

Association canadienne pour la santé mentale Kootenays La santé mentale pour tous



HOMELESS AT RISK – OUTCOMES REPORTS APRIL 1 2019 to MARCH 31 2020

PROGRAM DESCRIPTION – Homeless-At- Risk (HAR) housing consists of forty-six units (Abbott Gardens in Cranbrook, and Gatehouse Gardens in Kimberley) available to low income, marginalized persons who are able to live independently. Core services provided are property management services.
PURPOSE – This report is intended for board, management, program staff, stakeholders and persons served. Feedback and suggestions to assist with continuous quality improvement planning are both solicited and encouraged.

| Key Demographics | 2015 | 2016 | 2017 | 2018 | 2019 | 5 Year | Findings |
|---|------|------|------|------|------|---------|--|
| | 2016 | 2017 | 2018 | 2019 | 2020 | Average | |
| # of adult males housed | 23 | 25 | 22 | 25 | 28 | 24.6 | The data has remained reasonably consistent over the past |
| # of adult females housed | 22 | 22 | 21 | 24 | 27 | 23.2 | 5 years |
| Total | 45 | 47 | 43 | 49 | 55 | 47.8 | |
| Average age of adult tenants | 46 | 47 | 48 | 46 | 48 | 47 | |
| Average length of tenancy | 7 | 8 | 8 | 8 | 10 | 8.2 | |
| # of tenants who moved to higher care | 1 | 1 | 2 | 0 | 2 | 1.2 | |
| facilities | | | | | | | |
| # of deceased tenants | 1 | 1 | 2 | 0 | 2 | 1.2 | |
| # of clients who returned to non-subsidized | 1 | 0 | 0 | 7 | 4 | 2.4 | |
| housing/other | | | | | | | |
| # of minorities housed | 1 | 1 | 1 | 4 | 4 | 2.2 | |
| File Status at Year End | 2015 | 2016 | 2017 | 2018 | 2019 | 5 Year | Findings |
| | 2016 | 2017 | 2018 | 2019 | 2020 | Average | |
| Open | 46 | 46 | 46 | 46 | 46 | 46 | Relatively consistent year over year. The number of open |
| Closed | 5 | 3 | 6 | 4 | 8 | 5.2 | and closed files fluctuates at any given time and typically no |
| | | | | | | | trends are noted. |

| Risks & Barriers | 2015 | 2016 | 2017 | 2018 | 2019 | 5 Year | Findings |
|---|------|------|------|------|------|---------|---|
| | 2016 | 2017 | 2018 | 2019 | 2020 | Average | |
| # experiencing significant barriers as a result of English as a second language / cultural issues | 5 | 5 | 5 | 5 | 4 | 4.8 | 5 year comparative average continues to indicate that the number of tenants experiencing health related issues is relatively static. These findings are not surprising given this |
| # experiencing significant barriers due to physical/health issues | 35 | 32 | 30 | 37 | 37 | 34.2 | population is typically considered to be one that is marginalized. |



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| # experiencing significant barriers based on mental health issues or anti-social behaviors | 33 | 32 | 30 | 34 | 37 | 33.2 |
|---|----|----|----|----|----|------|
| # experiencing long term mental health problems | 31 | 31 | 29 | 33 | 35 | 31.8 |
| # significantly involved in alcohol or drug misuse | 19 | 21 | 20 | 19 | 19 | 19.6 |

REFERRAL ELSEWHERE: Whenever risks and barriers such as those indicated above become prevailing factors, housing staff work with tenants to ensure appropriate community referral sources are identified and to provide assistance with the referral elsewhere process. Housing staff work collaboratively with tenants who request these referrals. Throughout the year 4 tenants were referred to other community service providers. Examples of community referrals in family housing typically include family legal services, homecare services, or community resource centres. In addition to tenants being referred to resources outside the agency, 1 tenant was referred to other services offered by the agency.

| Referral Elsewhere | 2015 2016 | 2016 2017 | 2017 2018 | 2018 2019 | 2019 2020 | 5 Year Average | Findings |
|---|--------------|--------------|--------------|--------------|--------------|-------------------|---|
| Referral to other services offered by the | 4 | 3 | 3 | 3 | 1 | 2.8 | Data appears relatively static with no new trends |
| agency | | | | | | | identified. |
| Referral in the community | 5 | 4 | 4 | 3 | 4 | 4 | |

GOAL SETTING & RESULTS Service outcomes are intended to assess the safety and affordability of the living environment, health benefits, and value of social opportunities provided. 73 surveys were distributed to tenants and 53 were returned. Surveys are distributed at intake for pre-service responses and again at exit as well as annually at time of rent review for post-service or service-to-date responses.

| Objective Type: | Indicator | Who Applied To | Target Goal | Actual Result | Met or | |
|--|---|-------------------------------------|------------------|--------------------------------|---------------|--|
| Effectiveness Measures | | | Expectancy | | Exceeded | |
| 1. Provide secure housing | The security of the access/entry to tenant | All Tenants at Time of | 90% | 91% | 1 | |
| | residence | Survey | | (42 of 46) | v | |
| 2. Provide affordable housing | The affordability of rental unit | All Tenants at Time of | 90% | 92% | √ | |
| | | Survey | | (48 of 52) | v | |
| 3. Provide stable housing | Length of tenancy | All HAR Housing Tenants | 7 years | 11 years | ✓ | |
| Findings: Of the 53 returned surveys 46 | responded to the question "the security of the acce | ss/entry to your residence. 42 of 4 | 6 respondents | Recommendati | ons: Continue | |
| indicated good or satisfactory response | s to this question. Of the 53 returned surveys 52 res | ponded to the question "the afford | dability of your | to monitor and maintain tenant | | |
| rental unit" 48 of 52 respondents indica | tistic recorded | feedback on the effectiveness | | | | |
| in, and gathered from, tenant files. The | opulation is | of HAR housing relative to the | | | | |
| continuing to be able to remain indeper | ndent and direct their own care prior to moving to hi | igher care facilities. | | areas of safety, | affordability | |
| | | | | (90%) and stability (7 years). | | |





PAST PARTICIPANT FEEDBACK: Past participant feedback is intended to solicit feedback from tenants after they have left HAR housing. However, in the HAR units the turnover rates are exceptionally low and, as such, past participant feedback is difficult if not impossible to achieve.

PROGRAM EFFICIENCIES – The efficiency measured by housing staff was to examine program utilization by monitoring occupancy rates.

| Objective Type: Efficiency Measures | Indicator | Who Applied To | Target Goal Expectancy | Actual Result | Met or Exceeded |
|--|---------------------------|---------------------------------------|------------------------|---------------|-----------------|
| Maintain occupancy at 99% | Occupancy rate | HAR Housing Units | 99% | 98% | x |
| Findings: There are a total of 46 HAR units | d there was a total of 13 | Recommendations maintain an occupancy | | | |
| vacant units during the year. In calculating | : | rate of 99% for the cor | ming 2020-21 fiscal | | |
| 13 vacant units / 552 total units = .02 or (.0 | rate is 98%. | year. | | | |

PROGRAM SATISFACTION

| Objective Type: Consumer Input | Indicator | Who Applied To | Target Goal Expectancy | Actual Result | Met or Exceeded |
|--|--|----------------------------|--|-------------------|--------------------|
| Maintain tenant satisfaction levels | Tenant satisfaction | All tenants of HAR housing | 85% | 98% (51 of 52) | ✓ |
| Objective Type: Stakeholder Input | Indicator | Who Applied To | Target Goal Expectancy | Actual Result | Met or Exceeded |
| Maintain stakeholder satisfaction levels | Stakeholders satisfaction | Non-tenant stakeholders | 85% | 94% (33 of 35) | ✓ |
| Findings: Of the 53 tenant surveys returned question asking if staff are willing to listen to property management questions. 51 of 1 indicated good or satisfactory responses to non-tenant stakeholder feedback surveys v 35 were returned. 33 of 35 respondents in question did the program meet your expect delivery to the service user? | and provide answers 52 respondents o this question. 35 were distributed and dicated "yes" to the | | to monitor to ensure a minimum or nd record stakeholder satisfaction fe | | |

PROGRAM ACCESSIBILITY: During the year program staff received 20 requests to accommodate tenants. Each of these requests upon review was deemed reasonable and as such staff undertook the following measures to accommodate: provided additional support and/or information, added an accessibility feature to a tenant unit, attended a meeting with a tenant and third party, completed outreach on behalf of a tenant and contacted family and/or friends to discuss tenancy. In addition to the above, program staff deemed that housing accessibility for tenants would be 100% sourced from the Housing Registry which affords maximum accessibility through province-wide exposure to potential tenants



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| Objective Type: Access Measures | Indicator | Who Applied to | Target Goal Expectancy | Actual Result | Met or |
|---|--------------------------------------|---|---|---|------------------------|
| | | | | | Exceeded |
| 1. Tenants accessing services requiring | % of tenants requesting | All tenants who are accessing | 5% | 43% | |
| accommodation to facilitate access | accommodation | housing | | (20 of 46) | • |
| 2. BC Housing Registry Waitlist | % of tenants on waitlist for housing | All tenants on the waitlist that | 100% | 100% | |
| | | received housing in the fiscal | | (5 of 5) | • |
| Accessibility Findings: Each of the 20 req initiatives was deemed achievable and as housed came from the registry waitlist de | such, implemented. 5 of 5 tenants | Recommendations: a. Continue to regular basis. b. Record and consid- if these are reasonable and / or do who have applied via the on-line H units become available. | der any substantive accomm bable. c. Continue to fill 100 | odation requests t % of vacancies with | o determine tenants |

ADMINISTRATIVE OBJECTIVES

| Objective Type: Access Measures | Indicator | Who Applied To | Target Goal Expectancy | Actual Result | Met or Exceeded | |
|---|---------------------------------|--|------------------------|---------------|-----------------|--|
| 1. Make available at least two external | Number of external trainings | HAR Staff | 75% | 400% | | |
| professional development opportunities to | scheduled for staff | | | | \checkmark | |
| staff by end of the fiscal year. | | | | | | |
| Findings: Staff were able to attend 8 outside | trainings over the fiscal year. | Recommendations: a. Continue to make available opportunities for the | | | | |
| | | professional development of staff. | | | | |

Data collated via Excel Spreadsheet Report Completed by Justine Cohen, Director of Housing Services Date: April 1, 2020 Report Reviewed by Carey Fraser, Executive Director