

# At Home in Medicine Hat: People, Planning, Policy & Politics

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*APPI*

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Calgary, AB



# The Vantage Point :

## The Medicine Hat Community Housing Society

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### 1. Not-for-Profit + Registered Charity

### 2. 2 Core Business Functions:

- Housing Management Body (HMB)
- Community Based Organization/CE

### 3. Funding Investments:

- HMB – AB Seniors and Housing
- CBO/CE – Provincial: AB Community Supports **\$2.9M**  
- Federal: HPS **\$500K**

### 4. The Reach:

- At Home in Medicine Hat: Our Plan to End Homelessness
- THRIVE Medicine Hat & Region Plan to End Poverty & Increase Wellbeing
- Affordable Housing Plan

# Ending Homelessness

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Ending homelessness in Medicine Hat means that no one in our community will have to live in emergency shelters or sleep rough for more than **10 days** before they have access to stable housing and the supports they need to maintain it.

- 1. System Planning**
- 2. Housing and Supports**
- 3. Systems Integration and Prevention**
- 4. Data and Research**
- 5. Leadership and Sustainability**

# Individuals that are Homeless or at Risk of Homelessness

Salvation  
Army Shelter

Phoenix Safe  
House (MHWSS)

Hospital

Incarceration

Street

Couch Surfing

**Housing Assessment and Triage**  
Medicine Hat Community Housing Society  
*Outreach Department*

HAT also provides **diversion** efforts to help support those individuals that do not require the intensive case management supports of the housing first/rapid re-housing programs.

Individuals in community that are experiencing homelessness start the process of accessing supports by meeting with the Housing Assessment and Triage (HAT) program at MHCHS. HAT uses an assessment tool to determine the level of need and refers the individual to the appropriate program.

HAT also provides **community referrals** and other resources to help support those individuals that do not require the intensive case management supports of the housing first/rapid re-housing programs.

**Housing First Program**  
Canadian Mental Health Association

CMHA is the newest organization to deliver Housing First in community; this program provides intensive case management; it serves individuals with an acuity of 35-60. Housing First programs provide case management supports for approximately 12-18 months.

**Housing First Program**  
Medicine Hat Women's Shelter Society

MHWSS Housing First program provides intensive case management with a focus on women/families fleeing family violence. This program serves individuals with an acuity of 35-60. Housing First programs provide case management supports for approximately 12-18 months.

**Rapid Re-Housing Program**  
Medicine Hat Community Housing Society  
*Outreach Department*

MHCHS Rapid Re-Housing program provides intensive case management to individuals; it serves individuals with an acuity of 20-34. These individuals receive case management supports for approximately 4-6 months

# Housing First –by the Numbers

From Program Inception: April 1, 2009 – February 28, 2017	
<i>*Numbers include 2 Housing First Teams and 1 Rapid Re-Housing Team unless otherwise specified</i>	
<b>Total Housed in Period</b>	<b>1084</b>
Total Individuals Housed in a Period	<b>770</b>
Total Dependents Housed (children)	<b>314</b>
<b>Demographics of Participants Housed in Period**</b>	
Gender	Women: 381 (49%) Men: 385 (50%) Unreported: 4 (0.5%)
Ethnicity	Caucasian: 565 (73%) Aboriginal: 89 (12%) Other: 55 (7%) No response: 3 (0.4%) Unreported: 57 (7%)
Age	<18: 9 (1%)      18-24: 165 (21%) 25-35: 238 (31%)      36-50: 239 (31%) 51-65: 112 (15%)      65+: 7 (1%)
Chronically Homeless participants housed in period	<b>263 (34%)</b>
Episodically Homeless Participants housed in period	<b>507 (66%)</b>
Veterans	<b>18 (2%)</b>
<b>Outcomes</b>	
Provincial Retention Rate Calculation <i>% participants served in period who have successfully exited the program or remain housed as program participants. Calculation excludes exits due to death</i>	<b>74%</b>
Exits in Period	<b>674</b>
Successful Exits in Period	<b>462</b>
Continuing Participants	<b>96</b>



# System Utilization

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1. It works. We have the **data** to back it.
2. Shelter usage and rough sleeping has gone down significantly over the past 6 years.
3. 75% of the service participants successfully exit the program and maintain their housing stability.

## Utilization of Public Systems in Housing First (2009-2016) N=705

	<i>Intake</i>	<i>In Program</i>	<i>Estimated Reduction</i>
<b>Days in Hospital</b>	5,989	4,003	-33%
<b>EMS Interactions</b>	654	625	-4%
<b>ER Use</b>	1,734	1,472	-15%
<b>Days in Jail</b>	11,294	3,050	-73%
<b>Police Interactions</b>	2,160	2,851	+32%
<b>Court Appearances</b>	1,050	1,156	+10%

Note: The data represents 100% of adults housed through the Housing First programs and who have exited the program (successfully and unsuccessfully) and those who remain in program. Assessments are completed at with each adult at 3 month intervals and spans the duration of time in program.

# Elements for Success

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- 1. Local/Provincial/Federal Leadership and Investments**
- 2. 7 Cities on Housing and Homelessness: the Role of Community Based Organizations (CBO) and/or Community Entities (CE)**
- 3. Strategic Areas of Investments**
- 4. Flexibility and Responsiveness to Community Need (versus reactive)**
- 5. Centralized or Coordinated Intake Processes**
- 6. Integration**
- 7. Ego** (Kindly place it at the door, preferable when you walk into a room.)

# Contact Info:

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**“If you want to be innovative, you  
have to be prepared to fail.”** Stein.

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