REACHING HOME

CANADA'S HOMELESSNESS STRATEGY

Reaching Home Community Homelessness Report: 2025-26 Reference Guide

January 2026

Housing, Infrastructure and Communities Canada
Logement, Infrastructures et Collectivités Canada

Canada

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Community Homelessness Report Reference Guide

The Community Homelessness Report (CHR) Reference Guide provides communities with instructions on how to complete, submit and reflect on their CHR.

Throughout the document, references are made to tips, definitions and additional tools. Purple boxes with a question mark on the left hand-side provide question-specific information for additional clarity.

The Guide forms part of the Homelessness Learning Hub **CHR Reporting Tools e-course**. To prepare, communities should review the full suite of tools, including the outline of questions (in Word) and reporting template (in Excel).

Introduction

This introduction provides key information about the CHR.

At a glance

Have questions or concerns? Contact your community's Housing, Infrastructure and Communities Canada (HICC) Engagement and Program Officer (EPO).

What is the CHR? The CHR is an annual Reaching Home reporting deliverable that helps communities to self-assess their progress with program implementation, CHR results may be used to determine where communities might benefit from more targeted training and technical assistance to support them to reach their homelessness reduction goals.

Who completes a CHR? CHRs are completed by communities funded under the Designated Communities (DC) stream and the three territorial capitals funded under the Territorial Homelessness (TH) stream, as required by the Community Entity (CE) contribution agreement with HICC. CHRs are not a requirement under the Indigenous Homelessness (IH) or Rural and Remote Homelessness (RRH) funding streams. In Quebec, community reports are published per the terms of the *Canada-Quebec Agreement regarding Reaching Home 2019-2024.*

How is the CHR completed? Communities must complete their CHR in the Excel workbook that is provided to them. If answers are too long for the question's corresponding comment box in the CHR template, communities can submit a separate Word document as an addendum to their CHR. There is no specific template for this addendum.

When is the 2025-26 CHR due? Where does it get submitted? The 2025-26 CHRs – covering April 1, 2025, to March 31, 2026 – are due by May 30, 2026[1]. This submission date is aligned with CE contribution agreements. CHRs must be submitted by email to the community's EPO by that date.

What happens to the CHR once it is submitted? Officials from HICC review CHRs for clarity, completeness, and alignment with other information (e.g., the Reaching Home Self-Assessment Checklist as of March 31, 2026 and previous CHRs). HICC may follow up with CEs to address any issues with clarity, completeness and alignment prior to finalization. CEs will receive an email notification from HICC with a PDF copy of the

[1] When the due date falls on a Saturday or Sunday, HICC will consider your CHR on time if it is received on the next business day.

CHR when it has been finalized. HICC posts all finalized CHRs to their respective Community Profile on the Homeless Hub.

What is the CHR?

Reaching Home: Canada's Homelessness Strategy is a federal program that provides direct support and funding to communities to help them address local homelessness priorities using a coordinated, systems-based and data-driven approach.

The CHR is an annual Reaching Home reporting deliverable that helps communities to self-assess their progress with program implementation. More specifically, using their CHR, communities self-assess their progress with Reaching Home implementation, which includes the following key components:

- Integrated, community-based governance;
- Meaningful collaboration between Indigenous and non-Indigenous partners;
- Encouraging broad participation and partnerships (i.e., beyond federally-funded service providers, projects and roles);
- Coordinated service delivery (Coordinated Access);
- Active use of a Homelessness Management Information System (HMIS)[2]; and,
- Maintaining quality, person-specific data on homelessness and working to meet reduction targets specific to the following community-level outcomes:
    - Homelessness is reduced overall;
    - New inflows to homelessness are reduced;
    - Returns to homelessness are reduced;
    - Indigenous homelessness is reduced; and,
    - Chronic homelessness is reduced.

The CHR is designed to support local discussions and decision making related to priorities, challenges and opportunities, using all of the information about homelessness currently available at the community level. Communities use their Reaching Home outcome data, as reported in their CHRs, to highlight where they should focus their efforts to prevent and reduce homelessness in the coming years. This could include developing and/or updating clear plans of action that help them to reach their homelessness reduction targets and to leverage the collective efforts of service providers working across the community, over and beyond Reaching Home-funded service providers.

[2] Communities are expected to actively use the Homeless Individuals and Families Information System (HIFIS) or existing, equivalent HMIS.

❶ What's new for 2025-26

The following changes were made for the 2025-26 reporting cycle:

- ✓ **Interim reporting standards for reporting on core outcomes, which were in place for previous CHR reporting cycles, have now ended. All communities are now expected to meet the standard for reporting on core outcomes in the CHR that aligns with the Reaching Home Directives.**
  - Communities will use the Canadian methodology, as described in the Community Outcomes Report (COR) Guide (Annex E) to generate data for Section 4. The **COR for HIFIS** or an equivalent report for an existing, equivalent HMIS will be used for this purpose.
  - The COR was developed by HICC in partnership with the Canadian Alliance to End Homelessness (CAEH) and ACRE Consulting. It enables communities to measure homelessness at a systems level, including the number of people experiencing (active) homelessness, inflows and outflows, as well as trends for specific population groups over a chosen timeframe. For more information, see the **COR Key Messages.**
- ✓ **Responses to the questions used to self-assess progress with meeting minimum requirements for Coordinated Access, the Outcomes-Based Approach and HMIS have been pre-populated in each community's CHR template.**
  - The data used to pre-populate these questions comes from each community's Reaching Home Self-Assessment Checklist. Pre-populating responses supports greater consistency and alignment across reporting tools. It also helps to reduce the overall reporting burden for communities.
- ✓ **Questions CHR 3, CHR 4, CHR 5 and CHR 6 (Collaboration between Indigenous and non-Indigenous partners) were reformatted to increase clarity and consistency, and to better support qualitative responses.**
- ✓ **Additional guidance has been provided to support communities in self-assessing their progress with meeting minimum requirements for meaningful collaboration between Indigenous and non-Indigenous partners (see Guidance: Meaningful Collaboration and CHR 4(a)).**
- ✓ **In Section 4, communities can now add data annotations to contextualize trends and explore the reasons behind the changes.**

❶ Summary of roles and responsibilities

✓ **DC and TH streams – CEs:**

- When there is only DC or TH funding in the community:
  - Engage with local Indigenous partners at the earliest opportunity to confirm interest in working collaboratively on the development of the CHR and jointly determine the nature of the collaboration.
- When there is IH and DC funding in the community:
  - Engage with the IH CE, IH CAB and/or local Indigenous partners at the earliest opportunity to confirm interest in working collaboratively on the development of the CHR and jointly determine the nature of the collaboration.
- In all cases:
  - Complete the draft CHR, making best efforts to meaningfully reflect the views of local organizations and CAB members in the development and content;
  - Send the draft CHR to the DC or TH CAB for approval and secure appropriate signature(s) (depending on the local context and the form of collaboration decided, this could include sending the CHR to the IH CAB as well for joint approval);
  - Send the CAB-approved CHR to HICC; and,
  - As needed, make adjustments to address issues with respect to clarity, completeness and/or alignment for any of the responses as identified by HICC, and seek CAB re-concurrence on adjustments (once the CHR is finalized).

✓ **DC and TH streams – CABs:**

- Review the CHR and use the information to inform CAB discussions on local challenges, opportunities, and priority setting; and,
- Approve the CHR through sign-off.

✓ **IH stream – CEs and CABs:**

- Engage with the DC CE to confirm interest in working collaboratively on the CHR and jointly determine the nature of the collaboration;
- Consider providing narrative content on efforts to prevent and reduce Indigenous homelessness;
- Collaborate with the DC CE on the development of the CHR; and,
- Review and sign-off on the CHR, where this is consistent with agreed-upon roles and responsibilities.

Completing the CHR

The CHR must be completed in the CHR reporting template that has been provided for this purpose, which is an Excel workbook. The 2025-26 CHR is divided into four sections, and each section is accessed on a different tab/sheet in the CHR template. Unless otherwise noted, questions apply to the full 2025-26 fiscal year (April 1, 2025, through March 31, 2026), with **self-assessments as of March 31, 2026**.

The CHR template includes a variety of response options. While most questions have drop-down menus, there are some opportunities for narrative answers. Depending on the question, the CHR template allows for responses up to 3,000 words. If answers in the CHR template are too long for the question's corresponding comment box, a separate Word document can be submitted with the CHR as an addendum. There is no specific template for this addendum.

The ***Checklist for Community Entities*** summarizes the information in this section of the guide, providing CEs with an actionable list of key activities at each stage of the CHR process. It forms part of the CHR Reporting Tools e-course.

How to prepare for the CHR

There are a number of steps communities can take to help them prepare for completing their CHR.

1. Review the resources on the CHR Reporting Tools e-course.
2. Determine who will be responsible for drafting the CHR answers and how people will work together. For example, communities can consider the following:
    - Who is best positioned to answer each question in the CHR on behalf of the community?
    - Will one person lead the CHR process, or will the work be divided between a few people, based on their areas of expertise?
    - How will the Coordinated Access and HIFIS Leads be engaged in the process?
    - How will Indigenous partners be engaged in the process? Who will lead next steps?
3. Gather CHR-related information as a reference. This could include the community's:
    - Reaching Home Self-Assessment Checklist (see here for more information);
    - Previous CHR (2024-25);
    - Monthly outcome data shared with HICC through the Homelessness Indicator Project (HIP) to inform national homelessness indicators;

- 2024-28 Reaching Home Community Plan;
- Local policies and protocols (related to governance, the Coordinated Access system, as well as the HMIS and its person-specific dataset); and,
- Local systems map and Resource Inventory.

4. Determine how the community will meet the requirement to collaborate with local Indigenous partners in the development of the CHR.

5. Determine when and how the draft CHR will be presented to the CAB, to ensure there is adequate time to incorporate changes before the submission deadline. For more information, see Securing CAB sign-off.

Completing the CHR template

As a first step, once the CHR template has been downloaded, the community's name should be added to the "Cover" tab in the identified area.

On an ongoing basis, communities should provide progress updates to the CAB, and collaborate with local Indigenous partners in the development of the CHR in a way that is consistent with agreed-upon roles and responsibilities.

Unless a cell is greyed out or it is indicated otherwise in the Excel template, all questions in the CHR template must be completed. Of note:

- All questions should be completed in order (i.e., start with (a), then (b) and so on).
- Section 3 must be completed before Section 4.

As the CHR is being completed, communities can refer to the portion of this Guide that provides question-by-question guidance (pp. 14-56), as well as the resources on the CHR Reporting Tools e-course.

New for 2025-26 Reporting Cycle: Responses to the questions from your Reaching Home Self-Assessment Checklist have been pre-populated in this year's CHR template. These responses should be reviewed and updated to align with your community's progress as of March 31, 2026.

In addition, the following tools can be consulted for more information:

- Homelessness Glossary for Communities.
- Reaching Home Coordinated Access (CA) Guide.
- Using HIFIS to Generate a Unique Identifier List.
- The Coordinated Access in HIFIS Guide.
- Reaching Home Systems Mapping Toolkit.

- HIFIS Implementation Guide.
- Reaching Home Community Outcomes Report – HIFIS Report Guide.

Extension requests: If you need more time to complete your CHR, submit a request for an extension to your EPO before May 30, 2026. Your request should include a **rationale for the request** and a **new proposed submission date**. Extension requests received after the deadline will not be considered. CHRs submitted after the deadline without an approved extension request will be considered late.

Seeking CAB approval and securing CAB sign-off

As identified in the CAB Roles and responsibilities of the Reaching Home Directives, DC or TH CAB members must approve the CHR prior to submission to HICC, and the DC or TH CAB chair/co-chairs must sign-off. This may also include the IH CAB, as applicable.

Seeking CAB approval: The DC or TH CE must present the draft CHR to the DC or TH CAB (and IH CAB, where applicable), and incorporate feedback received before submitting the final CHR to their EPO. The approval process should be consistent with agreed-upon processes in the community. More information about the processes for seeking approval and securing sign-off with the IH CAB is outlined below.

Securing CAB sign-off: Once approved, the DC or TH CE must receive and document CAB sign-off, which takes place in two steps. The DC or TH CE must:

1. **Complete the CAB Sign-Off sheet.** The sheet can be found in tab "5. Sign-off" of the CHR template (in Excel) or on the CHR Reporting Tools e-course (in Word). As applicable, the DC or TH CE should also complete the portion of the sheet called "Separate Indigenous Homelessness (IH) Community Advisory Board (CAB) Sign-Off Sheet".

    - The CAB sheet is organized around the different areas of representation identified in 8.2 Composition of the Reaching Home Directives, including those that are mandatory, expected, and encouraged.
    - For each applicable area, the DC or TH CE should identify the corresponding CAB member(s) (by name or organization).
    - Information in the CAB Sign-Off sheet is used by HICC to track CAB representation as required under Reaching Home; it will not be made public.

2. **Record signatures.** Once the CAB has approved the CHR, the DC or TH CAB chair/co-chairs (and IH CAB chair/co-chairs, where applicable) must provide concurrence by digitally recording their signature. Valid forms of signature include, but are not limited to:

- Printing the sheet, manually signing it where indicated at the bottom of the page, and scanning the document to digitize it;
- Inserting signature(s) electronically directly in the sheet in Excel/Word;
- Creating a PDF copy of the sheet and inserting signature(s) electronically (e.g., using Acrobat PDF Reader's "Certificate" function);
- Sharing an email from the CAB chair/co-chairs explicitly stating they approve the CHR, with signatures in an attachment; or,
- Sharing a copy of approved CAB meeting minutes that clearly state the CHR was voted on, approved, and that the CAB chair/co-chairs have signed-off.

Seeking approval and securing sign-off from the IH CAB: In communities where there is a separate IH CAB, its active participation in the drafting of the CHR must be sought. This is one way to demonstrate that collaboration on the CHR has occurred. Efforts should also be made to secure the IH CAB's sign-off on the final version.

Indigenous organizations are frequently asked to provide expert advice on a number of initiatives. It is important to consider how Indigenous engagement can be fully supported and to ensure there is adequate time for input and review. It is a best practice to provide as much advance notice as possible to local Indigenous leadership about meetings that are taking place and to seek their advice on both the structure and content of the discussions as they are being planned.

For more information, including more best practices, refer to Supporting collaboration between Indigenous and non-Indigenous partners in the CHR Process.

Submitting the CHR

Once the CHR has been approved by the DC or TH CAB (and IH CAB, where applicable), it must be submitted by email to the community's EPO.

The following documents must be included in the submission:

- The completed CHR template (in Excel).
- The completed CAB Sign-Off sheet (if not completed in the CHR template).
- Any separate attachments (e.g., addendum with answers that were too long for the Excel template).

2025-26 CHRs are due on May 30, 2026[3]. This submission date is aligned with CE contribution agreements, as CHRs are due 60 days following the period covered by the report.

Review by HICC

Once submitted, HICC reviews each CHR for completeness, clarity and alignment, as applicable.

The following is taken into consideration when reviewing for completeness and clarity:

- Has an answer been selected from each drop-down menu?
- Are all narrative answers clear?
- Has each comment box been filled out? Has the question been answered?
- Has information been entered in all the data fields in Section 4?
- Have all acronyms been spelled out at least once?
- Has the use of the first person been avoided where possible (e.g., “I”, “we”)?

The following is taken into consideration when reviewing for alignment:

- Does the community’s progress with program implementation align with information provided in the community’s Reaching Home Self-Assessment Checklist, the previous CHR and the 2024-28 Community Plan? If not, has a rationale been provided?

Note: Only responses to questions that are not shaded out are reviewed.

Securing CAB sign-off following edits (as applicable)

If changes are made to the CHR following its initial approval by the CAB (e.g., to address outstanding items as recommended by HICC officials following its review for completeness, clarity and alignment), CEs may submit their updated/revised CHR to HICC for review without immediately seeking CAB re-approval.

Once **all** outstanding items are addressed and confirmed as such by HICC, the CE will be asked to inform their DC or TH CAB (and IH CAB, where applicable) of the changes, and seek DC or TH CAB chair/co-chairs’ (and IH CAB chair/co-chairs, where applicable) sign-off for concurrence on the edits (see above for valid forms of signature).

[3] When the due date falls on a Saturday or Sunday, HICC will consider your CHR on time if it is received on the next business day.

CHR Summary and public access to results

As identified in the Reaching Home Directives (see 7.2 Community Homelessness Reports), a "summary" of CHR results must be made publicly available. The "CHR Summary" includes responses to all questions in the CHR template. Once a CHR is finalized, HICC will create a PDF of the document, which will become the "CHR Summary".

To support CEs in meeting the requirement for making their summary publicly available, HICC will be responsible for posting each community's "CHR Summary" to their respective Community Profile on the Homeless Hub.

Along with this, CEs will be provided with a PDF copy of the "Summary", which they may also choose to make publicly available (e.g., on a local organization's website). However, this is not mandatory. Communities are strongly encouraged to share the link to their public CHR results with the IH CE (where applicable) so that they can, in turn, share the information with their IH stream service delivery partners.

Supporting collaboration between Indigenous and non-Indigenous partners in the CHR Process

Note: This section specifically focuses on best practices for supporting meaningful collaboration in the CHR process. For information on self-assessing progress towards meaningful collaboration in core Reaching Home program elements, see Guidance: Meaningful Collaboration and CHR 4(a).

Meaningful collaboration between local Indigenous and non-Indigenous partners is critical for improving the outcomes of people experiencing or at-risk of homelessness, including Indigenous peoples. Under Reaching Home, collaboration between Indigenous and non-Indigenous partners is a requirement for Coordinated Access, the Outcomes-Based Approach, HMIS and the CHR. For this reason, Section 1 of the CHR includes questions about the level of collaboration between local Indigenous and non-Indigenous partners that has taken or will take place.

Indigenous partners includes, but is not limited to, the IH stream CE and/or CAB, as well as local Indigenous governments and Indigenous-led organizations. It also includes Distinctions-Based partners: First Nations, Inuit and/or Métis, including those with a modern treaty or self government agreement.

Meaningful collaboration between Indigenous and non-Indigenous partners refers to processes that:

- Build relationships based on the principles of transparency and responsiveness;

- Acknowledge and respect the value and the resources involved in participating in collaborative exercises;
- Respect the unique rights, needs and preferences of Indigenous peoples in the community;
- Are co-developed, culturally appropriate and inclusive of diverse perspectives across the community;
- Incorporate Indigenous knowledge and expertise; and,
- Add value for Indigenous and non-Indigenous organizations and individuals alike.

In the context of the CHR more specifically, meaningful collaboration between local Indigenous and non-Indigenous partners can take a number of forms to reflect what is relevant and appropriate for the community. Some best practices for how CEs can approach this include:

1. **Planning:**
    - In the early stages of development, engage with local Indigenous partners to confirm their interest in working collaboratively on the development of the CHR. Jointly determine the nature of CHR collaboration, considering Indigenous partners' capacity to collaborate and priorities.
    - Consider how Indigenous partners may want to be engaged. Some partners may appreciate connecting over the phone or in person, rather than exclusively discussing the CHR via email. Ensure Indigenous partners have adequate time to discuss, provide input and review CHR materials. Ask Indigenous partners what supports they require to enable their involvement.
    - Ask Indigenous partners what their vision of the CHR is and what information is important to them for inclusion in the document.

2. **Completion and validation:**

    - When completing the narrative sections of the CHR, invite local Indigenous partners to highlight their own efforts to prevent and reduce Indigenous homelessness in the community.
    - Involve Indigenous partners in the interpretation and analysis of data reported in the CHR.
    - Maintain communication with Indigenous partners throughout the CHR process, giving them several opportunities to review and provide feedback on the draft of the report.
    - Work to meaningfully incorporate feedback that is received from Indigenous partners, prior to submission of the CHR.

3. Approvals and reporting back:

- As applicable, assign one or more representatives from the IH CE and/or IH CAB as voting members in the CHR's approval, if they are not already on the DC CAB.
- In communities where there is a separate IH CAB, secure its sign-off on the CHR.
- Once the CHR is submitted, share the final report with Indigenous partners, highlighting how their input was integrated into the document and any findings that may be of interest to them.

Recognizing the principle of meaningful collaboration, in all cases, data used to inform the CHR **must be shared proactively and in a timely way** with local Indigenous partners. Likewise, Indigenous partners should be provided with opportunities to participate in community-level decision making more generally (e.g., as part of an Outcomes-Based Approach). This ensures that Indigenous partners have an opportunity to participate in data interpretation, as well as to identify program and service gaps based on the results.

In order to effectively address Indigenous homelessness, all CEs must ensure there are no unnecessary barriers preventing any partner organizations (including Indigenous organizations) from accessing and/or generating reports from the relevant data. The purpose of this is to ensure Indigenous and non-Indigenous organizations benefit from the available data being collected within a community to inform a coordinated and comprehensive approach to addressing homelessness.

As a reminder, as identified in the Reaching Home Directives (see 7.2 Community Homelessness Reports):

- In communities where only DC or TH funding is available, CEs are expected to collaborate with local Indigenous partners to complete the CHR.
- Where DC and IH streams co-exist, and where there are distinct CEs for each stream, these entities are expected to collaborate with each other, their respective CABs, and local Indigenous partners, to complete the CHR, including approvals and sign-off.
- Where DC and IH streams co-exist, and where there is a single CE for both streams, this entity is expected to collaborate with the CAB(s) and local Indigenous partners, to complete the CHR, including approvals and sign-off.

To determine if there is an IH CE or IH CAB in your area, consult the "Find a Community" section of the Reaching Home website. On this page, you will find contact information for all the Reaching Home funded organizations in your area. Your EPO can also help you find this information.

❶ Sections at a glance

There are four sections in the CHR:

- **Section 1:** Community Context;
- **Section 2:** Coordinated Access Self-Assessment;
- **Section 3:** HMIS and Outcomes-Based Approach Self-Assessment; and,
- **Section 4:** Community-Level Outcomes and Targets.

Section 1: Community Context

Section 1 provides communities an opportunity to share information about their local homelessness context, including reflections on changes in the local approach to addressing homelessness and the level of collaboration between Indigenous and non-Indigenous partners that has and/or will take place.

Section 2: Coordinated Access Self-Assessment

Section 2 provides communities with a checklist to self-assess their progress with meeting the Coordinated Access minimum requirements under the 2024-28 funding cycle. It also provides guidance that will help communities determine the necessary human resources and technical infrastructure needed for implementing, maintaining and/or improving their Coordinated Access system, as well as the policies and protocols that form part of the minimum requirements under Reaching Home.

Section 3: HMIS and Outcomes-Based Approach Self-Assessment

Section 3 provides communities with a checklist to self-assess their progress with meeting the HMIS and Outcomes-Based Approach minimum requirements under the 2024-28 funding cycle. It also provides guidance that will help communities further reflect on the quality and use of their data.

Section 4: Community-Level Outcomes and Targets

Section 4 is where communities with person-specific data that meets the minimum standard for reporting must set targets and submit results for the five core Reaching Home outcomes: homelessness is reduced overall; new inflows to homelessness are reduced; returns to homelessness are reduced; Indigenous homelessness is reduced; and chronic homelessness is reduced.

Section 1: Community Context

Where is this Section in the CHR reporting template? See **Tab 1. Section 1**.

What is this Section's goal? Section aims 1 to provide an opportunity for communities to share information about their local homelessness context, including reflections on changes in the community's approach to addressing homelessness, and the level of collaboration between Indigenous and non-Indigenous partners that has and/or will take place. Most of the questions require narrative responses.

Overview

In this sub-section, communities provide additional information and context specific to the positive developments and lessons learned through challenges faced over the reporting period.

Communities may choose to answer the overview questions at the end, after they have completed the rest of their CHR, so that answers can include highlights as documented throughout the report.

?	**Question CHR 1** invites reflections on efforts and/or issues related to the work that has been done to prevent and/or reduce homelessness over the last year, including work to improve access to safe, appropriate housing. Communities are encouraged to include information about changes to investments in Housing First[4] to respond to emerging needs, identifying the current percentage of Reaching Home funding allocated to this programming. Communities are also asked to consider the impact that these efforts and/or issues may have had on their community-level outcomes (if known). This impact may or may not be directly related to the efforts and/or issues identified over the past year. Communities are encouraged to reflect on changes to investments in Housing First over time, where applicable. Communities are encouraged to include reflections on local efforts and/or issues more broadly, beyond those related to Reaching Home-funded service providers (projects/sub-projects).

[4] For more information about Housing First (e.g., a definition and key principles), see the Homelessness Glossary for Communities.

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In **Question CHR 2**, communities are asked to consider their changing approach to addressing homelessness more broadly. A worksheet called ***"Reflecting on the Changing Response to Homelessness"*** is available to help communities consider the changes that are taking place in more detail. It forms part of the CHR Reporting Tools e-course.

Using this tool, communities can reflect on their efforts to:

- **Work toward more integrated, community-based governance.** For example, have new processes been put in place to strengthen shared, collaborative decision making? Is information being shared more openly through new working groups or case conferencing tables? Is it more clear how different groups fit together and are mutually supportive?
- **Work to strengthen meaningful collaboration between Indigenous and non-Indigenous partners.** For example, is the community working with new Indigenous partners on a more consistent, ongoing basis or with existing partners in a new way (e.g., using more equitable decision-making processes)?
- **Support more coordinated service delivery.** For example, with a Coordinated Access system in place, has the community been able to:
    - Better explain where people can go for help with their housing challenges;
    - Reduce the number of times people need to repeat their stories or get added to different waiting lists to access housing, services, subsidies or supports;
    - Make better referrals and more appropriate matches between people experiencing homelessness and vacancies that become available for housing units, subsidies or supports for this population; and/or,
    - Better explain what resources are available to address homelessness locally, and how people can access them.
- **Support data-driven approaches and improving information management.** For example, has the community been able to:
    - Make decisions using more accurate data about how to meet people's needs and preferences in a timely way (e.g., to inform service plans);
    - Make decisions about funding allocations using more accurate data about the unmet need for services and housing-related resources (e.g., to inform investment strategies);
    - Reduce administrative burden for service providers using an HMIS; and/or,
    - Reduce data fragmentation about homelessness at the community level.

Collaboration between Indigenous and non-Indigenous partners

As mentioned previously, addressing Indigenous homelessness is **central** to achieving the prevention and reduction of homelessness for all communities. Recognizing the over-representation of Indigenous peoples among those experiencing homelessness, meaningful collaboration between local Indigenous and non-Indigenous partners is necessary in each community.

Local Indigenous partners have knowledge and expertise to offer and deliver culturally-appropriate programming that is proven to effectively address Indigenous homelessness. As such, the delivery of culturally-appropriate programming should be informed by local Indigenous partners' knowledge and expertise. Considering, reflecting on, and actively incorporating Indigenous perspectives and priorities will ensure that the work to address homelessness represents the insights and expertise of the entire (non-Indigenous and Indigenous) community. In particular, local Indigenous and non-Indigenous organizations are expected to work closely together in order to achieve results in the core Reaching Home outcome of reduced Indigenous homelessness.

Questions CHR 3, CHR 4, CHR 5 and **CHR 6** ask about the level of collaboration between local Indigenous and non-Indigenous partners and, where applicable, the IH CE and IH CAB.

A separate worksheet called ***"Indigenous Partners in your Community"*** helps communities to connect with the Indigenous partners that exist in their area. This worksheet forms part of the CHR Reporting Tools e-course.

❶ Meaningful Collaboration: Guidance

Meaningful collaboration with Indigenous partners on core Reaching Home program elements includes three components:

- Which Indigenous partners are involved;
- What aspects of the work Indigenous partners participate in; and,
- How the work is being approached, to ensure that collaboration is meaningful.

Which Indigenous partners are involved

- Indigenous partners includes, but is not limited to, the IH stream CE and/or CAB, as well as local Indigenous governments and Indigenous-led organizations. It also includes Distinctions-Based partners: First Nations, Inuit and/or Métis, including those with a modern treaty or self government agreement.

- When working on core Reaching Home program elements, Indigenous representation should be reflective of the local Indigenous population. Where there are multiple, diverse Indigenous partners in a community, the perspectives and needs of each of these partners should be considered.

- Reaching Home recognizes that achieving this diverse representation may be impacted by:
    - The landscape of Indigenous homelessness-focused partners in a community. In some communities there are many established Indigenous-led organizations and/or distinctions-based partners, while in other communities there may be few or none.
    - The decisions of Indigenous partners regarding if and how they would like to collaborate on core Reaching Home program elements.

What aspects of the work Indigenous partners participate in

- Reaching Home does not have firm expectations regarding what aspects of core Reaching Home program elements Indigenous partners participate in. Instead, it is up to communities (including both Indigenous and non-Indigenous partners) to determine what participation should involve, with consideration for their local context.
- This flexibility reflects that communities have diverse realities that necessitate working together in diverse ways. For example, both within a community and across communities, the status of relationships between Indigenous and non-Indigenous partners varies. Meaningfully working with partners may look different when relationships are still being formed, compared to when they are firmly established.

- Recognizing the flexibility described above, communities should work towards the following goals related to the implementation, maintenance and improvement of Coordinated Access, the Outcomes-Based Approach and the HMIS:
    - There are established processes (formal or informal) for engaging with Indigenous partners regarding Coordinated Access, the Outcomes-Based Approach and the HMIS.
    - Indigenous partners have established roles and responsibilities related to Coordinated Access and HMIS governance.
    - Indigenous partners participate in Coordinated Access and the Outcomes-Based Approach, and use the HMIS.[5]

How the work is approached

- Reaching Home has a definition of meaningful collaboration that can be found under "Indigenous partners and meaningful collaboration" in the Homelessness Glossary for Communities. This definition focuses on how collaboration between Indigenous and non-Indigenous partners should be approached, to ensure that it is meaningful. Reaching Home expects that Indigenous and non-Indigenous partners will follow these principles in their work together.

[5] IH CEs are not required to participate in Coordinated Access or the Outcomes-Based Approach, or use the HMIS, but are encouraged to do so. Should the IH CE not wish to participate in Coordinated Access or the Outcomes-Based Approach, or use the HMIS, meaningful collaboration can still take place in other ways.

Question CHR 3 is used to tailor questions CHR 4, CHR 5 and CHR 6. Communities where the same CE manages both DC and IH funding are not asked about collaboration between the DC CE and IH CE in 1.4(a) and 1.5(a) because this does not apply to their local context. Similarly, where communities do not have IH stream funding, they are not asked about collaboration with IH CEs and IH CABs.

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Certain provinces[6] have an IH non-Designated CE, which manages IH funding available across the whole province. Though expectations for IH CEs related to collaboration on Coordinated Access, the Outcomes-Based Approach and an HMIS – as identified in the Reaching Home Directives – do not apply to IH non-Designated CEs, DC CEs are encouraged to connect with these organizations as part of broader efforts to collaborate with Indigenous partners.

Reminder: This question does not assess progress with meeting Reaching Home minimum requirements for the 2024-28 funding cycle.

[6] British Columbia, Manitoba, New Brunswick, Newfoundland and Labrador, Nova Scotia and Saskatchewan.

Question CHR 4(a) asks about progress with meeting **Coordinated Access Minimum Requirement 2**, **Outcomes-Based Approach Minimum Requirement 2** and **the HIFIS Directive.**

CHR 4(a) was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives.

The response to **CHR 4(a)** is used to auto-fill questions in Section 2 (**CA 5**) and Section 3 (**HIFIS 5** and **OBA 16**), where the responses are used to contribute to the self-assessments for those Sections.

Self-assessing meaningful collaboration

- **Step 1:** Review the Meaningful Collaboration: Guidance box and the ***"Indigenous Partners in your Community"*** worksheet (found in the CHR Reporting Tools e-course).
- **Step 2:** Reflect on which local Indigenous partners are currently involved in work related to Coordinated Access, the Outcomes-Based Approach and the HMIS. Also reflect on which partners may be missing.
- **Step 3:** Reflect on what aspects of Coordinated Access, the Outcomes-Based Approach and the HMIS Indigenous partners currently participate in.
    - This should involve reviewing the tick box questions under CHR 4(b), which include forms of participation that communities should work towards.
- **Step 4:** Reflect on how the work under Step 3 is being approached and whether it represents meaningful collaboration, based on the principles outlined under "Indigenous partners and meaningful collaboration" in the Homelessness Glossary for Communities.
- **Step 5:** Once communities have finished this reflection, they should place themselves on the following scale:
    - **Yes (continuous improvement)**[7]**:** Under Step 2 you identified that Indigenous partners who are involved in work related to Coordinated Access, the Outcomes-Based Approach and the HMIS are quite representative. Under Step 3, you identified that Indigenous partners are currently participating in many aspects of this work. Under Step 4, you identified that many aspects of collaboration are meaningful.
    - **No (under development):** Under Steps 2 and 3, you identified that at least some Indigenous partners are currently participating in at least some aspects of Coordinated Access, the Outcomes-Based Approach and the HMIS. Under Step 4, you identified that there are efforts to make collaboration meaningful.

- **No (not yet started):** Under Step 2, you identified that Indigenous partners are not currently involved in work related to Coordinated Access, the Outcomes-Based Approach and the HMIS.

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Questions CHR 4(b), CHR 4(c) and CHR 4(d) help communities further reflect on some of the ways that collaboration with Indigenous partners on Coordinated Access, the Outcomes-Based Approach and the HMIS may be taking place at the community level.

More specifically, **CHR 4(b)** asks whether certain activities took place with Indigenous partners related to the following:

- **Engagement Processes:** For example, there may be local engagement strategies for providing updates to and gathering feedback from Indigenous partners, related to Coordinated Access or the HMIS.
- **Governance roles and responsibilities**: For example, Indigenous partners may be active members of the local Coordinated Access steering committee and HMIS working group.
- **Indigenous partner participation in Coordinated Access:** For example, Indigenous partners may be leveraging the Coordinated Access system to connect people experiencing or at-risk of homelessness with appropriate services, including supporting them with their housing plans and matching them with vacancies that become available.
- **Indigenous partner participation in the Outcomes-Based Approach:** For example, Indigenous partners may be actively engaged in the work of improving data quality, including ensuring that data for Indigenous peoples is accurate (e.g., up-to-date, complete, and comprehensive). In addition, Indigenous partners may be actively engaged in the community's efforts to set a reduction target for Indigenous homelessness, develop strategies to reach this target, and assess progress over time.
- **Indigenous partner use of the HMIS and access to HMIS data:** For example, Indigenous partners may be actively using the software for activities such as:
    - Managing client data and service provider information, documenting service transactions, and tracking interactions with the Coordinated Access system;
    - Integrating HMIS use into daily workflows and ensuring timely data updates;
    - Supporting data accuracy through consistent data entry and audit practices; and,

[7] Meaningful collaboration is a continuous improvement process. Communities can still self-assess themselves as meaningfully collaborating, even if they are still working towards aspects that require improvement.

- Using data to inform action in policy-making, program planning, performance management, investment strategies and/or service delivery.
- Under Reaching Home, active use of the software includes generating data for a Unique Identifier List in order to meet Coordinated Access requirements, as well as generating data for outcome reporting in order to meet Outcomes-Based Approach requirements.

In addition:

- Where collaboration is taking place (even if limited), communities are asked to provide further details about this collaboration in **question CHR 4(c).** The response should clearly outline what activities took place **as it relates to Coordinated Access, the Outcomes-Based Approach and/or the HMIS**.
- Where collaboration is not taking place (or is limited), communities are asked to provide further details about limitations in collaboration in **question CHR 4(d)**. The response should clearly outline what activities are planned to take place to meet the minimum requirements for collaboration **as it relates to Coordinated Access, the Outcomes-Based Approach and/or the HMIS**.

Reminder: These questions do not assess progress with meeting Reaching Home minimum requirements for the 2024-28 funding cycle.

Question CHR 5(a) asks about progress with meeting the **CHR Requirement.** When self-assessing whether meaningful collaboration took place, communities should look at the self-assessment process provided for CHR 4(a), since it also applies.

Questions CHR 5(b), CHR 5(c) and **CHR 5(d)** help communities further reflect on some of the ways that collaboration with Indigenous partners on the CHR may be taking place at the community level.

Under **Question CHR 5(b)**, communities are asked whether certain activities took place with Indigenous partners related to the following:

- **Early engagement with Indigenous partners:** For example, if the community engaged with Indigenous partners at the beginning of the process to determine their role in providing input for the CHR and reviewing the final draft.
- **Collaboration during CHR development and finalization:** For example, if Indigenous partners co-developed the draft CHR.
- **Review and approval of the CHR:** For example, if Indigenous partners reviewed the final draft and signed the CHR sign-off sheet once approved.

In addition:

- Where collaboration did take place, communities are asked to provide further details in **question CHR 5(c)**. The response should clearly outline what activities took place **as it relates to the completion of the CHR**.
- Where collaboration did not take place, communities are asked to provide further details in **question CHR 5(d)**. The response should clearly outline what activities are planned to take place **as it relates to the completion of the CHR**.

Reminder: These questions do not assess progress with meeting Reaching Home minimum requirements for the 2024-28 funding cycle.

Question CHR 6 asks communities if IH CAB sign-off was received and, if not, why. This question is only asked for communities where there is a separate IH CAB.

Section 2: Coordinated Access Self-Assessment

What's new for 2025-26?

- ✓ Responses have been pre-populated to align with your Reaching Home Self-Assessment Checklist.

Where is this Section in the CHR reporting template? See **Tab 2. Section 2**.

What is this Section's goal? Section 2 provides communities with a checklist they can use to self-assess their progress with meeting the minimum Coordinated Access requirements under the 2024-28 funding cycle, as well as requirements identified under the CAB Directive related to integrated, community-based governance. These questions are the same as the Reaching Home Self-Assessment Checklist.

What is Coordinated Access?

Under Reaching Home, Coordinated Access is defined as a way for communities to bring consistency, equity and efficiency to the process by which people experiencing or at-risk of homelessness access services and housing-related resources within a geographic area. For more information, refer to "Chapter 5: Coordinated Service Delivery (Coordinated Access)" in the Homelessness Glossary for Communities.

Communities will have completed their implementation of Coordinated Access when all of the minimum requirements have been met under the Coordinated Access Directive for the 2024-28 funding cycle, as well as CAB requirements related to integrated, community-based governance.

How is Coordinated Access implementation assessed in the CHR?

All questions in Section 2 of the CHR help communities self-assess progress with meeting minimum requirements under the Reaching Home Coordinated Access Directive and related CAB requirements for the 2024-28 funding cycle, by prompting communities to reflect on their level of completeness with respect to each minimum requirement.

- At the end of Section 2, responses automatically tally into summary tables to help measure progress over time and identify gaps. A point has been attributed to each question in Section 2. To get a point, "Yes" or "Not applicable" must be answered for all questions. Coordinated Access implementation is considered **completed** when a community has 17 out of 17 points.

- Depending on the complexity of the task and the local context in which the work is done, it is expected that meeting some of the requirements may take more time and effort than others.
- Responses in Section 2 will be reviewed by HICC officials for alignment with the Reaching Home Self-Assessment Checklist (as of March 31, 2026), the previous CHR and 2024-28 Community Plan, as applicable.

Governance and partnerships

Governance refers to the overall structures, policies and protocols that establish strategic direction, define how decisions are made, and oversee program implementation.

In general, effective governance supports a transparent, accountable, and responsive Coordinated Access system. Successful implementation of Coordinated Access and an HMIS requires a clear governance structure with appropriate data-related policies, protocols and practices.

Under Reaching Home, communities must maintain an integrated, community-based governance structure that supports a transparent, accountable and responsive Coordinated Access system, with use of an HMIS. The CAB must be represented in this structure in some way.

For more information, refer to:

- ✓ "Governance structure" in the Homelessness Glossary for Communities.
- ✓ The CA Guide, for examples of governance structure and to learn more about Coordinated Access Leadership Group and responsibilities, Coordinated Access Lead and responsibilities and HIFIS Lead and responsibilities.
- ✓ The HIFIS Implementation Guide, to learn more about governance for HIFIS (pp. 16-24).

Question CA 1 asks about progress with meeting **Coordinated Access Minimum Requirement 3.** For more information, refer to "Governance structure" in the Homelessness Glossary for Communities.

CA 1(a)	**CA 1(a)** asks about an "integrated, community-based governance structure" in place for the Coordinated Access system and the HMIS, in alignment with the 2024-28 Reaching Home Directives.
CA 1(b)	**CA 1(b)** was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives.

Question CA 2 asks about progress with meeting part of **Coordinated Access Minimum Requirement 5.**

CA 2 was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives.

For clarity, participation of provincial/territorial, municipal and Indigenous governments on the CAB is intended to support the following objectives:

- Members act as a resource for information on existing policies and programs;
- Members provide guidance to ensure complementarity between federal and existing investments; and,
- Members keep respective organizations apprised of developments at the community level (e.g., information regarding calls for proposals, lists of projects to be funded, etc.)

Question CA 3 asks about progress with meeting part of **Coordinated Access Minimum Requirement 5.**

CA 3 was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives.

Question CA 4 asks about progress with meeting **Coordinated Access Minimum Requirement 4.**

CA 4(c) and **CA 4(d)** were introduced as new minimum requirements under the 2024-28 Reaching Home Directives.

?	**Question CA 5** asks about progress with meeting **Coordinated Access Minimum Requirement 2.** Though this question appears in Section 2, it is actually completed in Section 1 through question CHR 4(a). The response is carried-over automatically to Section 2. For more information, see **question CHR 4(a)**.

?	**Question CA 6** asks about progress with meeting **CAB requirements** under the 2024-28 Reaching Home Directives, but forms part of the self-assessment for Coordinated Access under "governance and partnerships". More specifically: • **CA 6(a)** outlines and assesses progress with expectations specific to the CAB and its role with addressing homelessness in the community. • **CA 6(b)** helps communities better understand what elements they're missing if they answer "Under development" or "Not yet started".

?	**Question CA 7** asks about progress with meeting **CAB requirements** under the 2024-28 Reaching Home Directives, but forms part of the self-assessment under "governance and partnerships". More specifically, it outlines and assesses progress with expectations specific to CAB documents.

?	**Question CA 8** asks about progress with meeting **Coordinated Access Minimum Requirement 6** (a) and **Coordinated Access Minimum Requirement 7** (b and c). • **CA 8(b)** and **CA 8(c)** were introduced as new minimum requirements under the 2024-28 Reaching Home Directives. For more information, communities can refer to the Reaching Home Systems Mapping Guide on the Homelessness Learning Hub, as well as "Service provider participation in Coordinated Access" in the Homelessness Glossary for Communities.

Systems Map and Resource Inventory

In general, systems mapping is a process used by communities to develop a comprehensive understanding of a local network of community services, such as a homeless-serving system, as well as connections between these service providers and broader, inter-related service systems. Communities can use their systems map to

document the Coordinated Access roles that service providers have agreed to play, as they work to coordinate their services among partners, and reach shared aims related to addressing homelessness at the community level. A Resource Inventory is a sub-set of a broader systems map. Communities use this document to describe the service providers that have agreed to fill vacancies through Coordinated Access in more detail, helping to inform the matching and referral process.

For more information, refer to:

- ✓ The Systems Mapping Toolkit, which provides step-by-step instructions for creating a systems map and Resource Inventory, including customizable templates.
- ✓ "Systems Mapping" and "Resource Inventory" in the Homelessness Glossary for Communities.

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Question CA 9 asks about progress with meeting part of **Coordinated Access Minimum Requirement 8.**

CA 9 was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives.

CA 9(c) Communities are asked if a systems map was used over the last year to guide efforts to improve the Coordinated Access system, use of the HMIS and/or data quality. For example, communities may have used their systems map to help determine the following:

- Which service providers are not yet participating in Coordinated Access but should be. For example, the systems map might show that no access points are youth-specific. As a next step, the Coordinated Access Lead could ask *if any youth-specific outreach providers or shelters* would be willing to serve as access points, so that the system is better able to meet the needs of youth.
- Which service providers are not yet using the HMIS but should be. For example, the systems map might show that only some access points have agreed to use the HMIS and, as such, are helping to keep data about the people they serve up-to-date. As a next step, the HMIS Lead could ask *all access points* if they would be willing to use the HMIS for this purpose, so that information that is relevant and essential for Coordinated Access is entered in the database as soon as people connect or re-connect with the system (e.g., housing history and data that informs who is eligible and could be prioritized for housing and related resources).
- If the person-specific dataset is comprehensive. For example, there may be providers that are not using the HMIS but serve either a large portion of the

	local homeless population (e.g., a very large shelter) or a very specific portion of the homeless population (e.g., the only Indigenous outreach provider in the community). If so, the HMIS Lead could engage with these providers to encourage them to use the HMIS, so that the people they serve can be included in the dataset and receive offers through the Coordinated Access system.

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Question CA 10 asks about progress with meeting part of **Coordinated Access Minimum Requirement 9** (a), **Coordinated Access Minimum Requirement 10** (b) and **Coordinated Access Minimum Requirement 11** (c).

CA 10(b)	Eligibility criteria can apply to a type of housing resource (e.g., all supportive housing) and/or a smaller subset of that type (e.g., a unit in a supportive housing building).
CA 10(c)	Prioritization criteria can be shared for more than one type of resource (e.g., all rapid re-housing and supportive housing) or apply to only one type (e.g., only supportive housing). While communities can select the prioritization criteria that will work best for them, they must include depth of need (i.e., acuity) as a factor. Other prioritization criteria could include housing history, current length of homeless episode, current living situation, health status, vulnerability to victimization, household type, number of children and/or pregnancy, age, Veteran status and/or Indigenous identity.

Service Navigation and Case Conferencing

Service navigation is a collaborative process where service providers work together to develop and implement service plans. The focus is on supporting people to move through the Coordinated Access process by removing service barriers, so that people can exit homelessness as quickly as possible. Within this context, case conferencing is a specialized form of problem solving, often used to help people access a range of services and/or housing-related resources, so they can move forward with their housing plans. By pooling expertise and knowledge, case conferences can help to find solutions to more complex challenges.

For more information, refer to “Service navigation and case conferencing (service planning)” in the Homelessness Glossary for Communities.

Question CA 11 asks about progress with meeting **Coordinated Access Minimum Requirement 12**.

CA 11 was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives.

Access points to service

Access points are where people enter the Coordinated Access system, either through phone lines, virtual/online spaces, mobile outreach and/or physical locations.

For more information, refer to:

- ✓ "Access points (intake and referrals)" in the Homelessness Glossary for Communities.
- ✓ The CA Guide, to learn more about selecting access points, promoting access points, and ensuring quality in the design and implementation of access points.

Question CA 12 asks about progress with meeting **Coordinated Access Minimum Requirement 13**.

CA 12(b) was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives, and asks if access points and documented and publicly available. Documentation that is publicly available helps to ensure that people experiencing or at-risk of homelessness know how to connect with the Coordinated Access system.

For more information, refer to "Available access points" in the Homelessness Glossary for Communities.

Question CA 13 asks about progress with meeting **Coordinated Access Minimum Requirement 14**.

CA 13(a) Where communities were previously asked about "processes in place that ensure no one is denied access to service due to perceived housing or service barriers", the term "low-barrier" is now used in alignment with the 2024-28 Reaching Home Directives.

Ensuring easy, equitable and low-barrier access to the Coordinated Access system is an ongoing quality improvement process. As such, this requirement does not assess if there **is** easy, equitable and low-barrier access **at any point in time**. Rather, it assesses if the community has **processes in place** to **monitor for issues**

	related to access that are making it challenging for people to connect with the system, and to **respond appropriately**. In their self-assessment, communities can consider if there is a group and/or specific staff role that has taken on the role of monitoring and responding to access issues. Communities can also consider if there are any policies, protocols and/or practices in place to support this function, and if these tools are sufficient. For more information, refer to "Easy access", "Equitable access" and "Low-barrier access" in the Homelessness Glossary for Communities.
CA 13(b)	This question was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives.

Initial triage and more in-depth assessment

While the specific details of individual housing challenges will vary, the goal for Coordinated Access is to bring consistency, equity and efficiency to the process by which people can get help with their challenges. This process includes triage, which is an initial or immediate intervention that focuses on ensuring safety, meeting basic needs, and homelessness prevention or shelter diversion. The process also includes assessment, which is part of more in-depth or intensive service planning used to gain a deeper understanding of people's needs, strengths, and preferences.

The overall triage and assessment process spans the full continuum of interactions with people as they are supported to access services, including ensuring that those who are eligible for housing-related resources are ready to accept an offer when a vacancy becomes available.

For more information, refer to:

- ✓ "Triage and assessment (service planning)" in the Homelessness Glossary for Communities.
- ✓ The CA Guide to learn more about use of progressive engagement, initial triage for homelessness prevention and shelter diversion, comprehensive assessment and use of a common tool, and eligibility screening.
- ✓ The HIFIS User Guide to learn more about assessment tools in HIFIS (pp. 61-62 for SPDAT, pp. 65-66 for VAT), case management in HIFIS (pp. 44-46), custom surveys or questionnaires (p.63).

?	**Question CA 14** asks about progress with meeting **Coordinated Access Minimum Requirement 15.** **CA 14(b)** was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives. For more information, refer to "Protocols for triage and assessment" in the Homelessness Glossary for Communities.

?	**Question CA 15** asks about progress with meeting **Coordinated Access Minimum Requirement 16.** **CA 15(b)** was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives. Some communities may be using more than one triage and/or assessment **tool** to meet the needs of different population groups. If more than one tool is being used, having a common, unified **process** in place is important. Communities will need to put additional processes in place to limit the risk of re-traumatizing people (e.g., ensure people are not asked similar questions multiple times), as well as reducing administrative burden and data duplication if service providers are expected to use multiple tools (e.g., ensure users are not being asked to enter similar information into multiple fields in the HMIS). If only one triage and assessment tool is being used, communities should select "Not applicable – Only use one tool" in all three drop-down menus. For more information, refer to "Assessment; common tool" in the Homelessness Glossary for Communities.

Vacancy matching and referral with prioritization

Vacancy matching and referral represents the final stage of the Coordinated Access process. It refers to the process of matching people experiencing homelessness with open or pending vacancies from the Resource Inventory, based on eligibility and need, and then prioritizing who gets an offer first. For more information, refer to:

- ✓ "Vacancy matching and referral with prioritization" in the Homelessness Glossary for Communities.
- ✓ The CA Guide to learn more about prioritization methods and considerations, applying prioritization criteria to the resource inventory, matching clients to vacancies, and common challenges.

Question CA 16 asks about progress with meeting **Coordinated Access Minimum Requirement 17**.

CA 16(b) was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives.

For more information, refer to "Protocols for vacancy matching, prioritization and referral" in the Homelessness Glossary for Communities.

Question CA 17 asks about progress with meeting **Coordinated Access Minimum Requirement 18**.

Section 3: Homelessness Management Information System (HMIS) and Outcomes-Based Approach Self-Assessment

What's new for 2025-26?

- ✓ Responses have been pre-populated to align with your Reaching Home Self-Assessment Checklist.

Where is this Section in the CHR reporting template? See **Tab 3. Section 3**.

What is this Section's goal? Section 3 provides communities with a checklist they can use to self-assess their progress with meeting the requirement to implement an HMIS and to implement an Outcomes-Based Approach under the 2024-28 funding cycle. These questions are the same as the Reaching Home Self-Assessment Checklist.

What is an HMIS?

An HMIS is a software that collects person-specific data and manages service provider information over time within a homeless-serving system. It plays a critical role in a Coordinated Access system and in the Outcomes-Based Approach. Developed by the Government of Canada, and in collaboration with communities across Canada, HIFIS is an HMIS designed to support Coordinated Access, the Outcomes-Based Approach and day-to-day operational activities of service providers in the homeless-serving sector. For more information, refer to "Chapter 6: Using HIFIS as an HMIS" in the Homelessness Glossary for Communities.

Communities will have completed their implementation of an HMIS when all of the minimum requirements have been met under the HIFIS Directive for the 2024-28 funding cycle.

What is the Outcomes-Based Approach?

Under Reaching Home, an Outcomes-Based Approach is defined as a data-driven approach to preventing and reducing homelessness where local organizations and service providers work together to achieve community-level outcomes and reach reduction targets using person-specific data.

Communities will have completed their implementation of an Outcomes-Based Approach when all of the minimum requirements have been met under the Outcomes-Based Approach Directive for the 2024-28 funding cycle.

How is HMIS and Outcomes-Based Approach implementation assessed in the CHR?

There are **three** types of questions in Section 3. As a reminder, Section 3 **must** be completed before Section 4.

1. HIFIS questions that help communities self-assess progress with meeting minimum requirements under the Reaching Home HIFIS Directive for the 2024-28 funding cycle. The numbering of these questions starts with "HIFIS" (e.g., HIFIS 1).

    - At the end of Section 3, responses automatically tally into summary tables to help measure progress over time and identify gaps. A point has been attributed to each "HIFIS" question in Section 3. To get a point, "Yes" or "Not applicable" must be answered for all questions. HMIS implementation is considered completed when a community has 5 out of 5 points.

    - Depending on the complexity of the task and the local context in which the work is done, it is expected that meeting some of the requirements may take more time and effort than others.

2. Outcomes-Based Approach questions that help communities self-assess progress with meeting minimum requirements under the Reaching Home Outcomes-Based Approach Directive for the 2024-28 funding cycle. The numbering of these questions starts with "OBA" (e.g., OBA 1(a)).

    - At the end of Section 3, responses automatically tally into summary tables to help measure progress over time and identify gaps. A point has been attributed to each "OBA" question in Section 3. To get a point, "Yes" or "Not applicable" must be answered for all questions. Outcomes-Based Approach implementation is considered completed when a community has 17 out of 17 points **and** has set baselines, set reduction targets and is tracking their progress in Section 4.

    - Depending on the complexity of the task and the local context in which the work is done, it is expected that meeting some of the requirements may take more time and effort than others.

3. Data questions that prompt communities to reflect further on their dataset, beyond the minimum requirements for the 2024-28 funding cycle. Some of these questions are also used to assess if communities meet the standard for reporting on core outcomes in the CHR. The numbering of these questions starts with "CHR" (e.g., CHR 7).

Responses in Section 3 will be reviewed by HICC officials for alignment with the Reaching Home Self-Assessment Checklist (as of March 31, 2026), the previous CHR and 2024-28 Community Plan, as applicable.

What is the standard for reporting on core outcomes?

The standard for reporting on core outcomes outlines the minimum elements of an Outcomes-Based Approach that a community must have in place to establish baselines, set targets, and track progress in Section 4 of their CHR. For more information about the methodology used to calculate these outcomes, see Section 4.

For the previous CHR reporting cycle (2024-25), a temporary, interim standard was put in place to allow communities to continue reporting data using their existing methods. This ensured continuity in reporting while the community completed its transition toward the full Outcomes-Based Approach.

For the current CHR reporting cycle (2025-26), the interim standard has now ended. Beginning in this reporting cycle, communities must have all minimum elements in place in order to report data in Section 4 of their CHR as per the Reaching Home Directives.

The following table provides a comparison of the previous interim standard (which is now expired) and the current standard for Section 4 for the 2025-26 CHR reporting cycle.

Element	Interim standard (expired) (2024-25 CHR)	Standard as per 2024-28 Directives (2025-26 CHR)
Data uniqueness	**OBA 1(a):** The dataset includes people currently experiencing homelessness that have interacted with the homeless-serving system.	**OBA 1(a):** No change.
	OBA 1(b): There are no duplicate records in the dataset.	**OBA 1(b):** No change.
	OBA 1(c): People give their consent to be included in the dataset.	**OBA 1(c):** No change.
Data consistency	N/A	**OBA 5:** The HMIS is used to collect data for setting baselines, setting reduction targets and tracking progress for all community-level outcomes.
Data timeliness	**OBA 6 and CHR 8:** Data is updated at least monthly.	**OBA 6:** Data is updated as soon as new information is available.
Data completeness	N/A	N/A

Element	Interim standard (expired) (2024-25 CHR)	Standard as per 2024-28 Directives (2025-26 CHR)
Data comprehensiveness	**OBA 13:** The dataset includes everyone currently experiencing homelessness that has interacted with the homeless-serving system, as much as possible right now.	**OBA 10:** Does the dataset include all household types (e.g., singles and families experiencing homelessness)? **OBA 11:** Does the dataset include people experiencing sheltered homelessness (e.g., staying in emergency shelters)? **OBA 12:** Does the dataset include people experiencing unsheltered homelessness (e.g., people living in encampments)? **OBA 13:** No change.
Data use	**OBA 14:** The dataset* can and is being used to set monthly and annual baselines and reduction targets for all community-level outcomes. *Communities can choose the source of their dataset.	**OBA 14:** The dataset** can and is being used to set monthly and annual baselines and reduction targets for all community-level outcomes. **Communities must use HIFIS (or existing, equivalent HMIS) as the source of their dataset.

Context

?

Question CHR 7 provides context on the HMIS being used. Throughout Section 3 and Section 4 of this CHR, questions that ask about the "HMIS" or the "dataset" refer to the HMIS identified in question CHR 7.

To meet Outcomes-Based Approach Minimum Requirement 8, communities must use HIFIS (or an existing, equivalent HMIS) as their dataset to set baselines, set reduction targets and track progress for the five core Reaching Home outcomes.

Reminder: This question does not assess progress with meeting Reaching Home minimum requirements for the 2024-28 funding cycle.

Homelessness Management Information System (HMIS)

Under Reaching Home, the use of HIFIS is mandatory for all CEs that are not already operating with an equivalent HMIS. For more information about the requirements for an equivalent HMIS, refer to the HIFIS Directive.

For more information about HIFIS, contact the HIFIS Client Support Centre and refer to:

- ✓ "Chapter 6: Using HIFIS as an HMIS" in the Homelessness Glossary for Communities.
- ✓ The HIFIS Implementation Guide to learn more about privacy and legal compliance (pp. 21-23), data sharing and configuration (p. 29), and setting user rights (pp. 38-39).

?	**Question HIFIS 1** asks about progress with meeting part of **HIFIS Minimum Requirement 3**. For more information, refer to "Active use of an HMIS/HIFIS" in the Homelessness Glossary for Communities.

?	**Question HIFIS 2** asks about progress with meeting part of **HIFIS Minimum Requirement 3**. **HIFIS 2(a) and HIFIS 2(b)** were introduced as new minimum requirements under the 2024-28 Reaching Home Directives.

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Question HIFIS 3 asks about progress with meeting **HIFIS Minimum Requirement 4** (a and b) and part of **HIFIS Minimum Requirement 3** (c).

HIFIS 3(a)

A Data Provision Agreement is an agreement between the HMIS/HIFIS Lead and HICC that outlines roles and responsibilities and authorizes the collection of certain non-identifiable export fields.

Communities should only answer "Yes" when they have signed the latest Data Provision Agreement, which can be found here: Data Provision Agreement. For ease of reference, this latest version includes the Racial Identity field in the annex.

HIFIS 3(c)

HIFIS 3(c) was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives.

Ensuring appropriate access to data and/or reports is an ongoing quality improvement process. This question assesses if the community has processes in place that support greater access.

In their self-assessment, communities can consider if they have specific policies, protocols and/or practices that support Indigenous partners to access the data and/or reports they need, and if these tools are sufficient.

?

Question HIFIS 4 asks about progress with meeting part of **HIFIS Minimum Requirement 3.**

HIFIS 4 was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives.

As of the 2025-26 CHR, the latest mandatory version of HIFIS is **4.0.60.1**.

?

Question HIFIS 5 asks about progress with meeting **the HIFIS Directive.** Though this question appears in Section 3, it is actually completed in Section 1 through question CHR 4(a). The response in Section 1 is carried-over automatically to Section 3.

For more information, see **question CHR 4(a)**.

Data uniqueness

The dataset contains no duplicate records and no redundant information. Person-specific data represents unique individuals experiencing or at-risk of homelessness.

Each person who interacts with the homeless-serving system appears only once in the dataset, and only after appropriate consent has been obtained.

For more information, refer to “Data uniqueness” in the Homelessness Glossary for Communities.

?	**Question OBA 1** asks about progress with meeting part of **Outcomes-Based Approach Minimum Requirement 5**.

?	**Question OBA 2** asks about progress with meeting **Outcomes-Based Approach Minimum Requirement 3**. **OBA 2** was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives. For more information, refer to "Inactivity policy" in the Homelessness Glossary for Communities.

?	**Question OBA 3** asks about progress with meeting **Outcomes-Based Approach Minimum Requirement 4**. **OBA 3** was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives. For more information, refer to "Housing history policy" in the Homelessness Glossary for Communities

Data consistency

Data is drawn from a single source of truth and remains unchanged as it is transferred, reported, or published across systems. Data is considered consistent when it is

collected using the HMIS and the same data is used to generate a Unique Identifier List in the context of Coordinated Access and for outcome reporting.

For more information, refer to “Data consistency” in the Homelessness Glossary for Communities.

?	**Question OBA 4** asks about progress with meeting part of **Outcomes-Based Approach Minimum Requirement 5.** **OBA 4** was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives.

?	**Question OBA 5** asks about progress with meeting part of **Outcomes-Based Approach Minimum Requirement 8.** **OBA 5** was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives. This question asks communities to reflect on how they collect data. It does not ask if the HMIS is used to report data. In other words, this question assesses if the HMIS is being used to gather the information needed to eventually report on core Reaching Home outcomes.

Data timeliness

Data is timely if it is up-to-date (real-time), readily available and accessible whenever it is needed. For more information, refer to “Data timeliness” in the Homelessness Glossary for Communities.

?	**Question OBA 6** asks about progress with meeting **Outcomes-Based Approach Minimum Requirement 6.** **OBA 6** was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives.

?	**Question OBA 7** asks about progress with meeting part of **Outcomes-Based Approach Minimum Requirement 9.** For more information, refer to "Data availability" in the Homelessness Glossary for Communities.

Data completeness

Data that is complete includes all relevant and necessary information for Coordinated Access and outcome reporting. For more information, refer to "Data completeness" in the Homelessness Glossary for Communities.

?	**Question OBA 8** asks about progress with meeting part of **Outcomes-Based Approach Minimum Requirement 5**. **OBA 8** was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives. This question asks communities to consider if they have the right processes in place to ensure that all relevant and necessary data for filling vacancies is complete in the dataset. For example, if Veterans experiencing chronic homelessness are a local priority, Veteran status and housing history will need to be complete and accurate for every person in the HMIS. That said, the specific data points that are considered "relevant and necessary" for Coordinated Access will vary by community, based on the services and housing and related resources that are currently available, as well as local priorities.

?	**Question OBA 9** asks about progress with meeting part of **Outcomes-Based Approach Minimum Requirement 8**. **OBA 8** was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives.

Data comprehensiveness

Data that is comprehensive includes everyone currently experiencing homelessness that has interacted with the system. It reflects community-level homelessness.

Having a comprehensive dataset is a process of continuous improvement. Remember that access points need to be evaluated to ensure they are meeting the needs of those they are intended to serve. Reviewing data and reflecting on any existing or emerging gaps will support a more equitable Coordinated Access system. Over time, with effective engagement and outreach, the number of people experiencing homelessness who are known (in the dataset) versus unknown (not in the dataset) should get smaller.

For more information, refer to "Data comprehensiveness" in the Homelessness Glossary for Communities.

?

Questions OBA 10, **OBA 11** and **OBA 12** ask about progress with meeting part of **Outcomes-Based Approach Minimum Requirement 7**.

OBA 10	A dataset may not be comprehensive if it is missing certain household types, for example unaccompanied youth that are experiencing homelessness and have interacted with the system in some way. For more information, refer to "Household type" in the **Homelessness Glossary for Communities**.
OBA 11	A dataset may not be comprehensive if, for example, it is missing people staying at one of the largest shelters in a community, unless there is a process in place to ensure that these individuals are included another way (e.g., if the shelter agrees to refer everyone to an access site where their data can be entered in the HMIS). For more information, refer to "Sheltered homelessness" in the **Homelessness Glossary for Communities**.
OBA 12	A dataset may not comprehensive, for example, if it is missing people being served by one of the largest outreach teams in a community, unless there is a process in place to ensure that these individuals are included in the dataset another way (e.g., confirming that they are being included through a shelter stay or referring them to an access site where they can get included). For more information, refer to "Unsheltered homelessness" in the **Homelessness Glossary for Communities**.

Question CHR 9 helps communities consider who is currently included in their dataset and who might be missing. More generally, communities are prompted to consider all of the ways in which people can connect or engage with the homeless-serving system – or, more specifically, the Coordinated Access system – so that they can be connected to services and offered housing, subsidies and/or supports. The goal is for no one to be left out of the dataset and, subsequently, left out of the Coordinated Access process. This information can be used to self-assess overall data comprehensiveness in **OBA 13**.

Reminder: This question does not assess progress with meeting Reaching Home minimum requirements for the 2024-28 funding cycle.

CHR 9(a)	This question expands on OBA 10 by prompting communities to consider which household types may or may not be included in the dataset.
CHR 9(b)	This question expands on OBA 11 by prompting communities to consider if people staying in various types of shelter may or may not be included in the dataset.
CHR 9(c)	This question prompts communities to consider if different groups of people may or may not be included in the dataset. Communities can consider if the dataset: • Is representative of **Indigenous homelessness**. A dataset may not be comprehensive if it is missing Indigenous people that are experiencing homelessness and have interacted with the system in some way, for example. • Includes people on the **first day they interact with the system**, or if there is a waiting period before they are included (e.g., two weeks). Communities are encouraged to include people in the dataset beginning on the first day of interaction. Doing so allows for a fuller picture of where people are coming from, even if they self-resolve their homelessness (e.g., find housing within the first few days of a shelter stay). If a dataset only includes people after a waiting period, data for Outcome #1 may be missing those that experienced homelessness for at least one day during the waiting period, for example. • Includes people experiencing **hidden homelessness** that have interacted with the system in some way. • Includes people staying in **transitional housing**. Given that there are limits on how long an individual or family can stay in these types of programs, a comprehensive dataset could include people staying in transitional housing in situations where, if other housing is not secured before the service end date, that individual or family could be discharged into homelessness.

- Communities need to consider if the dataset includes individuals staying in **public institutions who do not have a fixed address** and have interacted with the system in some way.

?

Question OBA 13 asks about progress with meeting part of **Outcomes-Based Approach Minimum Requirement 7.**

Communities are asked to self-assess on the comprehensiveness of their data by reflecting on their responses in OBA 10, OBA 11 and OBA 12, as well as CHR 9.

The dataset is comprehensive if the community determines that it includes all of the people experiencing homelessness in the community that have interacted with the system, as much as possible right now.

- Beyond the three mandatory groups (all household types, people experiencing sheltered homelessness, and people experiencing unsheltered homelessness), communities have flexibility to decide if everyone in temporary living situations must be included in the dataset before it can be considered comprehensive by local standards (e.g., staying in transitional housing).
- They also have the flexibility to apply the same process across all living situations, or not. For example, a community could decide that *everyone* staying in transitional housing *must* be included in the dataset in order for it to be comprehensive. Alternatively, communities could decide that only *some* temporary living situations need to be included (e.g., everyone staying with only *certain* transitional housing providers).
- To help them with this process, communities can consider eligibility and prioritization criteria for housing, subsidies and/or supports. Are people staying in public institutions, transitional housing, or domestic violence programs eligible for these resources? Would they be prioritized for offers? If people are eligible and would be prioritized, they probably should be included in the dataset before it can be considered comprehensive.

Data use

Data is used to set baselines, set homelessness reduction targets, and track progress for each of the core outcomes of Reaching Home. More broadly, data is used to inform action in policy-making, program planning, performance management, investment strategies and/or service delivery.

?

Question OBA 14 asks about progress with meeting part of **Outcomes-Based Approach Minimum Requirement 8.** More specifically:

- **OBA 14(a)** asks if the dataset can be used to set baselines and reduction targets for each core Reaching Home outcome. In other words, this question asks communities if they *have the capacity* or *can* set a baseline and reduction target for each outcome.
- **OBA 14(b)** asks if the dataset is being used to set baselines and reduction targets for each core Reaching Home outcome. In other words, this question asks communities if they *have* or *will* set a baseline and reduction target for each outcome in Section 4 of the 2025-26 CHR.
- Both questions **ask about monthly and annual data reporting together**. If a community can only set baselines and reduction targets for either monthly or annual reporting, they can select a response from the drop-down menu that reflects this.

In the context of this question, only communities that have **enough data** can set baselines and reduction targets:

- For monthly reporting, data needs to be in place for at least one month (since March 1st).
- For annual reporting, data needs to be in place for at least one fiscal year (since April 1st of the previous calendar year).

?

Question OBA 15 asks about progress with meeting part of **Outcomes-Based Approach Minimum Requirement 9.**

- **OBA 15(a)** was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives.
- **OBA 15(b)** is not a self-assessment question. It helps communities in meeting part of **Outcomes-Based Approach Minimum Requirement 9:** "demonstrating how data is being used to inform actions related to preventing and reducing homelessness must be documented and be made publicly available, if requested".

Question CHR 10 helps communities determine *how* they will report data in Section 4.

Reminder: This question does not assess progress with meeting Reaching Home minimum requirements for the 2024-28 funding cycle.

CHR 10(a)
CHR 10(b)

Questions CHR 10(a) and **CHR 10(b)** help determine if a community can report on historical data in Section 4 on their 2025-26 CHR.

- If a community previously reported data in Section 4, they should look at their last CHR (question 3.16) to determine the earliest period of time they can report.
- If a community is reporting for the first time in Section 4 this year, they would most likely select "March 2026" and/or "2025-26".

All data fields prior to the one they have chosen will be shaded out in Section 4. For example, if a community selects "March 2021", the cells for "March 2020" will be shaded out for all outcomes.

CHR 10(c)

To meet Outcomes-Based Approach Minimum Requirement 8, communities must use their HMIS to generate data for setting baselines, setting reduction targets and tracking progress for the five core Reaching Home outcomes. For more information on the Canadian Methodology for calculating core outcomes, see the **Community Outcomes Report - HIFIS Report Guide** and Key Messages.

Partnerships

Question OBA 16 asks about progress with meeting **Outcomes-Based Approach Minimum Requirement 2.** Though this question appears in Section 3, it is actually completed in Section 1 through question CHR 4(a). The response is carried-over automatically from Section 1 to Section 3. For more information, see **question CHR 4(a)**.

Data quality improvement

Question OBA 17 asks about progress with meeting part of **Outcomes-Based Approach Minimum Requirement 9.**

- **OBA 17(a)** was introduced as a new minimum requirement under the 2024-28 Reaching Home Directives.

- **OBA 17(b)** is not a self-assessment question. It helps communities in meeting part of **Outcomes-Based Approach Minimum Requirement 9:** "Efforts to improve data quality […] must be documented and be made publicly available, if requested".

Some examples of efforts to improve data quality include:

- **Uniqueness:** Ensuring that data in HIFIS is unduplicated by limiting use of Declined to Share (formerly Declined Anonymous) consents.
- **Consistency:** Ensuring that, when data for the Unique Identifier List is generated from the same instance of HIFIS to filter and sort people and match them with different vacancies, the dataset itself does not change. That is, after the data is exported to Excel, people are not added, and data fields are not changed.
- **Timeliness:** Ensuring housing history data in HIFIS is up-to-date, which makes it possible to count the number of people currently experiencing homelessness at any point in time.
- **Timeliness:** Ensuring that HIFIS is being used to support day-to-day service planning, where transactions are documented, service plans are created and updated, and outcomes are tracked.
- **Completeness:** Ensuring housing history is complete, which means that every person that is active in HIFIS has an accurate housing status (e.g., no "unknown housing history" data gaps).
- **Completeness:** Ensuring data is complete for prioritization, which means that every person that is "active" in HIFIS has accurate data in the fields used to track prioritization criteria.
- **Comprehensiveness:** Ensuring that the dataset includes everyone currently experiencing homelessness that has interacted with the system.

For more information, refer to "7.4 Data quality and the Outcomes-Based Approach" in the **Homelessness Glossary for Communities**.

Reporting on other community-level outcomes

As identified in Outcomes-Based Approach Minimum Requirement 9, communities have the option of reporting on other community-level outcomes beyond the core Reaching Home outcomes.

?	**Question CHR 11** asks communities if they wish to report on additional outcomes (monthly and/or annual) beyond the five core Reaching Home outcomes. As a reminder, reporting on additional community-level outcomes in **optional**. Answering "No" will shade out the data fields in tab "4b. Optional Outcomes". For more information, see Optional community-level outcomes.

Section 4: Community-Level Outcomes and Targets

What's new for 2025-26?

✓ Communities can now add data annotations to contextualize trends and explore the reasons behind the changes.

Where is this Section in the CHR reporting template? See **Tab 4a. Section 4** and **Tab 4b. Optional Outcomes**.

What is this Section's goal? Section 4 is where communities use their person-specific data for homelessness to set baselines, set reduction targets and track their progress up to 2027-28, as identified in Outcomes-Based Approach Minimum Requirement 8 and the CHR Requirement. For more information on the Outcomes-Based Approach, see Section 3.

When can Section 4 be completed?

Answers in Section 3 are used to determine if a community can complete Section 4. For this reason, **Section 3 must be completed before Section 4**. Only communities that have met the standard for reporting on core outcomes as assessed in Section 3 will complete Section 4 of the 2025-26 CHR.

Using person-specific data to set baselines, set reduction targets and track progress

As identified in Outcomes-Based Approach Minimum Requirement 8, communities must use their person-specific data to set baselines, set reduction targets and track progress for the five core Reaching Home outcomes:

- Homelessness overall is reduced;
- New inflows to homelessness are reduced;
- Returns to homelessness are reduced;
- Indigenous homelessness is reduced; and,
- Chronic homelessness is reduced.

Of note, outcome data under Reaching Home for the CHR is calculated based on three key factors:

- **Consent** – that is, results only include people that have granted consent to be included. COR in HIFIS calculates "active" consent based on Explicit consent.

- **Interaction with the system** – that is, results only include people who were "active" at some point during the reporting period. The COR in HIFIS calculates

"active" state based on certain client file updates within the Inactivity Policy threshold, which is set at 90 days.

- **Housing history** – that is, results only include people who were homeless at some point during the reporting period. COR in HIFIS calculates "homelessness" based on certain housing types and shelter stays (for more information, see Annex C in the Homelessness Glossary for Communities).

HIFIS can generate outcome data for Section 4 using the COR for any period of time (e.g., over a fiscal year or a month).

For more information about how Reaching Home outcomes are calculated using the Canadian methodology, see the HIFIS COR e-course.

A tool called ***Outcome Reporting under Reaching Home: Baselines, Targets and Tracking Progress at the Community Level*** explains the purpose of baselines, setting targets and tracking progress through outcome reporting. This tool forms part of the CHR Reporting Tools e-course.

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Questions O1 to O5 are where communities set baselines, set reduction targets and track progress for the five core Reaching Home outcomes.

In the CHR template, the left side of the sheet is for monthly reporting, where each outcome is tagged with an "(M)". The right side of the sheet is for annual reporting, where each outcome is tagged with an "(A)".

Of note, certain cells or entire outcomes may be shaded out based on answers from Section 3.

In general, the following elements must be completed for each unshaded outcome:

Report data	Using person-specific data, communities **must report the number of unique individuals for that outcome for each unshaded cell**. As a reminder, numbers reported in previous years may have changed. Communities can adjust their outcome data to reflect these updates, and must use the comment box to explain this change. Though people can be counted in more than one outcome, they are always counted only once within each outcome. For example, if a person returned to homelessness three times, that person is only counted once in Outcome #3 (returned to homelessness), but they will be included in Outcome #3 and in Outcome #1 (the overall number of people who were homeless during the reporting period). **More information on each outcome can be found below.**

Set a reduction target	As identified in **Outcomes-Based Approach Minimum Requirement 8**, communities must **set reduction targets**. With the exception of chronic homelessness, communities set their own reduction targets, which can change over time (e.g., due to improvements in data quality). For chronic homelessness, the Reaching Home Directives set a 50 percent reduction target by 2027-28 for all communities. Once a community can generate a baseline for this outcome, they will be asked to set a target that represents a 50 percent reduction for chronic homelessness, at minimum. Setting reduction targets helps communities to articulate their long-term vision for preventing and reducing homelessness. In the short-term, targets can spark new behaviours, guide focus, and sustain momentum. Targets function as "stretch goals", which are purposefully ambitious objectives that go beyond current capabilities and are intended to inspire progress. Note that communities **will not be held accountable for not meeting the targets they report**. Missing a stretch goal should not be interpreted as "low" performance. Instead, the emphasis is on learning, continuous improvement, and demonstrating commitment to meaningful system-level change.
Use N/A	Communities **must** enter N/A in any cell for which they **do not** have data to report in Section 4. Cells **should not be left blank**, and communities should not enter a "0" unless the quantity being reported is zero. • For example, a community has the capacity to report data since April 2022 and their dataset is in Excel. This means they have enough data to report on outcomes for 2022-23 to 2025-26. However, they are only able to generate data over a year beginning April 1, 2023, when the dataset was integrated into HIFIS. "N/A" is entered in all annual outcome data cells for 2022-23.
Set a baseline	Following each Outcome, **question (a)** asks about the baseline for the data. Though communities typically use the data from the first month or year that they report on an outcome to set their baseline, they may choose to update it based on their local context.

Provide context

A comment box is provided for each outcome:

- If a change has occurred, communities must explain what the change is and why it occurred. See Report data for more information on why changes may occur.
- If "N/A" was used in any of the data cells or, in other words, if a community was unable to report on one or more data points, communities must explain why. See Use N/A for more information.
- Communities can also use the open comment box to provide any additional context on their data they wish to include.

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Question O1, Outcome #1 seeks fewer people experiencing homelessness overall.

Communities should include people in the dataset beginning on the first day of interaction. Doing so allows for a fuller picture of where people are coming from, even if they self-resolve their homelessness (e.g., find housing within the first few days of a shelter stay).

For more information about how Reaching Home outcomes are calculated using the Canadian methodology, see the HIFIS COR e-course.

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Question O2, Outcome #2 seeks fewer people that were new to the dataset ("newly identified").

In order to have the most complete picture of homelessness possible at the community level, **people should be included in the dataset as early as possible in their homelessness experience**. That being said, given that people can be included at any point, the day they are newly identified in the dataset might not be their first day of homelessness in their lifetime.

For example, maybe a youth has lived unsheltered for over a year and has only recently connected with an access point through outreach in May 2023. If this happens, the youth will be reported as new to the dataset (Annual Outcome #2), but their first experience of homelessness would have preceded April 1, 2023. Another example is when someone who is experiencing homelessness moves to a new community. While they may have been included in their previous community's person-specific dataset, in their new community, they would be identified as "newly identified" and included in Outcome #2.

For more information about how Reaching Home outcomes are calculated using the Canadian methodology, see the HIFIS COR e-course.

More information about "Newly identified" is also available in the Homelessness Glossary for Communities.

Question O3, Outcome #3 seeks fewer people returning to homelessness.

For more information about how Reaching Home outcomes are calculated using the Canadian methodology, see the HIFIS COR e-course.

For greater clarity, using the COR, communities should include the following results under Outcome #3:

Inflow - Returned to Homelessness

		Total
Change in Housing	Housed to Homeless	5
	Transitional to Homeless	0
	Public Institution to Homeless	2
	Unknown to Homeless	3
	Subtotal	**10**
Change in Activity	Inactive to Active	2
	Archived to Active	0
	Deceased to Active	0
	Subtotal	**2**
Change in Consent	Consent Re-Activated	6
	Subtotal	**6**
Total Inflow - Returned to Homelessness		**16**

?

Question O4, Outcome #4 seeks fewer Indigenous peoples experiencing homelessness.

In question **O4(b)** communities are asked to clarify how Indigenous partners were engaged in the process of setting the baseline, setting the target, reporting on the outcome and/or interpreting the results, as applicable.

To improve accuracy of the dataset, communities can collaborate with their Indigenous partners to compare the proportion of people in their dataset that identify as Indigenous against other sources of information, such as shelter usage reports for all sites, surveys taken by street outreach teams or the last Point-in-Time Counts. Are trends as expected? With consent, data could be shared with local Indigenous partners, to help determine who might be missing and how gaps can be closed going forward.

Communities can also collaborate with their Indigenous partners to get a better understanding of Indigenous homelessness and ideas for improving local service delivery. For example:

- Are people that identify as Indigenous disengaging from the system more frequently than other population groups (e.g., a high rate of inactivity)? If so, why and how can engagement be sustained in a meaningful way?
- Are people who identify as Indigenous being "newly identified" in the dataset after experiencing homelessness for some time (e.g., a high proportion are included in the dataset for the first time after many years of homelessness)? If so, how might gaps be filled in collaboration with Indigenous partners, so that people can be included earlier?
- How can the Coordinated Access system be improved? How easy is it for people who identify as Indigenous to interact with the system and how are issues of equity being addressed? Are access sites being offered in a culturally-appropriate way? Are people able to interact with workers where and how they feel most comfortable, in the language of their choice? Are there options for people to connect with Indigenous-led organizations and/or workers that identify as Indigenous?
- What does the systems map show? Are all Indigenous service providers participating in Coordinated Access and actively using the HMIS, so that the people they serve are not missing from the dataset? If not, how might this gap be addressed, in collaboration with Indigenous partners?

For more information about how Reaching Home outcomes are calculated using the Canadian methodology, see the HIFIS COR e-course.

Question O5, Outcome #5 seeks fewer people experiencing chronic homelessness.

As previously mentioned, the Reaching Home Directives set a 50 percent reduction target for chronic homelessness by 2027-28 for all communities. As such, once a community starts to submit data for chronic homelessness in Outcome #5, they will be asked to set a target that represents a 50 percent reduction, at minimum.

The reduction is based on the baseline, which is typically the first number that was reported in this outcome (monthly or annual). For example, if the community had person-specific data that is real-time and comprehensive for the first time in 2020-21, and they reported 200 individuals experiencing chronic homelessness that year, then their baseline is 200 and their target should be, at minimum, 100 individuals experiencing chronic homelessness by 2027-28.

If a community is using a different monthly or annual baseline for chronic homelessness than the first number that was reported in Section 4, they can indicate this in **question O5(a)**.

For more information about how Reaching Home outcomes are calculated using the Canadian methodology, see the HIFIS COR e-course.

Optional community-level outcomes

If a community has chosen to report on additional community-level outcomes (i.e., they responded "Yes" in questions CHR 11(a) and/or CHR 11(b)), these outcomes can be added to Section 4 of the CHR template using the tab called **4b. Optional Outcomes**.

The **Optional Community-Level Outcomes** tab allows communities to report on community-level outcomes beyond the five core outcomes mandated under Reaching Home. **Reporting on additional, community-level outcomes is optional.** If a community does not wish to report on additional outcomes, they should answer "No" in questions CHR 11(a) and/or CHR 11(b), and the applicable reporting tables will be shaded out.

If a community wishes to report on optional community-level outcome(s), for each additional outcome they must indicate the expected outcome and describe what the data represents. For example, the expected outcome could be fewer people experiencing homelessness over a year from specific population groups (e.g., Veterans, youth, seniors, women or families). The data in the table could then represent the number of people in that specific population group experiencing homelessness that year. A target can also be added in the far-right cell, and the comment box should be used to provide additional context.