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The Regional Municipality of Durham Report

To: Health and Social Services Committee
From: Commissioner of Social Services
Report: #2023-SS-6
Date: May 4, 2023

Subject:

An Update on Durham Region's Homelessness Support and Coordinated Access System

Recommendation:

That the Health and Social Services Committee recommends:

That this report be received for information.

Report:

1. Purpose

1.1 The purpose of this report is to provide the first half of an update on the Regional Municipality of Durham's (Region) Homelessness Support and Coordinated Access System.

2. Background

2.1 The Region acts as Service System Manager legislated by the province and as Community Entity designated by the federal government. This role is responsible for the planning and coordination of the homelessness support system across Durham.

- a. Development, oversight and ongoing improvement of the homelessness support system is included in this role with the goal to reduce and ultimately end chronic homelessness in Durham.
- b. Financial management of Federal and Provincial funding streams is included in this role as well as the oversight of funded programs that support people experiencing homelessness across our communities.

2.2 Built for Zero Canada (BFZ-C) is led by the Canadian Alliance to End Homelessness. BFZ-C is a Canada wide change effort that helps a core group of

leading communities work towards ending chronic homelessness by implementing a By-Name List (BNL) and Coordinated Access System.

- a. A BNL is a real-time list of all known people experiencing homelessness in Durham that provide consent and includes specific data points to support prioritization and program matching. Knowing the people experiencing homelessness by name and prioritizing the most vulnerable is essential to ending homelessness in Durham.
 - b. Coordinated Access is a process that helps people experiencing homelessness get help in a coordinated way. In a Coordinated Access System, service providers use a shared information system and work together to triage, assess and prioritize people in a standardized way to access supported housing opportunities.
 - c. Durham achieved a Quality Coordinated Access System in April 2021. Durham is only the fifth community to achieve this milestone.
- 2.3 The Homelessness Initiatives Team has historically been small and provided oversight and system management to meet minimum requirements for funding. This team is now being expanded to increase oversight and system planning capacity. In addition, Regional staff are now engaging in direct delivery of homelessness support programming to provide enhanced leadership within the homelessness support and coordinated access system.
- 2.4 Regional financial investments to complement federal and provincial funding allocations for system planning and coordination were limited prior to 2022. The Regional investment has increased from \$27,000 in 2021 to \$6,268,770 in 2023.
- a. Pandemic funding, received from the Province, through Social Services Relief Funding and additional federal Reaching Home funding supported response to changing and increasing needs during the pandemic.
 - b. Increased Regional investments are providing an opportunity to make significant improvements to the support system.

3. Previous Reports and Decisions

- 3.1 2023-INFO-11: A Review and Renewed Homelessness Support and Coordinated Access System for Durham Region

4. Two-Part Information Report for the Health and Social Services Committee

- 4.1 The provincial budget released on March 23, 2023, included an additional investment of \$202 million for the Homelessness Prevention Program and Indigenous Supportive Housing Program.
- 4.2 To provide the most up to date information on funding and allow for additional consultation for this new investment, the Health and Social Services Committee will be receiving a second report and presentation in June 2023. Combined, the May

and June reports represent a full update on Durham's homelessness support and coordinated access system.

4.3 The second report will include:

- a. An overview of federal, provincial and Regional homelessness funding for 2023/2024.
- b. An overview of priority projects planned for 2023/2024 to address key challenges within the homelessness support and coordinated access system and accelerate housing move-ins from Durham's BNL.

5. 2022 Homelessness Support and Coordinated Access System Statistics

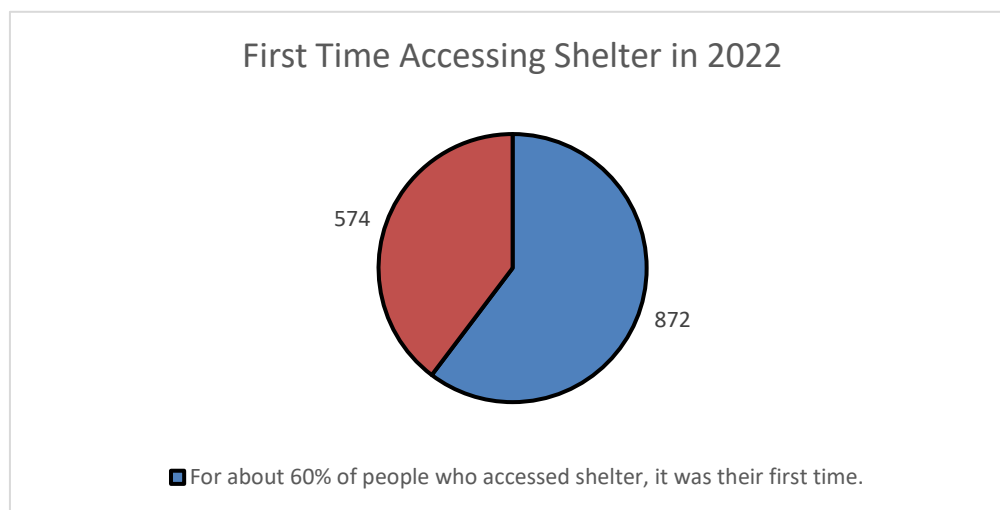
5.1 Throughout 2022, the homelessness support system helped more than 29,000 households across Durham Region. This number equates to roughly four percent of Durham's population who needed support. Supports provided include:

- a. Homelessness prevention activities such as mediating concerns between tenants and landlords, supporting tenants at the Landlord and Tenant Board, financial assistance with rental and utility arrears, family reunification programs for youth, etc. Preventing as many people as possible from becoming homeless is critical to maintaining capacity within the support system.
- b. Shelter and street outreach activities such as physical shelter spaces, hotel programs for families, case management, identification support, etc.
- c. Housing activities such as housing outreach to help people look for appropriate housing, financial assistance for last month's rent and moving costs, housing programs attached to the By-Name List, etc.

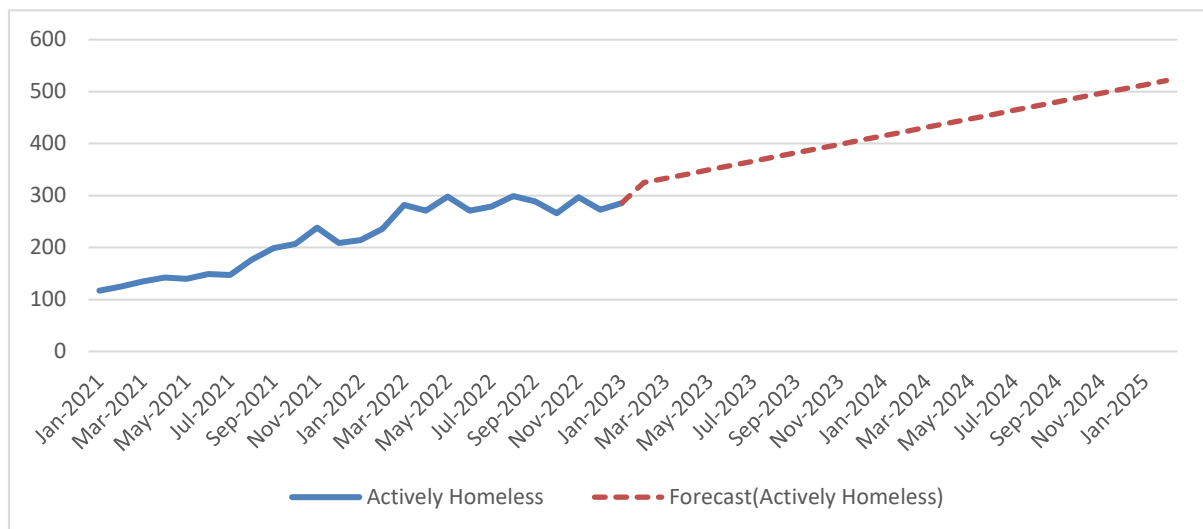
5.2 Housing-focused shelters help people move from homelessness to housing as quickly as possible. Shelter programs are designed to be part of the process of helping people end their homelessness while helping to meet their basic needs. A comparison of data from 2020-2022 is provided below:

Data Point	2020	2021	2022
# of people who accessed shelter	1,318	1,431	1,446
Occupancy Rate	54.5%	97.4%	92.0%
Average Length of Stay	16.9 days	20.2 days	18.9 days
Average Age of individuals who accessed shelter	35.8 years old	37.4 years old	38.8 years old
Average Number of Clients who stayed each night	101	139	163

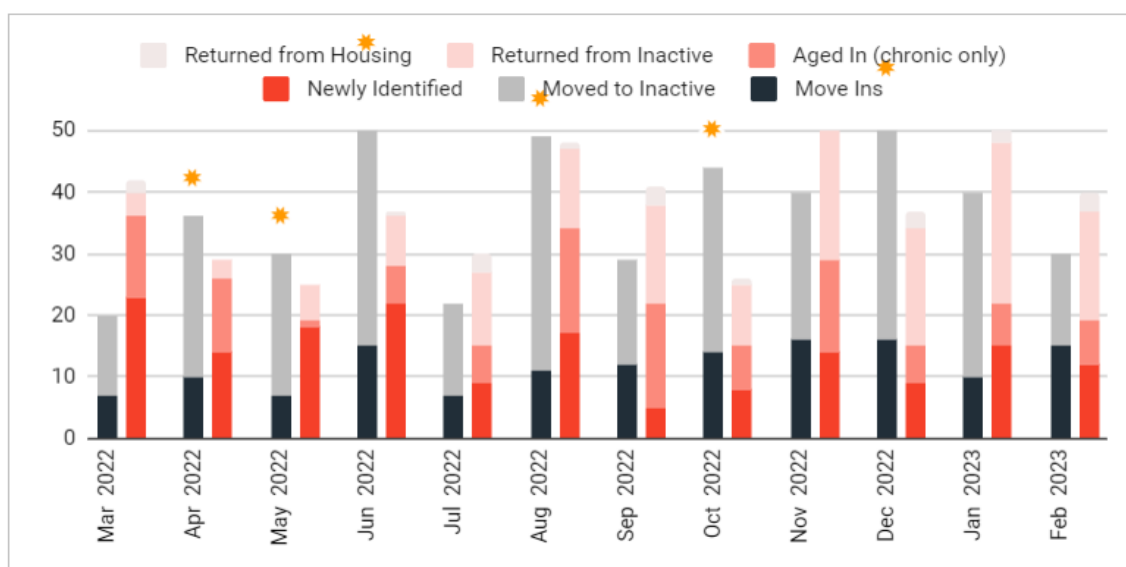
- Despite increasing the number of available shelter spaces in 2022, demand continues to exceed available supply.
 - Shelter occupancy rates below 100% do not necessarily mean that beds are underutilized. Beds may be offline due to shelter repairs/renovations or room composition where a household may occupy a whole room but not all beds in the room. The impact of COVID-19 resulted in long-term capacity restrictions due to the requirement of physical distancing.
- b. Of the 1,446 people who accessed shelter in 2022, for 872 of them it was their first time. This highlights the number of people experiencing homelessness for the first time in Durham.



5.3 Based on data from Durham’s By-Name List, the number of people actively experiencing homelessness has been steadily increasing since 2021. Forecasting using current trend data highlights that Durham is not able to achieve progress on reducing homelessness unless changes are made to the support system.



- a. Although the Region had six months in 2022 where our Outflow out of homelessness was higher than our Inflow into homelessness, it is not consistent over time and subsequently does not decrease our Actively Homeless numbers.
 - The average monthly number of newly identified households experiencing homelessness in 2022 was 42 households. This contributes to the Inflow.
 - The average monthly number of move-ins in 2022 was 18 households. This contributes to the Outflow.



* = outflow > inflow

- b. Until we can sustain having a greater number of Outflows than Inflows each month over time, we will not see any progress in reducing homelessness, despite strong housing outcomes each month.

5.4 As per the municipal BNL data of Durham’s Actively Homeless population, there has been an increase in people experiencing homelessness in most municipalities from 2021 to 2022.

Municipality	*2021	*2022	% Difference	Per Capita ¹
Ajax	19	42	121% increase	.033%
Clarington	4	6	50% increase	.006%
North Durham (Brock, Scugog, Uxbridge)	16	18	13% increase	.032%
Oshawa	136	165	21% increase	.094%

¹ (Statistics Canada, 2023)

Pickering	10	4	60% decrease	.004%
Whitby	9	22	144% increase	.016%
Other/ Unknown ²	15	16	7% increase	N/A

*Based on the December BNL of each year.

(Other/Unknown refers to people who may have not been living in Durham but have a meaningful connection to Durham, or who are working with the homelessness support system to complete intake information.)

5.5 As per the demographics of Durham's Actively Homeless population, there has been an increase in most sub-populations of our By-Name List

- a. This includes an 85% increase in families experiencing homelessness, a 50% increase in adults experiencing homelessness, and a 67% increase in people who are experiencing homelessness being unsheltered.

Age	*2021	*2022	% Difference
Youth (aged 16-24)	36	30	16% decrease
Adult (aged 25-59)	146	220	50% increase
Senior (aged 60+)	27	23	15% decrease
Household Type			
Single	175	210	20% increase
Family	34	63	85% increase
Housing Status			
Unsheltered (includes makeshift/street, transient, vehicle, encampment or other unsheltered housing types)	61	102	67% increase
Emergency Shelter/ Hotel	100	111	11% increase
Couch surfing – staying with family/ friends	43	49	14% increase
Unknown/ Other	5	11	120% increase

*Based on the December BNL of each year.

- b. The top 5 contributing factors leading to homelessness include: financial crisis, family/relationship breakdown, lack of family support, lack of housing, mental health, chronically homeless.

5.6 Acuity refers to a person's vulnerability and the level of supports needed to help them end their homelessness. A person's Acuity Level helps service providers determine areas where people may be more vulnerable and need further supports to obtain and sustain housing.

- a. From 2021 to 2022, there has been a 53% increase of people on the BNL who have High Acuity, an 18% increase of those who have Very High Acuity, and a 55% decrease in those who have Low Acuity.

² Refers to people who may have not been living in Durham but have a meaningful connection to Durham, or who are working with the homelessness support system to complete intake information.

- b. This highlights how most people experiencing homelessness have increasing needs outside the scope of housing and homelessness supports.
- c. People with High to Very High Acuity who require increased supports, such as health and mental health supports, made up 60% of our overall By-Name List at the end of 2022.

Acuity Level	Actively Homeless at the end of 2021	Actively Homeless at the end of 2022	% Difference	Housed throughout 2022
Low Acuity (0-3)	22	10	55% decrease	15
Mid Acuity (4-7)	58	65	12% increase	60
High Acuity (8-13)	90	138	53% increase	94
Very High Acuity (14+)	22	26	18% increase	15
Unknown	17	34	100% increase	18

6. Program Reviews

- 6.1 The annual review process includes monitoring and reviewing funded services and supports within Durham's homelessness support and coordinated access system.
- 6.2 There are several steps included in the annual review process.
 - a. **Document Review:** A shared software system is used to streamline this component. All funded programs and agencies must upload program manuals, financials, staff lists, client feedback, and service statements for review by Regional staff.
 - b. **Cross-Agency Interview:** Interviews are conducted with other agencies within each sector (ex. shelters sector). A structured interview solicits feedback to promote collaboration and transparency between agencies within the same sector and identify areas for improvement as well as bright spots.
 - c. **Key Performance Indicators (KPI):** Performance indicators have been set for each sector within the support system. This allows for comparison across programs within a sector. Data is pulled from a shared information system used by funded programs within the support system. The KPIs are being reviewed in 2023.
 - d. **Client Feedback Survey:** A standardized client survey is required to be available at every funded program and agency partner. The survey solicits regular client feedback that is accessible to Regional staff. Survey questions include which agency was accessed, which service was used and feedback on that service.
 - e. **Site Visits:** Regional staff attend each program and agency site and spend a full day monitoring service, interviewing staff and speaking with clients when appropriate. This component provides an in-depth understanding of program operations and acts as a follow up for the previous components. Onsite

interviews with staff identify the strengths and pain points within the program as well as receiving and providing feedback for program improvements.

- f. Agency Report: This component includes a summary of the findings of the review including recommendations and requirements for follow up. Recommendations are included to highlight where the program excels, acknowledges any challenges and provides recommendations for improvement.

6.3 Annual reviews are used to provide program/agency specific recommendations for follow up and monitoring by Regional staff. Information from the reviews is also used to provide broader recommendations for each sector within the support system. This is done by grouping similar challenges and bright spots experienced by all programs/agencies within a sector. The annual review in 2022 identified seven system-wide recommendations including:

- a. Providing new training for each sector within the support system, as well as standardized training for all frontline staff on mental health first aid and Crisis Prevention Institute.
- b. Reviewing frontline staff wages across the system to clearly identify wage gaps.
- c. Facilitating cross-agency job shadowing to build better collaboration, idea sharing, and relationships across agencies.
- d. Clearly articulating the specific needs for mental health, addictions and primary healthcare to partner with the support system for this population group.
- e. Establishing a centralized database of all available homelessness resources and services that is regularly maintained and up to date to support service navigation from support organizations outside of the homelessness system.
- f. Improving oversight and more frequent check-ins on programs to ensure service agreements are followed and standards are upheld.
- g. Facilitating staff appreciation days to provide agency staff with a greater sense of community with their peers and a sense of appreciation from the service manager.

6.4 In addition to the annual review process, financial reports are submitted and reviewed by Regional staff.

7. Bright Spots

- 7.1 Durham's support system continues to demonstrate strong and consistent housing move-ins despite significant pressures in the rental market.
- 7.2 Durham has been recognized for maintaining a low return from housing rate. This demonstrates that retention practices across the system are successful. Of the 218 people housed through the BNL in 2022, 30 returned from housing and 8 of those people were quickly re-housed.

- 7.3 The Transitional Support Program (TSP) continued to expand on outcomes and deliverables throughout 2022. This team works directly with chronically homeless BNL clients to provide assertive case management to support clients to move from homelessness to housing.
- a. In 2022, the TSP supported 33 people to move from chronic homelessness to stable housing. The program also celebrated a one-year stable housing milestone for the first client housed through the program.
 - b. The TSP also built relationships with 23 community agencies to collaborate and build individualized and coordinated support plans for each client.
- 7.4 The Primary Care Outreach Program (PCOP) continued to expand and now includes:
- a. Two teams that are each comprised of an Advanced Care Paramedic and Social Worker providing social and primary care to people experiencing homelessness and/or at risk of homelessness.
 - b. Updated program hours to operate seven days a week providing service from 8:00am to 6:00pm with flexibility to adjust times to meet service needs between the hours of 7:00am to 8:00pm.
 - c. PCOP had 2952 client interactions in 2022.
- 7.5 The Mental Health Outreach Program (MHOP) continued to expand and now includes:
- a. One team consisting of two Social Workers/Psychotherapists who provide outreach clinical counselling/psychotherapy services to vulnerable populations in Durham Region, including those who are living unsheltered and under-housed and who may have mental health and addictions challenges
 - b. MHOP had 346 client interactions in 2022 while operating at half capacity.

8. Key Challenges

- 8.1 While Durham has many achievements to celebrate, it also has persistent challenges inhibiting our ability to reduce chronic homelessness. Inflow into homelessness continues to increase putting capacity pressures on the support system.
- a. With the current monthly inflow and outflow rates, it is expected that homelessness in Durham Region will continue to rise annually. It is projected that homelessness will increase to more than 500 people by 2025. This represents an annual increase of approximately 100 people.
 - Durham Region's population is rapidly growing. The population is projected to grow to 798,900 people by 2025.³

³ [Monitoring of Growth Trends \(durham.ca\)](https://www.durham.ca/monitoring-growth-trends)

- In 2022, approximately 42 per 100,000 Durham residents experienced homelessness.
 - In 2025, it is projected that this number will increase to approximately 62 per 100,000 Durham residents who will be experiencing homelessness.
- b. Unsheltered homelessness in Durham accelerated throughout 2022 and represents a 67 percent increase from 2021. There are now more than 100 people across Durham experiencing unsheltered homelessness.
- 8.2 Rental market pressures continue to increase, inhibiting housing move-ins.
- a. Increasing challenges securing units in the rental market due to high demand and low supply.
- Rentals that were once considered affordable are seeing significant price increases.
 - A 2013 study found that rent increases were the strongest predictor of homelessness, and that for every \$100 increase in median rent, homelessness increased by 15% to 39%, depending on the urban or rural jurisdiction.⁴
 - Renters in the lowest income quintiles can only afford between 4 and 7% of the available housing stock.⁵
- b. OrgCode Consulting Inc's 2022 system review highlighted increasing discrimination and racism being experienced by rental applicants as landlords are increasingly filtering applicants due to supply shortages and increased demand.
- 8.3 Continued staffing pressures within the homelessness support system.
- a. Increasing challenges with recruitment and retention due to limited funding for staff wages and increasing levels of client acuity. Frontline staff are increasingly required to respond to mental health and addictions crisis – advanced levels of training and education are now required for these frontline roles. Appropriate health positions are needed throughout the support system to respond to crisis and support increasing levels of client acuity.
- Agencies continue to have challenges filling roles and responding to turnover, creating inconsistencies in programming.
 - Despite staffing challenges, the homelessness support system continues to have strong monthly housing and retention outcomes.
 - The Region is exploring a hybrid model for frontline services to support the workforce demands within the system by increasing involvement in direct delivery of homelessness supports across Durham.

4 (Cente News, Growth, 2023)

5 (Cente News, Growth, 2023)

- b. Regional staff are compiling wage information from funded agencies to identify disparities in wages and highlight the need for targeted funding to specifically support increases in wages for staff within the sector.

8.4 Homelessness supports are not a replacement for proper health supports.

- a. The critical lack of mental health and addictions treatment programs as well as supportive housing to support people with high acuity and very complex support needs will continue to exacerbate the current crisis. The homelessness support system is not able to provide these needed resources.
- b. This level of healthcare is not within the scope of the Region's role as provincial Service Manager and federal Community Entity for homelessness funding and systems planning.
- c. The homelessness support system is not equipped to successfully house people with significant mental health and addictions challenges.
- d. The decision to accept treatment is a choice. Legislation permits people including people with high acuity complex issues to refuse treatment and affords the freedom to actively move around and participate in the community.

9. Durham Advisory Committee on Homelessness

- 9.1 The Durham Advisory Committee on Homelessness (DACH) was established by the Health and Social Services Committee in December 1998 to address the issue of homelessness in Durham Region. At the time, community service organizations and homeless people were invited to participate in a reference group that would provide input into the distribution of newly announced Provincial and Regional homelessness funds.
- 9.2 The Chair of DACH is appointed from the Region of Durham's Health and Social Services Committee for a term that coincides with the Committee member's term of office.
- 9.3 The Health and Social Services Committee can make requests of DACH including presentations on agencies or programs, information, research, feedback and input, etc.

10. Relationship to Strategic Plan

- 10.1 This report aligns with/addresses the following strategic goals and priorities in the Durham Region Strategic Plan:
 - a. Goal 2: Community Vitality – To foster an exceptional quality of life with services that contribute to strong neighbourhoods, vibrant and diverse communities, and influence our safety and well-being.
 - b. Goal 4: Social Investment – to ensure a range of programs, services and supports are available and accessible to those in need, so that no individual is left behind.

11. Conclusion

11.1 Durham's homelessness support and coordinated access system will continue to experience significant challenges throughout the foreseeable future due to increasing rental market pressures, stagnant social assistance rates, ongoing mental health and addictions pressures, etc.

11.2 The Health and Social Services Committee can solicit the Durham Advisory Committee on Homelessness for information, presentations, etc.

11.3 A second report coming to Health and Social Services Committee in June 2023 will include an overview of 2023/2024 federal, provincial and Regional investments as well as priority projects to address key challenges and accelerate housing move-ins from Durham's BNL.

Respectfully submitted,

Original signed by

Stella Danos-Papaconstantinou
Commissioner of Social Services

Recommended for Presentation to Committee

Original signed by

Elaine C. Baxter-Trahair
Chief Administrative Officer