housing Society is honored to have been appointed as one of the Community Based Organization representative to the Alberta Interagency Council on Homelessness. The Interagency Council on Homelessness is made up of 32 individuals representing various sectors and levels of government with knowledge and expertise in the areas of housing and homelessness. The work of this Council will help to propel the homelessness agenda forward by elevating the conversations and revealing and addressing the systemic barriers to ending homelessness experienced by communities across the province.

**672 individuals, including  
230 children, in Medicine  
Hat have brought  
themselves out of  
homelessness since 2009**



## Looking Ahead

Our community is positioned to be the first in Canada to end homelessness – however we are not done yet. Continued investment in community is critical to the success of Starting at Home in Medicine Hat: Our 5 Year Plan to End Homelessness.

As we move into year four of Our Plan, we are focused on some key areas that will support us in ending homelessness in Medicine Hat; Permanent Supportive/Supported Housing, promoting the research agenda, working with the Salvation Army on the Shelter Visioning, and improving coordinated service delivery including effective discharge planning that ensures individuals being released from places such as the hospital are not discharged into homelessness. The refocusing of our plan will also be a priority this year.

This year will mark some transition in programming as we welcome Canadian Mental Health Association as our newest Housing First service provider. This addition will undoubtedly bring more diverse perspectives and strengths to the community table.

Medicine Hat is being recognized as a leader both nationally and provincially for the work being done at the local level. We need to continue to plan smartly, invest wisely, and maintain the highest quality intervention delivered in community.

In 2009, Medicine Hat committed to ending homelessness in 1,825 days.

**We intend to make every day count.**



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**“Ending homelessness is an audacious goal. When I look at Medicine Hat, I see a community that put their shoulder to the grind to turn the goal into an achievable reality. Results speak for themselves, and speak louder than words. I can see a future when even more communities across Canada and the US look at Medicine Hat and realize what is happening in this sleepy part of Southeast Alberta is a model of how to achieve success.”**

— Iain De Jong,  
President and CEO OrgCode Consulting Inc.

