

# City of Hamilton Homeless-Serving Coordinated Access System Process Guide

# March 2022

Please direct any questions to:

Homeless.Policy@hamilton.ca

This document was drafted by the Housing Services Division and will be updated as Coordinated Access processes evolve in the community. As such, some policies listed in these guidelines may change. Revised versions of these program guidelines will be provided to community as they become available.

Thank you to the Coalition for Indigenous Leadership, our community partners, and individuals with lived experience for their input and ongoing shared leadership in implementing Coordinated Access in Hamilton. We would also like to thank Canadian Alliance to End Homelessness, OrgCode Consulting, other community members of the Built for Zero movement, and Economic and Social Development Canada for their support with resources and guidance.

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# Introduction

We know homelessness is a complex social challenge with many structural drivers that we are not able to eliminate. We know that we cannot end all experiences of homelessness forever. What we are looking to do as a community is to build a housing response system that ensures homelessness is prevented whenever possible, or if it cannot be prevented, that it is rare, brief, and non-recurring.

Through Coordinated Access (CA), the City of Hamilton Homeless-serving sector is building a system where we are able to:

- Quickly identify and engage people at risk of and experiencing homelessness
- Intervene to prevent the loss of housing and divert people from entering the housing crisis response system
- When homelessness does occur, provide immediate access to shelter and crisis services while permanent stable housing and appropriate supports are secured
- Quickly connect people to housing assistance and services tailored to their unique needs and strengths – to help them achieve and maintain stable housing

Coordinated Access is not a program; it is an integrated process that streamlines access to resources for people at risk of or experiencing homelessness. This process aims to remove barriers individuals experiencing homelessness face when trying to navigate among services and programs run by different organizations. Without Coordinated Access, a client must tell their story repeatedly through multiple intakes, applications, and interviews without necessarily landing at the right program or set of resources to meet their needs. The silos, gaps, and duplication in an uncoordinated system contribute to traumatic experiences and prolonged homelessness as well as greater reliance on emergency supports.

Our vision through Coordinated Access is that an individual experiencing homelessness can access any door to the homeless-serving system (e.g. emergency shelter, outreach, drop-ins, Housing Services Division) in order to access a whole community of supports. Clients are asked to share their story one time through common intake and consent for inclusion in our shared HIFIS database and By-Name List (BNL). Common assessment supports a community-wide approach to assessing and triaging clients to effectively connect them with the right range of supports. This helps move from an approach where clients are served by single organizations to one where we take shared responsibility for ensuring everyone accesses their right to housing as equitably and efficiently as possible.

This document outlines the core principles, policies, and procedures that structure the Homeless-serving Coordinated Access System in the City of Hamilton. This guide will be reviewed and updated on an ongoing basis as the system evolves to advance collective goals towards ending homelessness.

# **Background**

Hamilton's housing and homelessness system is funded by all levels of government, investing approximately \$120 million annually in the community, including a \$64 million municipal contribution in 2021. This investment is guided by the strategies and goals laid out in the City of Hamilton's 10-year <a href="Housing and Homelessness Action Plan">Housing and Homelessness Action Plan</a> to make sure everyone in Hamilton has a home, including:

- Investments in building affordable housing
- Preserving community housing units and managing access to subsidized housing
- Managing coordinated access to a diverse range of housing solutions grounded in rights-based housing first principles
- Identifying mechanisms to build capacity in the development process in the Indigenous community to support the goal of Indigenous owned capital resources

Investments specifically targeted towards housing-focused interventions to prevent and end people's experience of homelessness total more than \$25 million annually in regular funding and has additionally included more than \$60 million in pandemic response funds. Together these investments make up a wholistic homeless-serving and prevention system, which includes: Prevention and Diversion, Housing-focused Shelters, Street Outreach, Rapid Rehousing, Transitional Housing, Intensive Case Management, and Permanent Housing with Supports. Pandemic response has expanded supports to include drop-in programs.

Our long-term strategy to end homelessness is driven by best practice evidence, real-time community data, and community engagement. This is why Hamilton's homeless-serving sector started developing our Coordinated Access System in 2016. Building on decades of collaboration, our sector sought to formalize standardized practices for common assessment while building our community's By-Name List, which achieved Quality BNL designation in 2018.

On April 1, 2019 the federal government launched Reaching Home as a revision to the former Homelessness Partnering Strategy (HPS). Under the Reaching Home directives, the City is mandated to achieve core requirements that help strengthen an evidence-based and integrated approach across the homelessness sector through Coordinated Access. These requirements are deeply aligned with The City of Hamilton's 10-year Housing and Homelessness Action Plan and Hamilton's Coming Together to End Homelessness Systems Planning Framework (CTEH) developed in 2019. This document builds directly from a legacy of community informed system planning to lay out a clear roadmap for community-wide action to end chronic homelessness in Hamilton by 2025.

The City of Hamilton, Housing Services Division is the designated Community Entity (CE) responsible for local implementation of the Reaching Home strategy and related investments. This is done in partnership with the CE for the Reaching Home Indigenous funding stream, the Coalition of Hamilton Indigenous Leadership (CHIL). CHIL is a collaborative of leaders at Indigenous organizations who work to enhance and improve

Indigenous-led and Indigenous-serving community resources while amplifying Indigenous voices in Hamilton.

Rooted in reconciliation, the CTEH framework underpinning Hamilton's Coordinated Access System acknowledges Indigenous homelessness as a colonial legacy. The interconnectedness of historical and ongoing colonialism, residential schools, intergenerational trauma, and ongoing systematic social and economic marginalization of Indigenous peoples drive our action toward addressing Indigenous homelessness in Hamilton.

# **Defining Homelessness**

To ensure Hamilton's Homeless-Serving System works to end homelessness, we must have a common understanding of homelessness.

Research on homelessness demonstrates a complex interplay of structural factors, systems failures, and individual circumstances. The Canadian Observatory on Homelessness defines homelessness as "the situation of an individual, family or community without stable, permanent, appropriate housing, or the immediate prospect, means and ability of acquiring it." This includes individuals or families who are unsheltered, in emergency shelter, provisionally accommodated, and precariously housed. An individual is considered to be experiencing chronic homelessness if they have been homeless for 6 months (180 days) or more over the past year or have had recurrent experiences of homelessness over the past 3 years, with a cumulative duration of at least 18 months (546 days). These working definitions of homelessness and chronic homelessness have been endorsed by the federal government and has been adopted by municipalities across Canada.

Indigenous peoples experience homelessness, as well as other forms of social exclusion, at a higher rate than the non-Indigenous population. Hamilton's homeless-serving system recognizes Indigenous homelessness as a colonial legacy rooted in historical and ongoing trauma. Indigenous homelessness is defined as "Indigenous homelessness refers to "Indigenous Peoples who are in the state of having no home due to colonization, trauma and/or whose social, cultural, economic, and political conditions place them in poverty. Having no home includes: those who alternate between shelter and unsheltered, living on the street, couch surfing, using emergency shelters, living in unaffordable, inadequate, substandard and unsafe accommodations or living without the security of tenure; anyone regardless of age, released from facilities (such as hospitals, mental health and addiction treatment centers, prisons, transition houses), fleeing unsafe homes as a result of abuse in all its definitions, and any youth transitioning from all forms of care." (Aboriginal Standing Committee on Housing and Homelessness, Reaching Home Directives, 2020).

# **Guiding Principles**

Hamilton's Coordinated Access System is a community-wide approach aimed at actualizing the right to housing for all Hamiltonians. Our system is designed to ensure consistent, equitable, and transparent processes for supporting individuals and families to prevent and end experiences of homelessness. Using a Housing First approach, participating agencies work together to assess people's unique housing related needs based on standardized intake and assessment procedures. This common assessment is then used to match and connect people to the right-level of available resources to find and keep housing.

Hamilton's Homeless-serving Sector is grounded in strength-based and person-centred values. People with Lived and Living Experience are at the centre of our system. It is their knowledge and experience that drives our rights-based, intersectional approach to advancing social and racial justice. Programs and policies are grounded in person-centred approaches to understanding and addressing the unique needs and strengths of Indigenous people, racialized community members, gender diverse and 2SLGBTQ+community members, women, youth, seniors, and newcomers.

We are committed to building a Coordinated Access System that advances Truth and Reconciliation. Deep collaboration with Indigenous leadership grounds our community's response to Indigenous homelessness in a way that respects, honours, and promotes the strength and resilience of Indigenous Peoples. This includes commitment to embedding principles and practices that support Indigenous data stewardship into our Coordinated Access System.

Our Coordinated Access System follows the principles of Housing First and shares real-time data to facilitate a responsive housing process. This ensures we get the most out of limited resources and we can more rapidly and effectively prevent and end homelessness for those in greatest need and facing the greatest barriers. Data driven responses help to move from an approach where clients are served by single organizations based on first-come, first serve or those with the strongest advocate to one based on a collective approach guided by principles of equity and transparency.

Core principles of Housing First include:

- Rapid housing placement with supports: This involves helping participants locate and secure accommodation as rapidly as possible and assisting them with moving-in.
- Offering participants a reasonable choice: Participants must be given a reasonable choice in terms of housing options as well as the services they wish to access.

- Separating housing provision from treatment services: Acceptance of treatment, following treatment, or compliance with services is not a requirement for housing tenure.
- **Providing tenancy rights and responsibilities**: Participants are required to contribute a portion of their income towards rent.
- Integrating housing into the community to encourage participant recovery.
- Recovery-based and promoting self-sufficiency: The focus is on capabilities of the person, based on self-determined goals, which may include employment, education and participation in the community.

# What is Coordinated Access?

Coordinated Access is a process whereby service providers work together to streamline the way people experiencing homelessness access housing support services needed to permanently end their homelessness.

Core components of Coordinated Access include:

- Entry Points: These refer to points where individuals experiencing homelessness enter into the homeless serving system, such as through: shelters, drop-ins, outreach, or City of Hamilton Housing Division. Staff at entry points attempt to complete diversion by connecting individuals with supports that may help them prevent homelessness. Where homelessness cannot be prevented, staff at entry points complete a common intake and consent process to enter clients into the Coordinated Access System to ensure they are able to benefit from a community of supports.
- Common Assessment: common assessment supports a community-wide approach to assessing and triaging clients to effectively identify and connect them with the right stream of supports. Using one consistent suite of tools helps limit the number of times individuals have to repeat their stories while enabling us to identify their needs and strengths. By putting the results of these conversations in HIFIS, we are able to collectively identify who needs what kinds of resources and where they've sought support.
- Real-time Data: The Homeless Individuals and Families Information System
  (HIFIS) database and the By-Name List (BNL) form the basis of Hamilton's
  Homelessness Management Information System which underpins our
  Coordinated Access System. Together they form a robust data system
  supporting identification and prioritization at a household level, while also
  providing an understanding of homelessness inflow and outflow at a system

level. A BNL is not simply a list of clients experiencing homelessness, nor is it a chronological list or waitlist for service. Data drawn from HIFIS and consolidated in the BNL is used to triage connection to specific services based on level of need, preferences, and available resources. It is also an advocacy and planning tool to monitor performance, evaluate and identify gaps and areas for improvement, and support advocacy for the policies and resources necessary to end homelessness.

• Prioritization & Matching: By establishing community prioritization criteria, we are building clear and transparent processes for right-matching housing resources to those with the greatest need and the most potential to benefit from available housing resources. Information collected through common assessment and captured in HIFIS and the BNL forms the basis of a By-Name Priority List (BNPL) as a smaller subset of individuals to be referred to specific housing resources and/or programs. This is done by applying community criteria to match housing resources to people who would benefit most. Clients not prioritized for immediate referral to an available resource (such as Intensive Case Management and Rapid Rehousing programs) continue to receive supports to resolve their homelessness and engage with community resources. Staff at dropins, shelters, and outreach work every day to build relationships, establish trust and support clients in taking steps to resolve homelessness on their own terms.

# **Benefits of Coordinated Access**

Coordinated Access does not immediately create more housing opportunities; however, it enables us to align processes and resources as a community to ensure the most effective, efficient, and equitable use of limited resources.

Benefits of Coordinated Access			
Participants	Service Providers	Funders	
Coordinated Access means	Have confidence programs are	Receive more complete and	
every door is the right one to	reaching the right people who	current data	
connect clients to a whole	can most benefit		
community of potential		Identify needs, gaps, and	
resources	Avoid repeating work already	strengths across the system	
	done by another provider		
Simplify and speed up the		Reduce system inefficiencies	
process to locate and access	Don't have to spend time		
housing services	screening clients or managing	Comply with local, provincial,	
	waitlists	and federal mandates	

Appropriate referrals will lead to
less frustration and better
service

Only having to explain needs and circumstances once, thus avoiding repeated stress and trauma

Be referred only to programs they are eligible for

Save time and resources allowing staff to focus on housing and case management

Build trust and collaborations that ease caseloads, strengthen the social service network, and move clients more quickly to self-sufficiency Foster collaboration among providers

Maximize existing funding

Reduce overall use of emergency services; streamline services; improve service delivery and client outcomes; and reduce recidivism

# **Coordinated Entry Points**

Entry points may be the providers of: prevention services, street outreach, emergency shelters, or drop-ins. The City of Hamilton will strategically seek to onboard entry points to expand geographic coverage and ensure engagement with populations that may not have easy access to centralized entry points, such as youth or populations exiting health or justice institutions.

Each Entry Point is required to do the following:

- Conduct a diversion assessment to assist families and individuals to utilize community and personal resources to prevent those that do not need more intensive interventions from entering the homelessness system.
- Triage for immediate needs including shelter, food, medical care, crisis response.
- Obtain client's common consent and create or update HIFIS profile and mandatory data fields.
- Refer those who would benefit from Indigenous-led programs or other systems (VAW, Veteran Affairs).
- Conduct VI-SPDAT for individuals or families who have been homeless for more than 14 days OR are sleeping rough.
- Assist in locating and identifying clients engaged through Outreach to help connect them to housing resources.
- Assist in referring and connecting all individuals and families to community resources (e.g. primary care, income support, employment programs, etc.)

# **Common Intake & Assessment**

Individual agencies will add and edit client information through HIFIS. Eligibility for clients to be added to the BNL is determined by the agency and includes:

- People experiencing homelessness, according to the definition adopted from the Canadian Observatory on Homelessness (people staying in emergency shelter, unsheltered, or provisionally accommodated including transitional housing, people being released from an institution, and/or couch surfing). For the purpose of the BNL we do not include people who are at risk of homelessness;
- · Currently staying in Hamilton; and,
- Consent Form completed (Appendix C).

Service providers that refer individuals experiencing homelessness to the BNL are known as entry points and include but are not limited to emergency shelters, transitional housing programs, outreach teams, and other programs in the homelessness serving sector in Hamilton. If a client is not already on file in HIFIS, all referral sources are required to complete:

- Intake Form (Client Details in HIFIS)
- Consent Form (Refer to Appendix C)
- Common Assessment (choose population-appropriate VI-SPDAT or Indigenous Experiences, Needs, and Preferences Form for Indigenous clients)

Service providers are responsible for client files and recordkeeping in accordance with agency recordkeeping standards and MFIPPA requirements.

# **Intake Form**

The Intake Form is used by all agencies in Hamilton's Homeless-serving System. It collects the basic demographic and housing information needed to serve and refer clients in accordance with our funding obligations. Each organization may collect additional information upon intake or through provision of services to the client. The intake form is intended to initiate case management with the client and to highlight areas a client may require supports, such as in securing an income source and/or renewing identification.

# **Consent Form**

Individuals must provide consent to have their personal information shared in our Homelessness Management Information System (currently HIFIS 4.0, the BNL/BNPL, and various agency spreadsheets and intake processes) in order to receive homeless services. People must consent to the services provided by the agency they present at

however, it must be communicated that they are clients of the whole homeless serving system in Hamilton. This means they may receive relevant referrals and supports based on their circumstances and choice. Relevant personal information is collected as it relates to supporting clients to get and stay housed, reporting de-identified outcomes to funders, and to inform policy and systems improvement.

When encouraging clients to provide their written informed consent to participate in Coordinated Access:

- Do explain that Coordinated Access connects individuals to a collaboration of service providers working to streamline services to help connect unhoused individuals to available resources and appropriate housing.
- Do explain the SPDAT suite of tools as assessments that enable our network of service providers to understand their needs, program eligibility, and assist in matching them to the resources available that best meet their needs and preferences.
- Do ask the client to sign the shared consent form prior to conducting any of the SPDAT series of tools.
- ➤ Do encourage clients to continue working towards their own housing goals by pursuing opportunities to end their homelessness.
- Do encourage clients to connect with their case managers and support staff.

In cases where clients do not provide consent upon entry into the program and the agency agrees to provide service, staff will progressively engage with individuals to encourage consent as their choice and/or status may change over time. The decision to decline consent does not prevent access to services. Without consent, confidential client information may not be added to the Homeless Management Information System (HMIS) or collected by the agency.

When individuals sign the consent form, agencies are to indicate in HIFIS that the client has provided **Explicit Consent** and **Coordinated Access Consent**, both are covered by the shared consent form. Agencies will maintain any records of signed consents.

If an agency receives a signed request to withdraw consent, they will update the request in HIFIS and inform City of Hamilton <a href="mailto:through-HIFIS@hamilton.ca">through HIFIS@hamilton.ca</a>. If consent is revoked, the client record is no longer accessible on HIFIS and information about the client will not be shared from withdrawal date onwards unless the client submits a new consent. In the case that a new consent approval is received, information will be updated from the date indicated on the newly signed consent. No information may be collected or shared for the period of time in which consent was withdrawn.

# **Common Assessment**

Hamilton's Homeless-serving System has chosen to use the suite of common assessment tools known as the Service Prioritization Decision Assistance Tools – SPDATs. These assessments are evidence-informed tools for assessing an individual's or family's acuity and there are versions for individuals, families, and youth. All these assessments (with the exception of the Youth Assessment Prioritization Tool) have been developed by OrgCode Consulting.

Hamilton's Homeless-serving System uses the Vulnerability Index - Service Prioritization Decision Assistance Tool series as our standardized triage tools. This includes: VI-SPDAT version 3 for single individuals and families and version 2.0 for youth (TAY-VI-SPDAT) and prevention (PR-VI-SPDAT). These questionnaires are used for the purpose of pre-screening or triage of an individual or family to help determine the type and intensity of supports a person may need. The VI-SPDAT is appropriate for any frontline staff to use when serving homeless individuals and families. The Full SPDAT assessment provides a more comprehensive view of the individual or family's needs. This tool should only be used by a certified assessor. Training is available through City of Hamilton.

Hamilton transitioned to use the most recent versions of the VI-SPDAT in July 2021. The latest VI-SPDAT versions were developed to address concerns that older versions contributed to racial and gendered disparities as well as stigmatization around substance use. The intent is to offer more respectful ways to ask questions about history of homelessness and more inclusive ways to reflect gender, race, and ethnicity.

Although no single tool is perfect, common assessment supports a consistent community-wide approach for assessing and triaging clients to more effectively identify and connect them with the right range of supports. Triage is the first step to make the connections between clients and their goals. This is part of ongoing attempts to recalibrate equity in service delivery.

All referral sources in the homeless-serving system, including staff at emergency shelters, drop-ins, and outreach must complete VI-SPDAT assessments. Indigenous clients who do not feel comfortable completing the VI-SPDAT will be offered the option to complete an Indigenous Common Assessment.

Emergency shelter staff must complete Common Assessment (using the VI-SPDAT or Indigenous Common Assessment) with clients at 14 days of intake. This threshold was determined based on community data and research on homelessness intervention best practices. Many people who access emergency shelters self-resolve within 14 days. All other referral sources must complete Common Assessment with clients as soon as possible so that the acuity score can be added to the BNL and system triage can be

initiated. All completed VI-SPDAT scores must be entered into HIFIS within 48 hours in accordance with the Common Triage and Assessment Policy.

In some cases, a client initiating service at a new program may already have a VI-SPDAT or full SPDAT score. Referral sources should not complete a VI-SPDAT again if it was completed within the last two years unless a client's situation has significantly changed. If there are major changes to the person's circumstances, including being housed and becoming homeless again, or if program staff are concerned that the VI-SPDAT failed to accurately capture client need or risk, a full SPDAT is recommended. Research shows the accuracy of the triage tool is lessened each time it is retaken, which may result in discrepancies and confusion among service providers.

The full SPDAT is completed upon intake at a Housing First or Transitional Living program with prioritized clients. It is recommended that the SPDAT begin at intake after the client has been screened for program eligibility (VI-SPDAT). The SPDAT can be completed over several visits with the client as opposed to one engagement. Clients that are receiving ongoing supports should have their full SPDAT reassessed at the following intervals:

- At 30 days
- On or about 90 days
- Every 90 days thereafter

Review of the SPDAT at regular intervals will show client progress in housing stabilization. With increased stabilization and supports, client acuity should consistently go down. This is a key measure of Housing First supports.

Staff are advised not to complete a SPDAT when a client is in crisis as the episode may misrepresent the overall acuity score. The SPDAT is not intended to replace clinical expertise or clinical assessment tools, rather it should complement them.

Information collected in both assessment tools include categories of:

- Personal identification (i.e. gender identity, Indigenous ancestry, ethic/cultural background)
- Wellness (e.g. mental, physical health/abuse, substance use)
- Risks (e.g. harm to others or themselves, legal involvement)
- Socialization and daily functioning
- Housing history

Existing VI-SPDAT and SPDAT scores for individual clients can be accessed in HIFIS. Please see Appendix D for comparison of scoring between the VI-SPDAT and SPDAT assessments.

# **Training**

Training is available through the City of Hamilton. Staff who require VI-SPDAT/SPDAT training or related support are asked to contact <a href="mailton:Loca"><u>Homeless.Policy@hamilton.ca</u></a> for more information.

# **Contributing to Real-time Data**

It is necessary to collect and share client information across Hamilton's homelessserving system in order to: prioritize services and resources based on individual or household depth of need and housing preferences; monitor housing progress through continuous system improvements; coordinate information for reporting to City Council, community partners, funders, and public; and, monitor Hamilton's overall progress towards ending homelessness.

HIFIS (Homeless Individual and Family Information System) version 4.0 is the client database used in the Homelessness Serving System. Information-sharing across homeless-serving agencies is done safely and securely through HIFIS. This is enabled through a robust Data-Sharing Protocol signed by all participating agencies and a Confidentiality Agreement signed by all end users. Client data security is ensured through multiple levels of protection, including: system design, user permissions to ensure information accessed is limited to that required by specific roles, attestation to access new client files, and random system audits.

Key HIFIS functions include: creating and/or updating HIFIS profiles, documenting admissions, sharing bed availability, indicating service restrictions, creating housing placements, and case management. All client information is recorded in HIFIS including intake forms, consent, triage assessments, and case management notes.

All of the data collected from an individual or family who provides consent will be entered into HIFIS, which automatically adds them to the BNL. It is therefore critical that all agency staff share responsibility for ensuring accurate, complete, and timely data in HIFIS within 48 hours of receiving it. This ensures that the clients they are working with can be located within the system and prioritized for supports.

The By-Name List (BNL) is a real-time list of everyone known to be homeless in the community who has provided consent in Hamilton's Homeless-serving System. The BNL includes information such as: HIFIS ID, VI-SPDAT and SPDAT scores (representing level of acuity), age, and duration of homelessness, Indigenous ancestry, program activity. The BNL is used to create a By-Name Priority List (BNPL) to prioritize and match people to specific housing resources. The BNL is also used to measure inflow (people new or returning to homelessness) and outflow (people moving from

homelessness to housing or becoming inactive in the system). It helps us better understand different demographic groups we serve, the supports people access, and the outcomes of services provided. This is important to inform ongoing policy and program decisions tailored to our local community.

The By-Name Priority List will be managed by City of Hamilton staff who will:

- Compile the BNL and filter by community criteria to compile the BNPL on a regular basis
- Monitor for data quality
- Facilitate frequent updates by following up with agencies
- Advise the filling of vacancies in dedicated housing and support programs
- Ensure adherence to privacy legislation and data management best practices
- Process requests for information

# **Data Management**

All client information is subject to The City of Hamilton's Data-Sharing Protocol and Confidentiality Agreement. Service providers also have their own confidentiality practices that should continue to be followed throughout participation in Coordinated Access and HIFIS.

Information shared across the homeless-serving sector should only include information for the purposes of connecting people to permanent housing and supports as efficiently as possible. All staff are required to share information professionally and respectfully in line with confidentiality and data sharing protocols.

Updating and maintaining the BNL/BNPL is the responsibility of the City of Hamilton, based on the information provided through HIFIS. Agencies participating in Coordinated Access are able to view the BNPL in a password protected folder of a secure file transfer site.

All persons on the BNPL will be given a priority standing that is dependent on active status and the updates provided by agencies through HIFIS.

The status definitions are as follows:

**Active** indicates individuals who are actively homeless in the community, including those who:

- are experiencing ongoing homelessness
- are newly identified
- have returned from housing
- have returned from inactive status

**Inactive** indicates individuals who are not actively homeless, including those who:

have been stably housed

- moved away from the community
- have lost contact (90+ days)
- are deceased
- have withdrawn consent

Note that consent does not have to be re-signed regardless of an individual's status on the list unless:

- they had previously withdrawn consent
- it has been more than 12 months since their last consent was signed

# Withdrawn Consent

A client may withdraw consent at any time. In the event that a client withdraws their consent for their information to be collected and shared, program staff will:

- Obtain the client's signature on a new consent form with "For Withdrawing Consent" selected as the consent option (if the client proceeds with withdrawing consent).
- Expire the client's previous consent form on HIFIS with an expiration date of the withdrawal date. This will lock the client's HIFIS file to prevent access.
- Report the withdrawal of consent to the City through the <u>HIFIS@hamilton.ca</u> email account.

# **Coordinated Exits from Homelessness**

The Coordinated Access System is dependent on dedicated housing and support resources to assist individuals and families to prevent and resolve their experiences of homelessness. The Hamilton Coordinated Access System will work on building relationships with community partners to ensure that there are resources equipped to serve people experiencing all degrees of homelessness.

The resources dedicated to the system will include (but are not limited to):

- Outreach services
- Prevention programs
- Intensive Case Management
- Rapid Rehousing Case Management
- Transitional Living programs
- Housing Allowances and Rent Supplements (as resources are negotiated)
- Permanent Supportive Housing (as resources are negotiated)

# **Prioritization**

The Hamilton Homeless-serving sector has identified key criteria that will help determine an individual's place on the By-Name Priority List: Indigenous ancestry, chronicity, acuity based on VI-SPDAT/SPDAT score, age group, demographic stream (women, men, youth, families), and urgent health and safety considerations. Overtime as community conditions change, Hamilton's homeless-serving sector may decide to adapt the prioritization categories to better serve homeless individuals and families.

The Vulnerability Index -Service Prioritization Decision Assistance Tool (VI-SPDAT), Indigenous Common Assessment, or the full SPDAT is used to determine an individual's level of vulnerability as low, mid, or high. This allows the community to connect individuals to housing programs which will meet their specific needs. An individual's score on the VI-SPDAT does not directly impact their prioritization on the BNPL but rather indicates the level of supports they are likely to require. For example, if a person obtains a score of 4 -7 on the VI-SPDAT they would be assessed for prioritization to a Rapid Rehousing (RRH) program. These programs are designed for individuals who require low to moderate wraparound supports. A score of 8-12 on the VI-SPDAT will have assessed for Intensive Case Management (ICM). These programs are tailored for individuals who require more intensive moderate to high supports.

Individuals who have not yet completed a VI-SPDAT or Indigenous Common Assessment but who have consented to being on the BNL will still be included on the list. Common Assessments should be completed with the individual within one week of being added to the BNL.

As our system becomes more integrated, we'll be able to move people through the system more quickly, releasing the bottleneck to reach more people. It's not that people are denied supports, it's that they are being linked or not being linked to specific types of limited resources. If individuals are not referred to ICM or RRH, they are still connected to broader supports in the community, such as Housing Help Centre, Income Supports, Shelter Case Workers, and other housing focused shelter-based resources to self-resolve. We rely on the expertise of staff at drop-ins, shelters, and outreach who work every day to build relationships, establish trust and support clients in taking steps to achieve their housing goals.

# Prioritization Based on "Urgent Health and Safety"

At any time, a front-facing staff member may submit a name for the BNPL and Case Conferencing based on Urgent Health and Safety Needs that require immediate action, e.g. pregnancy, safety risks, terminal illness, tri-morbidities. Presentation of client needs must be anchored to how stabilized housing would address the urgent issues presented

and include assessment of what it will take to get a client housed. This question contextualizes the level of resources and support required.

The staff member will be asked to make a brief case in writing to the City through <a href="https://example.co.">Homeless.Policy@hamilton.ca</a>. Staff will need to briefly outline how the client's needs can be alleviated or improved with permanent housing and demonstrate the needs are time sensitive and severe enough to supersede community prioritization. City staff will respond within 48 hours; however, there is no guarantee that clients put forward will be served immediately.

City staff will confirm a decision to include an individual on BNPL if one the following conditions are met:

- Client meets prioritization criteria but was unknown to the system (e.g. experiencing hidden homelessness)
- Client meets prioritization criteria but HIFIS details are inaccurate or incomplete, leading to inadvertent exclusion from the BNPL
- Client has clear immediate health and/or safety needs that would be alleviated through rapid placement to permanent housing

# **Prioritization Matrix**

Preceding Order	Urgent Health & Safety	Indigenous	Acuity Descending (low, mid, high)	Chronicity*	Frequent Service Usage***
1 <sup>ST</sup>			_**		***
2 <sup>ND</sup>					
3 <sup>RD</sup>					

<sup>\*\*</sup> CHIL has informed the priority of Indigenous people, seniors 60+ and youth, they and are currently working through prioritization criteria and processes within the Indigenous community. All Indigenous people are considered chronically homeless, and do not have to complete a VI-SPDAT or Common Assessment tool but are included in the prioritization lists if consent is in place.

<sup>\*\*\*</sup> Frequent Service Usage is currently defined as total bed night stays

# **Selection Criteria for the BNPL**

Selection Method	Details	How this supports the system
Prioritization     Matrix	See table 1 above	<ul> <li>Community priority on those with greatest need</li> <li>Commitment to prioritizing Indigenous people's experience of homelessness</li> </ul>
2) Common Assessment	a) VI-SPDAT** And/or b) Indigenous Common Assessment	<ul> <li>Initial triage into system streams</li> <li>Confirms the clients' desire to engage and their common assessment</li> </ul>
3) Type of Stay	<ul><li>a) Long Stayer</li><li>b) Short Stayer</li><li>c) Encampment/Unsheltered</li></ul>	<ul> <li>Creates variety in caseloads</li> <li>Supports inclusion of people who may be overlooked or experiencing hidden homelessness</li> </ul>
4) Demographic Stream	<ul><li>a) Women</li><li>b) Men</li><li>c) Youth</li><li>d) Family</li></ul>	Prioritizes sector specific populations to meet unique needs
5) Indigenous Peoples	Minimum 30% of all spaces offered	Commitment to address systemic barriers and colonial legacies that lead to disproportionate representation in homelessness
6) Seniors 60+	First (concurrent) priority for Indigenous community (in descending order)Representative % for non-Indigenous i.e. if 10% of men on the BNL are seniors, 10% of the men's BNPL will be seniors	Community priority
7) Youth	First (concurrent) priority for Indigenous community  Age in ascending order	Community Priority

# **Referrals and Matching**

All City of Hamilton funded homelessness programs in the mainstream system (including: ICM, RRH, and Transitional Living) are required to take 100% of their referrals through Coordinated Access via the BNPL. This means that staff at entry

points (such as shelters, drop-ins, and outreach) do not provide direct referrals to these programs. Rather, they support clients by adding up-to-date information and common assessment to HIFIS to ensure individuals are added and assessed through the BNL.

To facilitate referrals to City-funded programs, the City of Hamilton will produce the BNPL on a bi-weekly basis and send this to programs as a list of potential referrals based on demographic served, chronic/episodic status, and Common Assessment.

- Intensive Case Management programs are prioritized for individuals with a high acuity (8-12 on the VI-SPDAT).
- Rapid Rehousing programs serve individuals experiencing homelessness with moderate acuity (4-7 on the VI-SPDAT).
- Transitional Living programs may support people with a range of acuity levels depending on their staffing complement, though will typically have referrals of people with a score below 8.

The City additionally continues to onboard more permanent housing with support programs to serve individuals experiencing homelessness who have very high acuity of needs (13+). These resources will be allocated through Coordinated Access as they become available.

In cases where there is demographic overlap, for example a woman identified as a youth, the person's name will be sent to both the women's program and youth program. Whichever program is able to connect with the person first will make the person aware of their options and connect them to the appropriate program. Using this method we attempt to honour client choice and preference.

Housing programs will update HIFIS immediately upon completing a program intake by initiating a Housing Placement. This will signal to other programs that this client is already on a caseload.

# Managing Referrals Outside of the BNPL

City-funded programs should only take referrals from the BNPL. The City recognizes that referrals to programs may occur through sources other than those currently reporting into the BNL such as through corrections or healthcare. In these cases, as an interim and temporary measure, programs can direct individuals to other agencies that provide intake as appropriate for the individual seeking support, such as: shelters, dropins, outreach, or City of Hamilton Housing Division (refer to Appendix A: Programs in the Homelessness Serving Sector that participate in Coordinated Access).

All referrals that come through a Coordinated Access entry point are supported through the steps outlined above. Upon each client's consent, they are added to the BNL and assessed by community prioritization criteria to determine eligibility for the BNPL. As we work towards a more cohesive system, we will be able to serve all homeless individuals, not just the people who find themselves at each agency's door. To ensure equity,

efficiency and transparency for individuals accessing service individuals will be triaged based on eligibility, acuity, and community priority, not first come, first served. The BNPL is an instrument to help guide this change.

# **Case Conferencing**

The purpose of case conferencing for the BNPL is to share accountability for the services provided to people experiencing homelessness as a *system*. Although a single service provider will be primarily responsible for a person's case, Hamilton's homeless-serving system must acknowledge that the whole system can support the acceleration of a housing placement. Case conferencing also ensures that resources are used efficiently and that people are connected with the right services and supports.

City staff will regularly review case conferencing effectiveness that involves consultation with community partners. This process of testing and engagement will determine the purpose, process, and ongoing approach to case conferencing.

# **Dispute Resolution**

Disputes may be brought forward by clients to agency staff, whose first response will be to support clients in addressing their concerns as per organizational processes. If an issue cannot be resolved by the organization where the dispute is presented, agency management will engage Housing Services staff on matters related to Coordinated Access as outlined below.

The following procedures will be used to resolve case specific and systemic disputes raised by both clients and staff of the Coordinated Access System.

Case Specific disputes could be related to:

- Accuracy of assessment scores
- Prioritization on the By-Name Priority List, or
- Selection for housing or program vacancies

Any case specific disputes will be addressed using the steps below:

- 1. Workers discuss issues with one another and seek resolution.
- 2. Workers involve their respective supervisors and Housing Division staff to seek resolution. A face-to-face meeting is preferred.
- 3. Managers/Directors will resolve the dispute.

Systemic Disputes could be related to:

- Administrative or procedural differences
- Differences in service philosophy, principles or policies, or

• Resource shortages, which may require harmonization of systems

Systemic disputes will be addressed using the steps below:

- 1. Front line staff identifies the nature of the dispute
- 2. Front line staff informs their supervisor and/or Manager/Director
- 3. Mangers/Directors discuss the issue and forwards the issue to Housing Services Division via the Check-in Table and/or the Coordinated Access Steering Committee
- 4. The Coordinated Access Steering Committee recommends a strategy for resolution of differences

# Appendix A: Programs in the Homelessness Serving Sector that participate in Coordinated Access

- Men's Emergency Shelters: Good Shepherd Men's Centre, Good Shepherd West Avenue Overflow, Mission Services, Salvation Army Booth Centre, Hotel Overflow
- Women's Emergency Shelters: Good Shepherd Cathedral Women's Shelter, Emma's Place, Mary's Place, Womankind, Hotel Overflow
- Youth Emergency Shelter: Notre Dame
- Family Emergency Shelter: Family Centre, Hotel Overflow
- Drop-in Centres: YWCA Carol Anne's Place, Mission Services' Willow's Place, Wesley Day Centre
- Outreach: Hamilton Regional Indian Centre, Housing-Focused Street Outreach
- Prevention Programs: Hamilton Housing Help Centre; Youth Diversion Program
- Transitional Housing: New Beginnings Indigenous Transitional Living for women,
   YWCA Transitional Living Program for women, Wesley Youth Housing
- Intensive Case Management: Good Shepherd RRH and ICM for women and families; Good Shepherd ICM for youth; Hamilton Regional Indian Centre; Mission Services Housing Up! RRH and ICM; Wesley ICM
- Housing Services Division: Access to Housing Workers, Homeless Policy & Programs, Emergency Shelter Services Case Managers

# **Appendix B: Coordinated Access Governance**

Hamilton's Coordinated Access System is a community-wide approach to ensure consistent, equitable, and transparent processes for supporting individuals and families to prevent and end experiences of homelessness. Using a Housing First approach, participating agencies work together to assess people's housing related needs based on standard intake and assessment procedures, then match and connect people to the right-level of available resources to find and keep housing.

Development, implementation, and continuous improvement of Hamilton's Coordinated Access System is a shared responsibility, to which all partners hold specific accountabilities.

This document outlines core decision-making and advisory bodies within Hamilton's Coordinated Access Governance Structure. The Governance Structure is anticipated to evolve over time in line with community needs and resources through ongoing coordination with Indigenous leadership and Coordinated Access stakeholders.

# **Community Entities**

The Designated Community Entity (City of Hamilton) and the Indigenous Community Entity (CHIL: Coalition of Indigenous Leadership) work in partnership through a funder-to-funder relationship. The two Community Entities (CEs) work in collaboration to exercise shared responsibility for overseeing development, implementation, and monitoring of the Reaching Home Strategy to achieve specific outcomes related to reducing and eventually eliminating the experience of homelessness in Hamilton.

Designated Community Entity: City of Hamilton	Indigenous Community Entity: Coalition of Indigenous Leadership (CHIL)
Roles and Responsibilities	Roles and Responsibilities
Designated Community Entity (federal) and Service System Manager (provincial) accountable to ensuring Hamilton meets all federal and provincial homelessness strategy objectives, including: implementation of a Coordinated	<ul> <li>CHIL is the CE for the Reaching Home Indigenous Homelessness funding stream</li> <li>Works to decrease barriers and increase equitable access to services and programs for Hamilton's Indigenous community</li> </ul>
Access System in collaboration with Indigenous CE; management of a By-Name List of those known to be experiencing homelessness; system-wide use of a	As the leading Indigenous decision- making body that coordinates efforts to achieve federal, provincial, and local outcomes, the Indigenous CE plays a

Homelessness Management Information System; stewardship, administration, and coordination of diverse streams of funding to ensure a comprehensive Housing First approach to ending homelessness

- Responsible for engaging community to establish and monitor progress towards achieving homelessness reduction goals in line with municipal, provincial, and national targets
- Building collective community- and Indigenous-informed approach to local policies, processes, and training for common intake, assessment, prioritization, and matching towards establishing and achieving community goals towards ending homelessness
- Accountable to executing and monitoring Reaching Home Community Plan developed and achieved by the Community Advisory Board (see below)

critical role, in partnership with the Designated Community Entity, towards implementing a wholistic communitywide approach to ending homelessness for Indigenous community members

**Decision Making Structures** \**CHIL-specific decision-making structures to be updated*Project Leadership Team made up of staff from City of Hamilton Homelessness Policy and Programs and Coalition for Hamilton's Indigenous Leadership

- Responsible for engaging community partners to inform planning, policy development, implementation, ongoing monitoring of project activities and system outcomes
- Facilitates structures and processes for community leadership in establishing strategic direction and operational requirements
- Responsible for day-to-day operational decisions, resolving project issues and challenges
- Refers decisions and signatory approval to the Senior Management Team and City Council as required

Senior Leadership Team (Housing Services Division & Healthy and Safe Communities Department)

Responsible for approval of strategic direction and finalization of operational

- policies pertaining to divisional and departmental goals
- Holds signing authority for contracts and investments for spending as approved by City Council
- Accountable to ensuring timely, effective, and evidence-based information and recommendations to City Council and Committees as appropriate

# City Council

- Responsible for fiscal accountability and budgetary approvals
- Responsible for stewardship of public resources to serve the community of Hamilton with oversight and direction of strategic priorities for all City departments
- Final decision-making authority to which all City staff are ultimately accountable

Community Advisory Board (CAB): The Community Advisory Board is the local organizing committee responsible for setting direction for addressing homelessness in Hamilton. The CAB is required under Reaching Home and comprised of community stakeholders, including people with lived experience and members of the Indigenous community.

Hamilton's CAB consists of two groups.

The Hamilton Housing and Homelessness Action Planning Group is responsible for advising the CE on systems planning and coordinating community efforts related to homelessness through development and implementation of the Reaching Home Community Plan.

The Homelessness Funding Implementation Group is responsible for reviewing and evaluating applications for funding, recommending projects for approval to the CE, and contributing to monitoring of funded projects.

# Indigenous Community Advisory Board (ICAB)

The ICAB is comprised of Indigenous community members of Hamilton who are committed to preventing and addressing Indigenous homelessness. Each ICAB member brings their personal and professional experiences to help guide a community-wide effort to support Indigenous community members experiencing or at-risk of homelessness in Hamilton.

**The ICAB** is responsible for setting the direction to address Indigenous homelessness in Hamilton. Collectively, ICAB responsibilities include:

- Gathering relevant information related to Indigenous homelessness to identify community priorities to address Indigenous homelessness in Hamilton
- Assessing and recommending projects for funding to the Indigenous Community Entity (CHIL)
- Supporting the Indigenous

Community Entity (CHIL) to plan and coordinate a community-wide effort to prevent and address Indigenous homelessness
Developing terms of reference and other policies and procedures central to fulfilling the responsibilities of the Indigenous Community Advisory Board

# Coordinated Access Community Leadership – Key Tables \*\* Additional

# Indigenous Community Tables to be updated

Table	Frequency	Participants	Scope
Coordinated Access Steering Committee	Quarterly and as needed	Senior Leadership at funded agencies representing homeless-serving sector as well as senior leadership representing intersecting systems (e.g. health, justice, VAW) chaired by project leadership team representing both Designated CE and Indigenous CE	Informs overall strategic direction of Hamilton's Coordinated Access System alongside Indigenous leadership to ensure system efforts are grounded in truth and reconciliation efforts and reflective of Indigenous knowledge, experience, and strengths.  Contributes towards building and mobilizing community vision and commitment to Coordinated Access System. Reviews, advises on, and directs policies and practices, including operational challenges posed through check-in tables. Advises and fosters supportive structures and processes to engage and take direction from the expertise of people with lived experience.
HMIS Governance Committee	Quarterly and as needed	Senior Staff in Housing Services Division and CHIL chaired by project leadership team representing both Designated CE and Indigenous CE	Oversees HMIS data management, safeguarding, and strategic application of data insights; reviews and approves data management policies and amendments to data-sharing protocols and procedures; reviews, advises on, and directs response to operational challenges posed by the HIFIS super user group.
Prevention Check-in Table	Monthly	Managers and Directors of Prevention and	Comprised of managers and directors at funded agencies, and leadership from

		Diversion Programs, health partners, and CHIL; chaired by Designated CE project leadership team	CHIL, these groups are tasked with regularly convening to discuss joint system-level matters related to their respective area of service delivery in Hamilton. Feeds insights and
Housing First Check-in Table	Monthly	Managers and Directors of ICM, RRH, TLP, health partners, and CHIL; chaired by Designated CE project leadership team	recommendations up to Coordinated Access Steering Committee and Project Leadership Team.  The three main objectives of the respective tables include:  Communicating progress on meeting system-level housing outcomes and identifying improved ways to meet Hamilton's housing targets as outlined our System's Planning Framework  Communicating challenges in the system and collectively problem-solving these challenges  Communicating expectations and sharing best practices around topics in housing service delivery
Coordinated Access Working Group(s)	As Needed	Frontline staff and supervisors of funded agencies in all program areas chaired by Designated CE project leadership team	Convened as needed and directed by the Coordinated Access Steering Committee. Includes rotating membership of frontline staff to inform and take action on operational practices, challenges, and solutions for ensuring successful implementation of Coordinated Access grounded in frontline knowledge and expertise. Feeds insights and recommendations up to Coordinated Access Steering Committee and Project Leadership Team.
HIFIS Super User Group	Monthly	Frontline staff and supervisors of all funded programs who regularly use HIFIS; chaired by staff from CE project leadership team (Program Analyst, Applications Analyst, Project Manager)	Core group of active HIFIS users to inform operational issues and engage in collective troubleshooting and policy development. Key liaison for information-sharing and education between agency staff and community entity. Feeds challenges and recommendations for review by HMIS Governance Committee.

Case Conferencing Table  Bi-Weekly Frontline staff and supervisors working in: Shelters, drop-ins, outreach; ICM, RRH, Housing Services chaired by designated CE staff with advice, direction, and participation of CHIL leadership	Case Conferencing Goal: To efficiently connect people experiencing homelessness to the housing supports they need. To focus system wide practices on the goal of ending people's experience of homelessness. To be transparent and accountable as a system. This table is provides a mechanism to facilitate referrals from the By Name Priority List to Housing First programs and to coordinate services between agencies.
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# External Advisory Committees \*\* Additional Indigenous Advisory Bodies to be updated

Each of the advisory committees below are led and chaired independently from the City of Hamilton and are comprised of members from agencies funded through the Service System Manager/CE as well as non-funded partners. These groups are essential to informing ongoing strategic planning and systems alignment across Hamilton's Homelessness Serving System.

**Men's Emergency Services Committee (MESC):** A voluntary monthly gathering of stakeholders within the men's homelessness shelter system. Conducts service system review and coordinated planning involving agencies directly involved in the provision of services to those experiencing homelessness.

Street Youth Planning Collaborative (SYPC): The Street Youth Planning Collaborative exists to advocate for, support and facilitate a system of services for youth that is both comprehensive and accountable, in order to prevent, reduce and end youth homelessness in Hamilton. The agencies involved with the SYPC provide a spectrum of services to youth and collectively they support youth ages 12-25 years. The SYPC is composed three unique committees: the Directors' Committee, the Front Line Advisory Committee and the Youth Leaders Committee. The SYPC Directors' table is made up of senior staff of youth-serving agencies who collaborate on system level planning and funding development work. The Frontline Advisory Committee engages front line staff and supervisors in discussing service delivery experiences and emerging trends in the youth population. The Youth Leaders Committee is a group of young people who have lived or living experience of homelessness who provide their expertise in order to improve services for youth in Hamilton.

**Women's Housing Planning Collaborative (WHPC)**: A voluntary monthly gathering of stakeholders within the women's homelessness serving sector and people with lived experience who work to develop, coordinate, advocate for, and facilitate a gender

specific, comprehensive, and seamless system of services to best meet the needs of women, trans, gender diverse and non-binary people who are homeless or at risk of homelessness. Members are accountable to the mission of WHPC, people with lived experience, funders, as well as other stakeholder groups. WHPC includes a Service Coordination Committee made up of frontline managers in key women's organizations at the WHPC table as well as non-voting management members from City of Hamilton Housing Services Division to inform system issues as they arise from the day to day responses to women facing homelessness. The WHPC Advisory Committee is comprised of women with lived experience of homelessness or at risk of homelessness, supported by Good Shepherd staff and the WHPC facilitator through the SPRC. The role of this committee is to advise the WHPC on direction and decisions in relation to meeting the needs of women who are homeless or at risk of homelessness.

# **Appendix C: Consent Form**

# Hamilton's Homeless Serving System Hamilton's Homeless Serving System IMPORTANT INFORMATION - Consent to Share Personal and Health Information with Hamilton's Homeless Serving System

# Who Are We?

Hamilton's Homeless Serving System is a group of organizations within the community that work together to help individuals and families end their experience of homelessness. We connect individuals and families with supports and help find and maintain a place to live. The City of Hamilton and the following program areas that will have access to your information include:

- Outreach;
- Prevention;
- Diversion;
- Housing First;
- Rapid Rehousing;
- Emergency Shelters;
- Transitional Housing;
- Social Housing; and
- Permanent Housing with Supports.

# Who Do We Share Your Information With?

Once consent has been signed, your personal and/or health information will be shared with each of the program areas within Hamilton's Homeless Serving System. Also, your information will be shared with other Service Providers that provide supports and services that have entered into agreement with the City of Hamilton. Your personal and/or health information will be stored on the By Name List (BNL) and the Homeless Individuals and Families Information System (HIFIS) databases. These databases are secured and shared will all program areas.

The information collected will support a Coordinated Access System, so that services and supports can be right matched to your needs and to better understand homelessness in our community. Also, this information will provide insight into where future service improvements are needed.

Your personal information will also be shared with the Government of Canada (Ministry Employment and Social Development) for the purposes of policy analysis, research and evaluation of policies and programs respecting homelessness in Canada.

At any time, if you would like to have access to a list of community partners that administer the specified program areas for whom your information will be shared with, you can contact the City of Hamilton's Manager of Homelessness Policy and Programs, Manager of Homelessness Policy and Programs, T: 905-546-2424 ext. 4666, or by email: <a href="https://doi.org/10.2016/journal.com/">Homeless.Policy@hamilton.ca</a>.

# What Do We Collect?

Personal Information will be collected pursuant to the *Municipal Freedom of Information and Protection of Privacy Act*, 1990 (MFIPPA). Information is collected under the legal authority of the *Municipal Act*, 2001 and the *Housing* Services Act, 2011. Your personal and/or health information will be used to connect you with social service and support. For More information contact the Manager of Homelessness Policy and Programs, T: 905-546-2424 ext 4666, or by email: Homeless.Policy@hamilton.ca.

Your information, including your name, age, gender identification, income, health related information and housing history can be collected to better connect you to services and supports.

# What Do We Do With Your Personal and Health Information?

- Your personal and/or health information will be shared on the BNL and HIFIS with other organizations in Hamilton's Homeless Serving System.
- Your personal and/or health information will be used and shared by the organization in Hamilton's Homeless Serving System to provide you with services and supports.
- The Hamilton's Homeless Serving System will also use your personal and/or health information for statistical and research purposes, where the information collected will not indicate who you are or that the information belongs to you. Your name will not be shared. In addition, this collective and anonymous information may be provided to the City of Hamilton, the Province of Ontario, the Government of Canada (in addition to the Ministry of Employment and Social Development) and/or Community Partners to support policy analysis, research and evaluation of existing policies and programs related to homelessness.
- Your name and identifying information may be viewable by City of Hamilton staff for the
  purposes of billing and/or technical support with the BNL and HIFIS databases. Information
  within these databases are secure and will not be shared or used for any other purpose
  than to help secure you with appropriate supports and housing. Information will not be
  shared without your consent, unless required by law.

# **What Information Can Be Shared Without your Consent?**

Your personal and/or health information may be shared without your consent if there is a legal requirement to do so, or a serious concern about your health and safety or the health and safety of others.

# What Won't We Do With Your Information?

Organizations in Hamilton's Homeless Serving System will not release your information without your consent except for the purposes listed above.

# What If You Change Your Mind About Your Personal and Health Information Being Shared?

You can change your mind and remove your consent to share your information at any time, by contacting any organization of the Hamilton's Homeless Serving System. You should let them know that you want to stop sharing information about yourself.

If you withdraw your consent, staff can no longer make updates to your file but the information you have already shared will still be viewable by staff that provide you with services. You can, at any time, sign a new consent agreement with any one of the organizations in Hamilton's Homeless Serving System to receive supports and services.

If you have a complaint or question, you understand that you may contact the City of Hamilton's Manager of Homelessness Policy and Programs, Manager of Homelessness Policy and Programs, T: 905-546-2424 ext. 4666, or by email: Homeless.Policy@hamilton.ca.

# Consent to Share Personal and Health Information with the Hamilton's Homeless Serving System

Location of Signing:  Agency/Institution/ Organization	Date:
Participant(s):	
I/We	
(Print Name of Participant – 16 years or older)	
(Print Name of Co-Participant, if applicable)	
(Print Name of Co-Participant, if applicable)	
(Print Name of Co-Participant, if applicable)	
(Print Name of Co-Participant, if applicable)	

I consent to share my personal and health information within Hamilton's Homeless Serving System. My personal and health information may be used:

- to help me and/or my family find and keep a home; and
- to inform future service improvements.

My personal and/or health information will be recorded on the By Name List and the Homeless Individuals and Families Information System. This database is used by all

program areas defined under Hamilton's Homeless Serving System to collect, store and share my information.

I understand that if I would like to have access to a list of community partners that administer the specified program areas for whom my information will be shared with, I can contact the City of Hamilton's Manager of Homelessness Policy and Programs, Manager of Homelessness Policy and Programs, T: 905-546-2424 ext. 4666, or by email: <a href="mailto:Homeless.Policy@hamilton.ca">Homeless.Policy@hamilton.ca</a>.

I understand that I may withdraw or limit my consent at any time. I confirm that I have reviewed the attachment titled "Important information - Consent to Share Personal and Health Information with Hamilton's Homeless Serving System."

I understand the consent set out	above.	<u>-</u>
Signature (Participant)	Date of Birth	Date Signed
Signature (Participant)	Date of Birth	Date Signed
<ul> <li>I understand all the parts of this</li> <li>Where applicable, I understand dependents. Please list any dependents.</li> </ul>	that any consent given also exte	ends to my
Name of Dependent	Date of Birth	for Dependent:
Witness:		
Print Name of Staff Witness:		
Signed by Staff Witness:		

Date:					
USE ONLY if the applicant is REMOVING CONSENT.  By signing below, I understand that I have requested to remove consent.					

# **Notice of Collection:**

Personal Information will be collected pursuant to the *Municipal Freedom of Information and Protection of Privacy Act*, 1990 (MFIPPA). Information is collected under the legal authority of the *Municipal Act*, 2001 and the *Housing* Services Act, 2011.

Your personal and health information will be used to connect you with social service and support. For More information contact the Manager of Homelessness Policy and Programs, T: 905-546-2424 ext 4666, or by email: <a href="mailto:Homeless.Policy@hamilton.ca">Homeless.Policy@hamilton.ca</a>.

# Appendix D: Comparison of VI-SPDAT and SPDAT Scores

# Introducing the VI-SPDAT

This tool has been specially formulated based on literature reviews and research, so it is important to not significantly change the language of the questions, the order, or skip over any sections.

- My name is [INTERVIEWER NAME]. I'm going to ask you about your health and housing experiences through a 10 minute survey that is mostly yes or no questions.
- This survey is designed to help us understand your needs and to help you achieve housing stability.
- > This information will be kept confidential in a secure database.
- Your information will only be shared with the services listed on the consent form who have signed a confidentiality agreement.
- > You do not have to participate. Even if you don't participate, you will still have access to available services in the community.
- ➤ If you do participate, we will add your name to a priority list for Housing Services.
- As we go through the survey you can skip questions, you can take a break, or you can choose to end the survey early.

# **Scoring the Assessment**

After having thanked the client, take the time answer any questions the participant may have about consents, where the information will be stored, and what the scoring means. The score indicates level of acuity, which helps to determine the types of programs that may be of benefit to the client's specific situation. Appropriate housing intervention types are listed below for each VI SPDAT or SPDAT score range. This is not intended to be an exhaustive list of all homelessness programs in Hamilton.

VI SPDAT	SPDAT	Priority	Housing Interventions
Score	Score		
Adult 13+	Adult 49-60	Very high acuity	<ul><li>Permanent Supportive Housing</li></ul>
Youth 13+	Youth 49-60		. rouding
Family 16-22	Family 65-80		
Adult 8-12	Adult 35-49	Highly acute and chronic or episodic	Housing First
Youth 8-12	Youth 35-49	homelessness	<ul> <li>Intensive Case Management</li> </ul>
Family 9-15	Family 54-64		Housing with Supports
Adult 4 - 7	Adult 20-34	Moderate acuity and chronic or	<ul><li>Rapid Rehousing</li><li>Rapid Rehousing</li></ul>

Youth 4 - 7 Family 4 - 8	Youth 20-34 Family 27-53	episodic homelessness  May or may not be chronically homeless.	<ul> <li>Transitional Housing</li> <li>Housing Supports         (various agencies)</li> <li>Case Management</li> <li>Housing Workers</li> </ul>
Adult, Youth, and Family – 0 - 3	Adult, Youth, and Family – 0 - 26	Lowest Acuity  Should not be chronically homeless  *If chronically homeless but scoring 1- 4 individuals will be referred to moderate acuity interventions	<ul> <li>Self-led housing search</li> <li>Housing Resource         <ul> <li>Centres</li> <li>Housing Help Centre</li> </ul> </li> </ul>

# Other services and supports regardless of acuity score may also include:

- > OW/ODSP
- ➤ Housing Stability Benefit
- > ID replacement
- Brain Injury Services
- Legal clinics
- Meal programs
- > Mental health and addiction supports
- > Primary care