



Homelessness Partnering Strategy Community Plan Annex C: Priorities (2011–2014)

Community:

Thunder Bay

Priority Number:

1

Instructions:

Please create one document for each of your 2011-2014 Community Plan priorities.

- To create a document, open the template. Each time you open the Community Plan Priorities template, the computer will create a new document.
- Save the document. The computer will prompt you to give it a name.
- Please name your document using the name of the community and the priority number (e.g. Winnipeg_1.doc).
- Please number your priorities sequentially (e.g. 1, 2, 3, etc.). This number is to facilitate on-going tracking and coordination, not to demonstrate the order of importance.
- Please include this number in the box on page one of each of your Community Plan Priorities (2011-2014) documents.

Please refer to the Reference Guide for further information.



Note: The Reference Guide includes examples for each section of this template.

1. What are your Community Plan Priorities?

P-1: Priority

a. Statement of Priority

(maximum 255 characters)

To provide supportive housing options for people with concurrent mental health and addictions issues.

b. Related Issue(s)

Which issue (or issues) from Section 5a. of **Annex B: Community Plan** does this priority address? Please note the issue number(s).

Lack of supports for homeless individuals with addictions issues. Lack of transitional or treatment options for homeless individuals with addictions issues. Lack of supports and housing options for homeless individuals with mental illness. Not enough support services for homeless individuals to find

P-2: Rationale

Why is this a priority for your community? If the priority was identified in another related plan or planning process, please explain (maximum 1,500 characters).

The Thunder Bay CAB identified this as a major priority during consultation.

2. What will you Achieve?

Instructions

Under "What will you achieve?" you will:

1. Identify the objective you plan to achieve by implementing this priority
2. Identify the HPS Activity Area(s) related to this priority
3. Identify the target group(s) served by the priority (if applicable)
4. Indicate how you will measure your achievements according to the HPS Outcomes
5. Include your own outcome indicators (optional)

Please refer to the Reference Guide for more information.

Steps

1. In section P-3, identify the objective you plan to achieve by March 31, 2014
2. In section P-4, identify the Activity Area(s) that relates to your priority
3. Complete sections P-5, P-6 and/or P-7. **Important Note:** you only need to complete the section(s) related to the Activity Area(s) you identified in section P-4
4. Optional: Identify other outcomes in section P-8

P-3: Objective

What is the specific, measurable objective you plan to achieve by **March 31, 2014** by implementing this priority? You may include up to three objectives if needed (maximum 500 characters).

1. Identify best practices/implement supportive housing options.
2.
3.

P-4: HPS Activity Area

Please click on the box beside the HPS Activity Area(s) related to your priority. Note that the activities eligible for funding have changed with the renewal of the Homelessness Partnering Strategy. HPS now funds (1) client services, (2) capital investments and (3) coordination and data management.

Definitions:

1. **Client Services** (for homeless individuals and families, and those at risk of homelessness), including:
 - * Assistance to address basic needs such as shelter and food services
 - * Individual support services, also known as, wrap-around services and other case-managed support services (including referrals to treatment or health services)
 - * Assistance with housing placement and housing retention (e.g., services to help transition people out of homelessness, or help those at imminent risk of homelessness to remain housed)
 - * Bridging to existing employment programs, removing barriers to employment, or skill enrichment to facilitate labour market readiness
2. **Capital Investments** (e.g., pre-development, purchase, construction, renovation and purchase of appliances and furniture), including:
 - * Emergency shelter facilities
 - * Transitional housing facilities
 - * Supportive housing facilities
 - * Non-residential facilities
3. **Coordination and Data Management**, including:
 - * Coordination of community consultation; community planning; and needs assessment
 - * Local research and information collection and sharing (specific to the particular community); partnership and network development; and coordination of service delivery
 - * Emergency shelter usage data collection activities; data development; data coordination activities; and reporting on, for example, progress against community progress indicators

1. Client Services

If checked, complete section P-5: Client Services

2. Capital Investments

If checked, complete section P-6: Capital Investments

3. Coordination and Data Management

If checked, complete section P-7: Coordination and Data Management

P-5: Client Services

Instructions

Complete section P-5: Client Services only if you selected "Client Services" in section P-4.

a. Target Group(s)

Please click on the box to identify which group(s) this priority will address:

- Homeless individuals or families
- Individuals or families at risk of homelessness

Please describe in more detail the group(s) this priority will address (maximum 300 characters).

Those individuals that are homeless due to concurrent disorders and addiction issues.

b. HPS Outcomes

Please select one or more indicators below.

Outcome #1: Transitions to Housing Stability
<input checked="" type="checkbox"/> Indicator 1.1 Number of individuals who have experienced housing transitions as a result of housing placement/discharge planning
Outcome #2: Housing Loss Prevention
<input checked="" type="checkbox"/> Indicator 2.1 Number of individuals who retained their housing after receiving housing loss prevention services (after a three-month follow-up period)
Outcome #3a: Economic Integration
<input type="checkbox"/> Indicator 3a.1 Number of individuals whose income status improved
<input type="checkbox"/> Indicator 3a.2 Number of individuals whose employment status improved
<input type="checkbox"/> Indicator 3a.3 Number of individuals who started or finished a job training program
Outcome #3b: Social Integration
<input type="checkbox"/> Indicator 3b.1 Number of individuals who started doing volunteer work
<input type="checkbox"/> Indicator 3b.2 Number of individuals who started or finished an education program
<input checked="" type="checkbox"/> Indicator 3b.3 Number of individuals who experienced other social improvements

P-6: Capital Investments

Instructions

Complete section P-6: Capital Investments only if you selected "Capital Investments" in section P-4.

a. Target Group(s)

Please click on the box to identify which group(s) this priority will address:

- Homeless individuals or families
 Individuals or families at risk of homelessness

Please describe in more detail the group(s) this priority will address (maximum 300 characters).

b. HPS Outcomes

Please select one or more indicators below.

Outcome #4: Capital Investments	
<input type="checkbox"/>	Indicator 4.1 Number of new permanent emergency shelter beds, either in a new facility or added to an existing facility
<input type="checkbox"/>	Indicator 4.2 Number of new transitional housing beds/units, either in a new facility or added to an existing facility
<input checked="" type="checkbox"/>	Indicator 4.3 Number of new supportive housing beds/units, either in a new facility or added to an existing facility
<input type="checkbox"/>	Indicator 4.4 New or expanded non-residential facilities

P-7: Coordination and Data Management

Instructions

Complete section P-7: Coordination and Data Management only if you selected "Coordination and Data Management" in section P-4.

a. **HPS Outcomes**

Which of the following activities will you implement? Select one or more.

OUTCOME #5: Coordination and Data Management	
<input checked="" type="checkbox"/>	Community planning
<input checked="" type="checkbox"/>	Local research, knowledge development
<input type="checkbox"/>	Information sharing
<input checked="" type="checkbox"/>	Partnership and network development
<input type="checkbox"/>	Coordination of service provision
<input type="checkbox"/>	Emergency shelter usage data collection activities (including HIFIS) (Please refer to the Reference Guide sub-section 4.4 (Collection of Emergency Shelter Data) for more information)
<input type="checkbox"/>	Data development
<input checked="" type="checkbox"/>	Data coordination activities (including annual reporting)

P-8: Other Outcomes (Optional)

Instructions

This section is optional. You can use this section to identify any outcomes, indicators and data sources not included in sections P-5 to P-7.

a. **Additional Outcome Indicators**

Which indicators, in addition to the HPS indicators, will you use to measure the achievement of your objective(s)?

b. **Data Source(s)**

Which data sources will you use to measure the indicator(s) identified in P-8a?